through measures which include a clear strategy to develop their educational needs, participation in a joint research group with the local academic institution, ward discussion groups and regular contact with an experienced researcher.

1433

Realising the benefits of multiprofessional collaboration in research

M.I. Fitch. Toronto-Sunnybrook Regional Cancer Centre, Toronto, Canada

This presentation will explore the benefits of multidisciplinary or interdisciplinary collaboration in research. Collaborate is defined as working together or acting jointly, especially in works of literature, art and science. Collaborative research endeavours often pool the resources of any of a variety of researchers, agencies, scientists, clinicians and representatives from different disciplines. They frequently involve a team approach in which the team is often composed of persons with different levels of skill and various clinical interests. Collaboration, can, among other benefits, maximize the combined expertise, skills and resources of the team members. It provides a means to solve problems of limited resources (e.g., time, money, access to subjects) and access to qualified personnel. It may also serve to stimulate productivity and creativity. Collaborative research endeavours may take different forms. However, successful collaboration requires sustained and focused effort. This presentation will illustrate the benefits of collaborative research using examples from a program of nursing research and will highlight strategies to consider in building multidisciplinary collaborative research endeavours.

1434

Developments in consumer involvement in cancer research

J. Bradburn. 2 Cedar Way, Berkhamsted, Herts, United Kingdom

The presentation outlines the developments in consumer involvement in cancer research. It's growth in cancer research has been driven by UK health policy(1). Consumer representation on cancer research committees together with training and support has been endorsed by a recent Govern-

ment report(2) and has actively promoted through Consumer Involvement in NHS Research(3). In future cancer research in the UK will be co-ordinated through the National Cancer Research Institute (NCRI) and a National Cancer Research Network (NCRN). The NCRI has a Consumer Liaison Group to advise on consumer involvement.

Consumers have been involved in cancer research in the UK a number of ways:

- Identifying research topics
- Input into the design of trail protocols
- Designing and undertaking research
- Peer review
- Recruiting patients to trials

Consumers are involved in research as decision-makers rather than simply participants(4). However there is a need for capacity building among consumers to enable them to engage with researchers as equals and to influence the research agenda rather than as a tokenistic guesture(5). The presentation will describe recent initiatives taken in the UK to enable user representatives to access the support they need including training and give guidance on ways in which participation can be taken forward(6).

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Workshop: English

1435

Sexuality issues in cancer care

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Every cancer treatment affects organs or organ systems which may result in change(s) in body function. This change in function can affect sexuality and sexual behaviour. Although sex-specific changes that can occur have been present in the literature for many years, patients are often not well informed and are coping with these changes alone or with their partner

without support. Patients will often not discuss problems of a sexual nature with health professionals unless the professional initiates the discussion.

Education on basic sexuality and the effect of cancer treatments on sexuality is missing from many curricula, so nurses are often not confident with their knowledge base and frequently do not address sexuality during initial nursing assessments or patient information giving sessions.

This interactive symposium will give an overview of sex-specific changes following cancer treatments and focus in on two changes that have specific implications for long term survivors. Strategies will be given for integrating sexual health care in daily practice.