Commentary Overview

- Recent breakthroughs in cancer prevention, early detection, and treatment have contributed to a decrease in cancer deaths and an increased number of cancer survivors.
- ONS leaders are examining current trends in health care and oncology nursing to envision future scenarios for cancer care.
- ONS and AACI leadership are addressing the need to educate and maintain a robust oncology workforce by embracing technological advances and providing resources to nurses and physicians.

There has never been a better time to be an oncology nurse. Real breakthroughs have been achieved in the past few years in cancer prevention, early detection, treatment, and symptom management, contributing to fewer cancer deaths and more cancer survivors.

According to data from the Surveillance, Epidemiology, and End Results (SEER) Program, cancer mortality rates for men, women, and children continued to decline from 1999 to 2016. The National Institutes of Health’s Division of Cancer Control and Population Sciences estimates that, as of January 2019, there were 16.9 million cancer survivors in the United States. That number is projected to increase by 29.1%, to 21.7 million, by 2029.

Now, as we approach the turn of another decade, we have an opportunity to reflect on where we have been and where we are headed.

May 12, 2020 will mark the 200th anniversary of the birth of Florence Nightingale, the founder of modern nursing. Among Nightingale’s many accomplishments, she is perhaps best known for vastly improving the sanitary conditions of Scutari, a hospital in Constantinople where British soldiers were treated during the Crimean War. She is also credited with establishing a range of services to enhance the quality of a patient’s hospital stay, from an “invalid’s kitchen” to laundry services, classrooms, and libraries.
“Let us never consider ourselves finished nurses. We must be learning all of our lives.” — Florence Nightingale

Oncology Nursing Society (ONS) leaders are inspired by Nightingale’s advice to “never consider ourselves finished nurses.” Nightingale’s emphasis on the value of lifelong learning is an important lesson to all of us in the rapidly-evolving field of oncology.

For nearly half a century, ONS has served as the voice of oncology nurses and as the professional home where practitioners develop standards of oncology nursing and nurses find the best evidence to care for people with cancer. Looking to the future, oncology nurses are challenged to imagine how cancer care will evolve and to develop strategies that will transform cancer care.

Innovation is one of the core values of ONS. Our members invent the future of oncology nursing every time they identify a better way to care for patients. ONS members presented numerous strategies to improve care at the 44th Annual ONS Congress in Anaheim, CA, in April 2019. Improvements in care delivery included topics ranging from symptom management of new immunotherapy agents, cancer risk assessment incorporating genetic profiles and early identification of hereditary cancer, and advancements in telehealth and care coordination. The meeting’s keynote speaker was Rachel Walker, PhD, RN, an assistant professor in the UMass Amherst College of Nursing. Dr. Walker challenged the more than 4,000 oncology nurses in attendance to recognize the needs of people with cancer and to bring their innovative solutions to the table — even if they need to bring their own chairs!

AACI member cancer centers were well-represented at the ONS Congress. Misty Lamprecht, MS, APRN-CNS, AOCN®, BMTCN®, a clinical nurse specialist in the Blood and Marrow Transplant Program at the Ohio State University Comprehensive Cancer Center, James Cancer Hospital and Solove Research Institute, shared best practices and future considerations for adverse event management of CAR T-cell therapy. Annette Quinn, RN, MSN, program manager of Radiation Oncology at UPMC Hillman Cancer Center, discussed emerging scientific evidence using combination immunotherapy and radiation. Both presentations will be repeated during the Best of ONS Congress workshops in Minneapolis, Phoenix, and Philadelphia this fall.

ONS volunteer and staff leaders are examining current trends in health care, nursing, oncology, and oncology nursing to envision possible future scenarios for cancer care. For example, our leadership is considering how changes in cancer treatment may impact oncology nurses, with an increasing number of oral cancer therapies and fewer needs for patients to receive care in an infusion center. They are exploring ways that future oncology nurses will integrate technological advances in their work, from shared decision-making about cancer treatment guided by machine learning, to artificial intelligence that incorporates a patient’s genetic profile and offers the best recommendations for a successful outcome based on predictive models. Another future possibility: oncology nurses will coordinate care across the cancer care continuum from diagnosis to survivorship and end-of-life care with the help of a digital assistant used by patients and their caregivers to monitor biologic markers, activity, and symptom distress.

ONS isn’t the only organization that recognizes the need to educate and maintain a robust oncology workforce. At the AACI/CCAF Annual Meeting this fall, panelists—including ONS CEO Brenda Nevidjon, MSN, RN, FAAN—will address numerous factors that are significantly altering the cancer landscape, including technology, an aging population, and advances in detection and treatment. In a session titled “Training the Cancer Center Workforce for 2030,” experts will examine sustainable models for training both new physician scientists and clinical research staff.

Over the next year, ONS volunteer and staff leadership will develop a roadmap with ONS members and health care experts that will outline the tools and resources to help the oncology nurse of the future thrive. The future of oncology nursing is full of promise and hope. Together, the cancer workforce will transform the ways that the world cares for people with cancer.
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