

- The School of Nursing, Midwifery and Social Work
- The Christie Hospital
- The Macmillan Research Unit
- The Greater Manchester and Cheshire Palliative Care Research Alliance

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Newsletter

Manchester Supportive and Palliative Care Research

Volume 1, Issue 1

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Welcome to the first edition of this newsletter!

Welcome to the first edition of this newsletter highlighting the work and achievements of those conducting supportive and palliative care research in Manchester.

This edition will focus on the work of the Supportive and Palliative care research groups within the School of Nursing, Midwifery and Social Work at the University of Manchester, their work within the Christie Hospital, the work of the Macmillan Research Unit, and the Institute of Health Science's Greater Manchester and Cheshire Supportive and Palliative Care Research

Alliance.

In this newsletter you will be able to find out a little more about the aims and objec-



University Place: The new home of the School of Nursing, Midwifery and Social Work at the University of Manchester

tives of each of these groups, the work they are currently engaged in, and

who to contact to find out more about their work.

We hope that you find this newsletter useful as a way of finding out more about local research—both so that you can be aware of the findings to implement into practice, and be aware of the many different areas that research is being conducted in, so that you can hopefully link up with someone working in a similar area to yourselves. The newsletter will be published twice a year. Contact: Catherine Walshe (editor) or Prof. Alex Molassiotis (Research Team Leader) for more details.

New Research Findings

Acupuncture and acupressure for cancer related fatigue

New research from the team working at the School of Nursing and the Christie has found that acupuncture shows great potential in the management of cancer related fatigue.

Cancer related fatigue after chemotherapy is a common and disruptive symptom. This research aimed to assess the

affects of acupuncture and acupressure in managing this fatigue. The team conducted a randomized controlled trial comparing an acupuncture group, an acupressure group, and a sham acupressure group.

Acupuncture was the most effective therapy, with a 36%

improvement in fatigue levels, while the acupressure group improved by 19% and the sham acupressure by 0.6%.

Molassiotis A, Sylt P, Diggins H. The management of cancer-related fatigue after chemotherapy with acupuncture and acupressure: a randomised controlled trial. *Complement Ther Med.* 2007 Dec;15(4):228-37.

The Christie and supportive and palliative care research

Christie Hospital 
NHS Foundation Trust

Work is taking place between the School of Nursing, University of Manchester and the Christie Hospital NHS Foundation Trust. The work is managed from the Academic Cancer Nursing Research Unit of the Christie Hospital and led by Prof. Alex Molassiotis.

This work is focused on patient experiences of cancer and cancer symptoms, and developing and testing interventions for symptom management, particularly in relation to cancer-related fatigue, chemotherapy-related nausea and vomiting, and oral mucositis.

All staff of the unit are externally funded with funding coming from the Christie Hospital Charitable Trust, the industry, the Department of Health, and large charities, such as Breakthrough Breast Cancer & Myeloma UK.

The work is carried out with strong support and involvement from clinicians, working together collaboratively from conception of a research idea to completion of a project. The team has led some influential work developing international clinical guidelines for the management of chemotherapy- and radiotherapy-related nausea

and vomiting, complementary therapies, home care for patients receiving oral chemotherapy and the management of cough/breathlessness in lung cancer patients.

Since 2004 when the unit was set up, more than £1,300,000 have been awarded to members of the unit (including part of a national research collaborative in supportive and palliative care).

Staff development is also a high priority, and several staff have been awarded or are reading towards an MSc, M.Phil or PhD degree.

**WE ARE
MACMILLAN.
CANCER SUPPORT**

‘The Manchester MRU is focused on services for people affected by cancer, and pursues a number of themes related to psychosocial issues and service development’

Macmillan Research Unit

The Macmillan Research Unit (MRU) is led by Prof. Karen Luker and Dr Ziv Amir. The Manchester MRU and its sister unit at The University of Southampton are funded by Macmillan and carry out work that concurs with Macmillan research priorities. The research programmes of the two units have been devised in partnership with users of cancer services. The aims of the MRU are to provide research evidence

for Macmillan in relation to service provision, campaigns and policy, and inform the design and evaluation of new services.

The Manchester MRU is focused on services for people affected by cancer, and pursues a number of themes related to psychosocial issues and service development: developing flexible and responsive services for people with cancer, the nature and function of self-

help/support groups for cancer and returning to work after diagnosis and treatment of cancer.

You can find out more about the MRU by visiting their website at <http://www.nursing.manchester.ac.uk/research/researchgroups/primaryhealthcare/macmillan/> or by ringing on +44 (0)161 306 7780

New Research Findings

Working through cancer



New research by the MRU reveals that people who have had cancer treatment experience a range of problems when returning to work and that many are not getting the medical and rehabilitation advice and support they need.

