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## 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.

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## 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 commullity 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.

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## 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.

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## 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%) [Chi$^2$, $p < 0.00001$] 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%) [Chi$^2$ with Yates' correction, $p = 0.035$] & in ethnic (95%) v non-ethnic groups (70%) [Chi$^2$ with Yates' correction $p = 0.02$]. There was no difference between Patients & Relatives (78% v 73%, Chi$^2$, $p = 0.36$) or Males & Females (80% v 77%, Chi$^2$, $p = 0.7$).

**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.

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## 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.

**Conclusion:** An ward-based "environmental program" incorporating HEPA filters with staff and patient education may have reduced the number of invasive asperaillus infections. with minimal financial expenditure.

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### Do patients want the same information as their GP's?

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**Purpose:** Many patients cope with their illness by maximizing the information they collect. In addition to written & Video recorded (VCR) information one way to achieve this would be to forward a copy of all GP letters to the patients home.

**Methods:** 300 questionnaires where given out by hand over 3 wks in our institutions & Northampton Hospital. It described a system where copies of all written correspondents concerning their case eg GP letters & Clinic annotations, are sent directly to the patient to be kept in their own file. Patients indicated their response to this suggestions on a scale from 1–5 & also asked their ethnic status, age, sex & preferences for other sources of information.

**Results:** 210 (70%) questionnaires where returned. A greater proportion felt it would be helpful (30%) or very-helpful (38%) *v* not-helpful (10%) or worrying (5.2%) $Chi^2$, $p < 0.0001$. This remained significant in all subgroups except females patients >60 yrs. In the group who felt it would be helpful or very-helpful there was a greater preference in relatives v patients (90% v 61%, $Chi^2$, $p = 0.0008$), <60 v ≥60 yrs. (77% v 49% $Chi^2$, $p = 0.0001$) & in patients who also felt VCR information would be advantageous *v* those who did not (98% v 2%, $Chi^2$, $p < 0.00001$) but none between males (71%) *v* females (66%) or ethnic (49%) *v* non-ethnic groups (69%).

**Conclusions:** Young patients & most relatives prefer this system. However, a significant subgroup (mainly elderly, female patients) would find it worrying & therefore it cannot be introduced globally. Patients who have registered with our VCR library will be offered this system initially as this group had the strongest preference & no patients felt it would be worrying.

1392 ORAL

### Australian public cancer information messages in 1996. How well do the messengers agree?

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**Purpose:** To determine the level of agreement in the messages contained in written education materials provided by member organisations of the Australian Cancer Society (ACS).

**Method:** The content of 169 current public education materials relating to aspects of breast, cervical, skin, bowel and prostate cancer were reviewed in terms of their consistency and level of agreement against Australian Cancer Society recommendations and U.S. Preventive Taskforce Guidelines.

**Results:** The areas that appeared to have most inconsistencies include material which inform the public on the frequency and nature of risk factors for cervical cancer, the ages for non-radiological breast examination and mammography, Papanicolaou (Pap) smear testing, specificity of target screening groups and intervals for clinical examination for bowel and prostate cancer.

**Conclusion:** Clear, unambiguous and consistent cancer prevention messages in education materials provided by Australia's non-government cancer organisations have not been achieved fully. This has the potential to confuse the public and must be avoided. The implications for this situation and strategies for improvement are discussed. The Australian experience may well be mirrored elsewhere and could be of interest for investigation by other national cancer organisations.

1393 POSTER

### Effects of an instruction card about fatigue on the self-care knowledge, -behavior and symptom distress of patients receiving cephalic, thoracic and pelvic radiation therapy

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**Purpose:** To test the effect of the instruction card about fatigue on selfcare-knowledge, -behavior and distress. 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 fatigue and related distress due to radiation therapy and guidelines for effective symptom management.

**Methods:** A nonequivalent control group pretest-posttest quasi-experimental design. Seventy-three patients in a control and eighty 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.

1394 POSTER

### Developing a psychoeducational programme for the management of fatigue in patients receiving chemotherapy

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Fatigue is a disruptive symptom frequently experienced by patients with cancer. It can impede normal daily functioning and prevent patients' successful adaptation to living with cancer and its treatment. It is related to several factors including mental affect, sleep pattern, energy reserves and physical activity, and it is exacerbated by treatment.

Chemotherapy is one form of treatment which contributes to fatigue. It is experienced by 59–96% of patients receiving this form of treatment. However, despite its prevalence in this population, little empirical research has sought to derive or test interventions for the management of fatigue from chemotherapy. This poster will describe the development of a psychoeducational programme for the management of this symptom. This programme uses comprehensive printed information to educate patients about fatigue management, and provides the patients with ongoing support to explore the meaning of fatigue and to determine the optimal approach to its management.

This poster will describe the literature supporting this approach to the management of chemotherapy related fatigue, and will report findings from a pilot study with ten patients who participated in this programme. These patients completed satisfaction questionnaires on completion of the programme and reported benefits including: raised mood and morale, enhanced positive outlook and greater perceived control.

The poster will conclude with a discussion of the complexities associated with the management of fatigue.

Project supported by a grant from the Cancer Research Campaign.

1395 POSTER

### Informational support for relatives

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**Purpose:** The purpose of this study is to chart the perception of relatives and nurses regarding the importance and realization of informational support which promote the adjustment of cancer patients' relatives.

**Methods:** The target groups of the study were 168 relatives of cancer patients from oncological wards all over the country, and registered nurses (n = 143) from 12 oncological wards. The data was collected with the help of questionnaires which were developed for this study. As statistical analyses method nonparametric tests were used due to skewed distribution and variables of ordinal scale type.

**Results:** Almost all relatives and nurses consider that it is important to receive a lot of information related to the patient's illness, especially medical and nursing information from the health care professionals responsible for the patient's care. Relatives do, however, receive very little information in relation to their needs. The differences of the views of relatives and nurses on importance and realization of health care professionals' action are statistically significant. Those relatives who felt they needed less medical information have adjusted better than other relatives.

**Conclusion:** Giving information should be seen as a process in which informing would occur in relation to the real need and would be based on the actual knowledge level of the relatives. It is important that co-operation between the different professional groups is good and areas of responsibility in giving information are clear to health care professionals, patients and relatives.