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Supportive care and quality of life

ANXIETY: A PSYCHOLOGICAL OBSERVATIONAL STUDY BEFORE MAMMOGRAPHY SCREENING

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Scientific data show anxiety as the most important reaction to mammography screening and its levels appear to act as a barrier to this test. Less studies investigate the setting variables. Our aim was to investigate anxiety and coping style. Three hundred and thirty-nine women were asked to undergo STAI-Y and Brief Cope. Patients (pts) had high level of anxiety (57.1% pts before 40 years old and 52.8% older than 49 were alarmingly anxious), but also an effective coping style. Psycho-social variables have been examined by a psychologist towards an observational schedule drawn up before the screening test. From the observational study we found that often (80%) anxiety is related to the long time spent in the waiting room, ignorance about procedures (75%), and about medical tests (45%) and the goal of the prevention programme (38%). Many pts complain about the quick and abrupt welcome. Pts request information (80%) and explanations (85%). More information and a psychological support are supposed to reduce anxiety and stress, ensuring a better collaboration during the exam and more return to the screening. Obviously a psychological support in this contest is difficult and onerous. However, we underline the need for an effective training of the staff to supply information in a correct way to get in touch with pts, and the introduction of a volunteer figure for the welcome.

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BETA-ERYTHROPOIETIN IN CLINICAL PRACTICE: GOIM 2705 MULTICENTER OBSERVATIONAL STUDY

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Background: Chemotherapy-induced anemia is a significant problem for patients with cancer, causing fatigue and reducing quality of life (QOL). The ability of recombinant erythropoiesis stimulating agents (ESA) to correct chemotherapy-related anemia (CRA) in patients receiving chemotherapy has been well recognized. However, it remains unclear the real impact of this therapy in the clinical practice.

Methods: Participants will be recruited from 23 medical oncology institutions in South Italy between January 2008 until April 2008. The primary efficacy outcome was the analysis of management of anemia in the clinical practice and its adherence to clinical guideline. Secondary efficacy variables included the evaluation of Quality of Life, compliance and psychological influence.

Results: A total of 266 patients were enrolled at the moment of the interim analysis. One hundred and twenty patients completed the evaluation program, consisting of clinical monitoring every four week, with collection of QOL, compliance and psychological questionnaires.

The data revealed that about 20% of patients started ESP therapy with a basal haemoglobin levels between 10 and 11 g/l and 68% of patients obtained a relevant improvement of haemoglobin after beta-erythropoietin treatment. We registered QOL and psychological improvement correlated with ESA response however, about 50% of patients showed a poor knowledge of the meaning of treatment.

Conclusions: These preliminary results show that ESP therapy is a feasible and manageable option for neoplastic patients with anemia, but it remains poorly accepted for a majority of them. Final data analysis will be presented.

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IS MAMMOGRAPHY SCREENING ANXIETY RELATED TO PERSONAL COPING STYLE?

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Many studies value anxiety as the most important reaction to mammography screening and anxiety appear to act as a barrier to this test. No available data make a correlation between anxiety and coping style. Our aim is to value if patients' (pts) anxiety is due to their coping style. This research characterised women's levels of emotional distress associated with mammography screening test and relationship between women's coping style and anxiety. From May to October 2007, we developed a study to correlate anxiety levels and coping style before mammography in breast cancer screening. Tests used were STAI-Y1 and Brief Cope. 339 women were asked to undergo the tests: mean age was 56.1 years old. 71.7% pts were married. Most pts show a reactive coping style, with an effective self-confidence in their ability to face problems. Strategies used are: research of information and advice (44%), practical planning in order to reduce stress (40%), acceptance of unpleasant situations (39%), research of social support (36%) and of emotional event (32%). Positive is post-traumatic growth (52%) and the research of religious consolation (53%). Few pts put into action denial, avoidance (6.4%) and hopelessness (5.8%). Pts had effective coping style. In spite of that, before screening, 57.1% of pts younger than 40 years old and 52.8% older than 49 became alarmingly anxious. Findings suggest that anxiety reaches high levels, but it is not attributable to personal coping style. There is no correlation between anxiety and low level of education, instead there is with low knowledge of the screening procedure and goals of the prevention programmes. It will be our aim to examine in another study the role of setting variables and how to reduce anxiety around screening.

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ACCESSI VENOSI CENTRALI: INQUADRAMENTO E IDICAZIONI

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L'introduzione nella pratica clinica corrente di nuovi presidi per l'accesso venoso periferico e centrale, nonché per la somministrazione in continuo di farmaci e sostanze nutrizionali, ha determinato la necessità che l'uso di questi dispositivi avvenga secondo le più attuali modalità di gestione così come definite da appositi gruppi di ricerca e sintetizzate da specifiche linee guida.

Le indicazioni fornite da tali Società consentono un utilizzo ottimale di tali dispositivi, il cui costo superiore a quelli di precedente generazione e la cui maggiore invasività espone sia il paziente ad un rischio di aumentate complicanze locali e generali (soprattutto infettive), sia gli operatori sanitari ad una aumentata responsabilità medico legale.

in tale ottica le competenze infermieristiche si sono ampliate estendendosi alle conoscenze tecniche, pur rilevando che spesso esse vengono acquisite in maniera empirica e contingente.

Pertanto l'indubbio vasntaggio terapeutico apportato da queste metodiche ne rende sempre più diffusa l'utilizzazione ospedaliera coinvolgendo le U.O. di Chirurgia (Terapia antalgica e nutrizionale

postoperatoria), Rianimazione, Medicina (per i pazienti critici), Ematologia, Oncologia.

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IMPROVEMENT OF PAIN AND PSYCHOLOGICAL STATUS AFTER SIX MONTHS OF PSYCHOTHERAPY IN CANCER PATIENTS

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Materials and methods: The effectiveness of six month individual psychotherapy in reducing pain was evaluated in 104 consecutive patients. At baseline (T1) and after 6 months (T2) treated (n = 52) and control patients (n = 52) were administered validated scales for pain (BPI), alexithymia (TAS-20), coping (MAC), illness behaviour (IBQ), and psychological distress (HADS, SF-12). At T1, in a series of unilinear and logistic regression models, pain experience was associated with alexithymia, hopelessness, anxiety, depression and poor psychosocial functioning. Patients enrolled in the treatment group had worse health status at baseline than controls but alexithymia was not significantly different between the two groups.

Results: After six months of psychotherapy, patients in the treatment group showed significant decrease of alexithymia (t = 6.47, p < .001), hypochondriasis (t = 2.45, p = .02), disease perception (t = 2.54, p = .01) and pain intensity (t = 2.20, p = .03) than those in the control group. Compared to baseline, at T2 treated patients showed a dramatic improvement of alexithymia (t = 6.94, p < .001), adjustment to cancer (t = 4.99, p < .001), hypochondriasis (t = 6.55, p < .001), anxiety (t = 3.96, p < .001), and pain experience (t = 5.25, p < .001). In contrast, patients who did not receive psychological treatment did not show any improvement between T1 and T2 while and seven patients (14%) reported new onset of pain. In a series of hierarchical regression models, improvement of psychological distress was able to explain up to 58% of variance in the improvement of pain experience.

Conclusion: Psychological treatment showed promising results in improving psychological status, psychosocial functioning and the experience of pain in cancer patients.

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DVD-BASED GROUP INFORMATION FOR CANCER INPATIENTS AND FAMILIES

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Introduction: In past years, great importance has been done to information needs in cancer patients and families. This tendency