The MRU research con-

sisted of a literature review, a postal survey with 284 people in North West England working at the time of their cancer diagnosis, and in-depth phone interview with 41 of these people.

They found that many people desperately want to get back to normal, and that work is part of this. However, many people are unable to stay in work after

cancer. Many received little or no medical advice to help them return to work at this time. A staged return to work may be helpful.

Amir, Z., Moran, T., Walshe, L., Iddenden, R., & Luker, K. (2007) Return to paid work after cancer: a British Experience. *Journal of Cancer Survivorship*, 1: 129-131.

Creating Opportunities for Engaging in Local Palliative Care Research



Since 2003, the Greater Manchester and Cheshire Palliative Care Research Alliance has been bringing together researchers and clinical colleagues within the field of palliative care. The Alliance's aim is to provide opportunities for the development of local collaborative research initiatives, through the shar-

Bringing local researchers and clinicians together

ing of ideas and hearing about existing research projects.

Last year, the Alliance was officially recognised as a Network of the Institute of Health Sciences (IHS). Look out for the Alliance's own IHS website, which should follow later in the year.

In December, the Alliance said a BIG thank you to it's long standing Chair, Professor Chris Todd for all the hard work and commitment over the last few years and an equally big 'welcome' to it's new Chair Dr. Alison

Parr, and it's new Vice Chair Dr. Gunn Grande. At the February meeting, members initiated discussion on a wide range of potential research priorities and interests for locally based palliative care research in Manchester. If you would like to join us in helping to refine the research interests of the Alliance and perhaps even engage in collaboration, our next meeting is on 23rd April, 4.30pm at St. Ann's Hospice, Heald Green. Contact Dai Roberts, Secretary to the Alliance for further details (droberts@sah.org.uk, 0161-4983617). Membership of the Alliance is free and open to all with an interest in palliative and supportive care -it would be great to see new faces joining us!

CECo: Cancer Experiences Collaborative

Did you know that supportive and palliative care researchers in Manchester contribute to the work of CECo?

CECo is an equal partnership between researchers at five universities (Southampton, Liverpool, Lancaster, Manchester and Nottingham) clinical organisations (including the four largest hospices in England, and 'Help the Hospices') and user representatives.

CECo is addressing three inter-related research themes: innovative approaches to complex symptoms; planning for the care of older adults towards the end of life; and narratives of cancer and other life limiting illnesses. These provide platforms on which to build our research capacity-building activities.

The Symptoms theme is co-led by Professor Alex Molassiotis and is focussed on developing research into self management and non-pharmacological approaches to complex symptoms. By bringing together academics, clinicians and research partners research proposals are currently being developed into

a) CBT for sleep disturbance in can-

cer patients,

b) strategies for supporting psychological well being and

c) the design and validation of a scale to identify people living with symptoms and the psycho-social forces that contribute to the development of cancer cachexia syndrome.

A large multi-centre RCT into Acupressure for chemotherapy-related nausea has recently been awarded funding.

Annual State of the Science meetings are held by each theme and are an excellent platform for engaging with CECo and becoming involved with developing research in a focused and collaborative environment. These take place in the Spring:

Narratives State of the Science 8th-9th April, Southampton

Symptoms State of the Science, 10th April, Liverpool

Older people State of the Science, 15th May, Edinburgh

Further information about the work of CECO, its events and the contact details of the research fellows from

the collaborating institutions can be found on the website

www.ceco.org.uk

Come along to a state of the science meeting to learn more about what CECo is doing



News of people

Professor Alex Molassiotis has been appointed Frances Bloomberg International Distinguished Professor at the Faculty of Nursing, University of Toronto, Canada.

Professor Carol Tishelman from the Karolinska Institute, Sweden, has been appointed Professor of Nursing at the School of Nursing, Midwifery and Social Work at the University of Manchester. Carol comes with a wealth of experience in cancer symptom management and cancer prevention.

District Nurses and supportive and palliative care

A recent study has found that district nurses have great potential to meet cancer patients' supportive and palliative care needs.

Thirty four district nurses were interviewed about the palliative care they provide to cancer patients. District nurses were very ambiguous about their supportive role in the early phases of palliative care. They discussed the importance of

making early contact with patients to support them and their families, but found it difficult to articulate what such 'support' meant. District nurses described ambiguity, lack of confidence and skill deficits.

District nurses need to realize their great potential to care for cancer patients with supportive and palliative care needs. Education to fulfil this role may be important, but in

conjunction with an understanding of the tensions district nurses experience in their work.

