

Analogy between Nursing Outcomes and Anatomic-Pathological Diagnosis of Basal Cell Carcinoma

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Abstract

Introduction: Nursing is a discipline that seeks the physical and mental well-being of patients and families. The cancer patient requires special care that is promoted on the basis of the relationship between the doctor and the nurse.

Objective: To relate nursing results and anatomic-pathological diagnosis of basal cell carcinoma.

Methods: Cross-sectional, descriptive and correlational study at the Abel Santamaría Cuadrado General Teaching Hospital, in Pinar del Río, from January 2017 - February 2019. The universe consisted of 302 patients and the sample of 148. The statistical analysis was carried out with the program SPSS.

Results: 56.76% were male and 42.56% were 71 years and older. 66.89% belonged to skin type II photo. 65.54% of the sample had basal cell carcinoma. There was a recovery after treatment and acceptance of health status in the 148 and a direct correlation between pathological diagnosis and nursing results. 68.04% stage I and a tumor reduction of 91-100% of the lesion after treatment.

Conclusion: In the cellular basal carcinoma during its diagnosis, evolution and treatment there is a linear correlation between the acceptance of the state of health, knowledge of the disease process, level of anxiety, recovery after the procedure and the anatomic-pathological diagnosis. Providing a better response to treatment and a better quality of life.

Keywords: Neoplasm; Cellular Base; Nursing Outcomes; Skin Type Photo

Introduction

Basal cell carcinoma (CBC) is the cancer of the skin that most frequently affects men. It has a slow growth and occasionally metastasizes. It affects both sexes equally. It arises in close relation with genetic, viral and radiation exposure factors ultraviolet. Increases incidence with age. It is usually very aggressive when located on the scalp and nose [1].

In recent years it has had an excessive increase worldwide. It is estimated that it represents 70% of all diagnosed cases of skin cancer; reporting around 10 million cases per year [2,3]. Represents 80% of malignant tumors of the eyelids, causing deformity and loss of function [4].

A marked increase in this disease has been reported in Cuba. In 2014, the statistical yearbook of health placed it in first place for both sexes, highlighting the male with 104.3 cases per 100,000 inhabitants [5,6].

During the evolution of this pathology, the patient and his family members face a series of complications that are difficult to handle by medical and nursing personnel, which represents an overload for the health services, for the patient, the family and society.

So, the attention to each of them will be according to their needs. That is why the nurse must focus his knowledge, opinions and skills on diagnosis and treatment. This is possible through the application of the Nursing Care Process (PAE). That it is a clinical method that logically and rationally directs nursing as a discipline [7].

There have been multiple efforts to achieve structured nursing results based on people's understanding of the disease, treatment alternatives, self-care experiences, adaptive behaviors and health status. Currently the Nursing Outcomes Classification (NOC) refers to the classification of results and tries to provide the nurse with a validated system and own language to identify, name and measure the results in practice [8].

Although there is no doubt about the role of the nurse in the treatment and follow-up of the cancer patient, the need to create a dynamic and integrated nursing medical team that allows offering adequate care with results is no less certain. To achieve this, health records, a thorough physical examination, laboratory and imaging tests, and pathology studies are required [9,10].

Aim of the Study

Therefore, it was decided to carry out this research with the aim of relating nursing results and anatomic-pathological diagnosis of basal cell carcinoma.

Materials and Methods

A cross-sectional, descriptive and correlational study was carried out; at the General Teaching Hospital "Abel Santamaría Cuadrado" in Pinar del Río in the period from January 2017 to February 2019.

The universe consisted of 302 patients who attended ophthalmology, maxillofacial and dermatology consultations; referred from their health area for presenting clinical suspicion of basal cell carcinoma.

The sample was determined by applying the simple random sampling method, being made up of 148 patients who met the selection criteria.

Selection criteria

Inclusion criteria

- Patients with clinical suspicion of basal cell carcinoma.
- Patients over 18 years of age.

