Nursing and cardio-toxicity

Bernadette Shields, RN, MSN, MHA
Nurse Coordinator Cardio-Oncology
Current Perspectives February 2017
Cardio-Oncology and Cardiotoxicity

• The primary focus of the clinic is to provide collaborative, supportive care to patients experiencing cardiac symptoms related to his or her cancer treatments.

• Cardiotoxicity is the effects of chemotherapy/ radiation on the heart.

• Survivorship is another focus of the Cardio-Oncology program.
Role of the Nurse Coordinator

• Provide education to the staff and patients.
• Liaison between oncology and cardiac team.
• Coordinate clinic and patient appointments.
• Resource for patients.
Signs and Symptoms of Cardiotoxicity

- ECG Changes
- Arrhythmias/Palpitations
- Chest pressure/tightness
- SOB/Dyspnea
- Edema
- Fatigue
Prevention through education

Education is not only for the patients.

To help with the positive patient outcomes it is essential that the staff receive proper education regarding cardiotoxic medications.

Oncology nurses primary focus is education about the cancer and treatments plans.

Often oncology nurses may not focus on the cardiotoxic effects on medication.

Providing tools and education for the nurses and staff will help to make certain patients receive the education needed regarding potential symptoms related to cardiac side effects.
Education

Development of educational tools for the patient.

Discharge education listing potential symptoms to report.

Ensure patient has contact information for appropriate staff to report symptoms.
Case Study

- A 50 year old breast cancer patient is currently receiving known cardiotoxic treatments, Trastuzumab (Herceptin) and pertuzumab (Perjeta).
- HPI: At her recent appointment, she is noted to have shortness of breath and reports inability to complete ADL’s.
- PMH: hypertension and insulin dependent diabetes.
- Medications:
  - VS: blood pressure 171/98, heart rate is 100, respirations 26, and oxygen saturation is 96% on room air.
- Plan: consult cardio-oncology and an echocardiogram to be completed prior to appointment.
Echocardiogram
Cardio-Oncology Plan

• Medications
  – Beta blockers such as coreg, metoprolol-help slow heart rate and decrease blood pressure
  – Ace Inhibitors such as Lisinopril lower blood pressure, relax blood vessels
  – ARB’s (angiotension receptor blocker)- such as diovan

• Heart Failure Education
  – Monitoring weight
  – Monitor salt and fluid intake
  – Monitor for swelling/edema
Next Steps

• What should this patient be assessed for?
  – Signs and symptoms, vital signs, ability to complete ADL’s, medical history.

• What type of education should be provided
Thank You!

CardioOncology
at the HEART of Cancer

THIRTY YEARS OF COURAGE
References

• American Heart Association. 2017. Medications used to treat heart failure.
  http://www.heart.org/HEARTORG/Conditions/HeartFailure/Heart-Failure_UCM_002019_SubHomePage.jsp

• Mayo Clinic. 2017. Heart Failure.
  http://www.mayoclinic.org/diseases-conditions/heart-failure/basics/treatment/con-20029801