

1434

POSTER

COOPERATIVE MODEL—COOPERATING WITH INSTITUTIONAL AND PRIMARY HEALTH SERVICES FOR CHILDREN WITH CANCER IN TRONDHEIM, NORWAY

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The main purpose of our oral presentation is to present the cooperative model we have developed for children with cancer. The model involves all healthcare professionals in institutional and primary health services, including schools, day-care centers, public health nurses and doctors in the patient's home communities.

The Pediatric Clinic in Trondheim and the Norwegian Cancer Society have developed this model to promote professional cooperation between the institutional and the primary health services in the districts of Mid-Norway (population 620,000). The main objective is to improve the quality of care for children with cancer and their families in this area. The model helps us to find out what each family with a child with cancer possesses in the way of personal resources, as well as social networks and other forms of support. This service has been provided to children with cancer and their relatives since 1988. It has been shown that the model can be usefully applied to other groups of patients as well.

Our poster will describe the methods we use in this cooperative model. We will also have an informative brochure explaining this model.

1435

POSTER

FREQUENCY AND INDICATORS OF WHOLLY COMPENSATORY MOUTH CARE FOR BELGIAN HOSPITALIZED ONCOLOGY PATIENTS

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The purpose of this study was to describe and analyze the actual administration of mouth care for Belgian hospitalized oncology patients. Orem's self-care deficit nursing theory was used to analyze the performance of mouth care for cancer patients. Mouth care is indicated when patient's self-care demands are increased or when their self-care capabilities are limited.

The method used was a secondary data-analysis of the Nursing Minimum Data set of the Belgian hospitalized oncology patients. The randomized sample accounted to 88,000 observations on 35,000 patients. Wholly compensatory mouth care was administered to 10% of the oncology patients. Indicators for mouth care for cancer patients were ventilation 71%, nasogastric tube 55%, endotracheal tube 43%, isolation 41%, malignant neoplasms of lip, cavity and pharynx 40%, age younger than 8 years 37%, disorientation 31%, malignant neoplasms of nose cavities, middle ear, sinus paranasales and larynx 27%, malignant neoplasms of the brains 22% and Hodgkin's disease and leukemia 17%. Mouth care was more frequently carried out by higher qualified staff. Results can be used for nursing protocols, textbooks and additional research.

1436

POSTER

SLEEPING DISORDERS IN ADVANCED CANCER PATIENTS

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Sleeping disorders are frequently observed in patients with advanced cancer. There are various causes for them: organo-pharmacological, psychological and social. The cancer pain syndrome is the main cause. The problem of disturbed sleep of patients in pain therapy and palliative care unit involves the nurses on the night shift. There are few studies on night nurses that revealed their experience, isolation, lack of recognition and decreased educational opportunities. Night nursing is challenging as cancer patients verbalize that they often feel worse at night, because of the lack of activities and sense of loneliness. Oncology night nurses revealed their main role consists of providing support to cancer patients who have concerns and troublesome symptoms. Key categories included empathic presence, comfort care, checking behaviour, anticipation of request and information giving. Following a previous study, we are presenting new results of a personal log of sleeping habits for each of 32 patients in our department. Patients opinion of sleep satisfaction was recorded. Specific data on six months survey were recorded at the end of every nurse's night shift. Data showed: (1) the most frequent cause of sleep disturbance; (2) kind of disturbance and classification: normal,

intermittent, none. Moreover: number of night nurse calls for each patient: more than 3, less than 3, none, and nature of them.

1437

POSTER

A RESEARCH PRIORITIES SURVEY OF THE DUTCH ONCOLOGY NURSING SOCIETY

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Oncology nurses are more and more aware of the need for nursing research. Research areas in oncology nursing are very diverse and may differ between practice setting or patient population. To provide direction for needed research, the Special Interest Group Nursing Research of the DONS surveyed members of the society about research priorities. The questionnaire, adapted from the research priority survey of the American ONS 1991, was sent to all 1400 members in June 1995. The nurses were asked about the importance of nursing research in several areas: physical symptom management, psychosocial aspects of care, care delivery issues, special populations, continuum of care, health promotion behaviors and treatment decision making. They were asked to rate the items on a five-point scale and to rank the top 10 priorities for research. By means of open questions the members were asked to identify additional areas for research which were not mentioned in the list and to put in their own words what the most important research question in oncology nursing is to their opinion. The results of this survey will be presented. The findings provide direction for the focus of oncology nursing research and identify areas that require research funding based on ideas of nurses in the different settings of oncology nursing practice.

1438

POSTER

MEETING THE NEEDS OF BREAST CANCER PATIENTS IN AN AMBULATORY CHEMOTHERAPY UNIT: A NURSING CHALLENGE

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Oncology nurses have a statutory obligation to educate patients and their families and provide global quality health care. However the high levels of activity and patient turnover prevalent in most ambulatory care units mean that quality time for patient education is limited. Patient needs and perceptions must therefore be carefully assessed and nursing objectives clearly defined if patient education is to be successfully integrated into the daily activities of ambulatory care.

A randomized survey of 100 newly diagnosed breast cancer patients high-lighted patient priorities and the importance of family, social, cultural, economical and psychological difficulties which may inhibit a positive psychosocial patient response to illness and indirectly adversely affect patient learning abilities and the capacity to develop self-care skills.

This paper discusses some of the environmental and organizational changes implemented within the day unit at IGR and the objectives behind the development of a specialist nurse consultation in chemotherapy tailored to the individual psychosocial needs of breast cancer patients.

1439

POSTER

NURSING QUALITY ASSURANCE PROGRAM FOR CANCER PATIENTS TREATED WITH CHEMOTHERAPY IN SOUTH-KARELIAN CENTRAL-HOSPITAL

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A nursing development project for cancer patients treated with chemotherapy was started in the year 1987 in South-Karelian Central-hospital. The process is still going on as a nursing quality assurance program. Our group chose the adaptation model of Roy and our own philosophy of nursing to ethical methods of approach. In 1989 nursing standards and criteria were formed for the process of nursing the patients, who were given cytostatics. The first evaluation for quality of nursing care was executed in 1991. We interviewed ten (10) patients treated with cytostatics and did a questionnaire for 17 persons of our personnel.

Results: The practice of nursing has changed both individually and holistically. Patients' instruction has become more thorough and regular. Personnels' knowledge, skills and motivation have increased and thus the evaluation process is still continuing in the form of interviews of the patients.