Exclusion criteria

- Patients with an incomplete medical history.

To collect the information, the individual medical history of the patients was reviewed and the data referring to the variables analyzed were taken: age, sex, photo skin type, pathological diagnosis, nursing results, stage of the disease, percentage of Lesion reduction after treatment with HeberFERON. The variable nursing outcomes was considered taking into account the effects obtained from the nursing intervention. The assistance nursing staff carried out a survey that included the aspects of: acceptance: health status of each patient, knowledge of the disease, level of anxiety of the patients, recovery after the medical procedure with HeberFERON. Thus, allowing to customize the nurse action for each patient studied.

The stage of the disease was classified into: I, II, III, IV according to the severity of the local destruction of the tissues.

The photo skin type was stratified according to the degree of melanin of the skin and response to sun exposure in: type I always burns, never tans, type II always burns, then lightly tans, type III sometimes always burns tans, type IV never burns always tans, brown type V rarely burns, but stains easily and profusely, black type VI never burns tans profusely.

In the last variable, the decrease in the size of the lesion was counted in: 0 - 29%, 30% - 60%, 61% - 90%, 91% - 100%.

Medical treatment with HeberFERON was only carried out in patients with the pathological diagnosis of basal cell carcinoma, according to the National Protocol.

Statistical analysis was performed using the IBM SPSS Statistics for Windows professional statistical package version 20.0. In the descriptive analysis, for the quantitative variables, the mean, median and standard deviation values were calculated; For the qualitative variables, the absolute and relative frequencies were used according to the proposed scales. At the analytical level, the Pearson index values were calculated.

The study was carried out in accordance with ethical principles for medical research in humans, in accordance with the provisions of the Cuban National Health System, provided for in Public Health Law No. 41. The confidentiality of all data was ensured, guaranteeing respect for the person, charity, justice and equity. The information obtained was only used for scientific and educational purposes.

Results and Discussion

Age (years)	Female		Male		Total	
	No	%	No	%	No	%
40 - 50	13	8,78	6	4,06	19	12,84
51 - 60	15	10,14	21	14,19	36	24,33
61 - 70	14	9,46	16	10,81	30	20,27
≥ 71	22	14,86	41	27,70	63	42,56
Total	64	43,24	84	56,76	148	100,00

Table 1: Percentage distribution of patients with clinical suspicion of basal cell carcinoma according to age and sex.

Table 1 shows the percentage distribution of patients who were referred from their health areas for clinical suspicion of basal cell carcinoma according to age and sex. Confirming a prevalence of male biological sex in 56.76% and the most represented age group was 71 and over with 42.56%.

Skin type photo	No	%
I	18	12,17
II	99	66,89
III	22	14,86
IV	9	6,08
Total	148	100,00

Table 2: Percentage distribution of patients with clinical suspicion of basal cell carcinoma according to skin type photo.

When considering the most representative photo type of skin in the patients studied with clinical suspicion of basal cell carcinoma. It is corroborated that skin type II photo was present in 66.89% of the cases studied (Table 2).

Anatomopathological Diagnosis	No	%
Basal cell carcinoma	97	65,54
Squamous cell carcinoma	43	29,05
Carcinoma Epidermoid	8	5,41
Total	148	100,00

Table 3: Percentage distribution of patients according to pathological diagnosis.

When analyzing the percentage distribution of the patients studied according to pathological diagnosis. It could be determined that 65.54% confirmed the diagnosis of basal cell carcinoma (Table 3).

Pathological anatomy diagnosis	1300 Acceptance: Health status	1803 Knowledge of the disease process	1211 Anxiety level	2303 Post-procedure recovery
Basal cell carcinoma	97	48	55	97
Squamous cell carcinoma	43	43	35	43
Carcinoma epidermoid	8	8	6	8
Total	148	99	96	148
Pearson's index	1	0,86	0,97	1

Table 4: Correlation index between pathological diagnosis and NOC nursing outcomes.

