

are undergoing CT for hematological malignancies. Initial results show a difference in pts' report about periods of fatigue occurrence and the reasons for their fatigue. The pts' experience will be the basis to identify specific effective interventions in order to improve quality of life for pts undergoing CT.

1331 POSTER
BENEFITS OF EARLY MOBILIZATION AND OF DINNER ON THE DAY OF SURGERY IN PATIENTS THAT UNDERWENT QUADRANTECTOMY AND MASTECTOMY

F. Spagnolo, A. Metica, G. Sasso, L. Giordano, S. Bianchi
 Istituto Nazionale dei Tumori, via Venezian 120100 Milano, Italy

The study considers 171 patients that have undergone an operation for breast cancer at the Istituto Nazionale dei Tumori from May 1994 to March 1995. Benefits regarding early mobilization and dinner on the day of surgery have been evaluated. Mean age is 50 (from 20 years old to 80): 107 patients have undergone quadrantectomy and lymphoadenectomy, 64 Patey mastectomy. Of the patients that had conservative surgery 48 got out of bed after.

Early mobilization (getting up on the day of surgery) reduced the need of pain medication by 20%. This happened in both groups of patients considered. Eating (light dinner) on the evening of surgery eliminated completely cases of fainting.

1332 POSTER
OPTIMUM CARE FOR THE ORAL MUCOSA IN CHILDREN AND ADOLESCENTS UNDER CHEMOTHERAPY

K. Thielmann¹, H. Voss¹, M. Kunze¹, L. Schaumburg¹, Th. Wygold¹, M. Bose², K. Olbing², K. Otr², H. Jürgens¹

¹University Hospital, Department of Ped. Oncology

²University Hospital, Department of Operative Dentistry, 48129 Münster, Germany

Three different programs for protection of the oral mucosa were examined in 30 children and adolescents undergoing cytostatic therapy. The programs consisted of (a) a liquid of 0.1% Hexeditin + a soluble combination of an extract of rhubarb, salicylic acid and ethanol, (b) a liquid of 0.1% chlorhexidine digluconate and sugar-free chewing gum, and (c) a liquid of amino fluoride/tin fluoride and sugarfree chewing gum. All three programs seemed to protect the oral mucosa equally well. The programs also protected the teeth from increased plaque coverage in 69–90% of all examinations. However, there were striking differences in the acceptance of the three programs. Those containing sugarfree chewing gum were preferred by 83% of the examined children, frequently because of the good taste and the easy way of application. A reason for some patients to decline a program was the painful biting taste that liquids sometimes had on irritable or ulcerative districts of the mucosa. Good compliance is important and essential for protecting the oral mucosa of an immunocompromised child. Different forms of oral disinfection work well, but their acceptance depends on their taste and painless application. The combination of a mild disinfective solution and sugar-free chewing gum is recommended.

1333 POSTER
THE ROLE OF THE NURSE IN RADIOTHERAPY: UNDERVALUED?

E.M. Wells

Radiotherapy Department, Churchill Hospital, Oxford, U.K.

Over 50% of all cancer patients receive radiotherapy at some stage of their disease, the majority as out-patients. Few radiotherapy departments employ oncology trained nurses and as a result, most patients complete treatment without any nursing assessment or intervention.

The emotional and physical distress associated with radiotherapy is well documented and there is enormous potential for nursing involvement with this patient group. However, the role of the nurse in radiotherapy is poorly defined and given limited recognition. The glamour and specialism in cancer nursing is most often attached to the high-tech,

intensive aspects of medical oncology, not to what is inaccurately seen as 'bread and butter' radiotherapy care. Misunderstandings about radiotherapy care are common; evidence of nursing research is particularly lacking.

This paper demonstrates and argues for the unique contribution which nurses can make to the care of radiotherapy patients; assessment of radiation reactions, skin care management, innovative symptom relief, information and support, nurse-led clinics. The complex needs of patients receiving this major treatment modality have been neglected; radiotherapy nurses now need to act.

1334 POSTER
THE USE OF ACTION RESEARCH STRATEGY TO IMPROVE NURSING CARE PLANNING AND DOCUMENTATION IN AN ACUTE CANCER HOSPITAL TRUST

E. Williams

Christie Hospital NHS Trust, Wilmslow Road, Manchester, M20 4BX, U.K.

The assessment, planning, implementation and evaluation of individualized nursing care (The Nursing Process) by nurses in an Acute Cancer Care Trust (Christie Hospital N.H.S. Trust) was affected by changes in nursing practice which were introduced to the profession over time, for example: the use of nursing models, the introduction of patient's charter and the concept of the "named nurse". This presentation illustrates the use of action research methodology to manage improvements and a variety of research strategies used, are described, which include: soft systems methodology, (Checkland and Scholes 1993) qualitative, and quantitative research strategies, the validity of the action research was addressed by triangulation. This project improved the quality of patient care documentation to meet both legal and professional requirements.

Checkland P.B. and Scholes J., *Soft systems methodology in action*, London, Wiley, 1993.

1335 POSTER
CONTEMPORARY RADIOTHERAPY AND CARE OF PATIENTS DURING TREATMENT WITH STATED THERAPY WITH LOCALLY ADVANCED ESOPHAGUS CANCER

R. Živanović, M. Jovanović, V. Simić, B. Marlinović

Institut za onkologiju i radiologiju Srbije, 11000 Belgrade, Yugoslavia

Radiotherapy is the classical method of treatment of locally advanced esophagus cancer with high symptomatic effect, but with treatment results without survival, or rarely three years at least. Due to anatomic localization of the esophagus, surrounding structures often limit radiotherapeutical doses on transcutaneous machines and in order to apply greater doses, saving surrounding healthy tissues. Microselectron for treatment of this type of cancer was introduced at our institute, in accordance with development of contemporary radiotherapeutical technique. *Patients and methods:* Endoluminal radiotherapy alone, or in combination with a transcutaneous one. For treatment of this type of cancer we introduced it at the beginning of 1993, and 21 patients have been treated by now. The most common localization was in the upper and medium toracal part of the esophagus and advanced tumors of medium length of 8 cm were in question. Almost all patients could swallow only liquid food. Endoluminal air therapy was applied most frequently in three fractions over seven days with doses of 7 Gy. Most patients were parallel treated with transcutaneous air therapy on mediastinum with dose of 45 Gy in 4.5 weeks. Mainly middle aged patients (57 years old) of male sex were treated. A nurse, as part of a team, takes part in the preparation of patients and necessary instruments and material for radiation. Endoluminal air therapy is most often applied without anesthesia with necessary premedication: Baralgin, Bensedin, Attopin. Upon application of probe (flexible catheter) and radiographic verification of its position (Simulator) radiological physician and radiotherapeutist determine probe length and dose. Upon completion of the treatment, the probe is pulled out and the patient, with accompanying letter and council, is dismissed from hospital and transferred to his department.