

manage the emotional aspects of the nurses' work: Emotional Shielding through professional shielding or cold shielding; Emotional Processing through chatting, confirmation seeking, self-reflecting, or ruminating; and Emotional Postponing through storing or stashing. Emotional Competence is a property of Emotional Survival that explains how well emotions are handled since there are more or less adequate ways of dealing with the risk of being emotionally overloaded.

Conclusions: The grounded theory Striving for Emotional Survival can be useful in the nurses' daily work and provides a comprehensive framework for understanding how emotional difficulties are dealt with. We suggest that health care organizations encourage self-care, prioritize time to talk and offer counseling to nursing staff with emotionally difficult working conditions.

1599

POSTER

Severe sepsis – a major complication in the treatment of cancer

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Background and Rationale for Audit: One in three people will develop cancer with an increasing number receiving multi-modality treatment and going on to require intensive care therapy. Severe sepsis remains a major cause of mortality and morbidity in the intensive Care environment, and therefore an important challenge for nursing (Dolan 2003). The main cause of death for patients admitted to non-coronary Intensive Care Units (ITU) has been shown to be severe sepsis (Edbrooke et al 1999). Specialist cancer ITU have the rare opportunity to monitor and treat sepsis in those with a cancer diagnosis. The Royal Marsden Hospital in London has the United Kingdom's only dedicated Cancer ITU.

Aims: This presentation will start with an overview of the current sepsis literature. It will then describe a prospective audit that was undertaken in 2003–2004 on the Cancer ITU in relation to sepsis. The purpose of the audit was to augment our understanding of the pattern of severe sepsis in cancer patients admitted to an ITU.

Material:

- Cancer diagnosis
- Stage of disease
- Relevant pathogenic data where available
- Outcome data for each patient
- Current microbiological causes
- Implications for practice

Method of Audit: Retrospective case note review of epidemiology of sepsis in a cancer ITU over a period of one year

Results:

- Coagulase Negative Staphylococcus was evident as the major causative microbiological factor in severe sepsis. The respiratory tract was evident as the major source for sepsis in conjunction with central access lines.
- The Candida family also played a major role in infections within this patient group. Improved infection control practice in the clinical environment put into practice in order to reduce the risk of severe sepsis. Further education and support for nursing staff implemented. Unmet challenges for current cancer nursing practice will be further highlighted.

1600

POSTER

Prolonging the infusion time for an implantable hepatic artery infusion pump

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Background: The Codman® Model 3000 Constant Flow Implantable Pump with Bolus Safety Valve, hereafter called "pump" is an implantable drug delivery device with an attached silicone rubber catheter intended for long-term delivery of medication to various body parts. In our institution, the current use is to provide a means for hepatic artery infusion. Because the pump has a constant flow rate, a continuous infusion of floxuridine (FUDR) to the liver can be achieved. The standard procedure is to alternate 2-week infusions of floxuridine with 2 week infusions of heparinized saline.

Even if the patient is not receiving chemotherapy, the pump must be refilled every 2 weeks. This can create problems for patients, many of whom must travel long distances for a pump refill. Resources in the community are unfamiliar with the pump and are reluctant to assume responsibility for pump refill. For these reasons, we sought a means of prolonging infusion times.

The predecessor to this model pump was sometimes filled with glycerin to prolong infusion times. There is anecdotal evidence that infusion times in the current pump can be prolonged by filling the pump with 30 ml glycerin. We performed a pilot study to investigate this use.

Research Question: Is filling the Constant Flow 3000 Implantable Pump with 30 ml glycerin a safe and effective method of prolonging infusion time?

Sub-Questions:

1. Will using glycerin result in hepatic artery thrombosis?
2. Will using glycerin result in infected pumps?
3. Can the pump be maintained every six weeks with a glycerin refill?

Procedure: Ten patients were treated as follows:

- 2 patients received glycerin over 2 weeks
- 2 patients received glycerin over 4 weeks
- 6 patients received glycerin over 6 weeks

End Points: Patients were assessed at each visit for:

1. Pump rate: 30 ml minus return volume divided by number of days = ml/day.
2. Thrombosis: May be detected by no or sluggish flow of pump.
3. Dry pump: no infusate returned.
4. Infection.

Conclusions: The average infusion rate was 0.437 mL/day. No patient developed a thrombosis. All pumps returned infusate when refilled. No patient developed an infection. We concluded that filling the pump with 30 mL glycerin every six weeks is a safe and effective procedure.

1601

POSTER

The most frequent nutritional problems of the patients of chemo- and radiotherapy

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Introduction: Chemo- and radiotherapy can have similar side-effects, one of which can be loss of weight. This may worsen the prognosis of cancer and tolerance of side-effects. The aim of study was to find out the most frequent side effects of chemo- and radiotherapy and their connection with nutrition in general as well as the preferences of nutrition.

Material and Methods: The study was carried out hospital in Hematology Oncology Clinic of the Tartu University during 01.03.–14.04.2002. 75 patients from the first and second department of surgery, radiotherapy and hematology department were included. Data were obtained by using single self-reported questionnaires. Following questions were presented:

1. What kind of nursing problems the patients on chemo- and radiotherapy observe?
2. What is the correlation between elongation of the period of radiation and frequency and severity of side-effects?
3. What are the nutritional preferences of the patients on chemotherapy and on radiotherapy?

Results: From our study following results can be presented. The most frequent side-effects connected with nutrition were nausea, stomatitis and anorexia. From the patients to whom chemotherapy caused strong nausea 35% had nausea and anorexia, 31% stomatitis in every day of treatment. From those patients 38% preferred to eat fruits, 35% vegetables and low fat soups. From the patients of radiotherapy 30% had anorexia in every day of treatment. Members of this group chose many-sided food – fish, meat, fruits, vegetables and low-fat soups. From the patients to whom chemotherapy caused moderate or mild nausea 15% had nausea, 19% stomatitis and 23% anorexia. Clear food preferences of this group were not obvious. There was a strong positive correlation between the number of days of radiation and frequency of nausea.

Conclusions:

1. The most frequent nutritional problems for the patients of chemo- and radiotherapy were nausea, stomatitis and anorexia.
2. The patients of chemotherapy preferred to eat fruit, vegetables and low-fat soups. The patients of radiotherapy preferred to eat fish, meat, fruits, vegetables and low-fat soups.
3. There was a strong positive correlation between the number of days of radiation and frequency of nausea. Medium positive correlation was found between the days of radiation and severity of diarrhoea.

1602

POSTER

Nurses' perception of parental participation on oncopediatric department

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Background: The admission of a child on oncopediatric department is a very extreme and stressful situation for entire family. It will cause adverse effects on a child's well being and stress to the parents.

Objectives: To determine: 1. How parents experience the admission of their child on oncopediatric department. 2. Which conditions are needed for parental participation 3. What is the nurses' perception regarding parental participation.

Material and methods: Subjects were 16 nurses (N=16), aged between 22 and 54 years, at Oncopediatric Department. We used the method of interview, a questionnaire with 10 opened and closed questions.

Results: We identified the following issues: Parents are essential in the well being of their child; Parents' participation is necessary for