## **Therapeutic Management**

The primary modalities of therapy are chemotherapy and irradiation. Each may be used alone or in combination based on the clinical staging. The goal of treatment is obviously a cure; however, aggressive therapy increases the chances of complications in the disease-free state and can seriously compromise the quality of life. Consequently, numerous research studies are currently investigating treatment options to minimize long-term complications. One of the major concerns with combined radiation and antineoplastic drug therapy is the serious late effects in children with an excellent prognosis.

Radiation may entail involved field radiation, extended field radiation (involved areas plus adjacent nodes), or total nodal irradiation (the entire axial lymph node system), depending on the extent of involvement. In stage IV disease, chemotherapy is the primary form of treatment, although limited irradiation may be given to areas of bulky disease. Follow-up care of children no longer receiving therapy is essential to identify relapse and second malignancies. In children with splenectomy because of laparotomy, prophylactic antibiotics are administered for an indefinite period. Also, immunizations against pneumococci and meningococci are recommended before the splenectomy (see Chapter 6).

## **Nursing Care Management**

Nursing care involves preparation for diagnostic and operative procedures, explanation of treatment side effects, and child and family support. Once the child is hospitalized for suspected Hodgkin disease, a battery of diagnostic tests is ordered. The family needs an explanation of why each test is performed, because many of them, such as bone marrow aspiration and lymph node biopsy, are invasive procedures (see Chapter 20).

Explanations of chemotherapeutic reactions vary with the specific drug regimen. The most common side effects, such as nausea and vomiting, body image changes, neuropathy, and mucosal ulceration, are discussed in the Nursing Care Management section. Radiation results in few side effects, sometimes consisting only of a mild skin reaction. With external field radiation to the chest and abdomen, nausea and vomiting, weight loss, and mucosal ulceration (esophagitis, gastric ulcers) are common. The usual