



JOINT EVENT

5th Annual Congress on **EMERGENCY NURSING & CRITICAL CARE**
&
26th CANCER NURSING & NURSE PRACTITIONERS CONFERENCE

July 16-17, 2018 | London, UK

Scientific Tracks & Abstracts

Day 1

Emergency Nursing 2018 & Cancer Nursing 2018

Sessions:

Day 1 July 16, 2018

**Emergency Nursing | Critical Care Emergency Nursing | Cancer Nursing Trauma Emergency Nursing
| Cancer Therapy & Treatment | Breast Cancer Nursing | Cancer Biomarker Mid-Wife Emergency
Nursing | Types of Emergency Nursing**

Session Chair

Pauline Rose

Princess Alexandra Hospital, Australia

Session Co-Chair

Fahad Zeed Alanezi

University of Southampton, UK

Session Introduction

Title: Concurrent radiation therapy and chemotherapy for anal cancer: Retrospective chart audit of autonomous nursing practice in radiation oncology

Pauline Rose, Princess Alexandra Hospital, Australia

Title: Rural Emergency, Trauma, and Critical Care Management: Preparing facilities to care for critically-ill patients

Lucus Christoffersen, Idaho State University, USA

Title: Organophosphorus poisoning at Tribhuvan University Teaching Hospital, Emergency Department

Pratibha Silwal, Tribhuvan University Teaching Hospital, Nepal

Title: Women's experience of acute skin toxicity following radiation therapy in breast cancer

Eivind Richter Andersen, Stavanger University Hospital, Norway

Title: Sexual assault in the emergency department: Are we missing something?

Heidi Martin, University Medical Center of New Orleans, USA

Title: Applying lean methods and team resource management to reduce medication errors in nurses of emergency

Shuei-Chen Chin, Mennonite Christian Hospital, Taiwan

Title: The effect of the Anti-Cancer preparation NSC-631570 on prostate cancer

Wassil Nowicky, Ukrainian Anti-Cancer Institute, Austria

Title: Factor affecting utilisation of health facilities and trained birth attendants for childbirth in Jahi district Abuja Nigeria

Bawa-Muhammad Taiwo Hassanat, Jahi primary health centre Abuja, Nigeria

Title: Door to CT: Stalk the stroke

Mor Saba, University of Haifa, Israel

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Concurrent radiation therapy and chemotherapy for anal cancer: Retrospective chart audit of autonomous nursing practice in radiation oncology

Pauline Rose

Princess Alexandra Hospital, Australia

Autonomous nursing practice is the hallmark of radiation oncology nursing in the study setting in Brisbane Australia. This setting utilises a primary nursing/collaborative model to support the large numbers of patients treated daily. Anal cancer represents approximately 2% of all gastrointestinal cancers, and sphincter-preserving treatment, combining radiation therapy and chemotherapy, has become standard treatment. However, acute toxicities are as high as 80%. Radiation oncology nurses assess their patients regularly, and refer to medical and allied health professionals as necessary. The aim of this retrospective chart audit is to determine the extent of patients' toxicities and the nursing interventions to support their quality of life and reduce admission to hospital. This study audited patients treated for anal cancer over a 2 year period at a Radiation Oncology Department in Brisbane Australia. Data was analysed using a visual toxicity display spreadsheet, and SPSS Version 23. Eligible patients were identified from the radiation oncology information system. The audit examined documented toxicities by nurses across the course of treatment, interventions, referrals to allied health professionals and admission rates. Sixteen patients were identified: 11 females and 6 males. Toxicities consistent across all patients were pain, diarrhoea, moist desquamation of groins and perianal area, nausea, mucositis, fatigue and dysuria. Admission rates were 64.7%: 5 females and 2 males. 47% of patients scored >5 on the distress thermometer at baseline, with 2 females expressing embarrassment at the site of cancer, and 3 patients having underlying psychological disease. Six patients had pain at baseline in the 4-10 range (median 5.00); 3 not entered. Missing chart information included irregular documentation of weight. Referrals were made by radiation oncology nurses to social workers, occupational therapists, and dietitians. The common toxicities resulting from concurrent anal chemoradiation affected all patients audited, with differences only in severity and timing. Proactively improving bowel regimens, hydration, analgesia and weight monitoring as part of a formal clinical pathway may result in less toxicity during and following the course of treatment.

