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## ABSTRACTS

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**Conclusions:** Central venous access can be achieved by polyurethane catheters easily inserted by cancer doctors. Insertion complications are few and manageable. With prolonged use, infection becomes the main complication although it seldom requires catheter removal.

#### 704P Psychosocial states of companions

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**Aim:** Most of the cancer patients who experience the disease-related problems and their stress occasionally reflect them to their family members. In this present research some of the socio-demographic features of the companions, their feelings concerning patients and their illnesses, and their relationship with the psychological symptoms have been discussed.

**Methods:** 106 inpatients' companions at GATA Medical Oncology Department were interviewed face to face between August 1997 and April 1998. Data were obtained from Symptom Distress Check List (SCL-90-R) and Questionnaire Form. Questionnaire Form included some questions about socio-demographic features of companions and emotional states with their patients. Companions' psychological states were determined by using variance analysis and t test.

**Results:** The mean score of psychological symptoms of the companions was 59.68 (range 0-177). It has been found that there was no significant relation with the statistical aspect in respect to the age, marital status, degree of patient relatives, taking information about patients and disease, helping by health care personnel about patient care and psychological symptom scores of companions ( $p > 0.05$ ). A meaningful relation at  $p < 0.05$  importance level from the statistical viewpoint has been observed between (1) sex, (2) educational level, (3) the duration of his stay in hospital as an companion, (4) falling into psychological problems during the treatment, (5) having financial problems and (6) the things which were wanted to be done with the patient but not accomplished and their psychological symptom scores.

**Conclusion:** In this study the mean score of psychological symptoms of the companions was found 59.68 (low). It was detected that most of the companions' problems were psychological and financial and that the mean score of psychological problems in women companions' was higher than men. The companions' psychological problems like fear, depression, stress and distress can effect their lives negatively. Quality of life of patients and companions can be improved by the problem solving groups at oncology clinics who aim at fighting and managing with the negative psychological situations caused by the disease.

#### 705P Interpersonal sensitivity, depression and anxiety positions of patients with breast cancer

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**Aim:** The breast cancer giving way to stressful symptoms, causes such reactions in women in the form of sorrow, anxiety, depression and denial starting from the diagnosis stage. In this present research, have been discussed such matters as interpersonal sensitivity, depression, anxiety situations of women stricken by breast cancer as well as their relations with some variables related therewith.

**Methods:** An interview has been made at GATA Medical Oncology clinic by way of talking face to face with 72 women stricken by breast cancer. By means of the research form certain demographic characteristics of women have been searched. Psychological symptoms of women, on the other hand, have been measured with three sub-scales (interpersonal sensitivity, depression and anxiety) of Symptom Distress Check List (SCL-90).

**Results:** It has been found that there was no relation with the statistical aspect in respect to the age, acceptance of the disease, the place where the patients lived for longest period of time, the use of herbal drugs and interpersonal sensitivity, depression and anxiety of patients ( $p > 0.05$ ). The mean depression score of women stricken by breast cancer was 19.73 (founded rate: 5-37; normal range: 0-52), mean anxiety score was 13.02 (founded rate: 1-27; normal range: 0-40) and the mean interpersonal sensitivity score was 12.44 (founded rate: 2-32; normal range: 0-36). A meaningful relation at  $p < 0.05$  importance level from the statistical viewpoint has been observed between (1) marital status and educational level and anxieties, (2) loss of organ and interpersonal sensitivity and (3) early diagnosis and depression levels.

**Conclusion:** It has been concluded that the women stricken by breast cancer were living the depression feeling more densely in respect to other two dimensions. Interpersonal sensitivity depression and anxiety levels are determined to be not in a stage to require psychological intervention. Quality of life of patients may be increased by application of psycho-educational programs at oncology clinics by aiming at fighting with negative psychological situations caused by the disease.

#### 706P Predictive response variables (PRV) and life quality (LQ) in patients with anemia and cancer treated with recombinant human erythropoietin (rHuEPO)

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**Introduction:** Response rate to rHuEPO in patients with anemia and cancer is of approximately 50%. High treatment cost makes mandatory to identify population with higher chances of response and to examine the impact of treatment in life quality of patients. With this aim we conducted a prospective trial in patients with anemia and cancer treated with rHuEPO.

