Patients' care plan management system on mucositis precaution in patients with hematopoietic stem cell transplant (HSCT).

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Introduction/Purpose

Mucositis is a common complication in patients who underwent hematopoietic stem cell transplant (HSCT). Mucositis is graded from mild to profound in severe pain and unable to eat causing nutritional insufficiency. Care plan for mucositis may help to relieve patients’ suffering and improve their nutrition status.

Methods

We retrospectively analyzed frequency and severity of mucositis in thalassemic patients after haploidentical HSCT in order to developed care plan for these recipients in 2015-2016. There were 18 patients, with a median age of 7.3 years receiving hematopoietic stem cells from mothers or fathers at our institute. The preparative regimen included rabbit antithymocyte globulin, fludarabine, and intravenous busulfan. We found that patient suffered. With mucositis after HSCT. Grade 1 occurred between day +2 and +4, grade 2 between day +2 and +6, grade 3 between day +6 and +12 and grade 4 between day +8 and +16.

Results

For 2017, using this data, we planned for our nursing care in 12 hematopoietic stem cells transplant patients, with a median age of 6.04 years (range 1-20 years). We found that patient need (1) evaluating nutrition intake and support since day +1 after HSCT of 100% (12/12), (2) Changing oral to intravenous medication between day +2 and day +6 of 25% (3/12) and between day +7 and day +9 of 56.3% (5/12) average day=5.5, (3) considering parenteral nutrition in day+6 after HSCT of 0% (0/12) between day +1 and day +5 of 50% (6/12) between day +7 and day +8 of 50% (6/12) average days=5, (4) weaning parenteral support and encouraging oral intake since day +9 and day +36 of 100% (12/12). As a result, the median length of stay within 22 days of 66.6% (8/12) after day +22 of 33.34/12, We successfully 91.6% (11/12) after developed and used our care plan for mucositis in HSCT patients.

Conclusions

An occurrence of Mucositis among patients with bone marrow transplant at Samitivej Siriraj Hospital between 2015 and 2017 has been studied. Patients with various medical backgrounds including severe beta-thalassemia, leukemia and adenoleukodystrophy who have been receiving hematopoietic stem cells have been included in the study. Interventions such as nutritional support, medication administration method, administration of PPN, early weaning process, and early introduction of oral medication have been among the factors allowing patients to be discharged at an earlier pace. These factors contribute to the success of the best bone marrow transplant practice at Samitivej Siriraj Hospital.

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