

## CHANGES IN TASTE AND SALIVARY FUNCTION AFTER RADIOTHERAPY : SPECIFIC ROLES OF THE NURSE IN EVALUATION AND TREATMENT.

Radiotherapy of head and neck cancers usually induces significant drop of saliva production and marked taste alterations. Nutrition disorders follow leading to unfavorable consequences : loss of body weight, poor general condition, reduction of immune competence, healing delay ...

A study has been initiated concerning patients treated for head and neck cancer by radiotherapy with follow-up periods ranging from one month to five years. The goal is double : qualitative and quantitative assessment of salivary and gustatory consequences and screening of drugs able to restore a satisfactory function.

An oncology nurse actively participates in this clinical research with specific roles :

- 1) Selection of patients according to the site of the primary tumour : buccal cavity, pharynx, larynx, ...
- 2) Obtainment of patient's consent : written information, discussion.
- 3) Practical arrangements : planning of tests, appointments.
- 4) Assessment of salivary deficit : interview on the basis of a detailed questionnaire, scoring of dysfunction.
- 5) Measurement of taste changes : determination of detection and recognition thresholds for sour, bitter, sweet and salt. Adaptation of the forced choice method with increasing concentrations, elaboration of a data form.
- 6) Correlations of results with different parameters : age, sex, irradiated volume, prior surgery, associated chemotherapy ...
- 7) Drug treatment : patient information, observation of reactions, registration of side-effects, collection of blood samples.
- 8) Assessment of treatment effectiveness : comparative salivary and gustatory testing at regular intervals.

These roles will be detailed and discussed showing that the oncology nurse is part of the research team where are necessary not only her knowledge and skill but also the relationship that she builds with the patient.