Griffiths J, Ewing G, Rogers M, Barclay S, Martin A, McCabe J, Todd C. Supporting cancer patients with palliative care needs: district nurses' role perceptions. *Cancer Nursing*. 2007, 30(2):156-62,

Publications and grants during 2007

We're going to highlight just a few of the grants and publications that we have achieved during 2007 to give you a flavour of the depth and breadth of the work within supportive and palliative care locally.

Publications

Berman R, Campbell M, Makin W, Todd C. Occupational stress in UK specialist registrars in palliative medicine, medical oncology and clinical oncology. *Clinical Medicine*. 2007 7 (3): 235-242

Beaver K, Craven O, Witham G, Tomlinson M, Susnerwala S, Jones D, & Luker K: (2007) Patient participation in decision-making: views of health professionals caring for people with colorectal cancer. *Journal of Clinical Nursing* 16: 725-733.

Burns M, Costello J, Ryan-Woolley B, Davidson S: (2007) Assessing the impact of late treatment effects in cervical cancer: an exploratory study of women's sexuality. *European Journal of Cancer Care*. 16(4): 364-372

Griffiths J, Willard C, Burgess A, Amir Z, Luker K: (2007) Meeting the ongoing needs of survivors of rarer cancer. *European Journal of Oncology of Nursing*. 11: 434-441

Lavelle K, Todd C, Howell A, Bundred N, Campbell M. Non-standard management of breast cancer increases with age in the UK: a population based cohort of women over 65 years. *British Journal of Cancer*. 2007. 96; 1197-1203.

Molassiotis A, Coventry PA, Stricker CT, Clements C, Eaby B, Velders L, Rittenberg C, Gralla RJ. Validation and psychometric assessment of a short clinical scale to measure chemotherapy-induced nausea and vomiting: the MASCC antiemesis tool. *J Pain Symptom Manage*. 2007 Aug;34 (2):148-59.

Molassiotis A, Helin AM, Dabbour R, Hummerston S. The effects of P6 acupressure in the prophylaxis of chemotherapy-related nausea and vomiting in breast cancer patients. *Complement Ther Med*. 2007 Mar;15 (1):3-12.

Ryan-Woolley BM, McHugh GA, Luker KA: (2007) Prescribing by specialist nurses in cancer and palliative care: results of a national survey. *Palliative Medicine* 21:273-277 2007

Walshe C, Caress A, Chew-Graham C, Todd C. Evaluating partnership working: lessons for palliative care. *European Journal of Cancer Care*. 2007, 16(1):48-54.

Willard C Luker K: (2007) Working with the team: strategies employed by hospital cancer nurse specialists to implement their role. *Journal of Clinical Nursing*. 16: 716-724.

Wilson K, Ganley A, Mackereth P, Rowswell V: (2007) Subsidised complementary therapies for staff and volunteers at a regional cancer centre: a formative survey. *European Journal of Cancer Care*. 16(3): 291-299

Grants

Dimbleby Cancer Care . 2007 – 2009, "Predictors of patients' use of cancer support groups: a prospective study" G Grande, C Todd, B Ryan-Woolley, A Molassiotis, Z Amir, A Howell. (£140,899),

Cancer Research UK PBSC Small Grant 2006- 2008 "An exploration of the factors that contribute to treatment decision making when patients have advanced cancer." C Willard, G Grande, K Lavelle, (£32,845)

British Academy Small Grant Application 2007- 2007, "Inequalities in referral: Exploring differences in referrals to a Hospice at Home service between two socio-economically distinct areas of Greater Manchester." D Roberts, AL Caress, G Grande, (£7,494),

MRC Special Training Fellowship in Health Service Research and Health of the Public 2007 – 2011. "The development of an inter-

vention for cost effective and beneficial lung cancer follow up". L Calman, K Beaver, C Roberts (£ 402,677)

RCUK Fellowship. 2007 – 2012. "District Nurses and their provision of palliative care". C Walshe, K Luker, S Payne. (£125, 000).

Breathlessness Research Charitable Trust. 2007—2008 A systematic review of breathlessness in lung cancer. Molassiotis A, Wilson B. (£6,900).

Breakthrough Breast Cancer. 2007—2010. A randomised trial of acupuncture and self acupuncture in the management of cancer related fatigue in breast cancer patients. Molassiotis A, Richardson A, Mackereth P, Filshie J. (£315,000).

Myeloma UK. 2007—2008 Assessment of unmet needs in multiple myeloma patients. Molassiotis A, Blair, S, Howe T, Cavet J (£40,000).



Professor Alex Molassiotis receives his Miriam Hyman Research Grant for Myeloma research

If you have any comments or questions about the newsletter, or have an article for the next edition contact Catherine Walshe on catherine.walshe@manchester.ac.uk or 0161 306 7649