



EWMA Education Committee

Module descriptor:
Management of
Oncology Wounds



Latest Revision: May 2016

ABOUT THE EWMA EDUCATIONAL DEVELOPMENT PROGRAMME

The Programme is designed to assist students and healthcare professionals who work with patients with wounds and related skin conditions and wish to develop and/or increase their knowledge and skills in order to meet patient needs.

Overall, the Programme aims to:

- Provide students and healthcare professionals with the knowledge and skills to equip them to perform their role in the delivery of optimal wound care.
- Provide contemporary, interdisciplinary, product/brand neutral wound management education that is endorsed by EWMA.
- Provide quality standards against which other organisations can evaluate existing wound management programmes.
- Achieve European acceptance by developing an educational framework that is in line with European Commission educational initiatives in order to disseminate best practice in wound care.

ABOUT THE CURRICULUM DEVELOPMENT PROJECT

The Curriculum Development Project is at the heart of the Educational Development Programme. The aim of the Project is to develop a flexible curriculum, consisting of a number of modules.

All modules are based on a standard template but individually focused on a specific aspect of wound management. Each module is developed by a small group consisting of members of the EWMA Education Committee and/or affiliated wound care key specialists. For an updated list of the currently available modules please visit the education sub page at www.ewma.org.

ABOUT THIS MODULE

The Management of Oncology Wounds module aims to:

- Broaden participant's knowledge and understanding of the assessment and management of oncology wounds, palliative wound care and associated conditions.
- Evaluate strategies to promote effective inter-professional collaborative working for patients with oncology wounds and palliative care needs.

MODULE CONTENT

1. Elaborating Body

European Wound Management Association (EWMA)

2. Date of production of module

April 2004

3. Latest review date

May 2016

4. Module intended learning outcomes

This module provides opportunities for health professionals to develop and demonstrate knowledge and understanding, skills and other attributes in the following areas:

A. Intellectual (cognitive/mental) Skills – Knowledge and Understanding

Participants will have knowledge of the:

Tumours and tumour-related wounds basic knowledge

Normal and impaired wound healing

1. Pathophysiology of cancer in relation to the skin
 - a. Tumour development.
 - b. Primary skin tumours.
 - c. Tumour infiltration of the skin through locally advanced, metastatic or tumour recurrence.
2. Epidemiology of oncology wounds.
3. Principles of medical curative and/or palliative treatments.
4. Evidence-based treatment modalities.
5. Evidence-based symptom management: local and systemic.
6. Evidence-based local wound management.
7. Supportive care to patients and families.

B. Practical (Manual and Physical) Skills – Skills and Attributes:

Participants will be able to:

1. Appropriately assess a patient with an oncology wound (See section 7 C for more information)
2. Differentiate between multiple presenting symptoms.
3. Make effective treatment decisions, initiate further investigations and know when to refer to specialist services.

4. Monitor and evaluate treatment outcomes with objective scales and measures.
5. Identify the psychosocial impact that wounding has on the individual and society.
6. Evaluate the provision of cancer and palliative care services, and other services available for the assessment and management of patients with oncology wounds.
7. Ability to function in a multidisciplinary team

C. Affective skills – views and perspectives

- Understand the different impact of oncological wounds on the patient's life
- Accept need for special effective communication techniques
- Respect patients problems concerning the wound from different view and perspective

5. Teaching/learning methods & strategies

Acquisition of 4.A & 4.B (see above) is through a combination of lectures, small group workshops, problem based learning and learning in practice throughout the module. There is also the possibility of using e-learning in combination with traditional learning methods. Throughout, the learner is encouraged to undertake independent study both to supplement and consolidate what is being taught and to broaden individual knowledge and understanding of the subject.

6. Assessment methods

Assessment methods will need to vary for each professional group. Understanding will be assessed in a variety of ways i.e. open discussion, formal written exercises, seminars, case studies, practice work-books. Throughout, the learner is expected to consolidate the development of practical skills / management skills in the clinical setting.

