

Proffered papers

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THE U.K. PUBLIC'S ATTITUDES TO CANCER

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This study, sponsored by Europe Against Cancer was undertaken jointly by Marie Curie Cancer Care and the Health Education Unit of Southampton University. The aim was to explore the U.K. public's attitudes to cancer, its prevention and treatment. Data were collected through focus 28 group interviews at five locations in the U.K., these groups of 6 to 8 people were designated by social class ABC1 (professional)/C2DE (working), age 16–25/26–40/41–65 years and sex.

Results: As a disease, cancer is still associated with fear, misconception and feelings of personal vulnerability. Most felt that screening was a good thing but found much of the cancer information available confusing. An encouraging trend was that younger people, more often those from higher socioeconomic groups, were open minded and had a thirst for knowledge particularly in relation to skin cancer and general preventive measures. The research shows that cancer information and education are starting to show some success and indicates areas needing further effort.

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role modelling and health care promotion. Oncology nurses must develop strategies to apply these principles in their practice.

With the increased costs of health care, nurses will be forced to face promoting health care with limited financial resources. How can oncology nurses do this optimally? By applying the principles of primary, secondary and tertiary prevention in their practice, efficiency for the patient and the health care system can be achieved.

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HIGH SCHOOL STUDENTS AND PARENTS SELF EVALUATION ON THEIR ATTITUDES RELATED TO CANCER RISKS AND PREVENTION

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This study was conducted with the high school students and their parents, in Bornova city near Izmir. Subject students were informed by a classroom education, and a well prepared brochure was given to each to be shared with their parents at home. Beside this, the students were asked to answer a questionnaire with their parents to evaluate their own cancer related risks and attitudes toward prevention.

The percentage of students who were found to have positive cancer cases in their family trees was 12. The most frequent cancer types causing death among close relatives were trachea and gastric cancers.

Smoking and alcohol consumption were significantly higher among male parents; however students were not found to assume these habits so heavily.

By their own evaluations students and their parents were not adequately alert about cancer causing risk factors, preventive life styles and early detection procedures.

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PRIMARY PREVENTION AND SCREENING GUIDELINES: IMPACT OF A SHORT TRAINING PROGRAM ON NURSES' KNOWLEDGE AND PERCEPTION OF THEIR TEACHING ROLE

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Continuous education is becoming a common way for nurses to keep up with new developments in the field of cancer prevention. During a cancer nursing course coordinated by the SIO-AFIC-ESO, a four hour training session was organized to inform nurses about current primary prevention and screening guidelines. Objectives were to increase nurses' knowledge and to improve nurses' perception of their teaching role as health care providers. The session included a presentation of current prevention concepts and results of a knowledge test among nursing students. Emphasis was put on providing clear and concise information about guidelines, in addition to discussion about controversies. Extensive written documentation was made available. A pre and post test was used to evaluate the impact of the session. Nurses served as their own control. Out of the 72 registered participants, 68 completed both parts of the questionnaire. Characteristics of participants were as follows: median age 36 (range 22–57); previous post-basic cancer nursing education 53%, working in anticancer center: 53%, general hospital: 38% and working in home care setting 9%. Number of participants by countries were as follows: France 31, Belgium 24, Italy 9, Spain 3 and Luxembourg 1. Preliminary results indicate that nurses' knowledge improved after this short training session. Detailed results will be presented.

This course was supported by the "Europe against cancer programme".

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THE POLITICAL ASPECTS OF BREAST CANCER—THE ISRAELI BREAST CANCER COALITION

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Breast cancer presents political issues related to its gender and social aspects. In Israel, self-help groups of women with breast cancer, and health care professionals, together with women's organizations, have made an effort to unite to form the Breast Cancer Coalition. This coalition was established with the aim of representing a grass root feminist voice for bringing breast cancer care to the forefront of the national health care agenda. These developments, with further European implications, will be described in detail. Health promotion and education are at the heart of the work of the newly-established coalition. Nurses, as women, are in a uniquely powerful position to advertise, and participate in, such activities, both as health care consumers and as health care providers.

