**Results:** The median age of the interviewees was 80 years and the median time of diagnosis was 1992, with a range of 1 to 8 co-morbidities. Key themes from the interviews indicate that the impact of breast cancer is long lasting and continues to affect women's lives for many years following treatment. A core finding throughout the research has been the concept of "invisibility", and how this group of older women felt that their preferences and needs were neglected and marginalised from initial diagnosis to post operative living. This included failure to disclose breast cancer diagnosis, inadequate provision of information concerning post mastectomy care, reconstruction surgery, bras and prostheses. Ongoing issues relating to increasing comorbidity were not been addressed, such as the impact of arthritis on the fitting and wearing of prostheses. The women also identified a need for wider social understanding of the consequences of breast cancer treatment, particularly the visual impact of mastectomy.

**Conclusion:** The key themes from this study indicate that older women confront a range of exclusionary practices throughout their experience of breast cancer. In identifying these practices, this study suggests a range of information and support mechanisms to improve these experiences, such as adequate provision of information and options for treatment, so older women can be adequately prepared to make their own decisions about treatment and ongoing care. Older women's support needs should be examined in the light of their other health conditions rather than as 'older' people.

**4225** POSTER

### Hematopoeitic stem cell donation: the sibling emotional experience

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Allogeneic stem cell transplantation is an intensive and demanding process with unpredictable outcomes that poses physical and psychological challenges for the recipients and their families. Siblings are often the most suitable donors. Although they represent a major group of stem cell donors, information regarding the sibling donor emotional experience is scarce. The aims of this study are to explore the psychological and emotional aspects of sibling donor's donation and the meaning of their experience.

**Methods:** adult sibling donors were retrospectively evaluated by a qualitative questionnaire. The donors were contacted by phone and asked to fill an anonymous questionnaire and return it by mail. Most donors donated peripheral stem cells between the years 1997–2007. At the time of contact all recipients were alive with or without complications.

**Results:** A total of 49 questionnaires were evaluated. Age of donors ranged between 17−73 years at time of contact. Four main themes emerged form the analysis of the questionnaires. 1. Feelings towards the donation. They felt happy that they matched their sibling and most of them had no doubts regarding the donation. 2. Feelings towards the recipient. After donation, they felt closer to their siblings with a great amount of responsibility and obligation towards them. 3. Feelings towards themselves as donors. The donation made them feel good about themselves. 4. Meaning of the donation. Donors thought that the donation changed the way they viewed life and added meaning to their life.

**Conclusions:** This study provides an insight into the emotional and psychological experience of sibling donors with a successful transplant. Overall they had a positive response to the donation experience. Further research should evaluate family dynamics when the donor or the recipients are children. Another important issue is to study the association between donors experience when their recipient has not survived.

**4226** POSTER

### The impacts and adjustment of the spouse of head and neck cancer patient in Taiwan

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**Purpose:** When the patient is diagnosed with head and neck cancer, the family's life changes. This study is a part of a project focused on family centered care for head and neck cancer patients and their family members in Taiwan. The aim of this study is to understand the impacts and adjustment of the spouse of the head and neck cancer throughout the entire course of anticancer treatment.

**Methods:** A descriptive qualitative design was used, with semi-structured, face-to-face, and in-depth interviews. Nineteen subjects (17 women and 2 men) whose spouses were diagnosed with head and neck cancer were recruited from a radiation-oncology outpatient clinic at a medical center in northern Taiwan. All patients had completed their treatment. The patients were stationary in terms of tumor status. Data were collected through individual, tape-recorded interviews and observations. Transcripts were analyzed by content analysis for emerging themes and concepts.

**Results:** Subjects described six themes of impacts from the analysis: (i) dread of loss their spouses due to cancer, (ii) financial problem, (iii) caregiver's burden while undergoing anticancer treatment, (iv) overload in parenting, (v) unmet information need to making medical decision, and (vi) changes in plans for life. Eight themes of adjustment to the impacts were described: (i) changes in roles in family: from house keeper to economical provider, (ii) searching for his/her own support: from other family members or friends, (iii) changes in relationship with children, (iv) adjustment of plans of life, (v) adjustment of his/her own characteristics, (vi) changes in life style: more health seeking behaviors, (vii) adjustment of interpersonal relationship, and (viii) searching for the meaning of life.

