

An Integrative Review of Nursing Research on Active Surveillance in an Older Adult Prostate Cancer Population

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Prostate cancer is a common diagnosis in the older adult male population. In the United States, 1 in 6 men are at risk for a prostate cancer diagnosis during their lifetime, with an estimated 241,740 new cases diagnosed in 2012 (Siegel, Naishadham, & Jemal, 2012). The detection of prostate cancer has evolved from being clinically detected at a stage of advanced disease, where cure was unlikely, to the evolution of the prostate-specific antigen (PSA) blood test beginning in the late 1980s that increased screening and detection of early, low-grade disease. The use of the PSA blood test identifies men who are at risk and who, subsequently, undergo prostate biopsy. Currently, a large percentage of prostate cancers are detected as indolent cancers that may never manifest as clinically significant (Thompson & Klotz, 2010).

The detection of disease classified as an insignificant or indolent cancer creates a dilemma for healthcare providers and patients. Current statistics reflect that even when Gleason score and volume of cancer are classified as both low risk and low volume and, therefore, unlikely to impact mortality, 90% of patients will still go on to receive a definitive treatment in the form of either radiation-based treatment or surgery (Thompson & Klotz, 2010). The impact on quality of life on those treated patients also is significant; common side effects include erectile dysfunction and incontinence for those who have surgery, and persistent irritative bowel and bladder symptoms for those who have radiation therapy (Hayes et al., 2010).

A treatment option under increasing consideration as an alternative to surgery or radiation for the patient with low-risk, low-volume disease is active surveillance. Active surveillance is a treatment strategy of cooperative, intentional, and prescribed monitoring of prostate cancer, with a clearly defined strategy for intervention management reserved for patients who exhibit signs of disease progression by either a rapid sequential PSA increase or an increase in Gleason score or volume

Problem Identification: To summarize the current state of nursing knowledge regarding the management of older adult men with prostate cancer with active surveillance as the treatment strategy.

Literature Search: Publications of nursing research from January 2003 to March 2012 addressing patients with prostate cancer undergoing an active surveillance treatment management strategy.

Data Evaluation and Analysis: A paradigm shift in the recommendation to consider active surveillance is apparent in the literature. Since 2003, active surveillance has become a more frequent recommendation as the management approach for low-risk, small-volume prostate cancers. Current nursing literature provides data on decision making and the uncertainty associated with active surveillance; however, minimal information is available that specifically addresses the needs of the aging adult population with prostate cancer. In addition, the trajectory of adaptation has only been preliminarily identified within the body of nursing knowledge; the actions that promote or obstruct successful adaptation to active surveillance as a treatment approach require in-depth study.

Presentation of Findings: Active surveillance has relevance for the aging population while providing a potential means to judiciously allocate medical resources and expenses within the healthcare delivery system. The nurse researcher, in partnership with the advanced practice nurse, should proactively address the multifaceted needs of this patient population.

Implications for Nursing Practice: Active surveillance, as a program of cooperative, intentional, and prescribed monitoring of prostate cancer with a clearly defined strategy for management, is ideally suited for nursing research into the adaptation, educational needs, and management of chronic disease processes of older adult men while advancing the educator and provider roles of the advanced practice nurse.

Knowledge Translation: Active surveillance is an appropriate treatment option in older men with low-risk, low-volume prostate cancer. However, this treatment also is a source of uncertainty. Targeted, ongoing nursing education about active surveillance as treatment must address this uncertainty in this patient population so patients are comfortable with planned monitoring.