

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

1391

ORAL

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

E. Kaminski, A. Deary, R. Thomas. *Dep. of Oncology Addenbrooke's Hospital, Cambridge. Primrose Oncology Unit (POU), Bedford Hospital, Bedford, UK*

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 were 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 were returned. A greater proportion felt it would be helpful (30%) or very-helpful (38%) v not-helpful (10%) or worrying (5.2%) χ^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%, χ^2 , $p = 0.0008$), <60 v >60 yrs. (77% v 49% χ^2 , $p = 0.0001$) & in patients who also felt VCR information would be advantageous v those who did not (98% v 2%, χ^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?

T. Kober¹, R.W. Sanson-Fisher², C.L. Paul². ¹*Australian Cancer Society;* ²*Hunter Centre for Health Advancement, Australia*

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

K. Giesberts¹, W. Coudyzer¹, G.C.M. Evers¹, A. Tanghe¹, W. Van den Bogaert², G. Vandeveld², B. Stouthuysen². ¹*Center for Health Services and Nursing Research, Catholic University Leuven;* ²*Department of Radiation Therapy, University Hospital of Leuven, Belgium*

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. There 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

E. Ream, A. Richardson, C. Alexander-Dann. *Department of Nursing Studies, King's College London, University of London, UK*

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

E. Eriksson, S. Lauri, M. Hupli. *Department of Nursing, University of Turku, Finland*

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.