**Conclusion:** The results of this study have shown that spouses of patients with head and neck cancer are distressed due to the impacts of their spouses' disease. Facing the impacts of all dimensions of the family's lives, spouses of patients with head and neck cancer have to adjust their roles in family, seeking for emotional, economical, and social support, and search for the meaning of life. The distress and impacts of the spouse must be recognized and addressed by health care professionals. More studies are needed for the development of effective interventions.

**4227** POSTER

### Finding contentment after prophylactic interventions in women with BRCA1 or BRCA2 mutations

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**Purpose:** To describe the decision-making process for women who are BRCA1 or BRCA2 mutation carriers and choose to undergo a prophylactic operation.

**Method:** A qualitative cross-section analysis in which eleven women are interviewed who have undergone genetic screening for cancer at Sahlgrenska University Hospital in Gothenburg, Sweden. The material has been subjected to qualitative content analysis.

**Results:** The decision-making process is part of a time flow in which various components stand out as important conditions that enable decisions to be made about prophylactic operations:

*Threat against life*, which comprises both a subjective threat in the form of the woman's familial history and an objective threat in the form of the results of the genetic testing.

*Time – a space for manageability*, a meaningful time during which both internal and external resources provide support for the woman in her process.

*The experience and insight that the woman is at a crossroads* where she has an opportunity to make a choice, which means that she is given *the opportunity to choose life*. Many times there will be a specific event that has a very strong effect on the woman and facilitates the decision to have a prophylactic operation.

*Finding contentment* is the theme that deals with where the woman finds herself today, and gives expression to what has come of the process.

**4228** POSTER

### Homecare – a way to care for cancer patients

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**Background:** Italy has a National Health Service for general homecare (diagnostic tests, medications, wound care, etc) and ADI that means Integral Home Care for chronic and cancer pts, a service carried out by physicians and nurses plus social and rehabilitation assistance. Home care is defined by WHO as the ability of providing, at the patients home those services and equipment that help maintaining the highest level of their wellbeing, health and body functions. Carrara in Tuscany, has 65.760 inhabitants and the incidence of cancer is high. Hospitalisation of cancer pts is rapidly decreasing due: 1) to hospitals cutting costs, 2) the strong desire of pts to be cared for at their home 3)the lack of hospices. Our team of 20 nurses covers five districts including mountain villages totalling 71.29 $km^2$ cares for pts with all kind of diseases. GOALS Our motto: "Working together towards a common vision, having the ability to direct each individual action towards a common goal". We identify pts needs, judge the likely terminal phase and the extent of care. We evaluate the pts and their families' appreciation of the care received.

**Materials and Methods:** Observations and the actions taken are written on an individual “patient schedule” at his/her home and include Karnofsky (KPS) test and Scale of Norton.

**Results:** In ADI we cared for about 200 pts, 50% of whom were cancer pts, females 53%, males 47%, their age range was 45−90. Most frequent diseases: lung, breast, colon-rectal, glioblastom. 20% needed supportive care because of cachexia, 80% needed palliative care (our actions: we establish psychological support, pain control, intravenous hydration, supply medicines, control their wellbeing, and see to their welfare both social and within their family. The percentage that died at their home has been high. The medium score of KPS and Scale of Norton starting ADI were 60 and 18.

**Conclusion:** Cancer pts and their families receiving ADI care described us as motivated and professional nurses with the special qualities of compassion, equanimity, moderation, and with the ability of communication and most importantly reassurance. Cancer pts are the fuel that allows us, common people, to attain uncommon results.

**4229** POSTER

### Danish webbased network for women treated for cervical cancer

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**Background:** Initiated by a former cancer patient, a group of organizations including departments from Copenhagen University Hospital, three patient organizations and the Danish eHealth Portal (sundhed.dk) established national web based networks for six different diseases in January 2008. The networks were established collectively as a one-year pilot study, and one of these networks iwas for women during and after treatment for cervical cancer. The purpose was to give the patients this extra opportunity to establish social support amongst each others, and to share knowledge about their illness, increase options to self efficacy and life style as part of daily living and rehabilitation during and after cervical cancer.

**Materials:** The design of the network site for cervical cancer patients was formed by a multidisciplinary group at the Copenhagen University Hospital based on a focus group interview with former cervical cancer patients, discussions with staff at different wards in the hospital, and with the web group organizing and running the Danish Cancer Society website. The website had various features such as a “Discussion forum”, where experiences were shared between patients, and issues were revealed and often resolved and a forum “Ask a professional staff member”, where different kinds of questions were answered by a multidisciplinary team from the hospital. The web based network was run by an administrator and a moderator, and was evaluated by an external evaluation facility, the Danish Institute for Health Services Research (DSI) in December 2008.