Biography

Pauline Rose has worked in Radiation Oncology for the past 32 years, and is the Clinical Nurse Consultant for Radiation Oncology at the Princess Alexandra Hospital in Brisbane, Australia, which was the first Magnet Hospital in the southern hemisphere. She completed her PhD in 2010 and is a Credentialed Cancer Nurse (Australia). She was a Content Author for the Cancer Institute New South Wales for radiation therapy education modules for nurses and is a regular reviewer for the *European Journal of Oncology Nursing*. She has published in a range of peer-reviewed journals focusing on person-centred and individualized nursing care in the radiation oncology department, and was instrumental in 1995 in introducing a primary nursing/collaborative practice model into the radiation oncology department, which continues to provide person-centred care to patients every day.

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Rural emergency, trauma, and critical care management: Preparing facilities to care for critically-ill patients

Lucus Christoffersen
Idaho State University, USA

Rural emergency departments have a unique role in the care of critically-ill patients. Nurses serve as the primary caregivers in these intense and time-sensitive situations. With the increase of hospital accessibility for rural populations, do the facilities have the capabilities to care for critically-ill patients? Do nurses and care providers have the necessary education and training to care for patients that require high-levels of care and extra resources? This lecture will discuss some of the vital tasks that nurses and health care providers should perform to make sure that they are prepared to receive and care for critically-ill patients at their facilities. Some of the topics include facility preparation, training and education, how to deal with small team dynamics, and collaboration with larger facilities. This lecture helps give managers and leaders at rural facilities helpful information that they can use to better plan and prepare their staff and facilities for critically-ill patients.

Biography

Lucus Christoffersen is an Assistant Professor at Idaho State University, teaching Adult Health Nursing to undergraduate nurses, with the clinical components. He has been active in teaching certification courses and working as the President for Utah Emergency Nurses Association.

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Organophosphorus poisoning at Tribhuvan University Teaching Hospital, Emergency Department**Silwal Pratibha**

Tribhuvan University Teaching Hospital, Nepal

Organophosphorus is most common poisoning in Nepal. Many cases among poisoning the majority are organophosphorus poisoning. As known farming is main occupation here. Most of the people are dependent on farming. Organophosphorus (OP) is choice of pesticide for them and is easily available. But in another way many people use them for threatening purpose, especially among young girls and boys. Most of the case presented in our emergency, are from low economic background. Very simple discussion among husband & wife result in poisoning incident. OP pesticide intoxications are estimated at three million per year worldwide with approximately 3, 00,000 deaths. Most of the OP pesticide poisoning and subsequent deaths occur in developing countries following the deliberate self-ingestion. The case fatality rate following the deliberate ingestion of OP pesticides in developing countries in Asia is 5-20%, we have taken data of six months from Sep 2017 to Feb 2018. During this period, we had found 123 organo phosphorus poisoning cases. This data is collected from TUTH, emergency department. Among them only few cases have ingested in large amount. But majority of cases have ingested few amount. Among total cases, 65 patients were discharged on their request some of them are not worried despite of telling the consequences of poisoning, whereas others were not serious about their family members. In TUTH emergency most of the poisoning cases were managed. But according to the seriousness of the case some were referred to other center for high dependency unit due to unavailability of enough critical care units.

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Women's experience of acute skin toxicity following radiation therapy in breast cancerEivind Richter Andersen¹, Aud Mette Myklebust², Grethe Eilertsen² and Siren Eriksen^{2,3}¹Stavanger University Hospital, Norway²University College of Southeast Norway, Norway³Vest fold Hospital Trust, Norway

Purpose: Acute skin toxicity is experienced by 70%–100% of patients receiving radiation therapy following breast cancer. Most studies focus on skin appearances and treatment of such reactions, not the experience. Increased knowledge about patients' experience will contribute to provide tailored patient care. Thus, the purpose was to investigate patients' experiences of acute skin toxicity following radiation therapy for breast cancer.

