The role of the nurse in inflammatory arthritis

This is the lay version of the EULAR recommendations for the role of the nurse in the management of chronic inflammatory arthritis. The original publication can be downloaded from the EULAR website: www.eular.org.


Introduction

Nurses play an important role in looking after people with arthritis, and they are often the person that a patient sees at clinic appointments. The nurse role has changed in modern clinics, and nurses may now perform some tasks that would traditionally have been done by doctors. Nurse specialists trained in rheumatology are able to give patient education and support, give injections, and recommend and prescribe medicines. However, the role for nurses can differ between different countries in Europe.

EULAR recommendations give advice to doctors, nurses and patients about the best way to treat and manage diseases. EULAR has written new recommendations on the role of nurses in looking after people with inflammatory arthritis. Inflammatory arthritis is a group of conditions where the joints become stiff and painful due to the immune system attacking the body’s own tissues and causing inflammation. Inflammatory arthritis includes rheumatoid arthritis, ankylosing spondylitis and psoriatic arthritis.

Doctors, nurses, other health professionals and patients worked together to develop these recommendations. Including patients in the team ensured that the patient point of view was integrated in the recommendations. The authors looked at the evidence on medical and non-medical interventions undertaken by nurses.

What do we already know?

The role of nurses has changed over the years. Nowadays, specially trained nurses are able to lead clinics and manage patients with inflammatory arthritis, including monitoring of disease, drug treatment and drug side-effects. Nurses also monitor disease consequences on daily life, participation and psycho-social consequences.

What do the recommendations say?

Overall, there are ten recommendations. The first three are about the needs of people with inflammatory arthritis, and the remaining seven are about how nurses in this area should work and be trained.

Each recommendation is based on available scientific evidence or expert opinion. The more stars a recommendation has the stronger the evidence is and the more important it is that you and your doctor or nurse follow it.

One star (*) means it is a weak recommendation with limited evidence.

Two stars (**) means it is a weak recommendation with some evidence.

Three stars (***) means it is a strong recommendation with some evidence.

Four stars (****) means it is a strong recommendation with a lot of evidence.
Recommendations for how people with inflammatory arthritis should interact with their nurse

- **People with inflammatory arthritis should be able to speak to a nurse who can give them education about their disease and how it is managed.****
  Patient education is a process that helps people to cope with their disease and look after themselves better. Your patient education might include information and monitoring around side effects or complications, that can help you to understand why it is important to take your medicine consistently. It may also include the importance of non-drug treatments such as physiotherapy, or ways to look after yourself and your disease. Patient education given by nurses is often more effective than when it is given by a doctor.

- **People with inflammatory arthritis should be able to have nurse consultations because this can improve communication and satisfaction.****
  Nurses often have good communication skills and are caring towards the people they look after. This can help to improve how satisfied you are with the care you receive.

- **People with inflammatory arthritis should be able to contact a nurse by telephone for support.*
  Inflammatory arthritis can be unpredictable, and you might sometimes need to get quick advice and support. Telephone helplines run by nurses can offer one-off support when you need it, as well as ongoing care and monitoring. Email support services can also be useful.

Recommendations for nurse training and working

- **Nurses should be involved in managing inflammatory arthritis to reduce people’s symptoms and improve their outcomes.****
  Well-trained nurses can spot early arthritis, make referrals, and prescribe medicines. People with inflammatory arthritis who are looked after by nurses may have less pain and feel less tired than those who are cared for by doctors.

- **Nurses should be able to spot anxiety and depression.****
  Having inflammatory arthritis can make you more likely to suffer from anxiety or depression, and it can have an impact on your quality of life. All nurses should be able to spot if you are struggling to cope with your disease. Being able to talk to a nurse can help you to deal with your disease better. Some nurses may even be able to offer counselling if you need it.

- **Nurses should help people with inflammatory arthritis to manage their own disease and achieve a sense of control and empowerment.*
  You are more likely to feel in control of your disease if you believe that you have the right tools to achieve your goals. Nurse specialists can help to increase the control you have by giving you support and information. This makes you more able to rely on yourself.

- **Nurses should provide care that is based on their own hospital and country’s protocols and guidelines.*
  Guidelines are written based on research and evidence. Guidelines give doctors and nurses a set of options for the way they manage and treat the people in their care. Protocols set out one particular way in which doctors and nurses should treat people. Protocols should make sure that everyone receives the same care. Following these can help to ensure consistent and safe care for people with inflammatory arthritis.

- **Nurses should improve and maintain their knowledge and skills with ongoing education.*
  Nurses undertake a lot of different tasks – from patient education and counselling to prescribing, injections, and monitoring. How well educated and trained nurses are in each task has an effect on
how well patients do. To make sure that they have up-to-date knowledge, nurses should have ongoing access to education and information.

- **Nurses should be encouraged to take on more involved roles once they have completed the proper training according to their national regulations.**
  Giving nurses more advanced roles can benefit both the nurse and the people in their care. For the nurse, a more advanced role can increase job satisfaction. Patients often appreciate being looked after by a nurse who has the skills to deal with all aspects of their treatment. Nurses should be encouraged to take on these roles if they have the right skills.

- **Nurses should carry out interventions and monitoring in order to save costs.**
  Clinics or telephone helplines run by nurses can help to save money, as well as reducing the time you might have to wait for follow-up appointments.

**Summary**
Overall, the recommendations say that it is important for nurses to be involved in the care of people with inflammatory arthritis. The recommendations also emphasize how important education and training is for nurses who take on the role of managing people with inflammatory arthritis, and there are some areas in which this can be improved.

If you have access to a nurse with special training in rheumatology you will be able to work together to manage your disease and get the best possible results from treatment. If you have an inflammatory arthritis these recommendations will give you some guidance on what to expect from clinics run by nurses, or from any nurse specialists who might work with you.

If you have any questions or concerns about your disease or your medication, you should speak to a health professional involved in your care.