

To treat or not to treat? That is the question

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Abstract

Age is a risk factor for both dementia and most cancers and we can hypothesise that we will see more and more people affected by both conditions over future decades. Individuals affected by both cancer and dementia pose unique challenges to healthcare professionals owing to complex factors as impaired mental capacity, consent issues, poor communication and issues of compliance when having to make decisions around oncology treatments.

Adjusting to a cancer diagnosis when living with dementia can unfold a variety of emotional and practical responses to receiving news of the diagnosis of cancer and treatment options available and indeed of whether or not to offer or accept treatments. This can be a confusing, frustrating and distressing decision for those working in oncology services as well as for family carers and people living with dementia which may on occasion indicate treatment is not always perceived as in that person's best interest. Therefore the decision of whether to treat or not to treat comes with huge implications both ethically and in relation to quality of life outcomes.

This presentation demonstrates the complexities and challenges involved in working as a dementia nurse consultant in a large UK oncology specialist treatment centre which have previously been unexplored.

Biography

Lorraine Burgess was trained at Stepping Hill Hospital as a general state enrolled nurse in 1980. In 1992 she retrained as a registered mental health nurse, again at Stepping Hill/University of Manchester, as she wanted to develop her understanding of older people's mental health needs.



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