

multi-agency, 2 year pilot project providing specialist palliative care for advanced cancer patients in their own homes, who would otherwise require admission to hospital or hospice for either medical, nursing or social crisis. The area served encompasses a range of socio-economic groups.

**Methods:** This is a prospective study using both quantitative and qualitative methods, using both validated (ESAS, POS) and newly designed assessment tools. Eligible patients, admitted to the designated hospital or hospice are recruited to the control group following permission from their GP and consultant.

**Results:** Data collection will be completed and presented at conference.

**Conclusion:** The analysed data will give greater validity to the evaluation of H@H. It may also provide valuable information influencing the development of palliative care services within Glasgow if generalised to other geographical areas. Our results will be of interest to all involved in cancer/palliative care.

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74

POSTER

### Patient's diary (PD) is the guarantee of quality and safety of clinical trial with CAMPTO

V. Zarouk<sup>1</sup>, N. Besova<sup>1</sup>. <sup>1</sup>Department of Chemotherapy, Cancer Research Center of RAMS, Moscow, Russian Federation

**Purpose:** To demonstrate the importance of using the PD during clinical study of new anticancer drug CAMPTO.

**Methods:** Patients often estimate very approximately the side effects. This fact doesn't allow the physicians to properly evaluate the severity of complication and make it difficult the correct choice of symptomatic therapy. In using CAMPTO it is necessary to attract patients attention to efficient registration of all appearing undesirable symptoms, to inform physician about it in proper time and to perform all recommended actions. Taking into account possible complications and approximately date of their elaboration with the aim to make collaboration between doctors, nurses and patients easier. The PD was implemented in CRC RAMS in Chemotherapy Department. It contains information about: side symptoms, date of appearance, number of episodes, duration of complication, concomitant treatment. The PD maintains some supplements: physician's recommendations on drug treatment of side effects and supportive therapy subject to date of appearance and duration of complication, phone numbers to contact with nurses, physicians and investigators. Patients enrolled in the trial CAMPTO study used the PD. One of the patient didn't use PD during first cycle of treatment, and couldn't evaluate his status properly. In that case toxicity was higher, as well as the cost of supportive care.

**Conclusion:** Elaboration and usage of PD for trial CAMPTO allow to raise the quality of investigation, the safety of patients life and to decrease treatment costs.

75

POSTER

### Development and evaluation of information materials for non-English speaking patients

V. Speechley, J. Mallett. Royal Marsden Hospital – NHS Trust, Patient Information, Fulham Road, London SW3 6JJ, United Kingdom

Communication about disease, treatments and living with cancer is essential for patients to enable understanding, establish congruence of aims and hopefully reduce distress. This presentation will describe one project aimed at developing simple factsheets which were culturally sensitive to different populations. The process of preparing materials in collaboration with health professionals and representatives of the relevant communities will be outlined. It is hoped to present preliminary data from the evaluation together with any other significant findings.

76

POSTER

### Staff knowledge and attitudes towards cancer pain management on general surgical wards: Identifying educational needs

M. Wells<sup>1</sup>, H. Dryden<sup>2</sup>, P. Guild<sup>3</sup>, K. Farrer<sup>4</sup>, P. Levack<sup>5</sup>, G. Mackie<sup>6</sup>.

<sup>1</sup>University of Dundee/Dundee Teaching Hospitals, Oncology, Dundee;

<sup>2</sup>Dundee Healthcare, Palliative Care, Dundee; <sup>3</sup>Dundee Healthcare,

Palliative Care, Dundee; <sup>4</sup>Western General Hospitals, Palliative Care,

Edinburgh; <sup>5</sup>Dundee Healthcare, Palliative Care, Dundee, United Kingdom

Despite advances in cancer pain management, it is estimated that between 1/3 and 1/2 of patients with cancer needlessly experience moderate to severe pain (Grond et al 1993, McCaffrey and Ferrell 1997). Over half the patient population within most general surgical wards has cancer, yet the majority of staff within these units have no specialist training in cancer or palliative care. Resulting deficiencies in knowledge or inappropriate attitudes in relation to cancer pain may partially explain why pain management is still such a widespread problem.

One of the main aims of the Hospital Palliative Care Team Despite advances in cancer pain management, it is estimated that between 1/3 and 1/2 of patients with cancer needlessly experience moderate to severe pain (Grond et al 1993, McCaffrey and Ferrell 1997). Over half the patient population within most general surgical wards has cancer, yet the majority of staff within these units have no specialist training in cancer or palliative care. Resulting deficiencies in knowledge or inappropriate attitudes in relation to cancer pain may partially explain why pain management is still such a widespread problem. One of the main aims of the Hospital Palliative Care Team (HPCT) is the dissemination of the principles of palliative care, through education to nursing and medical staff on general wards.

During the first few months of the HPCT's work at a large teaching hospital in Scotland, the knowledge and attitudes of 100 qualified nurses and 30 doctors from junior house officer to consultant level, were assessed using a questionnaire developed for the Minnesota Cancer Pain project (Elliott et al 1995).

Responses confirm that few qualified nurses and doctors on surgical wards have been given specialist training and education in the management of cancer pain. The results of the baseline survey will be presented here, demonstrating differences between groups of staff and common misapprehensions about the use of opiates in particular.

We plan to reassess the knowledge and attitudes of the same group of staff after one year, following the implementation of a training and education programme directed at improving staff understanding of cancer pain management. This study demonstrates the current knowledge and attitudes of general staff towards cancer pain management, and illustrates a useful method of assessing needs for cancer and palliative care education in relation to this important but still poorly managed symptom.