Patients & Methods: Semi-structured in-depth interviews were conducted with seven women, 2–3 weeks post-treatment. Five broad areas of inquiry were investigated: 1) experiences from the development of skin reactions; 2) experiences in day-to-day life; 3) coping strategies; 4) experiences of information; and 5) experiences from the aftercare. The interviews were analyzed in line with qualitative content analysis.

Results: The main theme: "Not so bad itself, but it comes on top of everything else" was identified, based upon three categories: 1) unique experience of the skin; 2) it is something about the psychological aspect; and 3) experience of information.

Conclusion: Acute skin toxicity following breast cancer treatment may affect many dimensions of patients' lives. Experiences are complex, individual, and not necessarily consistent with visible changes of the skin. A holistic approach is necessary to provide treatment and support according to patients' individual needs.

Biography

Eivind Richter Andersen works as a Radiation Therapist at Stavanger University Hospital in Norway. He is especially devoted in patient follow-up and radiation induced side effects, focusing on patient perspective.

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Sexual assault in the emergency department: Are we missing something?**Heidi Martin**

University Medical Center of New Orleans, USA

Lack of education leads to missed opportunity. Education is a necessary component for all members of a multidisciplinary team who provide victim-centered care in an Emergency Department (ED). Awareness of signs and symptoms of psychological trauma is key in preventing sexual assault victims from slipping through the cracks. Often, external injuries are focused on and in cases of sexual assault the crime may be missed in its entirety; this oversight has the potential to not only create a risk for sexually transmitted diseases, but may also return the patient to a dangerous environment in the event of trafficking cases. Healthcare providers have an obligation to appropriately identify and respond to victims of sexual assault, without the appropriate education, public health and public safety concerns are created. The evolution of societal awareness and concern, moving to action and intervention begins with bedside nursing in the clinical setting. This initial step is a nursing intervention that when judiciously applied, identifies these unique cases. Psychiatric knowledge combined with a victim-centered response, creates successful interventions in addressing neuro-trauma. For patients that are post sexual assault, a visit to the ED may see them present anywhere on a spectrum from an acute psychotic episode to mild anxiety or even complete denial. The nature of sexual assault tends to create complex psychological trauma that is expressed differently from patient to patient. My experience as a psychiatric and ED nurse at a Level 1 trauma center has equipped me to better identify victims of sexual assault and therapeutically engage patients with neuro trauma during forensic medical examinations. All ED nurses should be provided the basic tools and training to identify victims.

Biography

Heidi Martin is a Forensic Nurse with a strong foundation in ED psychiatric nursing. She has built her career by working as an ED Nurse in a Level 1 trauma center and expanded to forensics to address the needs of this population. She also likes kitties and coffee.

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Applying lean methods and team resource management to reduce medication errors in nurses of emergency

Shuei-Chen Chin, Shu-Ru Lin and Shu-Chen Tseng
Mennonite Christian Hospital, Taiwan

The purpose of this project is to reduce medication errors in emergency nurse. From January 1, 2015 to December 31, 2016, the medication error of our emergency department was 0.02% (16/83,322). A survey of medication errors using the eight types of waste analysis showed that the number of errors was 164 (32.2%). Causes include: waste of defects, waste of inventory, waste of action, waste of processes and waste of human resources, therefore, create a project. The proposed improvement plan is: Establish a standard procedure for emergency medication, the implementation of drug standard process according to the rules, medication process is smooth; do not disturb bulletin board, references recommended to use "do not disturb in medicine" sign to remind patients or their families to avoid mistakes nursing staff; conduct clinical teachers to teach the standard course of medication consistency, apply human resources, invite emergency room clinical teachers and teaching content and methods of consistency to discuss, for new employees to teach the relevant standard medication process, to avoid their medication errors; establish a mutual care mechanism team, take the initiative to care for the hearty colleagues, to give positive encouragement to discourse, and colleagues in the same class can remind each other and support each other, to create praise more than criticism of the friendly workplace did reduce the medication error from 32.2% to 3.13%, which not only achieved the goal of improvement, but also enhanced the patient's medication safety and also enabled the patients to obtain good care quality.

