1269 POSTER

Function and quality of life in patients following surgery for rectal cancer

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Introduction: Despite an increase in the literature on bowel function following surgery for rectal cancer, there is a paucity of prospective data on the impact on quality of life. Furthermore factors that may influence quality of life in relation to postoperative bowel function are not well documented. The aim of this study is to prospectively assess patterns of change in function and quality of life in patients with rectal cancer over a 12 month period following surgery. Specifically the study aims to identify any relationship between physical symptoms and quality of life in the context of demographic variables.

Methods: A consecutive series of 72 patients who have undergone anterior resection for rectal carcinoma have been recruited to date (commenced June 2001). Prospective data have been collected at pre-determined intervals (baseline, 4 and 6 weeks, 3,6 and 12 months post surgery) utilising the EORTC QOL-C30, a purpose-designed function questionnaire based on the EORTC QLQ-C38 and demographic sheet.

Results: 72 patients recruited. Mean age 68 years (25-91). Pre-operative radiotherapy given in 38 patients (5# n=17; 25# + chemo n=12; 20# n=4). Dukes' Stage A n=7; B n=19; C n=28; Metastatic n=9; no residual tumour in specimen n=3; inoperable n=5. Operation type includes APR n=13; AR n=31 (with covering stoma); AR with colopouch reconstruction n=23 (15 with covering stoma); inoperable n=5.

Data collection will be completed in March 2003 and analysed in SPSS. Key analyses will be presented and include:

Significant differences between function and QoL scores over time
Relationships between function and quality of life
Associative demographic details with function and quality of life

Conclusion: The measurement of quality of life and structured symptom assessment is rarely conducted as part of routine practice. The value of this prospective study will identify areas of difficulties for patients, both prior to and following surgery in addition to gaps in service delivery. This will enable specific interventions to be directed at appropriate time points and an overall improvement in quality of life

1270 POSTER

Anxiety and depression in breast cancer patients

M. Vahdaninia, A. Montazeri. *Iranian Institute for Health Sciences Research, Tehran, Iran*

A prospective study was conducted to measure anxiety and depression in newly diagnosed breast cancer patients using the Hospital Anxiety and Depression Scale (HADS). In all, 167 breast cancer patients were entered into the study and they followed up for 18 months. Anxiety and depression were measured at three points in time: baseline, 3 months after diagnosis and completion of the initial treatment, and at 18 months follow-up assessment. Repeated measure was performed to analyze data. Data for 96 patients were available at the study enclosure. The mean anxiety score was 10.3, 10.1 and 8.9 at assessment points respectively while these for depression was 6.1, 5.8, and 5.3. The analysis indicated that the decrease in anxiety and depression was significant ($P = 0.002$ and $P = 0.02$, respectively). However after adjusting for age and stage, decrease in anxiety and depression still remained significant ($P = 0.001$ and $P = 0.003$, respectively). The findings indicated that both anxiety and depression decreased in breast cancer patients in long term but decrease in anxiety was more evident. However, it seems that age and stage had more profound effect on patients' depression status. The study results suggest that depending on time variance breast cancer patients need different psychological support strategy. At diagnosis managing anxiety and in the long-term managing depression should be considered as priority for supportive care in breast cancer patients.

1271 POSTER

Appetizer - a guideline book to prevent malnutrition

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To prevent the risk of malnutrition among cancerpatients in the Oncology Dept., we have, with an interdisciplinary effort, worked out an easily understood guidelinebook. The book is meant as a tool to raise consciousnees among the interdiscilinary staff about good clinical practice concerning nutrition. The poster will show some of the tools from the guidelinebook such as: 1. The nutritional journal that follows all patients 2. The clinical guideline for screening and treating patients with risk of / malnutrition 3. Examples of checlists and standards 4. Patient information The guidelinebook will be presentedby the poster by nurses from the interdisciplinary "Nutrition-group".

1272 POSTER

Brain tumour in childhood

A. Ferreira, A. Henriques, L. Pereira. *Santa Maria Hospital, Paediatric Urgent Care Department, Lisbon, Portugal*

Despite all medicine and science advances and knowledge the impact of the word cancer is becoming, nowadays, bigger and bigger. It gains a deeper intensity when we talk about children, as we know that family and friends are the most affected: The admittance of children to postoperative care after making a partial or total tumour removal is frequent in our department: We aim to make a reflection on nursing care importance in a post surgery situation with children submitted to neurosurgical procedures.

The methodology performed was the clinical charts review at the Intensive Care Unit of Paediatric Urgent Care Department of Santa Maria Hospital in Lisbon between January and December 2002. With this survey we got a group of 28 children, 17 boys and 11 girls, between 0 and 14 years old, and we intend to report these variables according to their disease evolution time and their tumour kind and localization.

The frequent admission of children with this diagnosis along with the complexity of its nature emphasises the nursing care abilities in this area.

The evaluation of vital and neurological signs, emergent complications surveillance and pain control are the most important nursing procedures.

Nurses need specific approaches to deal with these children but we can't forget family and friends support, by listening them and showing availability, trying to minimize situation's first impact.

1273 POSTER

"Illness became my life" the caregivers perspective

L. Taylor. *Bristol Haematology And Oncology Centre, Avon Haematology Unit, Bristol, United Kingdom*

This study was carried out using a naturalistic approach to explore the lived experiences of eight family caregivers caring for a relative diagnosed with acute leukaemia or lymphoma during induction chemotherapy. Audiotaped interviews were carried out during which participants discussed the impact of caring on their daily life and functioning, and how they were supported in their role.

Caregivers found providing emotional support to the patient and other family members was one of the most demanding elements of their role both in terms of time and difficulty. The indirect care activities such as providing transportation, carrying out household chores and monitoring the patient were also dominant activities. Carers frequently discussed the time and role conflicts they faced when personal resources were unable to meet all the demands placed on them by their situation: In an attempt to rectify this carers forfeited time normally spent on personal activities but they still experienced feelings of failure when they could not meet all their role demands. Carers described how their lives became consumed by the illness management and they all described feelings of emotional, physical and mental fatigue.

Patients found the unrelenting nature of their role the most difficult part of caring and often suggested that 'time-out' for themselves was what they needed. As healthcare professionals it is essential that we remember that the carer is also our responsibility and ensuring they are mentally and physically able to cope is part of total patient care.