

2nd Global Congress on

Hospice & Palliative Care

September 29-30, 2016 Toronto, Canada

SIGNIFICANT PLACEBO: THE EFFECT OF SPIRITUAL PSYCHOTHERAPY ON SOME CYTOKINES IN FEMALE PATIENTS WITH BREAST CANCER

Shahram Vaziri^a, Farah Lotfi Kashani^a, Mohammad Esmaeel Akbari^b and Yashar Vaziri^c^aIslamic Azad University, Iran.^bShahid Beheshti University of Medical Sciences, Iran.^cTehran University of Medical Sciences, Iran

The aim of this study was to determine the effect of spiritual psychotherapy on some cytokines (TNF α , IFN γ , IL-10, hs-CRP) in cancer patients. Therefore, in a quasi-experimental research, 25 female patients with BC were selected and divided into two groups of experimental and control randomly. Experimental group were undergoing therapeutic protocols for 12 sessions. Control group did not undergo any psychological intervention. Both groups were assessed on some cytokines before and after the intervention. Measured variables were IL-10, IFN γ , TNF α , hs-CRP. Analysis of mixed variances of the data indicates that spiritual psychotherapy improved the median of cytokine levels. It seems that spiritual psychotherapy is a useful approach for breast cancer.

lotfi.kashani@gmail.com

SYSTEMATIC ASSESSMENT AND PATIENT'S DRUG PRESCRIPTION FOLLOW-UP IN LONG-TERM CARE

S. Medjahed^a, D. De-Falvelly^a^aAdelaide Hautval Hospital, France

To optimize resident's drug prescription in long term care, we conducted a retrospective analysis of all patient's prescriptions admitted to the department between January 1 and June 30 2013. This analysis was to respond, for each drug, to the presence of an indication of prescription, the appropriateness of the dose and the duration of prescription and to the indication to continue the prescription beyond the date of evaluation. This analysis was performed independently by two geriatricians, based on the data contained in the medical records of the patients considered. The justified character of a prescription was defined from the drug authorizations market data (AMM), the French list of drugs potentially inappropriate in the elderly, indications based on evidence and certain clinical ethic principles of geriatric medicine. For the 50 drug orders analysed, this approach allowed an average reduction of three lines of drug prescription per resident. Non-appropriate requirements (indication) rate was 41% of prescriptions; inappropriate times were 16% of prescriptions and non-adapted doses was 23%. Forty three percent of drug treatments had not been continued. This systematic evaluation of drug orders on admission is now sustainable in long-term care. This leads to correct drug prescriptions and fights against poly medication and the avoidable supply in the elderly.

Smahane.medjahed@aphp.fr