

## Europe's nurses: an untapped resource

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mbulatory care services are coming under huge pressure from the steady rise in the number of cancer patients who require long-term follow-up. Facilities are overcrowded, staff overstretched, and extended clinic waiting times are becoming the norm. Patients' physical, emotional and social welfare are often overlooked because there is not enough time to explore their needs and find solutions. It all adds up to a miserable experience for patients and huge frustration for health professionals.

Evidence has emerged over the past few years that nurse-led clinics may offer one answer to this growing problem. Across a number of cancer types and treatment settings, follow-up by specially trained nurses has been shown to be as effective as follow-up by doctors. Giving nurses the lead role results in similar outcomes, is acceptable to patients and their families and is associated with better symptom management and improved quality of life. Importantly, it is also more cost-effective than conventional followup approaches. These results have been shown to be valid not just for patients requiring ongoing observation following treatment, but also for patients who have just undergone surgery, and those still going through radiotherapy or taking longterm treatment.

Nurse-led follow-up services can be organised in different ways. Most research to date has been done in a hospital-based ambulatory care setting. A Dutch study recently showed that, following surgery for oesophageal or gastric cancer, regular home visits by specialist nurses is as effective as physician follow-up in an outpatient clinic. Home visits by specialist nurses have been the norm for many years in the palliative care setting. A third potential model is for nurses to do follow-up by telephone, which can be very convenient for patients — especially those who have to travel long distances for a check-up.

Proper training is, of course, critical for ensuring the safety and effectiveness of nurse-led services, and the nurses should have clear protocols to work to and easy access to a physician when they need advice. Given the heterogeneity in cancer nursing practice across Europe, not every country will currently be in a position to find specialist nurses capable of taking responsibility for patient follow-up. But with ambulatory services creaking under the strain, nurses represent an underutilised resource that could offer enormous benefits.

All countries should be thinking about how and where nurse-led follow-up services could be set up, for the benefit of patients, and a more efficient and costeffective health service.