Biography

Shuei-Chen Chin is a Head Nurse in Emergency department. She holds a Master's degree from Tzu Chi University in Taiwan. She has worked in intensive care units for 15 years and in emergency department for six years.

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Factor affecting utilisation of health facilities and trained birth attendants for childbirth in Jahi district Abuja Nigeria.**Bawa-Muhammad Taiwo Hassanat**

Jahi primary health centre Abuja, Nigeria

It is well known that giving birth in a health institution under the care and supervision of trained health providers promotes child survival and reduces the risk of maternal mortality. World Health Organization estimates that more than half a million women lose their lives in the process of reproduction worldwide every year and most of these mortalities are avoidable if mothers have access to maternal health care services, Nigeria is rated number 11 high globally with 630 maternal death in every 100,000 live births. Despite the availability of Primary Health Care Centre in virtually all villages in Nigeria, maternal mortality and other reproductive health problems persists. Utilisation of maternal health services remains very low, especially during labour and delivery. Most of the child deliveries are still taken at home by the relatives or friends in the house or sometimes by untrained midwives and unskilled traditional birth attendants in the village. This study was conducted with objectives of identifying the factors affecting utilization of maternal health care services in primary health centres, best practices and suggestions for improving primary health care child delivery.

Biography

Bawa-Muhammad Taiwo Hassanat is a registered nurse with Nigeria Nursing and Midwifery Council. She received her Bachelor of Nursing Science from National Open University of Nigeria Lagos with second class upper. She is awaiting admission for her Master's in Public Health Nursing from John's Hopkins School of Nursing Baltimore and London School of Hygiene and Tropical Medicine. She is the present vice chairman of Federations of Local Government Nurses and Midwife Abuja Municipal Area Council branch Abuja, Federal Capital Territory Nigeria from April 2012. She is the nurse in charge of antenatal, postnatal, family planning and prevention of mother to child transmission of HIV/AIDS in Jahi I Primary Health Care clinic FCT Abuja Nigeria from 2012 July till date. Her current research interests include How to improve quality of care in Primary Health Care Centres across Nigeria, and factors influencing bringing care from clinics to homes in Nigeria.

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Door to CT: Stalk the stroke**Mor Saba**

University of Haifa, Israel

Delayed diagnosis in patients with acute ischemic stroke in the Emergency Department (ED) still represented a blind spot in the assessment of quality health care indicators. To shorten the time for performing CT scan on purpose to give thrombolytic therapy within the reperfusion time window (IV rt-PA vs. Mechanical clot disruption). An intervention program was developed on purpose to promote rapid diagnosis and treatment for acute stroke patients. The intervention program includes a "Nurse Coordinator stroke" in the ED that supposed to correlate between the emergency service, to admit the patient in shock room, make rapid assessment, page the neurologist, order a head CT and ensure quick outgoing to the CT center (<15 minutes). In addition, cases that upheld the clinical guidelines were distributed to hospital staff by internal mail list. Cases that failed to meet the criteria underwent a full inquiry by the hospital safety and quality committee, which includes the involved ED & Radiologic staff, and the neurologist team. The median time to CT in 2016 was 31 minutes compared to 51 minutes in 2015 ($p < .001$). During the intervention period (2016), 109 patients (35.2%) adjust for thrombolytic therapy, when in 2015 only 79 patients (29.4%) received this therapy. 61 patients (56%) in 2016 and 50 (63.2%) in 2015 got reperfusion with IV rt-PA. Mechanical clot disruption was performed to 21 patients (19.2%) in 2016 and 15 (18.9%) in 2015. Integrated approach (IV rt-PA & Mechanical clot disruption) was performed in 27 patients (24.7%) at 2016 and 14 (17.7%) at 2015. After implementing the intervention more patients have reached neurologist evaluation within 10' (72.3%) compared to pre-intervention (56.6%) ($p = 0.04$); and more patients were stayed at ED less than 60' (68.2% and 41.7%, respectively, $p = 0.001$). It clearly appears that post- compared to pre-intervention, less time lags (in minutes) were measured in patients who their clinical guidelines were not achieved before the program. This was found for neurologist assessment (20.26 ± 7.29 vs. 34.55 ± 14.21 , respectively, $p = .03$), for total waiting time in ED (115 ± 32.25 vs. 164.61 ± 53.89 , respectively, $p = 0.01$) and time to CT scan (52.86 ± 13.51 vs. 70.25 ± 30.24 , respectively, $p = .004$). Attaching a case manager to perform rapid assessment of patient with acute ischemic stroke and perform head CT was proved beyond doubt. These findings make a prominent contribution to and have significant implications for quality of care for patients with suspected stroke admitted to an ED. These findings also encourage further such interventions to achieve better outcomes in the critical ED assessment stages.

