

The role of the occupational therapist in the care of people living with lung cancer

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Abstract: This paper aims to explore the vital role occupational therapists play in enabling people living with lung cancer to continue to actively live. Core assessments and interventions employed by occupational therapists are described in a case study. It will demonstrate how people living with lung cancer can continue to participate in meaningful and chosen life roles, even in the face of functional decline. Skilled management by the occupational therapist of the refractory symptoms of advanced lung cancer supports this participation.

Keywords: Occupational therapy; function; life roles

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Introduction

Occupational therapists are integral members of the lung cancer multidisciplinary team, working with lung cancer patients in the inpatient hospital setting, hospital outpatient clinics and in the community. The occupational therapists' focus is on enabling an individual's participation in chosen everyday activities (1,2). For people living with metastatic lung cancer, this entails enabling continued participation in the face of functional decline and increasing symptom burden. This focus can also include rehabilitation for people who have undergone curative treatment for their lung cancer, with the aim of facilitating a return to previous chosen and meaningful roles.

Occupational therapists can assist people living with lung cancer prioritize their goals while managing the side effects of treatment. They also have a vital role in assisting the person living with lung cancer to adjust to changing function that accompanies progressive disease. People living with lung cancer experience high symptom burden, which can include refractory breathlessness, fatigue and pain (3). There is a growing body of evidence for occupational therapy interventions for people living with cancer to assist with symptom management and many of these interventions are applicable for people living with lung cancer (1).

Interventions utilized by occupational therapists when

working with people living with lung cancer can include task analysis, task modification, equipment prescription, priority setting and relaxation therapy. Occupational therapists are experts in analyzing how people complete tasks that are meaningful to the individual. Through goal setting with the individual, the occupational therapist is able to ensure the focus is on tasks and roles that provide meaning in the face of deteriorating function, rather than tasks the health professional feels the person with lung cancer should focus on (2,4).

Case study

A case study of Bruce, a 60-year-old gentleman diagnosed with stage IV non-small cell lung cancer, demonstrates how occupational therapy interventions enable participation. Bruce has significant symptoms of breathlessness and fatigue at his diagnosis. These symptoms were limiting his mobility and ability to manage his personal care, leaving him primarily house bound. Bruce lives at home with his wife, they have no children but have a large social group and have been very active in their early retirement. Bruce's most valued activities are his leisure roles: spending time fishing at his local beach, listening to his music collection, having dinners with friends and visiting his local café with his wife.

Occupational therapy assessment

An initial assessment was completed with Bruce. This identified his current function and set initial therapeutic goals. Bruce identified the key activities that were important for him to continue to participate in: visiting the beach, going to his local café with his wife and listening to music. The occupational therapist conducted a home assessment where she completed a full environmental assessment. A personal care assessment was also completed at the time of the home assessment, allowing Bruce to be assessed in his own environment. Task analysis informed interventions that enabled Bruce to modify how he completes his shower, drying, dressing and grooming tasks.

Occupational therapy interventions

Through the use of equipment with his personal care tasks and physical assistance from community services, Bruce was able to complete these tasks using less energy and with improved safety. This meant Bruce had the energy and breath to focus on those activities that provided more meaning for him as his lung cancer progressed.

Through the provision of a lightweight transit wheelchair and portable oxygen, Bruce was able to access his local café and his local beach that had an accessible walkway. At home, the oxygen concentrator was moved to a different room so the noise didn't interfere with Bruce's enjoyment of his music. Bruce was also provided with an electric recliner chair, to optimize positioning for his breathlessness while listening to his music.

Attention to seemingly small details has huge significance for participation. The occupational therapy interventions for Bruce enabled continuing participation in his valued activities. He derived meaning and satisfaction from this participation, while simultaneously experiencing functional decline caused by his progressing lung cancer (2).

Management of breathlessness

The occupational therapist is in a unique position to facilitate mastery of non-pharmacological interventions to assist in the management of refractory breathlessness and fatigue. It is important to teach techniques early in the lung cancer trajectory, to ensure mastery prior to the escalation of symptoms. This assists with optimizing available function and supports the engagement of the individual in valued activities (5).

Occupational therapy management of breathlessness has been extensively researched in chronic lung conditions. The work of Norweg *et al.* (6) identifies interventions targeting improvement in everyday function for people living with COPD which include mastery of breathing techniques and task modification. These interventions focus on managing breathlessness during activities that provoke breathlessness.

Participation in pulmonary rehabilitation programmes is an established form of care for people with chronic lung disease. There is now a growing interest in the role of pulmonary rehabilitation to optimize function pre and post-surgery for lung cancer (7), as well as the role of exercise generally for people living with lung cancer (8-10). The use of rehabilitation programmes for people living with cancer are being reported more frequently in the literature, and the occupational therapist is identified as a key team member (11).

Energy conservation techniques

Energy conservation techniques are useful in managing both fatigue and breathlessness. The occupational therapist completes a detailed assessment, including task analysis of how the person completes their everyday activities. This then informs interventions which can include behavior and task modification, relaxation techniques, biofeedback, prescription of adaptive techniques and environmental modifications (5). These interventions have the aim of improving function and safety, while assisting in managing symptoms commonly experienced in lung cancer, such as breathlessness and fatigue. People living with advanced lung cancer may not have the time, energy or function to achieve full mastery of fatigue and breathlessness management techniques. Use of adaptive equipment can be an effective and immediate way of improving function and assisting with symptom management for people living with advanced lung cancer.

Conclusions

Occupational therapy interventions aim to improve and optimize a person's participation in everyday activities (12). Internationally, there are few occupational therapists that specialize in the field of lung cancer. This has led to a paucity of evidence and research into occupational therapy interventions that may benefit people living with lung cancer. Many interventions utilized by occupational therapists have a research base in non-malignant conditions and nursing literature. It is critical that occupational

therapists build on this evidence and continue to research the efficacy of interventions used to optimize function for people living with lung cancer. The focus of occupational therapy interventions for people living with lung cancer is on enabling continued participation in valued and chosen activities in the face of functional decline and increasing symptom burden (2).

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None.

Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

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