**Results:** A certain number of users were required for the network to be “alive” and to have a dynamic site. The features where users could ask professionals, write “My personal story”, and find information from the five cancer centres in Denmark were especially valuable for the users. The functionality of the network was stable and secure, and no spam or unpleasant episodes were reported during the pilot study. An update and further development of the network is needed as some functions have not been used much (blog and chat). Too few relatives used the website to conclude anything about that. Some questions and remarks posted on the site have caused the wards to adjust clinical practice and patient information.

**Conclusions:** A web based network gives an opportunity for information and answering questions from patients and survivors after cervical cancer. Rehabilitation and redefining daily living seems to be improved by a web based network.

**4230** POSTER

### The contribution of nurses in the adaptative process of an adolescent with cancer

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**Background:** The survivors of teenagers suffering from an oncologic disease has been improve due to technological and scientific advances, making available new therapeutic courses and early diagnosis. The IARC (International Agency for Research on Cancer) indicates stress that investigation line must include psychosocial needs of the cancer patients in order to develop the proper preventive strategies (IARC, 2003). This study has the objective of understanding the adapting process of teenage cancer patients as well as to recognize how nurses became a major help during the different processes.

**Materials and Methods:** This study of exploratory-descriptive nature, the study has a qualitative methodological approach Eight participants integrated the sample of patients with oncologic disease experiences that agreed to participate in this study. All patients were intervied and queried.

**Results:** For the analysis, the data was organized in six categories: Personal meaning of cancer; Psychological repercussions; Physical repercussions; Social repercussions; Adapting strategies; Nursing Contributions. We identified several feelings, from fear to uncertainty to hope as they went along all phases of the disease. Moreover, it was possible to find out the contribution of Nursing to the participants throughout these stages; acting as an important supporting source in their adaptation. Educational and helping functions of nurses were defined as key factors in the teenagers' trajectories.

**Conclusions:** The study results allow us to identify difficulties and needs felt during the teenage years, enhancing issues that need intervention in order to improve the quality of life of teenagers during their treatment course.

**4231** POSTER

### Psychological problems of survivate of paediatric cancer patients in their adolescence – an experience from eastern India

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**Background:** Adolescents who have been treated for childhood cancer not only have the substantial physical, cognitive, emotional and interpersonal problems but also have the added burden of integration a life threatening disease into their experiences. Persistent body image concerns somatic preoccupation, disruptions in heterosexual relationships and deficit in social competence have all been documented in this age group. The aim of our study was to document the psychological problems of adolescents survivors of childhood cancer in a developing country like India.

**Materials & Method:** We assessed 400 survivors childhood cancer patients in their adolescent period with their families in the Psycho oncology department of Netaji Subhas Chandra Bose Cancer Research Institute during period from July to December 2008. We examined their family functioning, mental health, self-esteem, and social competence.

**Result:** Total 325 patients (81.25%) had excellent psychological functioning without serious social issues. They expressed a positive effect of their illness. Total 30 patients (7.5%) had expressed a little depression. Thirty-five patients (8.75%) of the teenagers thought that their families were less attentive than the case with their counterparts. These adolescents were maladjusted to the society also. Ten patients (2.5%) were reluctant to command. Majority of the patients who had psychological disturbances, responded well to psychotherapy.

**Conclusion:** Almost 20% of the childhood cancer survivors had psychological problems in their adolescents. Hence we recommend psychotherapy strongly in their adolescent period in frequent intervals.

**4232** POSTER

### Cognitive expectations of cancer patients receiving chemotherapy over time – an integrative review

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This paper is a report of an integrative review of patient's cognitive expectations during cancer chemotherapy process.

**Background:** Patient's cognitive expectations (including information needs and knowledge expectations) are a good base for patient education. They help the educator to plan the education on individual basis. Earlier studies have shown that cognitive expectations change during the care process and thus their evaluation should also be continuous. The purpose of this integrative review was to evaluate the current literature on the topic.

**Material and Methods:** Searches were conducted on studies from 1950 to March 2009 through Medline, CINAHL, ERIC and Cochrane Library databases. The data were analysed by a validated scoring system for review purposes.

**Results:** In all, 234 papers were identified from the initial search, with 12 papers meeting the inclusion criteria.

**Conclusion:** Chemotherapy patient's cognitive expectations vary overtime. In the beginning patients cognitive expectations are broad. Patients want all possible information about their chemotherapy treatment. In the midway of the treatment process, cognitive expectations focus to daily living and