



## A Nurse's Responsibility

A great deal of information has emerged recently about cancer, including its incidence, contributing factors, and recommended lifestyle changes. As oncology nurses, our obligation to stay abreast of practice

changes tends to focus our attention on articles and conferences about new drugs and treatments. Yet, as nurses, we also have a responsibility to contribute to the dialogue in this country on decreasing the incidence of cancer

Cancer now has replaced heart disease as the number-one killer of Americans under the age of 85. The American Cancer Society (2005) reports that 476,009 Americans died from cancer in 2002 compared to 450,637 who died from heart disease. This is primarily because the drop in smoking rates has lowered death rates from heart disease. Although death rates from lung and colorectal cancer are dropping, more than 570,280 cancer deaths are expected in 2005. Obviously, we have a long way to go.

How can we impact these statistics in any way? It is becoming increasingly clear that obesity is linked to a number of cancers—colorectal, breast, esophageal, and liver, to name a few. Lippman and Levin (2005) stated that obesity is the largest avoidable cause of cancer mortality, responsible for 90,000 cancer deaths annually in the United States. The fact that obesity is rising in this country is no surprise to anyone. As oncology nurses, how are you helping to educate the public about this avoidable contributor to cancer? We would be wise to plan proactively when considering how to approach this topic with patients, family, and community members. Are you familiar with the new nutritional guidelines (U.S. Department of Health and Human Services and U.S. Department of Agriculture, 2005) that are essential to a healthy lifestyle? Some very humorous articles about the guidelines have appeared in the press, such as in *The Wall Street Journal Online*, where Cullen (2005) graphically

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describes the effort and time required to prepare healthier food and exercise for 60–90 minutes per day. However, obesity is a very serious subject, with even modest weight gain during adulthood associated with a higher risk of death regardless of how active one is (Hu et al., 2004).

A recent Gallup poll again found nurses to be the most trusted professionals, more honest and ethical than judges and doctors. Whenever a friend, family member, or neighbor is hospitalized or diagnosed with an illness, isn't it the nurse who he or she knows who is called? I often am asked my opinion about all kinds of illnesses, including obstetric questions, even after I declare emphatically that I have not practiced obstetric care since college! We have a responsibility to keep up with the literature on all kinds of topics, not just clinical oncology. The *Clinical Journal of Oncology Nursing (CJON)* will try to help you remain current with diseases and treatments other than cancer with some new columns.

Case Analysis will review treatments for some of the most common primary-care disorders, all of which occur regularly in patients with cancer. In My Own Words is a bit different. This column will give nurses the opportunity to describe their personal experiences with the healthcare system, thereby expanding our perspective of patient care. You also will notice articles that are more research-based than you may be accustomed to reading. To practice any semblance of evidence-based care, you must be familiar with the evidence! Most hospitals, medical centers, and practice groups claim that their care is based on evidence, and they



use those claims to attract new patients or apply for Magnet status. Are those claims accurate when nurses do not have Internet access at work to search the literature or have depleted medical libraries without many important nursing journals? Nurses have a re-

sponsibility to pierce through marketing and public relation campaigns and demand the resources essential to truly practicing evidence-based care. To that end, *CJON* now is publishing articles that will give you the evidence you need to make decisions about patient care. Those articles will remain clinically focused, as *CJON* has strived to do since its inception. Our Evidence-Based Research columns over the next few issues will give you some background on interpreting research and statistics, which is necessary for reading many medical and nursing research studies. I welcome your comments.

### References

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