

Peer counseling and nursing consultation on cancer patients' quality of life

Dear Sir,

We read with interest Bahrami *et al.*'s article which has been recently published in your journal.^[1] However, we noted some points in their study which are worth discussing.

First of all, it seems that the researchers conducted a peer counseling intervention instead of nursing consultation. There are many talking techniques for knowledge, attitude, and practice modifications such as counseling, motivational interviewing,^[2] and psychotherapy. Peer counseling takes place when people present knowledge, experience, and emotional or social help to each other.^[3]

Secondly, the authors evaluated their patients for a very short period. Newly diagnosed patients with life-threatening diseases confront psychological challenges due to feeling lonely, misunderstood, and being afraid. The scientists found a change in trend in emotions over time in these patients, which enabled them to design a model consisting of the stages of denial, anger, bargaining, depression, and acceptance, respectively.^[4,5] This coping model has been named as the five stages of grief. Therefore, when the researchers study terminally ill patients, they should notice the emotional stages of their patients. Otherwise, interventions can rarely produce their optimal outcomes in such problematic patients.

Thirdly, the study was performed with a quasi-experimental design without any control group. Considering the evidence-based medicine, such pre-test post-test studies are highly susceptible to confounding variables and their final results have little value.

Ultimately, regarding the sample size, the authors assessed only 22 patients. They should clarify how they had calculated the sample size. They were not able to get statistically significant differences with small sample sizes. Furthermore, there are some questions about the patients. The quality of life of such patients differs based

on gender, type of leukemia, severity of disease, kind of treatment, etc.

We kindly request the researchers to explain the above-mentioned issues.

Payman Salamati¹, Zohrehsadat Naji², Reza Rostami³

¹Department of Community Medicine, Sina Trauma and Surgery Research Center, Tehran University of Medical Sciences, Tehran, Iran, ²Department of Theology, Quran and Hadith University, Tehran, Iran, ³Department of Psychology and Education, University of Tehran, Tehran, Iran

Address for correspondence: Prof. Payman Salamati, Sina Trauma and Surgery Research Center, Sina Hospital, Hassan Abad Square, Imam Khomeini Avenue, Tehran, Iran.
E-mail: psalamati@tums.ac.ir

REFERENCES

1. Bahrami M, Parnian R, Samimi MA. The effect of nursing consultation involving cancer survivors on newly diagnosed cancer patients' quality of life. *Iran J Nurs Midwifery Res* 2012;17:338-42.
2. Salamati P, Poursharifi H, Rahbarimanesh AA, Koochak HE, Najafi Z. Effectiveness of motivational interviewing in promoting hand hygiene of nursing personnel. *Int J Prev Med* 2013;4:441-7.
3. Giese-Davis J, Bliss-Isberg C, Carson K, Star P, Donaghy J, Cordova MJ, *et al.* The effect of peer counseling on quality of life following diagnosis of breast cancer: An observational study. *Psychooncology* 2006;15:1014-22.
4. Wilson CT, Fletcher PC. Dealing with colon cancer: One woman's emotional journey. *Clin Nurse Spec* 2002;16:298-305.
5. Kars MC, Grypdonck MH, Van Delden JJ. Being a parent of a child with cancer throughout the end-of-life course. *Oncol Nurs Forum* 2011;38:E260-71.

How to cite: Salamati P, Naji Z, Rostami R. Peer counseling and nursing consultation on cancer patients' quality of life. *Iranian Journal of Nursing and Midwifery Research* 2014;19:443.

Source of Support: Nil, **Conflict of Interest:** Nil.