Abstract

Nursing Case Management in Oncology: Preliminary Effects on Quality of Life, Distress, and Continuity of Care

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Introduction. In patients with cancer undergoing active treatment, the care experience is influenced by treatment-related adverse effects, emotional distress, relational vulnerability, and the risk of fragmented care. Nursing case management may provide a useful organizational model for integrating monitoring, therapeutic education, personalized support, and continuity of care. The aim of this study was to evaluate the impact of a structured nursing case management pathway on perceived quality of life, distress, symptom burden, unplanned healthcare visits, and continuity of care among patients with cancer undergoing active treatment.

Methods. A prospective pre-post pilot study was conducted in a medical oncology/day hospital setting. The sample comprised 30 adult patients receiving active anticancer treatment. The intervention included a multidimensional nursing assessment, early identification of care needs, personalized education, scheduled monitoring between treatment cycles, and timely activation of the multidisciplinary network when clinical, psychological, or social concerns were identified. Three questionnaires were administered at baseline, between treatment cycles, and at the end of the pathway to assess continuity of care, support needs, symptoms, emerging concerns, care experience, and satisfaction.

Results. The sample included 30 patients with a mean age of 58.9 ± 12.1 years; 70.0% were female and 53.3% had a caregiver. Mean perceived quality of life increased from 51.7 ± 8.5 at baseline to 62.6 ± 10.4 at the end of the pathway, while distress decreased from 6.4 ± 1.7 to 4.5 ± 2.1 and symptom burden from 49.7 ± 13.9 to 40.2 ± 14.4. At baseline, 83.3% of patients requested scheduled nursing contact and 53.3% reported difficulty managing symptoms at home. During treatment cycles, 66.7% requested nurse follow-up. At the end of the pathway, 96.7% reported improved overall care experience and early symptom recognition, while 93.3% reported greater continuity between treatments.

Discussion. Nursing case management appears to be a promising model for supporting patients with cancer undergoing active treatment by enhancing continuity of care, promoting early symptom management, and strengthening the therapeutic relationship. The findings suggest favorable trends in quality of life, distress, symptom burden, and patient-reported care experience, supporting further evaluation of structured nursing case management pathways in oncology practice.

Keywords: Nursing Case Management, Oncology, Continuity Of Care, Quality Of Life, Distress

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