long-term admission in Oncopediatric Department; Parental participation has consequences for nurses: the workload increases, it requires time-investment, need of training regarding communication, relationship, parental psychology; The role of nurses changes: beside nursing care, they are also counseling and consultative toward family.

Conclusions: Parental participation and family-centered care on Oncopediatric Department benefits the recovery of child. It creates a better situation for child and family, during admission and better outcomes afterwards.

1603 **POSTER**

Application of cytostatic therapy in hematological patients presented through studies of nurses

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Chemotherapy is the application of cytotoxic agents for treatment and control of malignant diseases. It is the therapeutical choice for many cancers. In distinction from surgery and radiotherapy, chemotherapy as systemic treatment may reach all metastatic localizations including those not always accessible by other modes of treatment. Combination of specific chemotherapeutics for treatment of any malignant disease is known as “therapeutical protocol”, but such synergistic application has to be rationale since drugs may cause different impairments in the process of synthesis of nucleic acids and albumins. In this way, not only the supplementation but also emphasizing of their antitumor effect is achieved.

Nurse as a member of team has significant role both in preparation and application as well as in her self-protection in handling with chemotherapeutics. Controversy regarding the issue of possible health damage of nurses handling with these drugs has been actual since the time of verification of their probable toxic effects to DNA causing genetic defects, as well as cancerogenic, teratogenic, fetotoxic effects, etc. Although the respective studies suggest rather than conclude, they are the foundation of making the guide for safe handling and, accordingly, maximal reduction of possible risks.

This study used descriptive and observation method with the object of establishing the scope of activities of nurses-technicians in preparation and application of chemotherapeutics and their involvement in research work, as well as level of information of patients on their diseases and mode of treatment by chemotherapeutics.

Results have revealed that even 60% of nurses work in departments of chemotherapy for over 10 years, 94% of nurses believe that handling with chemotherapeutics is more hazardous than working in other wards, 100% of nurses use protective equipment pursuant to legal regulations, 68% consider continuous education necessary, as well as acquisition of knowledge in pharmacology, oncology, ethics and particularly in health care of hematological patients.

The majority of subjects, even 80% of them are informed on their diseases and chemotherapeutic treatment, 65% comply with instructions advised by nurses and physicians, and 65% are satisfied with relationship with nurses-technicians and other members of hematological team.

Based on our results, it may be concluded that patients have top-quality collaboration with hematological team what contributes to their faster recovery. Nurses have acquired their skills and advanced training in preparation and application of chemotherapy not during regular studies but during long-lasting working experience. Nurses assume their work as professional challenge and not as occupational burden.

1604 **POSTER**

Confrontation, control of symptoms and vida’s quality in women with cancer of breast with treatment of chemotherapy adyuvante

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Target: To analyze the strategies of confrontation of the women in situation of disease (cancer of breast) that they receive treatment of chemotherapy adjuvant and more concretely to study the relation between (among) the mechanisms of confrontation and the psychological tension (satisfaction with the life, well-being, state of mind and perception of symptoms) from the diagnosis and during the treatment. I

Design: Cross street Observacional with mixed technologies (skills): Qualitative by means of interviews in depth and quantitative questionnaires, both on the basis of the notable aims (lenses).

Emplacement: Day hospital: Institute Oncológico of San Sebastian

Participants: 81 women diagnosed of cancer of breast and with Qt’s treatment. Adyuvante in ages understood (included) between 32 and 65 years.

Method: Intentional Sampling. 11 interviews in depth of between 30 minutes and one hour and a half. Recording and trascripción of the same ones previous authorization. Interviews opened with semiconstructed script, but following(continuing) the riverbed of conversation prioritized by every interviewed one. The quantitative withdrawal of information realizes across them following instruments of autoadministration: questionnaire MAC (Mechanisms of confrontation to the cancer. Spanish version, validated by Zabalegui). Questionnaire POMS (Profile of Mood Status – Profile of states of mind). You climb to measure: Satisfaction with the life (SLSW). Support or Social Subjective Support (SSS). Welfare state (Bradburn’s PNA). Survey modified on Toxicity in Chemotherapy Adyuvante according to criteria of the WHO. PNA, SSS, and POMS measure up in six Qt’s cycles. The scale SLSW before the first cycle. The MAC in the first and last cycle. And the questionnaire of Toxicity from 2 º Qt’s cycle.

Results: The active forms of confrontation improve the subjective perception and help to a better managing of the situation of disease. The accompaniment of the pair(couple) is looked of active form and fundamentally there is perceived in this women’s sample the importance of which the children are nice, “normal possible mas”, which it (he, she) determines where of directing the active search of managing of stressful situation.

Conclusions: The kind (genre), to be a woman, influences the way of approaching the symptoms. The subjective well-being of the children is prioritized in a very clear way and is across the interviews like detects the importance of this active search of subjective well-being that also appears across the questionnaires but without being so clear. This type of design marks the need to work with triangular methodology, cuali and quantitative, and is outlined the need to modify the existing questionnaires today in this line of investigation (research), attaching the kind (genre) to the managing of the cancer. These conclusions also help to establish a frame of help to the women to be able to express his (her, your) emotions since the familiar (family) core (nucleus) appears for them as something to protecting and not always the pair (couple) helps in the expression of emotions.

1605 **POSTER**

Quality of life of long-term colorectal patients

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Background: The aim of the study is to evaluate specific dimensions and the overall quality of life (QOL) of long-term colorectal cancer survivors focusing on how some disease-related factors such as stage at diagnosis and time since diagnosis could modify the level of QOL for this group of patients.

Material and Methods: Individuals, of both sexes, with confirmed cancer of colon and rectum and with survival time at least 1 year from initial diagnosis, were recruited for participation in this survey from the archives of a hospital-based medical center and from a large private-practice oncology clinic. Participants completed two self-administered questionnaires: the Functional Assessment of Cancer Therapy Scales for Colorectal Cancer (FACT-C) and the Mental Component of the Medical Outcome Study Short –Form 36 (MOS SF-36). A general information sheet also administered including several demographic questions (ie age, education, socioeconomic status).

Results: Ninety-nine respondents completed the survey (average age=65 years 54.5% men). In the first 2–3 years after diagnosis the overall QOL was lower and varied for all Dukes’ stages. Patients who survived >3 years reported a uniform overall QOL with higher scores (better QOL) at all domains of FACT-C except from those of stage D. The mean physical domain was lower for participants with greater ages while patients with a colostomy appliance experienced a relatively high QOL over time although their emotional and social functioning were affected more. Low income status was associated significantly with poorer outcomes on social and emotional well-being.

Conclusions: The impact of colorectal cancer on QOL is not so devastating in survivors, although stoma appliance and low income play more dominant roles in determining the emotional and social well-being.