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Scientific Tracks & Abstracts

Day 2

Emergency Nursing 2018 & Cancer Nursing 2018

Sessions:

Day 2 July 17, 2018

**Emergency Nursing | Refugical Emergency Nursing | Surgical Oncology Nursing Clinical Trials
Emergency Nursing | Cancer Pain Management | Prostate Cancer Nursing**

Session Chair

Lucus Christoffersen
Idaho State University, USA

Session Co-Chair

Chukwurah Ndid Juliet Ifeoma
Nnamdi Azikiwe university Teaching hospital, Nigeria

Session Introduction

Title: A mixed method systematic review of the reasons parents attend emergency department with their children for non-urgent conditions

Ahmet Butun, Queen's University Belfast, UK

Title: ECLAMPSIA

Juliet Konadu Sasu, Ghana

Title: Depression, anxiety, dyadic relationships, and mutual impact between Chinese cancer patients and family caregivers

Qiuping LI, Jiangnan University, China

Title: Impact of oral care protocol on the incidence and severity of stomatitis induced by radiotherapy

Amany Mohamed Shebl, Mansoura University, Egypt

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A mixed method systematic review of the reasons parents attend emergency department with their children for non-urgent conditions

Ahmet Butun, Mark Linden, Fiona Lynn and Jennifer McGaughey
Queen's University Belfast, UK

Background & Aim: Non-urgent visits to emergency department (ED) services are on the increase, and the pressure on EDs is a significant global concern. The use of EDs by parents of children with non-urgent condition is an important and still unresolved problem, which is associated with overcrowding, higher costs, lower quality of care and longer waiting times. The aim of this review is to identify parental reasons for visiting ED for children presenting with non-urgent conditions.

Method: Seven databases were systematically searched in August 2016. The study selection process and quality assessment were undertaken independently by two authors. Data were analysed by means of narrative synthesis.

Results: 22 studies met with pre-specified inclusion criteria. Ten studies used quantitative methods, ten studies used qualitative methods, and a further two studies used mixed methods. All included studies were conducted in high-income countries and reported in English. Identified themes included perceived urgency by parents, perception regarding better care and staff expertise in the ED, proximity, out of hours availability, difficulties with obtaining a GP appointment, GP referral, lack of facilities in primary healthcare services, financial issues, need for reassurance, convenience and access issues.

Conclusion: This review brings both qualitative and quantitative data together. This review may inform researchers, healthcare staff and healthcare policy makers in better understanding parental reasons for using the ED. Identifying parental reasons may help with the development of targeted interventions that seek to reduce non-urgent ED visits, which would save overstretched healthcare resources.

Biography

Ahmet Butun completed his Master's degree from University of Nottingham, and his master's dissertation focused on why parents choose to use the emergency department for children presenting with minor illness. His dissertation has been published in International Emergency Nursing. He is currently a PhD student at Queen's University Belfast and his research project seeks to identify parental reasons for visiting ED, rather than their primary healthcare providers, in the context of developing countries.

