

including three days with extensive information on breast cancer: Day 1 on complications to surgery, pain, alternative treatment and body image. Day 2 on oncological treatment and psychology and on day 3 advises from dietician and physiotherapist were presented. Parameters studied were levels of stress and anxiety, body image, tiredness and general wellbeing. Data were collected from patient questionnaires.

**Results:** Preliminary socioeconomic and demographic data have been collected. Data on psychological wellbeing, coping, self-efficacy, social relations, and quality of life show encouraging results of the CAMMA intervention program. Complete analysis of data will be presented later.

**Conclusion:** Preliminary data indicate a positive effect of intensive information and intervention when patients are cope with the diagnosis of primary breast cancer. So the study continues but further conclusions await longer follow up and processing of data.

8103

POSTER

#### Working in partnership with Clinical Nurse Specialist (CNS) and cancer service users to evaluate and develop the CNS role

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Background and why this is an area of importance: In October 2005 the cancer peer review feedback suggested that one of the strategic aims that the Trust should focus on is the development of the Clinical Nurse Specialist role (National Cancer Peer Review, 2005). Fundamental to the development of any nursing role is that it should be patient centred. However, there is little evidence that service user have been involved in shaping the role of CNS. Often CNS roles evolved from clinical need (Hill, 2000). The need to organise health services around users has been the theme of many health policies in recent years (NHS Management Executive, 1992). The NHS Cancer plan (DOH, 2000a) advocates that patients should be at the centre of the development and delivery of cancer services. Various national initiatives have been set up for user involvement but action at local level is also important (DOH, 2000b). This research aims to bridge the gap that exists. This will occur through the evaluation and development of the CNS role in partnership with service users in a South East London teaching hospital. Since this review would require collaboration, action research will be utilised. Action research allows individuals to work together collaboratively. It also develops learning as it helps individuals reflect on their practice and helps them identify and justify how this new learning influences change (Mc Niff, 1988).

**Materials and Methods:** A qualitative approach through action research will be utilised within this project because this research is underpinned by collaboration and partnership working and these are also the essential components of action research (Coughlan and Brannick, 2001). A group of Clinical Nurse Specialist and Cancer Service Users will meet for a minimum of three focus groups. The numbers of expected participants will 8 to 10 individuals – 4 CNS and 4 service users.

**Results:** The study is currently underway and the data will be analysed using the Strengths, Weaknesses, Opportunities and threats framework (SWOT). Review of the data will be taking place during the data collection and this also ensures that further cycles of action are initiated. Triangulation of the data will occur through the cross referencing of the data collected from the inquiry diary, notes from focus groups and notes from feedback from the participants.

**Conclusion:** Will be available by the end of May 2007 when the research is completed.

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POSTER

#### Expanding the role of the clinical research nurse in an Italian cooperative oncology research group

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**Background:** cooperative oncology groups have a long history in Italy, while the role of the clinical research nurse is relatively new. The purpose of this project was to establish a network of clinical research nurses (CRNs) within a cooperative oncology group and to identify strategies for maximizing their impact on patient outcomes and research practices.

**Methods:** a group of CRNs were identified in May 2006, through a survey sent to all Investigators of the Multicenter Italian Trials in Ovarian Cancer and Gynaecologic Malignancies (MITO) cooperative group. Through brainstorming, a literature review, discussions with the MITO leadership and contacts with international gynaecologic oncology groups, the CRNs identified 4 initial objectives for improving patient care and research nursing practices to: (1) establish the use of nursing summaries for MITO

conducted trials; (2) identify potential companion studies and other nursing research projects in this patient population; (3) establish formal contacts with international gynaecologic oncology nursing organizations and CRN groups for future collaborations; (4) develop evidence based MITO nursing guidelines to address specific procedures or patient care issues.

**Results:** the first nursing summary was written for the international MITO-2 study, and established minimal content for MITO conducted trials, including strategies for staff and patient education and essential nursing interventions. The CRNs identified the following priorities for nursing: improving compliance with eventual intraperitoneal chemotherapy and evaluate symptom burden over time. MITO nurses have established contacts with the Gynaecologic Cancer Intergroup (GCIG) nurses and the Oncology Nursing Society Clinical Trial Nurses, permitting the review of existing practices and providing contribution to Clinical Trial Nurse Manual (chapter authored by MITO nurses). An intraperitoneal chemotherapy nursing protocol has been published within the MITO group.

