

81 **PATIENT-CENTRED ACP AND CANCER IN SPAIN:
INSIGHTS ON CULTURAL BARRIERS AND CLUES TO MOVE
FORWARD**

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Patient-Centered Advance Care Planning (PC-ACP) is a desirable goal as part of all care. Customising it to major illness trajectories is a wise organisational move based in common sense and best practices widely recognised. But could it be as widely implemented? For Spanish Mediterranean culture with a public health-care system we seem to walk in circles regarding the improvement of end-of-life care and having PC-ACP contributing in doing so. “Cancer-tag” adds, to the inner difficulty of facing potential life threatening illness, the cultural bias of “double deceit trap”: both patient and carer worrying/being scared and not sharing. What happens when not facing this double trap (‘non-telling-the-truth’ environment) works as default or step back standard hindering an open talk (ACP) about what the patient is experiencing, wants or needs? How could we improve current practice of clinicians where emotions are not addressed and skills are not taught in a significant behaviourally change manner? How can we introduce a ‘game-changing’ process towards implementing PC-ACP in cancer care in Spain and similar cultural systems? “KAYRÓS-Conversations that matter”, a Spanish ACP research program inspired in Respecting Choices®’ model, is working with chronic and neurodegenerative illness trajectories but needs to solve how to move beyond the “cancer” hurdle. This presentation will share qualitative study findings with in-depth interviews with oncologist, clinical psychologist, palliative care professionals and bioethicist that will give some insight and clues about what measures and training initiatives might help address the barriers and progress in implementing PC-ACP in cancer in Spain.