

and holistic care emphasising the increased need for emotional support. In terms of how patients define 'quality nursing care' they focus on issues related with the satisfaction of their needs, safety, proximity, trusting and being cared by qualified and competent nurses. In terms of their beliefs in relation to cancer, many cultural and social themes emerged such as religion, stigma, taboo and prejudice. Nurses on the other hand in their views on 'quality of nursing care' focused more on the physical needs of the patients and the technical aspects of the care they delivered.

Conclusion: The data analysis allowed the identification of certain practices that improve the quality of the nursing care provided to patients with cancer. From these a National Service Framework was structured. Furthermore in the light of the views of the patients and nurses on what constitutes 'quality nursing care' a theoretical framework was established.

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ORAL

A smoking cessation counseling program for cancer patients

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Background: Smoking is the major cause of head and neck and lung cancer. Also other malignancies such as skin, bladder, stomach, colon, and breast cancer are associated with smoking. The synergistic effect between smoking and alcohol intake further promotes head and neck cancer risk. The disappointing low success rate (8%) of personal smoking cessation attempts formed the basis to initiate in 2003 a counseling program to support cancer patients to quit smoking.

Material and Methods: From 185 patients (104 male, 81 female; mean age 54 years) were referred for support, 115 patients had head and neck cancer, 38 lung cancer, 16 non-cancer related pulmonary problems and 16 patients cancer in other areas (bladder and breast cancer). The mean age patients started to smoke was 16 years (range 7–40 years) with a mean of 43 pack/years (range 3–154). The program consisted of (face to face) counseling (one hour per week during the first month and from the second month onward 20 minutes or 10 minutes for telephone counseling). Data were collected by means of structured, study specific questionnaires. The counseling program is based on the self-efficacy theory of Bandura and the addiction circle of Prochaska & DiClemente.

Results: The analysis was based on baseline, 6 and 12 months data. 27 patients refused to join the program after the first informative session and 4 patients died during the first year, leaving 154 patients for evaluation. At 6 months 66 (42.9%), and at 12 months 53 patients (34.4%) were still 'smoke-free'. Including the 27 refusing patients, the 12-month's success rate was 29%. Reasons given for lack of success were: lack of motivation (also due to alcohol consumption), cancer recurrence, and stress in the period before and after the treatment. Moreover, many patients reported that smoking cessation is especially difficult, when partners and/or colleagues (continue to) smoke. Some non-successful patients reported they still were quite pleased with the counseling program, since it at least helped them to considerably decrease tobacco consumption.

Conclusion: This counseling program shows a promising success rate of 34.4% and forms an important adjunct to our post-treatment care program.

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ORAL

Smoking cessation as an integrated part of cancer care

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Background: There is evidence that tobacco smoking during radiotherapy (RT) increases the risk for acute toxicity (skin and mucosal reactions), and in some cases increased the risks for treatment failure, recurrent disease or the development of a new smoke related cancer. Despite these risks, many cancer patients continue to smoke during RT. Cancer nurses have many opportunities to intervene and support patients and their family members with smoking cessation. However, only one third of Swedish nurses practice smoking cessation techniques.

Materials and Methods: We have developed a nurse-led smoking cessation program, tailored for cancer patients and offered to all patients treated with RT with a curative intention. The intervention contain of verbal and written information, support, free test-packs of nicotine replacement products and monitoring carbon monoxide in expired air.

Results: Of all curative patients (n=439) treated at our RT-unit during 2006, 98 (22%) were current smokers. Seventy-nine (81%) of the smokers were considering quitting and 69 (70%) accepted to participate in the intervention. Quit rates, follow-up and experiences will be presented at this session

Conclusions: Cancer patients are interested in smoking cessation and interventions should be integrated into standard cancer care for easy access and close follow-up.

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ORAL

Use of the Internet as a tool of health knowledge search: perspective of Finnish radiotherapy patients

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Background: The purpose of this study was to describe radiotherapy patient's use of the Internet as a tool for searching health knowledge. The study was conducted as part of a larger research project "Evaluation of the Quality of Learning Outcomes in Nursing Education" at the University of Turku, Department of Nursing Science. This project is aimed at developing more inclusive methods of patient education that support active patient involvement in their own care and decision-making.

Materials and Methods: A survey for 150 patients starting their radiotherapy in one University hospital in Finland was conducted. Hundred questionnaires were returned (response rate being 67%). Of the respondents, 55% were male and the mean age was 62 years (range 21–79 years). Respondents were mainly (66%) retired and the most (60%) lived together with someone. Patients' education varied, 45% of the patients had no vocational degree, 40% had vocational degree or college degree and 15% a university degree. The most common (41%) type of cancer was prostate cancer. Data were analysed by descriptive statistic methods.

Results: The results suggest that almost one third (28%) of the patients used the Internet. Most frequent users were women (64%, $p=0.010$), people aged 51–60 (15%, $p<0.001$), patients with vocational qualifications (93%, $p<0.001$) and breast cancer patients (54%, $p=0.030$). The Internet was mostly used from a home PC (24%). Relevant information was searched from all kinds of health care sites. The majority (93%) considered the information reliable.

Conclusions: The study showed that Finnish radiotherapy patients use the Internet as a tool to search health knowledge. On websites patients search for information according to their individual needs. Further planning in patient education should focus on Internet education. Hospitals should provide reliable knowledge for patients throughout the process of radiotherapy treatment.

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ORAL

Action cancer: a schools programme for cancer prevention

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Background: With the recognition that 80% of cancers are preventable Action Cancer carries out numerous prevention programmes with children and adults. The programmes aim to increase knowledge levels to improve health behaviours and 'Health Action' is a three session programme covering smoking, alcohol, nutrition, exercise and body awareness specifically for post-primary school children. The aim of this study is to highlight, through the use of Action Cancer's evaluation protocol, the improved knowledge levels in children who have participated in the prevention programme carried out by Action Cancer within schools in Northern Ireland.

Materials and Methods: A baseline and follow-up measure, using a custom designed questionnaire, was administered to participants of the programme. Through a series of true/false questions the evaluation examined knowledge of smoking, drinking alcohol, nutrition, exercise and cancer awareness (with a maximum possible score of 33). On completion of the questionnaire knowledge scores were computed (higher score equals higher knowledge). All data was inputted into SPSS (v15) and the Wilcoxon signed ranks test was used to estimate any changes in scores.

Results: Four post-primary school groups (229 children in total) participated in the Health Action programme during a five week period between February and March 2007. Of these 51.2% were from year 10 (43.4% male, 56.6% female) and 48.8% from year 11 (53.8% male, 46.2% female). A large proportion of participants (61.2%) reported that they had previously participated in programmes dealing with smoking, 57.7% with alcohol, 29.4% on nutrition, 41.2% on exercise and 35.1% on cancer awareness. There was no significant difference in knowledge scores between boys and girls before or after the programme ($p>0.05$). The average total knowledge scores significantly increased from 20 to 28 $p<0.001$ after participation in the programme, with knowledge scores for smoking, alcohol, nutrition and exercise and cancer awareness all showing significant increases ($p<0.001$).

Conclusions: Even though a large proportion of participants had previously participated in health related programmes, and reasonable knowledge levels were reported, the Health Action programme by Action Cancer still successfully increased health related knowledge levels of participants. However, long-term follow-ups are required to understand the