

All items were designed to aid HCPs in providing consistent day-to-day management of FN in paediatric cancer patients. Two educational sessions were arranged to train HCPs using these materials. A pre-training questionnaire was used to evaluate HCPs' prior knowledge of FN, with a post-training evaluation to assess the effectiveness of the educational package and identify further educational needs.

**Results:** Seventeen nurses, with a broad spectrum of experience, attended the two educational sessions. The post-training questionnaire showed the sessions were well received. Some nurses were shocked at learning the potential consequences of FN and said they would now respond more actively to the symptoms of FN by recommending antibiotics and asking patients to come to the hospital immediately. Overall, the comments emphasized that this package was an excellent and much-needed resource for staff.

We overcame many hurdles during our project, for example, we printed the document ourselves because we were not able to finance professional printing.

**Conclusions:** The principal outcome of this project was the production of a user-friendly educational package on FN designed for HCPs who care for paediatric cancer patients in SCCs. Pending approval from OLCHC, educational sessions in further SCCs are planned. The pocket guide booklet and educational package will also be published with the aim of maintaining/improving the standard of care for FN in paediatric cancer patients.

## Wednesday, 26 September 2007

Teaching Lecture (Wed, 26 Sep, 08.15–09.00)

### People with intellectual disabilities and their need for cancer information

8052

INVITED

People with intellectual disabilities and their need for cancer information

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**Background:** Up to 3% of the population have intellectual disabilities. Many people with intellectual disabilities are affected by cancer in their lifetime. There is a lack of knowledge about their experience and understanding of cancer, and about their need for cancer information.

**Materials and Methods:** This presentation will explore current knowledge around this topic. St George's University of London has developed a range of accessible information materials for people with intellectual disabilities, including cancer information. We have conducted three studies investigating the views and experiences of people with intellectual disabilities around cancer and cancer information, using a range of qualitative methods (ethnography, interviews and observation).

**Results:** The people with intellectual disabilities in our studies wanted to be informed about cancer, but in practice they are often not provided with such information. We will explore some of the possible reasons for this. Guidelines will be given for effective communication with people with intellectual disabilities, and issues around breaking bad news will be discussed.

**Conclusion:** This area is very much under-investigated. Further research is needed, as well as further development of accessible information materials on cancer.

Proffered papers (Wed, 26 Sep, 09.15–11.00)

### Research utilisation

8053

ORAL

Analysis of protocol related predictors concerning occlusion in totally implanted venous access devices

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**Background:** Many oncology patients need a reliable venous access for the administration of chemotherapy: totally implanted venous access devices (TIVAD) allow infusion of drugs and blood sampling with a minimum

of discomfort. For nurses, these devices are practical in use. However, device occlusion can occur leading to a delay in the prescribed therapy. Attempts to solve this problem is for both health care providers and patients a time-consuming task. Incidence rates of blood withdrawal occlusion (WO) varies from 3 to 28% of all accesses in different hospitals using different maintenance protocols. We hypothesized that differences in protocols of care can influence the incidence of withdrawal occlusion.

**Material and Methods:** In 2004, data on the incidence of WO in 8,658 TIVAD accesses were prospectively recorded in oncology day clinics in the frame of a multicentre study in Flanders conducted by VlaNinka (Flemish Network on Vascular Access). A secondary data-analysis was carried out trying to highlight risk factors related to the incidence of WO.

**Results:** Relationship between flush solution (volume of normal saline, volume and concentration of heparin, syringe diameter), discard volume of first aspirate before blood sampling, number of days between needle change and incidence of WO will be reported. A flushing volume of 10 ml of normal saline is the optimal volume in reducing the risk on WO.

**Conclusion:** Further research has to focus on all potential risk factors for development of WO such as insertion procedure, catheter tip position, device shape and material, compliance to maintenance protocols and differences in skills within nursing staff.

8054

ORAL

Validation of a supportive needs screening tool

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**Background:** Assessing supportive care needs is an essential step in improving patient support outcomes. The Peter Mac Supportive Needs Screening Tool (SNST) seeks to address problems in using research based tools in routine practice. A pilot study indicated the SNST was acceptable to patients and clinicians and assisted referral.

**Materials and Methods:** We sought to validate the SNST psychological domain against the BSI-18 and the Supportive Care Needs Survey (SCNS) and the physical, sexuality, support, health system and information domains against the SCNS. We also undertook repeatability testing of the SNST. The study was a cross-sectional study of 200 patients attending an ambulatory radiotherapy centre without prior exposure to the SNST.

**Results:** Strong positive relationships were found between the SNST Psychological Domain and the BSI-18 Total Score, and with the SCNS Psychological Domain. Patients who scored highly on the BSI-18 and the SCNS tended to score highly on the SNST Psychological Domain. The SNST correctly classified 96% of cases identified by BSI-18 (25 out of 26), and 85% of cases identified by SCNS (94 out of 111). The SNST is a highly sensitive tool for identifying patients with potential psychological or emotional needs.

A strong positive relationship was found between the physical domains of the SNST and the SCNS. Patients who scored highly on the SCNS Physical Domain also tended to score highly on the SNST Physical Domain. Weak to moderate strength relationships were also found between the SNST and the SCNS on corresponding domains for Sexuality, Support, and Health-System and Information.

Overall, the majority of questions in the SNST displayed an appropriate level of repeatability in relation to the nature of the question. All questions in the Psychological Domain displayed strong repeatability, supporting that these questions tap into the relatively long-term and ongoing nature of psychological and emotional needs associated with depression and anxiety. The Physical, Support, Sexuality, and Health-System and Information Domains all reflected repeatability in accordance with each domain. Questions about short-term, transient issues and needs displayed weaker repeatability than questions about longer-term, stable issues and needs.

**Conclusion:** These results indicate that the Peter Mac SNST is reliable and valid against existing tools and as it is also highly acceptable to patients and health professionals it can be recommended for clinical use.

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ORAL

Cancer patients' knowledge about fatigue. Development and implementation of a structured educational programme to increase patients knowledge about fatigue and to evaluate the effect of increased knowledge on cancer patients experience of fatigue

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**Background:** Result from an earlier studie I carried out in the late 1990 showed that cancer patients were overall well informed about diagnoses, prognoses, symptoms, treatment, side-effects of treatment e.g. pain, nausea and vomiting and hairloss. Their knowledge about fatigue as a