**Conclusions:** these early successes of the MITO nurses have stimulated interest in continuing to work toward achievement of the initial objectives and to use this model for expanding the role of CRNs in other Italian cooperative oncology groups.

8105

POSTER

#### How to reach targets with a SIG

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**Introduction:** The Dutch Special Interest Group (SIG) Immuno/Targeted Therapy founded in 2004 is a special working party of the Dutch Nurses Association, V&VN Oncology and consists of nursing professionals with expertise in the immuno and targeted therapy. The SIG Immuno/ Targeted Therapy has a national reputation in the fields of monoclonal antibodies, small molecules, anti-tumor vaccines, immuno modulation therapy and cytokines (including growth factors).

In the past 4–5 years these new cancer treatments have developed rapidly. The working mechanism of immuno/targeted therapy is very complex and not fully understood. Side effects and complications of new therapies differ from those of traditional chemotherapy and need special nursing skills and attention. Knowledge of immuno and targeted therapy has become important for (oncology) nurses since they are increasingly involved in caring for patients treated with these new cancer therapies.

Aims of the SIG Immuno/Targeted Therapy:

- Improve the quality of care for patients
- Enhance knowledge and practice and become expert in this field
- Provide information and educate nurses and other health care professionals to improve nursing skills
- Become a network for health care professionals

Organisation of the SIG: The SIG consists of (oncology) nurses who have a special interest and expertise in immuno/ targeted therapy and participate at a voluntary basis. The Netherlands is divided in nine cancer registry regions. Each region has a catchment area of 5–20 hospitals. At this moment the SIG has 22 members, representing all nine regions. The SIG meets three times per year. During these meetings new developments, ideas and the progress of the different projects are discussed and new information is exchanged.

**Activities:** To achieve current goals the SIG is involved in several projects in the field of immuno/ targeted therapy, e.g.:

- Development of a theoretical and practical manual for nurses
- Development of educational programs for (oncology) nurses
- Development of patient brochures
- Organizing basic and advanced level sessions at the national annual oncology congress

**Central aim:** We would like to inform other health care professionals how to organize knowledge and share experiences in the field of immuno and targeted therapies to improve patient care, nursing skills and to exchange information about the organisation and activities of the Dutch SIG Immuno/Targeted Therapies.

8106

POSTER

#### Information meetings for patients with prostate cancer and their partners prior to combined treatment with external beam radiation and HDR brachy therapy

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**Background:** Adequate information and education is essential for patients with cancer and their partners to be able to participate in decision-making

regarding cancer treatment and care. All patients with prostate cancer at our department have individual appointments with an oncologist and a cancer nurse prior to their combined treatment with external beam radiation and HDR brachy therapy, but many patients still describe a lack of necessary information. Even if information meeting in groups are common in cancer centres today, there are little consistent research showing the usefulness of these activities for patients with prostate cancer and their partners.

**Aim:** The purpose of this study is to explore if information meetings in groups (as a complement to individual appointments with oncologist and cancer nurse) could improve the information and education for patients receiving combined treatment with external beam radiation and HDR brachy therapy.

**Method:** Prior to the initiation of the information meetings, we collected anonymous questionnaires from 20 patients with prostate cancer, regarding their information and education needs prior to cancer treatment. The collected data inspired the content of the information meetings. Several group meetings were held, with approximately four patients and their partners participating at each meeting. The meetings was organised and lead by specialist trained cancer nurses.

**Results:** Data collection is on going and will be discussed at this presentation. Data is collected from repeated anonymous questionnaires from patients who have participated in the group meeting and will then be compared with data collected prior to the initiation of group meetings.

#### 8107 POSTER Barriers in cancer patients – nurse communication in radiotherapy

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Patients should be told when cancer is diagnosed, but handling of these breaking bad news regarding their diagnosis and prognosis is still a problem for many doctors and nurses. On the other hand, communication between the radiotherapy nurse and the patient along the treatment is sometimes difficult because of some barriers.

We consider a group of 105 new cases of cancer patients referred to our Radiotherapy Department. All of them were diagnosed with cancer (breast, rectal, prostate, lung, cervical carcinoma) 2 weeks to 6 months before the start of irradiation.

Based on a specific questionnaire we analysed the effect of patient's sex, age, education and socioeconomic status on perception of:

- patient-nurse relationship;
- needs for information provided after cancer is diagnosed;
- family's involvement in patient – nurse communication during radiotherapy;
- telling the truth about cancer diagnosis and prognosis.