7. Unit content

A. Overview / epidemiology

Incidence and prevalence data

National/International guidelines and targets

Critique of existing epidemiological studies to promote understanding of their limitations and the need for population based data

B. Pathophysiology of cancer

Tumour development

Tumours associated with skin manifestations

Tumours that infiltrate the skin through local advancement, metastases and tumour recurrence

Skin cancers with wound formation: malignant melanoma, squamous cell carcinoma, basalioma, Kaposi's sarcoma,

Primary breast cancer with or without cutaneous metastases, gynaecological cancers e.g. cancer of the vulva, and head-and-neck cancers.

C. Assessment

Diagnostic investigations

Skin assessment

Wound assessment

Assessment of side effects/adverse effects of treatments

Signs of tumour progression through the skin

Signs and symptoms of tumour progression to internal organs and structure, e.g. cough, major bleeding.

General assessment of the patient including their general condition and Quality of Life (QoL).

D. Prevention

Identification of risk factors (sun exposure in melanoma, early detection of potentially ulcerating malignant tumours)

Identification and actions in relation to signs and symptoms of tumour progression, e.g. spinal cord compression

E. Medical treatments (Indications and side effects/adverse effects)

Surgery

Radiotherapy

Neutron/protone/electron therapy

Chemotherapy

Embolisation

Laser treatments- dangers and potentials

Topical chemotherapy/chemostatic drugs

Brachytherapy

Electro chemotherapy

Targeted therapies

F. Organisation of cancer and palliative services and interdisciplinary team working.

See for example: *Managing Wounds as a Team - exploring the concept of a team approach to wound care*

(Download at: <http://ewma.org/what-we-do/ewma-project-portfolio/list-of-completed-ewma-projects/managing-wounds-as-a-team/>)

G. Symptom management

Assessment and differential diagnosis of presenting symptoms and how these may be interrelated, e.g. infection that is in addition to active tumour infiltration of the skin

Symptoms related to the underlying systemic disease, e.g. pain

Symptoms related to local conditions at the wound site, e.g. stinging from the area between healthy skin and tumour, local maceration

Use of medical treatments for palliation of symptoms (Including: pain and pruritus: World Health Organisation analgesic ladder; topical opioids; Transcutaneous Electrical Nerve Stimulation (TENS); Acupuncture. Pruritus: products for treatment of pruritus, moisturizing lotions/creams, radiotherapy)

Pharmacology, pharmacokinetics, drug interactions

Management of side effects/adverse effects of different types of treatment

Legal and ethical issues concerning the use of controlled drugs; licensed drugs for unlicensed purposes

Palliative Care Drug Formularies: use of drugs on a named patient basis for applications for which they are not licensed e.g. Sucralfate suspension normally used for gastric ulceration applied as a topical preparation to control local bleeding and damage to mucosa by antitumoural treatment (Cytostatics and irradiation)

Patient administered drugs, including continuous infusions and appropriate drug combinations

H. Local wound management

Involvement of the patient and their next of kin in setting goals for management of the wound

Understanding of the functions of topical preparations and dressings

Understanding the function of therapeutic beds and seating

Understanding the function of therapeutic bed linen, underclothing and sleepwear to minimise sweating and promote skin function and comfort

Assessment of problems at the wound site that can be managed with topical preparations and wound dressings:

- Exudate including peri-wound skin protection
- Odour
- Bleeding
 - Emergency measures
 - Preventive measures (care with bathing, non-fibrous/non-adherent dressings, cleaning techniques)
 - Palliative treatments (radiotherapy, embolization, bleeding, topical haemostats)
 - Indications, contraindications and methods for debridement of devitalised tissue (See for example: *EWMA Document: Debridement* (Download at: <http://ewma.org/what-we-do/ewma-project-portfolio/list-of-completed-ewma-projects/debridement-document/>)