**Patients and methods:** Thirty-six patients with anemia (Hb < 10 Gr/dl) and cancer were recruited. Age avg.: 56.4 years, 16 male and 20 female. Twenty-seven were under chemotherapy (16 with CDDP), 15 had bone marrow metastasis (bm +). Other causes of anemia were excluded (folic acid, B12 deficit, etc.). In order to evaluate the response rate, Hct and Hb were monitored every 15 days. Evaluated PRV were: Hb rise > 0.5 Gr/dl and rise in reticulocyte count (> 3%) after 15 days. Ferritin: basal and monthly. Basal EPO and cytokines (IL 1, IL 6 y TNF). CDDP chemotherapy (CHT) and bone marrow metastasis. LQ parameters were measured by a visual analog scale with a minimal score of 0 and maximal score of 48 points, at the beginning and end of treatment. Treatment scheme was rHuEPO (Hemax<sup>®</sup>, Instituto Sidus) 150 U/Kg three times weekly by s.c. route during 12 weeks.

**Results:** Two patients died after 15 days of treatment and were excluded from analysis. 22/34 patients (64.7%) had complete response (Hb: 12 Gr/dl). Mean transfusional requirements diminished from 0.5 U/month/patient to 0.25 U/month/patient. Significant PRV were Hb rise: 91% Responders (R) vs 25% Non-responders (NR) ( $p < 0.001$ ), use of CDDP CHT: 64% R vs 17% NR ( $p < 0.01$ ) and bm +: 23% R vs 83% NR ( $p < 0.01$ ). There were no significant differences of basal LQ parameters between R and NR ( $24 \pm 11$  vs  $18 \pm 9$ ) though they were improved in the first group by the end of treatment ( $31 \pm 9$  vs  $13 \pm 11$   $p < 0.01$ ).

**Conclusion:** Increase in Hb, treatment with CDDP and absence of bone marrow metastasis permit identification of a population with higher chances of response to rHuEPO treatment. Life quality was improved in responding patients.

#### 707P Piroxicam in sublingual form for cancer pain

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**Introduction:** Pain is the most feared complication of cancer. In our previous studies we have showed that NSAIDs can be effectively used for the treatment of cancer pain. So we started a study to investigate the efficacy of piroxicam in sublingual form in the treatment of cancer pain.

**Methods:** A total of 21 patients were enrolled. The pain localized in extremities in 5, head/neck in 4, abdomen in 6, thorax in 4 and lumbar in 2 patients. Three patients had lung cancer, 3 had breast cancer, 4 had lymphoma, 2 had gastric carcinoma, 3 had colon carcinoma, 2 had sarcoma, 2 had testis tumor and 2 had over carcinoma. Pain is assessed with a 10-point visual analog scale (VAS). After administration of a single dose of 20 mg piroxicam sublingually the patients were asked to show the severity of pain on the VAS scale 15, 30, 60, 120, 180 and 360 minutes later.

**Results:** The mean initial VAS score was  $7.61 \pm 2.133$ . The analgesic effect of piroxicam started as early as 15 minutes and peaked at 30 minutes. The mean VAS scores at 15, 30, 60, 120, 180 and 360 minutes were,  $6.28 \pm 2.75$ ,  $5.33 \pm 3.526$ ,  $5.42 \pm 3.74$ ,  $5.71 \pm 3.73$ ,  $5.76 \pm 3.87$  and  $6.04 \pm 3.82$  respectively. Although the mean VAS scores were statistically lower this was not clinically significant. Complete relief was achieved only in 3 and partial relief was detected in 4 patients (14.2% and 19% respectively).

**Conclusion:** Cancer pain can be relieved in 80-95% of the cases with proper treatment. Although all patients tolerated the drug very well without any significant side effects, we achieved only 33% relief with piroxicam. This figure is far from being satisfactory and not acceptable for the treatment of cancer pain at this dosage and schedule.

#### 708P Treatment of decubitus ulcers (DU) and of venous ulcer (VU) with intralesion mielogen in elderly patients (EP) with or without cancer

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**Background:** DU and VU affect approximately 3% of hospitalised ep, and they have substantial implications on public health, both for the reduced quality of life and economic burden. No really effective therapies are available, and a large variability exists concerning their treatment. The granulocyte-monocyte colony stimulating factor (GM-CSF) has been employed in the recovery of neutropenia and mucositis after chemotherapy. A great deal of interest has been focused recently on the potential use of GM-CSF to stimulate healing of chronic wounds. In this pilot study, between July and December 1997 we treated 9 ep (one of which with 3 different DU), affected by DU or VU