expander and Implant reconstruction in 16. Contralateral mastopexy in 8 patients and augmentation in 5.

All patients had seen clinical photographs and contacted other patients. 25 chose to meet patients and had seen and felt the reconstruction. All preferred meeting (25) or talking (5) to patients to simply seeing clinical photographs. Some of the comments made were – "could not imagine how it would actually look on a real person", "have better understanding the difficult decision making process", "the buddy system was better than looking at photographs" and "positive feedback about the surgeon".

Conclusion: A key part of the decision making process is support.

Conclusion: A key part of the decision making process is support. Patients are often the best advocates for others at a time of great personal anguish. From this study we can conclude that women prefer support groups to looking at photographs in order to facilitate their decision for reconstruction.

Wednesday, 24 March 2010

18:15-19:15

POSTER SESSION

Advocacy and education

66 Poster The cariatide study: evaluation of the impact of educational material

on the compliance and persistence rates to adjuvant aromatase inhibitor medication in postmenopausal breast cancer patients: baseline data

P. Neven¹, M. Tanner², R. Kreienberg³, L. Atkins⁴, M. Marty⁵, A. Chioti⁶, C. Markopoulos⁷. ¹KUL, Gynecol. Onco., Leuven, Belgium; ²Tampere Univesity, Chemo and Onco., Tamper, Finland; ³Universitats-Frauenklinik, Gynecology, Ulm, Germany; ⁴King's College, Institute of Psychiatry, London, United Kingdom; ⁵Hopital St Louis, Dept of Medical Oncology, Paris, France; ⁶AstraZeneca, Medical, Brussels, Belgium; ⁷Athens University Medical School, Breast Unit, Athens, Greece

Rationale: Patient adherence to long-term medication is a multidimensional problem despite the demonstrated efficacy of adjuvant Aromatase Inhibitor (AI) treatment of early breast cancer. Providing educational material may help patients to be more compliant to treatment; subsequently, understanding the reasons of non-adherence may lead to the design of more adequate interventions aimed at improving patient's compliance to long term hormonal therapy.

Methods: This global observational study (NCT00681122) is conducted on 2,758 patients in 18 countries for a period of 2 years and investigates whether educational material (EM) could influence patient's motivation and behaviour, resulting in improved treatment adherence. Patients were randomised to GroupA: Standard Therapy and GroupB: Standard Therapy+EM. Patients in GroupB receive different packages of EM with information on characteristics of early breast cancer, risk of recurrence, benefits and risks of adjuvant AI treatment, coping with and adherence to long-term hormonal medication and supporting of active and healthy lifestyle.

Outcome variables: (1) Compliance rate for the adjuvant AI medication will be analysed at one year based on the subject's assessment. (2) Persistence rate will be evaluated for the first time after one year and a second time after two years. (3) Reasons for and time to treatment discontinuation of AI will be analysed. Specialized questionnaires are used to evaluate medication adherence and the patient's feelings and beliefs on the disease and therapy (EORTC-INPATSAT-32, OPTIMA-X, GHQ-12, FACT-ES, compliance questionnaire, and EM feedback questionnaire in Group B patients).

Questionnaire	Mean (SD) Score	
	Group A	Group B
EORTC-INPATSAT-32		
Investigator	76.8 (17.0)	76.6 (17.2)
Patient	77.2 (20.0)	77.8 (20.1)
GHQ-12	3.3 (3.4)	3.1 (3.2)

Results: Both groups were well-balanced for all baseline characteristics (mean age 63 yrs; mean age at menopause 49 yrs;15% of groupA patients and 14% of groupB had a history of hormone replacement therapy. Mean scores for specialized questionnaires used at baseline show a relatively good well-being (GHQ-12) and a high level of care perceived by both patient and investigator in both groups (table 1). Study accrual was completed in March 2009; preliminary results after one-year follow-up are expected mid-2010 and the study is expected to be completed by mid-2011.

