Summary

Patient information is a central component of both prevention and effective management of radiotherapy side effects and the value of specific information on adverse reactions in helping patients cope, increase their level of satisfaction and enhancing" self care" are emphasized ***(Ayoub, 2006)***. Oncology nurses play a critical role in providing this information to patients, so that they can evaluate the balance of risks and benefits associated with treatment **(Jessica, 2008).**

The aim of the current study was assessing the effect of a health educational program on quality of life of cancer patients receiving radiotherapy.

Education of patients did not aim to make them more knowledgeable about their disease, but to help them better manage radiotherapy and side effect. Thus, this study was conducted to assess the effect of educational program. This was achieved through designing, implementing and evaluating the educational program. To fulfill the aim of the present study, the following research hypotheses were formulated:

H By completion of the program, quality of life total score among the study group who participated in the program will be higher than control group.

The study was conducted of 60 adult male and female patients admitted to the clinical oncology unit and out patient unit of radiotherapy with cancer patients and receiving radiotherapy for the first time, for not less than one month. The study subjects were assigned into two equal groups (study and control), 30 subjects each.

Implementing this study required four tools:

Questionnaire sheet which included:

Part I: A- Socio Demographic Data Sheet:

This sheet was developed by the investigator to cover all items related to patient's demographic data.

B- Illness-Related Data Sheet:

Medical history sheet was designed by the investigator based on literature review to collect data about every patient.

(Appendix A).

Part II: Interviewing questionnaire sheet:

To assess of patient's knowledge about (cancer, radiotherapy …) etc.

Part III: - Quality of life index scale

The scale was adopted from ***(***Ferrel***, 1995)*** who developed it to assess the impact of cancer on the quality of life of cancer patients. This scale adopted by the researcher to use for cancer patient undergoing radiotherapy. The quality of life scale covered 4 health's dimensions as physical well-being, psychological well-being, and social well-being and spiritual well-being.

Part IV- Proposed Health Educational Program:

This program was designed to get the quality of life for patient and enhance the patient's coping with the side effects of the radiotherapy. The booklet consisted of two parts; theoretical part and practical part. This first one included information related to radiotherapy and its side effects, and nutritional management. The second part taught the patient how to practice the daily exercise to promote physical, psychological, social, spiritual condition and how to overcome the problems and strategies for minimizing these side effects.

Program implementation

The program was conducted through five sessions each one range from 30- 45 minutes on individual. Each of session started by a summary about what has been discussed in the previous session and the objectives of the new session, using simple Arabic language. The session ended by a summary of its contents and feedback from the patients was obtained to ensure that he/ she got the maximum benefit.

Program implemented through a period of 11 months, taking into consideration the time allotted the treatment visits during patients receiving guidance and instructions.

Program evaluation

Evaluation of the program on patient's condition was done through comparing the pre- and post- assessment of the patients regarding their knowledge, quality of life scale, and ability to perform the usual daily living activities. Evaluation was taken after finishing the program implementation.

The main findings of this study were:

- More than half of both study and control group subjects were respectively females and 4one third of both groups had breast cancer, more than one third were 40 to less than 60 years old and more than half worker.

- Regarding knowledge about cancer, radiotherapy and side effect , there were highly significant improvement in knowledge mean scores of study group immediately, post and one month after educational program as compared to control group, p (<0.001)

- The study hypothesis was supported. It was found out high percent of total QOL score of the study group immediately post and after one month of the educational program as compared to control group.

- The study revealed that there was appositive correlation between total physical quality and total psychological, social and spiritual total quality of the study group pre, immediately and after one month of intervention with highly significance differences, p (<0.001))

The following are the main recommendations:

1- The educational program for patients should be continued until finishing the radiation therapy.

2- Patient's education is very important element in improving patient quality of life. So, it must be emphasized before radiotherapy treatment initiation and continues after completion of treatment course.

3- This educational program should be used by all radiotherapy units, outpatients clinics and inpatients units, through a simple booklet, and pamphlets with updated knowledge and instructions about radiotherapy.

4- There is need to plan and conduct an in service training program to the radiotherapy nursing staff about their role in controlling side effects of radiotherapy, which is necessary for the continuously advancing care for oncology patients.

5- The educational program should be used on different cancer treatment units to improve quality of life during the treatment.