S44 Thursday 16 September 1999 Proffered Papers

to find a method of birth control but with little or no advice being given by qualified staff, and with little written information to help.

There is a need to increase awareness of the importance of contraception for patients receiving chemotherapy, amongst staff involved in their care. This may be aided by producing written guidelines for advising and prescribing contraception for patients receiving cytotoxic agents.

151 POSTER

Oncologic nursing evaluation at the Galician comunity

E. Davila, F. Díaz. Oncology nurses, Hospital Meixoeiro, Vigo, Spain

Purpose: for having a real coordination between all the nursing oncology units, we need an uniform, feasible, integral, global and personnel nursing documentation. That is why we started some workshops to define this nursing evaluation. We present our initial document.

Material and Methods: Before starting we had to define which kind of items we had to include in a consensous triptic document. At the front page were included personal datas, and at subsequents: initial evaluation, OMS toxi-cities, oncologic vigilance index, final evaluation and at the final page, the documents index. Also we included specific registraments for ache and paliative cares.

Results: as final result we elaborated the Oncologic Nursing Valoration and we started to apply it We are waiting for the first intermediate evaluation.

152 POSTER

Zoledronate, a new 3rd generation bisphosphonate: Implications for nursing practice

M. Hupkes, F. Givant. Hershey Medical Center, Hershey, PA, United States

Purpose: To give an overview of the nursing issues related to the use of Zoledronate.

Discussion: Zoledronate is a new potent 3rd generation bisphosphonate, about 500X more potent than Pamidronate. The primary mechanism of action appears to be osteoclastic inhibition. The mechanism of action in osteoblastic disease is unknown at this time. The drug is administered as a 5 minute IV influsion every 3–4 weeks. 280 patients (172 breast cancer and 108 multiple myeloma) were treated in the Phase II trial of this agent. Phase III studies comparing doses of 4 mg and 8 mg of Zoledronate with 90 mg of Pamidronate are currently in progress. Zoledronate is being evaluated for the prevention of skeletal complications of osteolytic and osteoblastic disease and for hypercalcemia of malignancy.

Analysis of the preliminary date revealed an at least equal efficacy with Pamidronate and a favorable safety profile (skeletal pain, low-grade fever and mild flu-like symptoms for 24–48 hours, following infusion were the most frequently reported events). The 5 minute infusion time is a significant advantage compared to 2–4 hour Pamidronate infusions. Less nursing time, less utilization of office space, and less time spent at the clinic for the patient are important with today's emphasis on pharmaco-economics and quality-of-life. This poster will give an overview of this therapeutic drug and the on going clinical trials and will discuss administration issues compatibility, side effects and symptom management. Finally the importance of patient education will be highlighted as it relates to this new agent.

153 POSTER

Family rooms at hospitals – Combining the advantages of the hospice and the facilities of the public hospital

H.R. Linderoth¹, C.H. Jorgensen². ¹Roskilde County Hospital, Oncology/Haematology Department, Roskilde; ²Roskilde County Hospital, Oncology/Haematology Department, Roskilde, Denmark

This project has been initiated at the Roskilde County Hospital with the aim to give the family the opportunity to be together in a family room, when the cancer patient wishes to die at the hospital. The project arises from the difficulty of integrating the needs of the distressed family with the typical frames of the hospital environment. Initially, the focus has been on families with smaller children. The dying parent patient has a need to be close to the children while these often get restless and make disturbance to other patients. This brings the healthy parent in a frustrating dilemma where he/she is forced to choose between being next to the dying patient or to leave the hospital with the children. The possibilities for the family to be together during the terminal expiration will thereby be reduced. This will further cause negative consequences for the family to work up the grief after the patient has deceased.

Inspired by study visits at the Sct. Lucas Hospice (Copenhagen) it was decided to develope a new concept at the Roskilde County Hospital. The nursing care in this concept is thought to combine the basic idea of the hospice with the frames of the public hospital. The project implies separate family rooms where the terminal cancer patient and the patient relatives has the opportunity to be together under more family-like conditions. Nursing care results from the new concept will be presented and discussed along with possible suggestions for further improvements.

154 POSTER

Management of the outpatient clinic in a breast cancer unit

G. Rubio, B. Rossetti, P. Bernasconi. Department of Surgery, Breast Unit, European Institute of Oncology Milan, Italy

Introduction: Because of the large number of patients treated in our division, a correct nurse planning of the hospitalization is mandatory. A general evaluation of the physical and pathological conditions of the patients and the schedule of diagnostic texts are necessary before the admission of the patient.

Methods: The outpatient clinic is independently run by a senior nurse of the division that is able to manage the patient work-up on the basis of the breast disease, surgical indications, preoperative exams and staging (telephone contact, exams schedule, specialist evaluations, patient's family meeting, critical analysis of the exams, discussion with medical and nurse staff, etc.).

Results: From April '98 to March '99, 2136 patients were admitted in our division for breast surgery. Four hundred and fifty-five patients out o 2136 (23%) underwent a complete work-up in the outpatient clinic. All the preoperative evaluations were done in a single day.

Conclusion: A preventive nurse evaluation of the patients allowed the optimization of the admissions and diagnostic texts, decreasing the time of the hospitalization, and the total cost of the hospital stay. This approach is also able to reduce the psychological stress of the patient.

155 POSTER

A multi-disciplinary 'outcome' round to decrease stress and burnout among Bone Marrow Transplant nurses and to promote disscussion and education; one year on

M. Stephens. Royal Marsden Hospital, Haemato-Oncology, London, United Kingdom

Patients undergoing Bone Marrow Transplant can be the most critical group of patients after Itensive Care. Extraordinairy clinical events that have the potential to cause unusually strong emotional reactions (Burns C, Harm N 1993), such as arrest or sudden haemorrage can leave nurses vunerable, upset and traumatised.

Further to undertaking a survey to ascertain how BMT nurses at a single centre dealt with stress after a critical incident, a multi-disciplinary 'outcome round' was established as a forum for disscussion and debriefing, disscussing clinical and ethical management of recently deceased patients and examining practice in each case. One year after it's initiation a srvey was undertaken to assess the effect on staff stress and satisfaction on a multi-disciplinary level.

156 POSTER

Increased willingness for organ donation in cancer patients

A. Müller¹, C. Kretschmar¹, I. Horn², M. Landenberger². ¹Clinic for Gynaecology; ²Department of Nursing Science, Martin-Luther-University (MLU), Halle, Germany

Purpose: New approaches to improve public relations were investigated by the MLU-study group "organ donation".

Methods: We had to develop a patients questionaire for optimization of nursing and quality management. The 18 question among other things read as follows: "Would You agree to organ donation to help other people?" The patients could choose from 5 suggestions. Among other gynaecological patients 50 cancer patients were questioned.

Results: Together with other interesting results we registered a promt willingness for organ donation in 28% of cancer patients. This readyness of unfortunately for donation unfit patients is as 5 times higher as in overall germany average (5%).

Conclusion: Lack of donated organs represents a world-wide problem. Our results suggest a new approach to enhance donation willingness. We