67 Poster

Creativity and assertiveness in advancing the fight against breast cancer on the national level

M. Ziv¹. ¹Israel Cancer Association, Director General, Givatayim, Israel

Background: Breast cancer is the most prevalent cancer disease in Israel. This is why ICA is placing an emphasis on leading a struggle against Breast cancer on all fronts – by promoting research, prevention, and early detection, by improving treatment modalities and rehabilitation, as well as by promoting patient rights.

by promoting patient rights.

Results: We will describe the ways in which we, as a voluntary organization, have succeeded in initiating and implementing a National Mammography Screening program, as well as in promoting the construction of comprehensive Breast Care centers, and creating a support network of breast care nurses and social workers accompanied by "Reach to Recovery" volunteers, who all operate nationwide.

We will present the measures we took to break the "conspiracy of silence" on this issue, while creatively recruiting and mobilizing the various media channels

Conclusions: By setting goals and priorities, a voluntary organization is able to initiate and implement projects at the national level. Assertiveness and perseverance are qualities required for lobbying and advocacy efforts, in addition to creativeness in recruiting the media to set the right atmosphere crucial to meeting specific goals.

68 Poster

Training of (breast) radiographers in Flanders: education at Hogeschool-Universiteit Brussel (Belgium)

E. Bogaert¹, H. Mol¹, D. De Backer¹. ¹Hogeschool-Universiteit Brussel, Gezondheidszorg – Medische Beeldvorming, Brussel, Belgium

Background: Correct positioning of the breast is one of the major points in guaranteeing a mammogram of high diagnostic accuracy not only in mammography diagnostics but also during a breast screening programme. Herein, the high level of skills, the ability of reassuring and informing the woman involved in the screening program by the radiographer is of great importance. This study gives an overview of the training of radiographers in Flanders (Belgium), and especially focuses on their future role in breast imaging.

Material and Methods: The current situation concerning training of breast radiographers in Flanders is compared with European Guidelines and implementation in neighbouring countries. Bachelors graduated at Hogeschool-Universiteit Brussel (HUB), currently working in breast care were questioned about the value of the training they received and the needs as emerging in daily clinical practice, regarding practical, social and theoretical education.

Results: The lectures, offered by HUB, covers a respectable part of the standards for education required by the European Guidelines, both in number of documented training hours and content. Theoretical aspects are lectured by skilled professionals. Social aspects are made clear through patient testimonies and a breast-oncology-psychologist. However, it has appeared that offering internship in clinical environment, especially for male students is not easy. Within the current training program, positioning skills at standard (Cranio-Caudal or Medio-Laterial Oblique/Latero-Medial Oblique views or more advanced projections should grow from an introductory demonstration-session to an intensive one to one student/trainer method.

Conclusions: An analysis of this questionnaire will contribute to the evolution of this three year bachelor program. The program will not only cover a general education as radiographer but will also answer to the demanding European Guidelines for breast radiographers.

69 Poster Systematic education of adjuvant treated breast cancer patients and their relatives – does it make a difference?

E. Ellegaard¹, L. Hindsgaul¹, A. Knoop¹. ¹Odense University Hospital, Oncology Department, Odense C, Denmark

Background: Introduction of new modalities in the adjuvant treatment of primary breast cancer treatments, such as taxanes, aromataseinhibitors and targeted treatments has made a major improvement in recurrence-free and overall-survival. But, with the aggressive treatments, patients experience more acute and long term side effects such as fatigue, menopausal and sexual problems, depression, joint and muscle pain and neuropathy – on top of the physical alteration and anxiety of relapse.

Material and Methods: All breast cancer patients treated with adjuvant chemotherapy in a single University Department of Oncology was invited to participate in systematic education between April 2006 and September 2009, together with their relatives. The curriculum included topics regarding breast cancer knowledge, basic psychological reactions, diet, social and physical rehabilitation. A breast cancer specialist, a social worker, a