Regarding the correlation between the anatomic-pathological diagnosis and the nursing NOC results, it was found that after the nursing intervention in 148 patients, there was a recovery after the treatment and acceptance of the health status. The Pearson index was between 0 and 1 confirming a linear correlation between the pathological diagnosis and the nursing results (Table 4).

Stage of injury	% reduction of primary injury after treatment with HeberFERON								Total	%
	0 - 29		30 - 60		61 - 90		91 - 100			
	No	%	No	%	No	%	No	%		
I	-	-	-	-	-	-	66	68.04	66	68.04
II	-	-	-	-	17	17.92	-	-	17	17.92
III	-	-	12	12.37	-	-	-	-	12	12.37
IV	2	2.06	-	-	-	-	-	-	2	2.06
Total	2	2.06	12	12.37	17	17.53	66	68.04	97	100

Table 5: Association of patients according to the stage of the injury and the percentage of reduction of the primary injury after treatment with HeberFERON.

Table 5 shows the results of the association of patients according to the stage of the injury and the percentage of reduction of the primary injury after treatment with HeberFERON, where it was confirmed that 68.04% of the patients studied presented a stage I injury in the time of diagnosis and a 91 - 100% tumor reduction of the lesion after treatment application. In all the patients there was a reduction of the injury after treatment.

Among the important factors for making an accurate diagnosis and being able to apply adequate treatment in basal cell carcinoma is being able to achieve a close relationship between the actions of nursing and the doctor. This pairing is essential in the diagnosis, evolution and treatment of the cancer patient.

The age group most affected in this investigation was 71 and over, which is related to a study carried out in the province of Santa Clara, where some characteristics of the presentation of skin cancer in patients from the municipality of Sagua la Grande are exposed. Where the author refers that the appearance of skin cancer in any of its variants, from the sixth decade of life is related to the accumulation of ultraviolet radiation given by exposure maintained throughout life, we also agree on this aspect. In the same way, a study carried out in Manzanillo shows a predominance of advanced ages that relate it to the same aspect, as well as that its occurrence is more frequent in men, also related to the tasks that they carry out that allow photo exposure, not use of means for sun protection elements that make it agree with other studies [9-12].

The information obtained regarding the most representative skin type photo was II. Like other scholars on the subject who attribute this to the inability to be able to tan due to the low presence of melanin in the skin, which provides it with a large amount of harmful radiation promoting the appearance of skin cancer [10,11].

According to international reports, skin cancer is the most common of all malignancies. Among non-melanoma, the one with the highest incidence is basal cell carcinoma, being in correspondence with the present study. Its location is especially in places where there are hair follicles and have greater exposure to the sun [11,13,14].

An analogy between nursing results and anatomic-pathological diagnosis of basal cell carcinoma was found, an important element for the rehabilitation and recovery of the health of the patients, as well as collaborating in their recovery, with minimal difficulties and risks. For this reason, there are nursing guides created on the basis of the nursing care process and the diagnoses of the North American Association for Nursing Diagnosis (NANDA), with the aim that their care, diagnoses and results are based on the sake of providing quality comprehensive care to the patient and their families [7,8].

In relation to the stage of the injury, the most representative was the I and a direct correlation between the stage of the injury and the percentage of reduction after applying the treatment with HeberFeERON, which is currently considered an effective alternative medical treatment; especially in the initial stages of the lesion, when the size is small according to the experience of the authors [13,14].

Conclusion

It is concluded that in basal cell carcinoma during its diagnosis, evolution and treatment there is a linear correlation between the acceptance of the state of health, knowledge of the disease process, level of anxiety, recovery after the procedure and the anatomic-pathological diagnosis patented in that increase and decrease in the same proportion. Providing a better response to treatment and a better quality of life.

Conflict of Interest

None.

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