1386 ORAL

Effects of an instruction card about diarrhea on the self-care knowledge – Behavior and symptom distress of patients receiving pelvic radiation therapy

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Purpose: To test the effect of the instruction card about diarrhea on selfcare-knowledge, selfcare-behavior and symptom distress. The instruction cards were developed by a national workgroup of oncology nursing specialists. Radiation therapy usually is given on an outpatient basis as a consequence the patient has a great responsibility in managing the side-effects and performing adequate self-care. The instruction card contained information about diarrhea and related distress due to radiation therapy and guidelines for effective symptom management.

Methods: A nonequivalent control group pretest-posttest quasi-experimental design. Nineteen patients in a control and eighteen in an experimental group were consecutively assessed on their knowledge about the side-effect and possible self-care measures, their selfcare-behavior and their symptom distress. The control group received the facility's standard care, while the experimental group also received an instruction card about the possible side-effects. Their was no randomization. The informative intervention was standardized and performed by one research-nurse to exclude interpersonal bias.

Results: Data have been collected and currently being analysed. Results will be presented at the conference.

1387 ORAL

Never say never to self-care. Stoma patients and family education

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Achievement of self-care is one of the most important aims of the nursing care and education provided to patients with a stoma. We desire to achieve self care before hospital discharge, however when the patient is elderly or too weak or lacks family support this goal cannot be achieved in the short hospital stay.

A community based stoma rehabilitation service, was established to facilitate patient education and continuity of care. The service consist of: liaison with the hospital stoma care nurse, discharge planning for patients and family, an immediate home visit within 48 hours of home arrival by the commulity stoma care nurse and follow up either at home or in the community stoma clinic.

120 visits a year to the clinic and home visits to those unable to attend promoted self care in most patients.

A systematic nursing intervention based on Orem's self care theory was implemented: Timely referral, establishment of a significant nurse patient relationship, allocation of plenty of time for a first home visit to assess the patient, family and environment, fitting of appliances, repetition of verbal and written instructions, exercise and telephone follow up.

Results: Given enough time, reassurance and rehearsals, most patients are able to reach self care. Those that the disease process continued, eventually became dependent on their relatives.

1388 ORAL

Hospital closed-circuit TV as an educational strategy to meet the learning needs of cancer patients

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Purpose: Recognizing the need for appropriate educational support for cancer patients and their families, we have developed closed-circuit TV programs containing information about cancer diagnosis, treatment and rehabilitation. By describing the development, implementation and evaluation of this project, the present work aims to contribute to the answering of major research questions such as how to define what to communicate, how to deliver the information and how to evaluate the success of the educational initiative.

Methods: This study was implemented in two phases. In the first phase, a script for three films (CAT, Scintigraphy and Exercises after Breast Surgery) was developed. In order to determine whether the material needed to be adapted before producing a finalized version, formative evaluation was performed. In the second phase, summative evaluation will be performed in order assess whether the finalized videos helped to meet the patients' informational needs.

Conclusion: Data obtained from the formative evaluation has helped to adapt the content, structure and vocabulary of the material to the expectations of its future audience and has showed that this kind of material contributes to patient satisfaction. Data from the formative evaluation will be available by September.

1389 ORAL

Patient attitudes towards video directed information – A multicentre study

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Purpose: Only a 1/3rd of the information given to patients during their visit to the oncologist is retained. Intensification of information provision can improve coping & reduce anxiety. Video Cassette Recording (VCR) is one way to achieve this but there has been no published data on the preferences of patients & relatives.

Method: 300 questionnaires were given by hand over 3 wks at our centres & at Northampton cancer centre. It described the script for an information video which summarised the details of radiotherapy and chemotherapy and asked on a scale from 1–5 whether they would have found such a video helpful. It also asked their ethnic background, age, sex and access to a VCR.

Results: 210 (70%) where returned, (89%) had easy access to a VCR. A greater proportion felt this video would be helpful or very helpful (78%) compared to not helpful or worrying (9%) [Chi², p < 0.00001] with 13% equivocal. This remained significant for all subgroups. For those who indicated helpful or very helpful the preference was greater with age <60 v >60 yrs (85% v 72%) [Chi² with Yates' correction, p = 0.035] & in ethnic (95%) v non-ethnic groups (70%) [Chi² with Yates' correction p = 0.02]. There was no difference between Patients & Relatives (78% v 73%, Chi², p = 0.36) or Males & Females (80% v 77%, Chi², p = 0.7).

Conclusions: There is a strong statistically significant preference for VCR directed treatment related information particularly in ethnic groups & younger patients. A film has now been commissioned in English & ethnic languages and its effect on quality of life is being evaluated in a prospective randomized trial.

1390 ORAL

Nosocomial invasive aspergillosis among neutropenic patients with acute hematological malignancies:
Contribution of nursing intervention and patient education in effective prevention

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Purpose: In 1996, due to construction in nearby areas, there was an outbreak of aspergillus among neutropenic leukemia and lymphoma patients. In a ward-based "environmental control program", the rate of aspergillosis was reduced.

Methods: High efficiency particulate air (HEPA) filters were Installed in all rooms, including 4-bedded rooms. All doors to patient rooms were closed and windows were sealed. Plants and flowers were forbidden. Data was collected regarding nurses' knowledge and behavior concerning infection control.

Nursing staff was trained in proper use of the HEPA filters and in patient and family education. Verbal instruction and a written leaflet were given to the patient and his family. Patient records were reviewed retrospectively from March 1994, when construction began, and prospectively from August, when the program was initiated, to identify cases of aspergillosis. HEPA filter efficiency was tested by repeated air sampling for aspergillus.

Results: New cases of aspergillosis dramatically declined following initiation of the program (1994: 4 cases; 1995: 6 cases; Jan. to July 1996: 12 cases; August to December 1996: 1 case). The number of detectable aspergillus spores decreased in a statistically significant manner. There were behavior changes among nursing staff and HEPA filter were used properly.