

chemotherapy treatment with chi-square analysis. AM users visited church more frequent than non-users ( $p = 0.04$ ). It was a borderline difference in the treatment intent (palliative vs adjuvant) of AM users in favor to palliative chemotherapy (65% of AM users vs 52% of non-users,  $p = 0.066$ ). 38% of pts used one AM methods, 24% – two, 15% – three, 23% – more than three. 78% of AM users took herbs, 31% – pharmacological and biologic treatment, 19% – microelements, 11% – mind-body techniques, 10% – hunger-strike, 16% – other methods. 75% of AM users trusted to doctor for 100%, 16% for 80–90%, 7% for 50%, 1% – non trust, 2% – non answer. Only 45% of users reported to oncologist about use of AM.

**Conclusions:** Prevalence of real AM use is high (60%). Herbal remedies were the widespread AM methods. Medical oncologists need to be aware that about half of their patients may not tell them about AM use.

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PUBLICATION

### Radiotherapy as a factor influencing psychological health of patients after breast conserving surgery (phase II)

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**Purpose:** Daily routine shows that anxiety and concern about radiotreatment is a factor with influence on psychological health of breast cancer patients. Beyond the description of data (phase I) aim of phase II was to identify possible influencing factors on psychological health and to find correlations and interactions between these factors based on a higher quantity of patients.

**Patients and Method:** 111 Patients participated in the phase II (age 33–84). They received two questionnaires (first and last day of radiotherapy) asking for coping strategies, psychological burden and side effects as well as surrounding factors like medical staff and rooms. Statistically significant correlations between identified factors were identified using t-test.

**Results:** The question for anxiety regarding radiotherapy allows to identify patients with a high level of treatment-related psychological burden. Patients with a low level of anxiety are significantly less concerned about expected negative effects on breast cosmesis and side effects and feel better informed than patients with high anxiety level. Also perception of treatment facilities (waiting room and treatment room) was significantly more positive.

**Conclusions:** Our results give evidence that patients with high treatment related anxiety require special attention. This underlines the importance of our phase I-result that the relation to the medical staff is an important factor in regard to reduction of treatment related psychological burden.

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PUBLICATION

### Quality of life in patients with breast cancer: A psychosocial investigation

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**Purpose:** To investigate on psychosocial problems of patients with breast cancer in Iran.

**Methods:** A hospital-based prospective study was conducted to collect data on psychosocial problems in women with breast cancer. During one year 169 breast cancer patients were identified and three months after their initial treatments they were invited to take part in the study. A 42-item questionnaire containing items on study objectives was used to collect data.

**Results:** Out of 169 breast cancer patients, 152 (90%) agreed to be interviewed. The mean age was 47 (SD = 13.4) years, the majority were married (69%) and underwent the modified radical mastectomy (83%). The main findings indicated that the majority of patients had trouble doing strenuous activities (84%), had pain in their arms and shoulders (68%), felt tense (59%), were worried (68%), felt irritable (72%), were worried about their health in the future (98%), and 43% of patients said that their physical condition and medical treatment interfered with their social life. In addition, it was found that 49% of patients had severe anxiety and 22% had severe depression symptoms.

**Conclusion:** The findings of this first study of the quality of life in patients with breast cancer in Iran is very alerting. It seems that to improve quality of life in this group of patients there is an urgent need to recognise the problem and provide a comprehensive cancer service for carrying breast cancer patients in Iran.

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PUBLICATION

### Medical treatment acceptance related to psychotherapeutical support of the oncologic patient

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**Introduction:** the psychological background of patients with cancer has been a research topic by the authors for many years. A retrospective study analyzing medical records from oncologic patients was made to evaluate whether the psychotherapeutical support modifies somehow the medical treatment acceptance.

**Patients and Methods:** 52 records from patients with solid tumors, ranging in age from 35 through 65, were evaluated in a case-control study. The medical treatment acceptance was compared between patients with any kind of psychotherapeutical support (i.e. familial and individual assessment with a minimum of 20 sessions) and those with no emotional aid at all.

**Results:** the acceptance and adhesion to medical treatment (i.e. chemotherapy, radiotherapy) was significantly better (chi square = 8.51  $p = 0.0039$ ) among patients who were helped to build a strong psychological background.

**Conclusions:** outstanding efforts are made every moment in order to defeat cancer. Out of these efforts, only a small part is dedicated to understanding the emotional aspects of the disease. The authors conclude that these aspects play a big role in its evolution and should be paid greater attention, not only for academical purposes but also for the patient's benefit.

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PUBLICATION

### Information an education programmes on breast cancer. The NCI of Naples experience

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The information and education programmes on breast cancer of the NCI of Naples are addressed both to healthy and affected by cancer women. We monthly organise series of lessons on breast diseases and the breast self-exam for the healthy women. 1002 women participated to these meetings in the last three years. Data about the psychological impact caused by these meetings on cancer early detection showed that only 3.8% didn't prefer to know, while 96.2% was more confident after the meeting. 76% of the interviewed women didn't practice the breast self-exam because of the fear and the lack of knowledge about the breast self-exam and how to do. Our Institute provides a pre- and post-operating counselling for the patients. During the pre-operating counselling the patients get to know the diagnosis and the therapeutic options in order to give the informed consent. The past-operating counselling provides a single or in groups meeting soon after the operation and another, after the hospital dismissal, with the COMITES constituted by a surgeon, an oncologist, a radiotherapist, a psychologist and one or more health operators. During this meeting the adjuvant treatment following to the result of the histological exam are communicated to the patient and his relatives. According to our experience the use of this procedure is positive infact thanks to the patient feeling that all the equipe is looking after him, there is an increase (about 45%) of the compliance to the medical treatment.

## Clinical pharmacology

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ORAL

### A phase I trial of SU5416 a novel angiogenesis inhibitor in solid tumours, incorporating MRI assessment of vascular permeability

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SU5416 (Z-3-[(2,4-dimethylpyrrol-5-yl)methylidene]-2-indolinone) is a potent inhibitor of vascular endothelial growth factor receptor signalling. In rodent xenografts treatment with SU5416 led to reduction in tumour growth