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ECLAMPSIA**Juliet Konadu Sasu**
Ghana

Blood pressure of 140/90 mmHg or more or an increase of 30 mmHg in systolic and/or 15 mmHg in diastolic blood pressure over the pre- or early pregnancy level. Predisposing factors: Primigravidae more than multigravidae, Pre-existing hypertension, Previous pre-eclampsia, Family history of pre-eclampsia, Hyperplacentalosis i.e. excessive chorionic tissue as in hydatidiform mole, multiple pregnancy, uncontrolled diabetes mellitus and fetal hemolytic diseases. Directed toward decreasing the maternal BP using inpatient hospitalization or conservative management and antihypertensive medications along with increase in dietary protein and an increase in calories, if indicated. Delivery is appropriate therapy; however, delivery may endanger the fetus due to fetal lung immaturity. Expectant management (wait and watch) can be considered if the following maternal and fetal factors are present: Controlled hypertension, Urinary protein of any amount, Oliguria (< 0.5 mL/kg/hour) that resolves with routine fluid/food intake, AST or ALT greater than 2 times upper limit of normal without epigastric pain or right upper quadrant (RUQ) tenderness. Signs of MgSO₄ toxicity include loss of deep tendon reflexes, including knee-jerk reflex, respiratory depression, oliguria, respiratory arrest, and cardiac arrest

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Depression, anxiety, dyadic relationships, and mutual impact between Chinese cancer patients and family caregivers

Qiuping Li and Yi Lin
Jiangnan University, China

Background: Cancer and its treatment can result in psychological distress in both cancer patients (CPs) and their family caregivers (FCs). This psychological distress acts as a significant adverse factor in both CPs and FCs. The study purposes included: (i) to assess the anxiety and depression of CPs and their FCs, and examine the dyadic relationships of anxiety and depression between CPs and their FCs; (ii) to investigate factors that may modify these relationships.

Methods: Participants consisted of 641 dyads of CPs and FCs. Three types of variables were collected as potential modifying factors, including CP-related variables, FC-related variables, and family-related variables. Descriptive statistics, T-test, Pearson correlations, sub-group analysis were applied to conduct the data analysis.

Results: Nearly one-third of participants experienced anxiety and depression (the Chinese version of the Hospital Anxiety and Depression Scale, C-HADS). CPs and FCs experienced a similar degree of C-HADS. Correlations (r) of C-HADS between CPs and FCs ranged from 0.25 to 0.32. Various factors influencing the anxiety and depression of dyads between CPs and their FCs were identified, including CP-related variables, FC-related variables, and family-related variables.

Conclusions: Study findings call attention to the anxiety and depression, as well as the related factors in dyads of CPs and FCs. The underlined essential components and focus of intervention, which will be developed to decrease psychological distress and improve quality of life in dyads of CPs and FCs, included such areas as individual characteristics of CPs and FCs, family relationship.

Biography

Qiuping Li, PhD and MD, Professor, Supervisor in master's degree. Her research interests comprise nursing education, digestive system diseases and cancer care. The major research contents mainly focus on the development and evaluation of supportive psychological intervention model for cancer patients and their family caregivers. She has accomplished 11 research projects. More than 90 articles were published by the first author or corresponding author, among which 25 were included in SCI journals. She has edited 16 textbooks and 5 monographs, and secured research funding from National Natural Science Foundation of China (NSFC) as Principal Investigator.

