Incorporating New Data on Colorectal Cancer Into Nursing Practice

Pamela Hallquist Viale, RN, MS, CS, ANP, AOCNP®

Treatment for colorectal cancer (CRC) has seen major advances, resulting in longer survival times for many patients. New data about improvements can appear daily in the form of updated journal articles, news reports, and study results reported at national and international oncology meetings. Practicing oncology nurses have a responsibility to keep current on treatments and symptom-management strategies for patients with cancer. Monoclonal antibodies targeting the epidermal growth factor receptor (EGFR) are approved in metastatic CRC, and new data are helping to define appropriate patients. Additionally, symptom-management strategies for commonly administered agents in CRC have been refined for EGFR inhibitor–associated rash and neurotoxicity; new information on hypersensitivity and cetuximab also has been reported. This article will discuss the role of the oncology nurse in the management of patients with CRC.

Colorectal cancer (CRC) was diagnosed in approximately 146,970 patients in the United States in 2009, and 49,920 patients were expected to die from the disease (Jemal et al., 2009). This commonly occurring cancer is the third leading cause of death for both genders. Thus, researchers and healthcare providers have great interest in improving outcomes for patients with CRC. Fortunately, major advances have occurred in the treatment of patients with CRC since 1996. Since the 1950s, a single treatment (5-fluorouracil) was the only chemotherapeutic agent available to treat this tumor type; leucovorin now is given with 5-fluorouracil to enhance its effectiveness. New therapies have been added to the armamentarium of agents against CRC (irinotecan, capecitabine, oxaliplatin, bevacizumab, cetuximab, and panitumumab). Because of the new therapies approved to treat CRC in the metastatic setting, overall survival has increased to more than two years. Improvements in the adjuvant setting have aided patients as well. Every year, new data document the improved outcomes of patients with CRC. The data have implications for nurses caring for patients with CRC. New information on K-*ras* mutations and efficacy of epidermal growth factor receptor inhibitor (EGFRI) therapy has been reported, precipitating a change in national guidelines. EGFRI therapy has significant dermatologic side effects, including rash, which can be challenging for nurses to manage. Although evidence is limited, new information has prompted earlier treatment with strategies to combat rash. Monoclonal antibodies have the potential to cause hypersensitivity reactions (HSRs), requiring diligence on the part of oncology nurses. Recent data on cetuximab and increased risk of HSRs in specific geographic areas have become apparent. And oxaliplatin, a third-generation platinum analog agent, has neurotoxicity as its dose-limiting side effect; nurses have struggled about how best to manage this adverse event since the drug was approved in the treatment of patients with CRC. Oncology nurses must be aware of the new data that directly impact nursing practice. This article will review selected data in the treatment of patients with CRC and discuss implications for nursing practice.

At a Glance

- Treatment of colorectal cancer has improved significantly with the advent of six new therapies.
- Oncology nurses must be aware of rapidly changing data affecting treatment of the third most common cancer for both genders.
- Important new data should be integrated into nursing practice as appropriate and based on the available evidence.

Mutations in K-*ras*: Choosing Appropriate Patients for Therapy

The discovery of the epidermal growth factor receptor (EGFR) signaling pathway led to EGFR being a target for many cancers,

Pamela Hallquist Viale, RN, MS, CS, ANP, AOCNP®, is a self-employed consultant in Saratoga, CA. (First submission February 2009. Revision submitted March 2009. Accepted for publication April 2, 2009.)

Digital Object Identifier:10.1188/10.CJON.92-100