Poster session
Patient's perspectives

1606 POSTER

Patient involvement in oral care during a course of chemotherapy

M. Miller[1], A. Taylor[1], M. Wells[2], L. Roe[3], S. Hagen[4]. [1]*Cancer Care Research Centre, Department of Nursing and Midwifery, Stirling, United Kingdom;* [2]*School of Nursing and Midwifery, University of Dundee, Dundee, United Kingdom;* [3]*Core Cancer Team, Forth Valley NHS, Falkirk, United Kingdom;* [4]*NMAHP Research Unit, Glasgow Caledonian University, Glasgow, United Kingdom*

Background: This study aimed to evaluate the feasibility and acceptability of a mouth care diary to direct self-care for patients receiving chemotherapy.

Materials and Methods: A consecutive sample of patients (n = 45) with a range of cancer diagnoses from 2 clinical sites in Scotland consented to participate in this study. A mouth care diary was designed to include 2 sections:

- a diary section for daily mouth assessment, using the Oral Assessment Guide (Eilers et al 1988), giving a daily mouth score
- a self-care guide providing structured self-care advice tailored to the daily mouth score.

Patients completed the mouth care diary for 14 days following 2 consecutive cycles of chemotherapy. Patient expectations and experiences of the mouth care diary and their participation in the study were evaluated by means of 2 purpose-designed semi-structured questionnaires: one pre-study and one post-study. In-depth interviews (n = 9) were conducted with a purposive sample of the study population at the end of the study to gain a deeper appreciation of patients' experiences.

Results: 46% of patients approached agreed to participate in the study.

Pre-study questionnaire: Pre-study questionnaires were completed by 42 patients (94% of study population). In general, mouthcare prior to starting the study was good: 67% brushed their teeth twice daily; 53% used mouthwash; 71% attended a dentists either once (40%) or twice (31%) a year. However, 73% felt that their mouthcare could be improved. Their expectations of the project were also positive: 71% felt it would be educational; 58% thought valuable and 27% believed it would be rewarding.

Post-study questionnaire: Post-study questionnaires were completed by 38 patients (97% of the population completing the study). Sixty-two percent of patients believed they had learnt from their involvement in the study. They reported finding the diary: simple to understand (78%); easy to complete (48%) and useful to complete (28%). Seventy-eight percent of respondents found it easy to assess their mouths and assign a daily mouth score, while 74% found the mouthcare advice relevant. Of those who responded, 51% felt that using participating in the study changed the way they cared for their mouth.

Patient Interviews: Patients enjoyed participating in the study and found it helpful for guiding their self-care. However, they could understand that the perspectives of those who declined to participate due to feeling overwhelmed or too ill to take on this additional role. Patients continued to follow the oral care self-care advice despite coming to the end of their participation in the study.

Conclusions: Patients participating in this feasibility study found the mouth care diary an acceptable method of assessing their mouths and ensuring they cared for it appropriately. Those patients who declined to participate were often too ill or overwhelmed by their diagnosis to take part. The mouth care diary is a feasible and acceptable method of encouraging patients to participate in self-care.

References

[1] Eilers, J., A. Berger, et al. (1988). Development, testing and application of the oral assessment guide. *Oncology Nursing Forum* 15: 325–330.

1607 POSTER

Cancer patients' informational needs about sexuality related issues

K. Hautamäki[1], M. Miettinen[2], P. Kellokumpu-Lehtinen[3]. [1]*Tampere University Hospital, Heart center, Tampere, Finland;* [2]*Tampere University Hospital, Intensive Care, Tampere, Finland;* [3]*Tampere University Hospital, Oncology, Tampere, Finland*

Purpose: The purpose of this study was to identify and describe the importance of information for patients about sexuality related issues during hospitalization.

Description on the study: 352 patients (288 with cancer) completed the structural questionnaire.

