counselling and support group, colposcopy, menopause and osteoporosis screening and management, urodynamics, general gynaecology, sexual dysfunction, pregnancy and STD counselling and contraceptive advice.

This poster depicts the Womeri's Health Centre as a warm and friendly environment, devoid as far as possible of the clinical setting which characterises many hospital outpatient services, whilst providing a "one stop shop" of services relating to women's health issues.

300 POSTER

# The structuring of a course of breast self-examination considering oncological, psychological and sociocultural aspects

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**Purpose:** Breast self-examination is perhaps today the most controversial exam among those recommended for the screening of breast cancer. To improve the efficacy and the compliance of the method and to eliminate the negative psychological implications, we have worked out a multidisciplinary course which includes group and individual approaches.

**Methods:** We have analysed the scientific literature on the topic, and the experiences of several voluntary italian and foreign organizations and territorial structures; and we have re-analysed our previous experiences about breast self-examination courses.

Results: We have worked out a breast self-examination course for women aged ≥20 structured over three days, to discuss the problems of the anatomy and pathology of the breast, the screening of breast cancer, to teach the technique of breast self-examination and to evaluate the grade of learning. The aims proposed are: a) to favour an early diagnosis, above all regarding the ages not included in the breast screening and cancers appearing between mammographies; b) to favour the compliance in correlation with screening programs; c) to favour a better knowledge and a better relationship with once own body; d) to favour a positive psychological attitude towards breast tumors and worries for once own health.

Conclusion: The first results are being processed and are showing a high acceptability of the method and a good level of learning.

301 POSTER

#### A pathway of care to clinical effectiveness and service efficiency

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Purpose: To develop breast care services for women in the South Tees area incorporating current research findings and government Calman Hine (1) recommendations to achieve clinical effectiveness and service efficiency.

- Method:
- (a) Process mapping of the care for women requiring breast treatment from G.P. referral to hospital admission, discharge and after care.
- (b) Negotiating a process of care which focuses on the patient and ensures a smooth, efficient journey through the health care system.
- (c) Devising a multidisciplinary protocol which is incorporated in a pathway giving the care required for a patient admitted for breast care surgery. The pathway acts as the patient record and is a multidisciplinary document of the care given and omitted.
- (d) Using the pathway to record any variations from the planned care as a means auditing health care delivery.
- (e) Development of timely accurate patient information leaflets and cooperation card which acts as a patient record of diagnosis, treatments, and appointments.

#### Results:

- (a) Multidisciplinary teamwork
- (b) Local guidelines, protocols and patient outcomes
- (c) Pathology-specimen collection and waiting time for results
- (d) Theatre pathway including venous cannulation
- (e) Pharmacy individual medications
- (f) Audit data (2).
- (g) Information pack for patients.

Conclusion: The care pathway provides a framework for multidisciplinary cooperation to maximise patient care.

- [1] Calman Hine. 1995 A Policy Framework for Commissioning Cancer Services. D.O.H.
- [2] British Association of Surgical Oncologists. 1995. Guidelines for Surgeons in the Management of Symptomatic Breast Disease in the United Kingdom. European Journal of Surgical Oncology, Vol. 21.

302 POSTER

### Europa Donna Italian Forum: Results of a survey among the breast cancer associations

Paola Mosconi. On behalf of Europa Donna National Committee, Italy

Europa Donna is an European movement against breast cancer. In Italy, the Italian Forum has been founded in 1996 and is composed by 90 different and indipendent associations. The first collaborative research promoted by ED in our country has been a survey on the Italian associations involved in breast cancer. In a postal questionnaire the following areas were examined, structure and organization (14 questions), activities promoted (3), organizative problems in the local National Health Survey (8), and a judge on ten objectives of ED, has been sent to 213 associations. 95 associations sent back the questionnnaire completed. The results show that 73% had an indipendent centre, 59% are open all the days a week, about 20 volunteers work in each association, on average each association have worked since 15 years. Among the daily activities, 81% organize psychological support, 80% organize conference and distribute depliants to promote early diagnosis, most of them organize rehabilitation support. Results of this survey will be presented in detail and discussed in comparison to the other European Forum of ED.

303 POSTER

## Use of prevention modalities for breast cancer: A survey on 3620 self-administered questionnaires

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**Purpose:** To assess the knowledge and real use of prevention modalities for breast cancer, such as mammography and self breast examination in an unselected population.

Patients and Method: We distributed a self compilative questionnaire to people coming in several health units of different Italian regions.

3620 questionnaires were collected. Of the women filling the questionnaire, 42% had less than 40 years, 41% were housework and 24% had a low educational degree.

**Results:** Ninety-one percent and 92% of the sample knew the aims of self-breast examination and mammography respectively. However only 82% was able to perform self-breast examination and only 47% performed it regularly. Of the women performing self-breast examination, only 23% performed it monthly while 54% did occasionally. Thirty-two percent of the sample did not undergo mammography in the last 5 years, 38% perform 1–2 mammographies and 27% more than 3 examinations.

**Conclusion:** The knowledge of prevention modalities for breast cancer in this population was high, but few women really carried out these techniques.

304 POSTER

#### Care across the continuum – The Breast Care Nurse in Australia

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It has been well documented that women diagnosed with breast cancer require information and supportive care. By providing more information about treatment options, women are able to participate in treatment decisions and consequently are better able to adjust to the breast cancer diagnosis and may display less psychosocial morbidity.

Recognising that a Breast Care Nurse would be a useful addition to the multidisciplinary treatment team within the Breast Unit, this role of the Breast Care Nurse was developed in 1994. The Breast Care Nurse provides information, coordinates supportive care and case manages women undergoing treatment for breast cancer. The Breast Care Nurse makes a valuable contribution in improving care by:

- (a) Providing continuity of care to women and their families from diagnosis to follow up.
- (b) Providing information in relation to psychosocial, physical, treatment, practical, cultural and communication issues.
- (c) Provide clinical support and education within the hospital and community.
- (d) Provide counselling on family, sexuality and grief issues.