

Proffered Papers

Relieving symptoms and side effects

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CAMPAS: new instrument for measuring symptoms and needs for cancer patients at home: measurement characteristics for symptoms

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Background: Increasingly cancer care is delivered on outpatient basis. To date no instrument has been available to monitor prospectively patients' symptoms and needs during palliative care in community. Such an instrument would assist symptom control by providing structured feedback to clinicians. CAMPAS, (initially developed for audit), has been revised as a structured clinical record, which allows ongoing changes in condition to be identified. Symptoms are scored in terms of severity and interference with everyday life.

Aim: To investigate psychometric properties of CAMPAS-R(evised) for general symptom measurement.

Methods: Daily over 4 weeks domiciliary cancer patients recorded self-assessments of (1) activity -5 point scale- (2) symptoms -visual analogue scales- and (3) emotional and practical needs -dichotomous scale. Internal consistency was determined by coefficient alpha. Criterion related validity was investigated by non-parametric correlation (Spearman) with the criterion EORTC-QLQC30 specific cancer symptom scales.

Subjects: Preliminary analysis is based on the first 30 of 100 patients with palliative care needs being cared for at home recruited from primary care, oncology and other specialist clinics.

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Results: Alpha = 0.76 for daily and alpha=0.79 for weekly self-assessments. Patients use full range of scores. Correlations between EORTC symptom scales and comparable CAMPAS-R scales are: nausea, severity $r=0.66$, interference $r=0.54$; vomiting severity $r=0.36$ ($p<0.05$) (interference not calculable); nausea and vomiting composite score $r=0.66$; constipation, severity $r=0.85$, interference $r=0.46$, composite $r=0.74$; breathlessness, severity $r=0.93$, interference $r=0.87$, composite $r=0.91$; fatigue, severity $r=0.54$, interference $r=0.55$, composite $r=0.54$ ($p<0.01$ if not indicated).

Conclusion: CAMPAS is a new measure for collecting quality of life and symptom information on cancer patients whilst at home. These initial psychometric characteristics indicate CAMPAS-R to be an acceptable, valid and reliable instrument in relation to cancer symptoms. CAMPAS has the advantage of being easy to use and acceptable to patients and potentially provides immediate feedback to clinicians as well as research usage.

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The development of an instrument to assess patients experiences of side effects of cytotoxic chemotherapy

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This paper describes the development of the Chemotherapy Symptom Assessment Scale (C-SAS), an instrument designed for the routine assessment of patients' experiences of side-effects of chemotherapy treatment.

Cytotoxic chemotherapy in the treatment of cancer is associated with a wide range of side-effects. Side-effects may substantially impair patients' quality of life, in some cases leading patients and/or physicians to reduce dosage or cease treatment completely. Research suggests that it is not simply the occurrence of side-effects but rather the difficulty in managing

them that contributes to non-compliance. The management of patients' side-effects is made more difficult by the lack of a validated, clinically useful instrument specifically designed to allow nursing staff to systematically monitor the symptoms patients are experiencing. The systematic assessment of symptoms has been found to be associated with reduced symptom distress.

This paper describes the item generation process and psychometric testing of the C-SAS. The C-SAS has been developed through a robust process of consultation with health professionals and patients to ensure that the scale meets the needs of those who will use it in practice. The scale assesses the severity of symptoms associated with intravenous cytotoxic chemotherapy, and the extent to which patients are bothered by their symptoms. The psychometric properties of the instrument have been tested using established techniques. A sample of 250 patients receiving chemotherapy at two district hospitals in the U.K. were randomly selected to three groups, each testing a different psychometric property of the instrument. The instrument is designed to be completed by the patient during their visits to hospital for treatment. It is hoped that the C-SAS will allow the routine clinical assessment of symptoms patients are experiencing and assist in the management of chemotherapy related side-effects.

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An exploration of European nurses' and patients' views on the resources available for patients to enable them to cope with cancer-related fatigue

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Purpose: Fatigue is a common and pervasive symptom experienced by patients with cancer, yet to date no research has addressed the adequacy of the educational resources that have been developed for patients with cancer-related fatigue. This study was designed to provide an overview of patients' and nurses' views on these resources and provide recommendations on the materials that should be developed in the future.

Methods: To elicit patients' views, focus group methodology was adopted. This method was used to generate rich consumer information, which would provide a range of suggestions for improving educational materials and the provision of quality nursing care. Groups were held in the UK and Switzerland using purposive sampling frames to enable recruitment of individuals with experiential knowledge of fatigue and its management. In studying nurses' views, a Delphi survey design with 3 phases was used. This method facilitated the sampling of specialist oncology nurses (selected from the EONS database) with diverse geographical spread.

Results: 9 patients in the UK and 6 in Switzerland participated in the focus groups. Three rounds of Delphi survey questionnaires mailed to 101 EONS nurses yielded response rates of 25-35%. These data detailed some common views held by the patients and nurses, but a notable difference included nurses' perceptions that more sophisticated resources were needed to educate patients about fatigue and patients' views that, whilst important, the educative process itself required attention.

Conclusion: Education of patients about cancer-related fatigue is complex and currently not seen by many healthcare professionals as a priority. The resources available to educate patients about this symptom are limited by the current evidence base, however there is some evidence that these could be used to better effect.

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Cancer related fatigue (CRF: a nursing approach

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Purpose: CRF represents an important symptom limiting daily routine activities. CRF is due to cancer and oncological therapy besides being classified as diagnosis in the International Classification of Diseases 10th Revision-Clinical Modification.