- Debridement of devitalised tissue (when to maintain dry eschar and when and how to debride)
- Stoma care

Management of co-morbid conditions e.g.:

- Spinal cord compression
 - Recognition of symptoms and emergency actions required: immediate referral, high dose steroids
- Care of the patient with weakness and loss of mobility
Care of the patient with quadriplegia/paraplegia
- Care of the patient with cancer-related fatigue
- Lymphoedema: prevention, treatment, lymphoedema therapy

Nutrition/dietary considerations, including enteral feeding for patients with head and neck cancer

Psycho-social problems; visibility of the malignancy, closeness/odour/depression, potential loss of self and body image, measurement of quality of life

Documentation e.g. assessment of risks; deep venous thrombosis, rupture of major blood vessels, pressure ulcers, infection, side-effects of immunosuppressives

Identification of patient centred management objectives

Care planning

Evaluation of outcomes, e.g. TELER (Treatment Evaluation by Le Roux's method)

Use of evidence based practice/clinical guidelines

Referral criteria

Interdisciplinary team working

I. Practical skills - Assessment

Wounds: location, fungating wounds; extension, depth, bacteriology, odour, exudation, bleeding potential, pain. Specific needs associated with the specific problems.

Surrounding skin: assessment of local and systemic symptoms and recognition of multiple potentially interrelated or super-imposed problems, e.g. pain, pruritus, infection, radiotherapy skin reactions; paraesthesia/hyperalgesia/loss of function which may herald spinal cord compression

Overall patient condition evaluation, including mobility, nutritional state, cognitive function, emotional status (depression)

Quality of life/ impact of wound on day to day living/impact of wound on family and partner/psychosocial problems

Dressing performance for example in relation to the management of exudate (condition of surrounding skin, dressing adherence, leakage, frequency of dressing changes/re-padding, dressing fit/conformability, patient perspectives)

J. Practical skills - Prevention

Prevention of progress of tumour and skin manifestations, odour, pain, pruritis, bleeding, lymphoedema

K. Practical skills – Treatment/Care

Treatment of tumour: surgery; radiotherapy, chemotherapy; neutron therapy; laser treatments; electro chemotherapy; topical chemotherapy/chemostatic drugs, targeted therapy

Documentation: goal setting involving the patient and next of kin when this is possible; evaluation of outcomes

Nutritional support

Psychosocial support

Dressings and topical preparations

Lymphoedema treatment: range of massage techniques; self-massage techniques; compression hosiery; compression bandaging

Symptom control

Homeopathy

L. Education

Education of patient and family

Education of homecare-staff

Education of paramedics

M. Documentation

Documentation of medical condition, wound condition, nursing care, nutritional status, lymphoedema status, psychosocial well-being, educational activities directed towards staff and next of kin, patient goals, outcome measures

8. Unit specific learning resources

Books/Book chapters

Grocott, P, Gethin, G and Probst, S. (2015). Skin problems in palliative care. In Cherny, N.I, Fallon, M.T., Kaasa, S., Portenoy, R. K. and Currow, D. C. (eds.) Oxford Textbook of Palliative Medicine 5th Edition. Oxford Medical Publications, Oxford. 715-723.

Lawton J. (2000). *The Dying Process*. London, Routledge.

Naylor, W, Laverty, D and Mallet, J (eds) (2001). *The Royal Marsden Handbook of Wound Management in Cancer Care*. Oxford. Blackwell Science

Twycross, R and Wilcock, A (2007) *Palliative Care Formulary PCF3*. Nottingham

Grocott P and Briggs E (2008) *Wound pain in palliative care*. White R and Harding K (eds). *Trauma and Pain in Wound care Volume II*. Aberdeen. HealthComm UK.



Web links

Recommendation for the care of patients with malignant fungating wounds (2015) available under:

<http://www.cancernurse.eu/documents/EONSMalignantFungatingWounds.pdf#search=%22malignant%20fungating%20wound%22>