Results: Most cancer patients (72%) reported that their disease or its treatments had affected their sexuality. Men reported slightly more adverse effects of disease or treatment on their sexuality than did women. Effects on sexuality were reported by 78% of men and 66% of women (p = 0.045) having cancer. Among younger cancer patients reported more often effects of disease than did older cancer respondents. Over than half, 76% (n = 50) of respondents under 40 and 66% (n = 152) of respondents over 50 years old complained effect on sexuality. Most cancer patients (71%) stated that it is necessary to discuss about the effect of the disease and of its treatment on sexuality during hospitalization. Most cancer patients (89%) wanted the health care personnel to take the iniative for the discussion of sexuality related issues. Only 11% expressed the wish that the iniative should come from the patient.

Clinical implications: It is important that healthcare professionals provide cancer patients with an opportunity to discuss sexuality related issues. The caring organisation should develop, introduce and evaluate action models to facilitate especially opening discussion of these sensitive issues.

Key words: sexuality, cancer patient, opening discussion

1608 POSTER

A comparison of EMLA cream and/or methoxyflurane for lymphoscintigraphy: A pilot study

J. Fleming, D. Speakman, M. Griffin, J. McIndoe, K. Harris. *Peter Mac Callum Cancer Centre, Surgical Oncology, Melbourne, Australia*

The pain associated with lymphoscintigraphy injection is intense but short lived. We believe that Methoxyflurane may provide an ideal short term pain management strategy for this procedure and furthermore significantly reduce anxiety in this group of pre operative patients.

In recent years techniques have been developed which aim to avoid full regional lymph node removal in patients with breast cancer and melanoma. The 'sentinel' node(s) – the node or nodes to which the area of the tumour drains – is identified and surgically removed. Only those patients in whom the sentinel node contains tumour cells undergo full loco-regional lymph node removal. The sentinel node is identified by injecting radioactive blue dye at the tumour site and tracing back blue lymphatics to the first draining blue node(s).

Unfortunately this procedure can be quite painful and anxiety producing. Current routine practice at our centre involves the use of EMLA cream (a topical cream that contains a local anaesthetic) which is of questionable efficacy. There is a paucity of literature relating to sentinel lymphoscintigraphy and the pain that it evokes.

Methoxyflurane is a volatile anaesthetic agent that produces analgesia at low inspired concentrations. It has a long history of use in relieving pain with minimal side effects. Methoxyflurane analgesia has an important role in short term pain relief in hospital practice as an alternative to narcotics, ketamine, diazepam, or nitrous oxide.

We believe that methoxyflurane would be ideal for the treatment of pain for patients undergoing sentinel lymph node biopsy.

In order to investigate the effectiveness of methoxyflurane in this patient group we plan to compare EMLA cream alone with EMLA cream with Methoxyflurane. We plan to enrol 60 participants. Patients will be randomly allocated to receive the above treatments and have their pain and anxiety levels assessed.

Pain assessments will involve patients evaluating their pain on a visual analogue scale (VAS). Anxiety will be assessed using both the State Trait Anxiety Index (STAI) and a visual analogue scale (VAS).

The data to be presented will include tables indicating differences in pain and anxiety levels between each group of patients.

1609 POSTER

Weekly paclitaxel and Quality of Life in women with advanced breast cancer

E. Ausén, A. von Wachenfeldt. *Karolinska University Hospital, Sodersjukhuset, Oncology Department, Stockholm, Sweden*

Background: Paclitaxel (P) was previously given only on a three-week schedule in both adjuvant and palliative settings. In recent years weekly administration has been offered to women with advanced breast cancer with the intention to diminish or to avoid side effects such as infections, total hair loss and drug related muscle pain. Data from several studies has shown an effect with weekly doses comparable to treatment on a three weeks basis.

How does a weekly administration influence quality of life (QoL) in women with advanced breast cancer in terms of side effects and interference with familial and social life?

Material and Methods: A non-interventional prospective QoL study. Women at any age with advanced breast cancer who where offered weekly P by their physicians, were informed about the study and 58 women agreed to participate. Baseline information about previous treatment and PS as well as QoL before the start of P was obtained from nurse and