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SMOKING AND CANCER: NURSING IMPLICATIONS

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Individuals who smoke are at greater risk for developing certain cancers and other smoking related illness. In addition, the health effects of passive smoking are becoming more evident. In 1995, 750,000 people in Europe will die of a smoking related illness. Cancer contributes significantly to this mortality.

Nurses are dedicated to the promotion of health and health care and the support of individuals that pass through the health care system. They also have close contact with their patients and therefore can use this contact to promote healthy behaviors by providing education which includes

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A STUDY TO DETERMINE WOMENS ATTITUDES IN BREAST SELF-EXAMINATION

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The increased average life expectancy through the control of infectious diseases and better treatment measure for many other illness, the magnitude of the environmental carcinogenic factors and better public awareness and utilisation of the modern diagnostic facilities are all contributing factor, for the increasing of cancer. Basing upon these determinations, this study has been designated to evaluate Bornova District's Womens' attitudes in "early detection and prevention of breast cancer".

This field study including descriptive and analytic methods has been performed in Ergene Health Center of Bornova District. The study has been performed over married women between 15–49 years of age living in the district and respecting to age variable, 210 women have been selected by stratification sample to represent the total population.

According to the data collected, 29.53% of the women are between 20–24 of age groups 45.24% primary school graduates, 84.29% having 1–2 children, 27.14% breast self examination.

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A significant relationship was found to be between the educational level of women and the breast self-examination statistically. The more educational level the women had, the more positive health activities they had ($x^2 = 21.72$, SD: 1, $p < 0.01$).

In view of these findings, it has been concluded that primary Health Care Staff would extend educational activities towards early detection and prevention of breast cancer.

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RELATIONSHIP BETWEEN AGE AND KNOWLEDGE AND ACCOMPLISHMENT OF CANCER PREVENTION MODALITIES: A SERIES OF 2481 QUESTIONNAIRES

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Aim: To assess the knowledge and beliefs about cancer prevention in an unselected population.

Methods: We distributed an autocompilative questionnaire to people coming in several health units in Trento district (Italy).

Results: We evaluated 2481 questionnaires exploring the cancer prevention-related knowledge of 1803 females and 678 males. The age distribution was: 35.5% less than 40 years, 41.5% from 40 to 59 years, 23% up 60 years. In this analysis we pointed out that the information about prevention is better in the middle age than among younger or older people ($P < 0.0001$). A similar aspect is showed by the effective agreement to clinical examinations able to detect an asymptomatic neoplasia. A highly significant value was obtained by chi-square in all differences.

Conclusions: These data seem move in direction as of more clear information in the school to increase the knowledge and adhesion of younger people to secondary cancer prevention modalities as of more widespread health policy in older people support.

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PROGRAMME OF EARLY DETECTION OF BREAST CANCER

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Success of treatment of breast cancer depends on early detection of the disease. Scanning programme was carried out in several phases:

- (A) Case control study of 29 risk factors
- (B) Forming of risk factors tables according to age
- (C) Making of questionnaire on the basis of former research
- (D) Asking for an opinion
- (E) Forming of groups
 - 1. Group with clinical symptoms
 - 2. High risk groups
 - 3. Groups without symptoms and risk
- (F) Following during 5 years

Phases A, B, C are completed. 10,000 women were polled until now. Questionnaire is still in progress. Following up of the groups with clinical symptoms is carried out immediately, high risk groups twice a year, and the rest once in two years.

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GENETICS AND CANCER: A MULTIDISCIPLINARY APPROACH

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Recent developments in molecular genetics offer the perspective to screen asymptomatic individuals for alterations in cancer-predisposing genes. A consultation accessible to individuals with a suggestive familial cancer history has been recently developed in our hospital.

We propose to those individuals a genetic counseling which is performed by a pluridisciplinary team including medical oncologists, geneticists, psychologists, research nurse and an ethicist.

The probability of a cancer-predisposing syndrome, the individual risk, the disponibility of genetical testing and recommendations for screening and preventive strategies are determined and delivered to the probands. A health psychology assessment is also proposed.