

Journal Club

Every two months the EBP mentors will place an Evidence-Based Practice Challenge on the EBP webpage under the Journal Club tab. You can work as a single agent or as a group. CEUs will be awarded per individual. You will essentially be practicing the 4 basic EBP skills; Ask – Access – Appraise - Apply. 2.5 CEU's are awarded for this activity. Merely fill out CEU form (form will contain specific questions r/t to the topic) and mail to Laura Longstaff 7D53. Your CEU's will be awarded within 4 days of receiving the completed form.

Process

1. Review the challenge
2. **ASK** an answerable question in the PICO format from the challenge
 - P = patient group or problem of interest
 - I = intervention
 - C = comparison
 - O= outcomes
3. **ACCESS** evidence to answer the PICO question by performing a brief literature search. Use the databases on the SCD [standard clinical desktop]. Choose 2 of the most current articles that address most of the problems in the challenge.
4. **APPRAISE** a couple of the articles retrieved and determine the level of evidence from the Melnyk and Fineout scale



5. **APPLY**= Make a suggestion how the research findings could be applied to your practice or to your clinical unit.
6. Email [Laura Longstaff llongstaff@cc.nih.gov](mailto:llongstaff@cc.nih.gov) the pico question, the citation, study conclusion and CEU application within 60 days of the challenge posting.
7. At the next Journal club challenge, the answers to the previous journal club will be posted. Compare your answers.
8. CEU certificates can be picked up from Nursing Education 7D42 within 4 days of submission.

Challenge for February, 2007 [2.5 CEUs]

Many patients and their caregivers complain of lack of sleep or disturbed sleep wake patterns especially in cancer patients. The multidisciplinary team is willing to consider practice changes based on the "state of the science". Being a novice at EBP you will start with just NURSING LITERATURE to review the sleep wake disturbances research. Your challenge, should you choose to accept, is to find an article that summarizes the factors that interfere with normal sleep, screening techniques and a summary of the randomized control trial research. **Hint: limit to adults only.**

Write your PICO

P = patient or problem

I = intervention

C = comparison

O = desired outcome

Which database did you access?

How many articles appeared?

Which article did you choose to appraise?

What level of strength and quality did the article have?

How would you apply the evidence to your practice or to your patient population?

CEU Application [print form]

Name:

Work Address:

Read the article "Sleep/wake disturbances in people with cancer and their caregivers: State of the science", by Berger et al Oncol Nurs Forum. 2005 Nov 3;32(6):E98-126. Circle the correct answer.

1. Which of the following statements about sleep wake disturbances is true?

- A. Practitioners themselves are the most prominent barrier to addressing sleep wake disturbances
- B. Until sleep wake disturbances are severe, they have a limited effect on daytime wakefulness, functional ability and quality of life
- C. BEARS is an assessment protocol from which two useful clinical tools for assessing sleep wake disturbances are derived
- D. Subjective and objective assessments of sleep quality typically are highly correlated

2. Which of the following statements about factors that can interfere with normal sleep regulation in patients with cancer and their caregivers is NOT true?

- A. Both pain and multiple symptoms occurring in groups (symptom clusters) have been linked to poor sleep
- B. There are no reported gender or racial differences in reported sleep quality
- C. Irregular sleep/wake schedules and prolonged naps, as well as caffeine and alcohol intake and smoking can all disrupt sleep
- D. Analgesics, antidepressants, antiemetics and anxiolytics may adversely affect sleep

3. The daily rest-activity (sleep wake) pattern is controlled by:

- A. Melatonin secretion
- B. Body temperature variations
- C. Amount, timing, and placement of sleep across the day and circadian rhythms
- D. All of the above

4. Sleep latency is defined as:

- A. Number of minutes between lying down to bed and actually going to sleep
- B. Number of minutes of sleep while in bed
- C. Number of awakenings after sleep onset
- D. Number of minutes of sleep divided by the total number of minutes in bed, and multiplied by 100

5. Which of the following statements about sleep wake disturbances in patients with cancer and their caregivers is NOT true

- A. In patients with cancer, sleep wake disturbances are four times more prevalent than in the general population
- B. Sleep wake disturbances are reported most commonly after diagnosis and before treatment begins
- C. Poor sleep has a significant effect on daytime wakefulness, functional ability and quality of life
- D. Sleep wake difficulties are often part of a cluster that includes pain, depression and fatigue

6. Berger et al recommend that all patients and their primary caregivers be screened for sleep problems. The best way to do that would be:

- A. The Clinical Sleep Assessment (Adult) or Clinical Sleep Assessment (Child)
- B. By routinely asking the following preliminary question at each clinical contact: "Are you having sleep problems or difficulty staying awake during the day?"
- C. By using the Pittsburgh Sleep Quality Index or the Epworth Sleepiness Scale
- D. Estimating by self report the total sleep time while in bed, and the number of awakenings during the night

7. Convincing evidence at the level of randomized trials or meta-analyses exists to support which of the following interventions for sleep-wake disturbances during and following cancer and its treatment?

- A. Cognitive behavioral interventions
- B. Distraction
- C. Exercise
- D. Pharmacologic agents

8. In clinical trials, benzodiazepines and non-benzodiazepine hypnotics have shown:

- A. Definite benefit associated with the use of specific agents
- B. Specific benefit in patients with cancer
- C. Reduced self-reported sleep onset latency time and number of awakenings, and improved sleep duration, total sleep time and sleep quality
- D. Potential benefit when compared to melatonin

9. Which of the following statements about herbal and complementary therapies used to promote sleep is NOT true:

- A. The evidence to support the use of herbal sedatives such as Kava, valerian and melatonin is weak and inconsistent
- B. Data on adverse effects of herbal and complementary therapies is systematically collected and regularly examined by the FDA
- C. Herb drug interactions associated with St. John's wort make this a potentially dangerous therapeutic choice for patients with cancer
- D. Several NIH-funded studies of herbal and complementary therapies are ongoing and will offer scientifically rigorous information about the outcomes of the use of complementary and herbal therapies

10. Case Vignette: A 62 year old female with lung cancer metastatic to brain and bone is experiencing difficulty with sleep onset and frequent awakenings, resulting in excessive daytime sleepiness. Pain and other discomforting symptoms are well controlled by her current regimen of narcotic analgesics and an antidepressant. Which of the following interventions would be most appropriate to consider for sleep wake disturbances, based on the level of evidential support outlined in Berger et al (2005)?

- A. Exercise
- B. Diazepam
- C. St. John's Wort
- D. Relaxation therapy

Correct answers to this exercise will appear in the Journal Club folder April 1, 2007 and a new article challenge awaits. For questions call 301 435 2272.