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Impact of oral care protocol on the incidence and severity of stomatitis induced by radiotherapy

Amany Mohamed Shebl
Mansoura University ,Egypt

Oral stomatitis is a common debilitating complication of cancer radiotherapy. It results from local effects of radiation on the oral mucosa. The impact of oral stomatitis is far-reaching for patients, caregivers and the medical system. Objective: the aim of the study was to assess impact of oral care protocol to radiotherapy induced stomatitis in cancer patients. Methods: Quasi-experimental research design was conducted in the Clinical Oncology and Nuclear Medicine Department at Main Mansoura University Hospital. The data were collected from two hundred adult patients of both sex randomized selected who corresponded to inclusion criteria and divided into two groups. Results: the result indicates increased total knowledge score for patients at immediate post more than post tests 1 and post test 2. Also it was found decreased incidence and severity of stomatitis after oral care protocol. There were a positive relation between severity and incidence of stomatitis of studied patients in relation to their knowledge. Conclusion: The implementation of oral care protocol had a positive effect on the studied patients' total knowledge scores and decrease incidence and severity of stomatitis in the study group. It was recommended that, Cancer patients should be given a written instruction plan for their radiotherapy steps and self- management measures to radiotherapy.

Biography

Amany Mohamed Shebl has occupied several positions as Dean of the Faculty of Nursing, Mansoura University, Egypt. Minister of Health Assistant for Human Resources all over Egypt. She was a published author of several research papers, articles, and books on nursing. She is a Reviewer in *Advanced Nursing* journal and *Cancer Nursing* journal and a Reviewer in National Authority of Quality Assurance and Accreditations. She has developed many national and international protocols (Nigerian government and United Arab of Emirates). She is one of the Developers in Nursing Education in Egypt. She has published more than 70 papers in reputed journals.

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Video Presentation

Day 2

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The effect of the anti-cancer preparation NSC-631570 on prostate cancer**Wassil Nowicky**

Nowicky Pharma, Ukrainian Anti-Cancer Institute, Austria

Unusual for an anticancer agent NSC 631570 possesses some distinct immune properties. In several immune target-effector systems NSC 631570 significantly amplified the malignotoxic activity of macrophages, lymphocytes and natural killer (NK) cells, and stimulates dendritic cells maturation in vitro. While the parameters like B-lymphocytes count, immune globulin concentrations, complement and acute phase proteins did not changed significantly, it can be postulated NSC 631570 modulates the cellular part of the immune system whereas the humoral part remains unaffected. Besides, the NSC631570 has a selective effect – thus, it kills only cancer cells and the healthy cells remain undamaged. First indications on the selective effect of NSC 631570 on the cancer cells were provided in an early study when different oxygen consumption by normal liver cells and Ehrlich's tumor ascitic cells after the incubation with NSC 631570 was revealed. A radio protective effect was found in normal human fibroblasts. NSC 631570 caused the accumulation of prostate cancer cells as well as epidermoid carcinoma cells in the G2/M phase, however, not of normal cells. The efficacy of NSC-631570 in prostate cancer has been confirmed in a controlled clinical study. In the study patients, all standard treatment modalities had been exhausted. The cancer relapsed and/or progressed and no therapy protocol was available. The patients were treated with NSC-631570 and partially with local hyperthermia. Following results were achieved: full remission in 54 patients (73%), partial remission in 16 patients (22%). Only in 4 patients (5%) the therapy did not affect the course of the disease.

Biography

Wassil Nowicky is the Director of Nowicky Pharma and President of the Ukrainian Anti-Cancer Institute, Vienna, Austria. He has finished his study at the Radio technical Faculty of the Technical University of Lviv (Ukraine) in 1955 with graduation in Diplom-Ingenieur in 1960 with title nostrificated in Austria in 1975. He became the very first scientist in the development of the anticancer protonic therapy and is the inventor of the preparation against cancer with a selective effect on basis of celandine alkaloids NSC-631570. He used the factor that cancer cells are more negative charged than normal cells and invented the celandine alkaloid with a positive charge thanks to which it accumulates in cancer cells very fast. He is an author of over 300 scientific articles dedicated to cancer research. He is a member of the New York Academy of Sciences, member of the European Union for Applied Immunology and of the American Association for scientific progress, Honorary Doctor of the Janka Kupala University in Hrodno, Doctor Honoris Causa of the Open International University on complex medicine in Colombo, Honorary Member of the Austrian Albert Schweitzer Society. He has received the award for merits of National guild of pharmacists of America; the award of Austrian Society of sanitary, hygiene and public health services and others.

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