The study is still in progress.

#### 8108 POSTER A qualitative study of organizational background and developments at cancer genetic centres in Sweden

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**Background/Introduction:** The purpose of this study was to describe the organizational and developments at cancer genetic centre in Sweden, as well as associated ethical issues.

**Methods:** Six cancer genetic centres were included and in the initial phase the coordinators of the respective clinics were contacted and requested to select individuals who participated in the development of the centres' operations. These individuals were interviewed. Qualitative content analysis was used to assess the material.

**Results:** Study findings showed that cancer genetic setting teams in Sweden need additional expertise. This line of work also requires constant ethical reflection to keep pace with technical and medical developments.

**Discussion:** As information related to these issues reaches the public through communication channels as the mass media and scientific publications, expectations of health care resources are based on what is published and not always on what is technically possible and ethical justifiable.

#### 8109 POSTER Spiritual needs as a part of the holistic approach

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**Introduction:** The aim of the current nursing is to use a holistic approach to the patient, i.e. to include particularly spiritual needs in the nursing process in addition to biological, psychological and social needs. Spiritual needs play an important role in the process of the disease and the patient's perception of life. The spiritual care provided by nurses is particularly based on listening, empathy and their effort to offer patients appropriate help.

**Method:** The research study performed in the University Hospital, Brno, in 2006 was focussed on the identification of patients' spiritual needs, wishes and demands. The study was carried out by means of an anonymous questionnaire in 200 respondents. The results were processed by means of statistic multi-variance methods.

The sample studied included patients treated in internal (26%) wards, in surgical wards (25%) and in cancer wards (24%) and in long-term care hospital (25%).

**Results:** 51% patients expect the hospital spiritual care to provide them with spiritual support, to enable them to speak about their problems or to understand the sense of life. Besides the significant ones, the health care staff represent the most important support for the patients. 47% patients only expect support from their families, 25% from their families and health care staff and 13% patients apply merely to nursing staff for help. 15% patients also mentioned, in addition to the nursing staff, the clergy as the source of spiritual comfort. 37% patients find no changes in their attitude to spiritual needs in comparison with the period before the onset of the illness, 24% patients suppose these needs to be higher.

The chi-square independence test confirmed a significant association between the expressed satisfaction with the possibilities of spiritual support and the religion, the most satisfied patients were Roman Catholics. This test also confirmed a significant correlation between the perception of the importance of spiritual needs and the establishment of a chapel. The patients who find their spiritual needs the same or higher than before the onset of the disease support this activity more.

**Conclusion:** One of the nursing diagnoses is defined as "spiritual discomfort" or "spiritual distress" which can result in the disintegration of a personality, impaired acceptance of the disease and suffering or social isolation. The area of spirituality is an integral part of competencies of nurses who respect the holistic approach to patients.

#### 8110 POSTER Stereotype concepts of oncological departments nurses

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**Background:** The importance of co-operation between different professions in the healthcare system increases due to development of medical technology and raise of patients' complexity. Separation of the status, power and authority of different professions in this system where physicians traditionally standing on the top of this hierarchy, naturally leads to dependence of the professions that are lower on this ladder (i.e. nurses), on those standing on the top (i.e., physicians). In the healthcare system there are different kinds of perception of each role partners filling some specific position. This perception can sometimes be stereotypic. The hierarchical structure can aggravate the stereotypic attitude of some sectors toward others.

This research continues the series of researches that were conducted in different sites of the healthcare system and dealt with nurses' stereotypic perception. This research checked the stereotypic perception of nurses towards themselves and towards their role partners: physicians and auxiliary staff in oncological departments. This research checked also the influence of power relations between the groups of role partners on stereotypic perception.

**Methods:** The sample included 90 nurses working in 6 oncological hospitalization departments in two large hospitals in Israel. The instrument checked different dimensions of stereotypic perceptions in relation with social phenomena: the Homogeneity Effect and the Ethnocentrism Effect, as well as influence of power relations and interdependence between the groups on stereotypic perceptions. Data was processed by SPSS program.

**Results:** Nurses perceive their group as more positive than the groups of physicians and auxiliary staff ( $p < 0.01$ ) and as more heterogeneous than the two groups of role partners ( $p < 0.01$ ). In addition, it was found out that nurses perceive their group as the one possessing more power than the group of auxiliary staff ( $p < 0.01$ ) and as the one possessing the power which can be compared to that of physicians. Additional finding: the more