

**Results** 18 articles were identified to inform the updated regional guidelines.

82 HCPs from 24 clinical sites completed an online survey of practice. 100% of respondents (n=78) reported Morphine is their oral strong opioid of choice. 95% (n=73) reported Morphine or Diamorphine is their parenteral strong opioid of choice.

Reported conversion ratios compared with equianalgesic ratios recommended by regional guidelines:

1. Morphine oral to Morphine subcutaneous: 95% use 2:1 (vs 2:1 recommended).
2. Morphine oral to Oxycodone oral: 67% use 2:1, 25% use 1.5:1 (vs 1.5:1 recommended).
3. Oxycodone oral to Oxycodone subcutaneous: 71% use 2:1, 26% use 1.5:1 (vs 1.5:1 recommended).
4. Morphine oral to Alfentanil subcutaneous: 59% use 30:1 (vs 30:1 recommended). 35% consult equianalgesic table or guidelines.

**Conclusion** When converting Morphine to Oxycodone or oral Oxycodone to subcutaneous Oxycodone the majority of HCPs used a 2:1 conversion ratio, rather than the 1.5:1 ratio recommended by regional, national and international guidance. This may lead to higher than recommended doses when converting Oxycodone to Morphine, subcutaneous Oxycodone to oral Oxycodone or Oxycodone to Alfentanil. Further work is required with stakeholders across the region to increase awareness of this.

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### SYSTEMATIC LITERATURE REVIEW ON THE PSYCHOLOGICAL CONCERNS OF INDIAN WOMEN UNDERGOING BREAST CANCER TREATMENT

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**Background** Psychological symptoms are common in women diagnosed with breast cancer. The cancer care experiences of women varies across diverse cultural backgrounds. Given that breast cancer is becoming the most common cancer among women in India, recognition of psychological distress during treatment is important to enable the physician to offer support that is culturally sensitive.

**Aims** To determine the psychological concerns of Indian women in relation to breast cancer treatment.

**Method** Medline, Embase, CINAHL and PsychInfo were searched (to February 2017) using terms relating to Indian women with breast cancer and psychological concerns. The EBSCO host discovery science was searched for papers from Indian journals inaccessible from other databases. Two reviewers were involved in all stages of study selection against inclusion criteria. Any discrepancy was finalised after discussion with a third researcher. Included papers were appraised for their quality and data extracted using a standard proforma.

**Results** Out of 550 titles, 17 studies met the inclusion criteria. 13 were observational and four were qualitative studies. The observational studies found five psychological outcomes related to breast cancer and its treatment; anxiety/depression, quality

of life, concerns and coping, body image and stigma and information needs. Thematic synthesis of qualitative papers revealed four major themes; cultural context of disease experiences, information seeking, role of women and women's individual response to disease. Overall, a major cultural impact of Indian family life and the role of women, the role of religion and a particular impact of hair loss for these women within these contexts was seen in women living in India and elsewhere in the world.

**Conclusion** This literature review highlights the cultural impact on the experience of Indian women with breast cancer living in India and around the world; culture travels. This is important for clinicians looking after patients from diverse cultural backgrounds.

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### INTEGRATED ONCOLOGY AND PALLIATIVE CARE: ANALYSIS OF MULTI PROFESSIONAL PREHAB INTERVENTION 'SUPPORT EVENT PROGRAMME' FOR PATIENTS WITH AN ADVANCED CANCER

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**Background** Early palliative care is recognised as an effective service for patients living with cancer. A new integrated palliative care service was developed in the outpatient clinics in September 2016. The palliative care needs of patients were assessed using the validated Integrated Palliative Outcome Scale (IPOS). 80% of patients reviewed through this service demonstrated significant psycho-social support needs e.g. anxiety, family worries, depression or financial concerns. We have created a multi-professional support event focusing on keeping active with ongoing cancer treatment, reducing anxiety and improving coping mechanisms.

**Aims** To pilot and evaluate the feasibility and effectiveness of the support event programme in order to inform a set of recommendations for developing and running future events.

**Methods** Prospective observational service evaluation of three events. Participant engagement and satisfaction were assessed using post event feedback immediately after the event and one month post event. Analysis was carried out using descriptive statistics and qualitative thematic analysis of the free text responses

**Results** Overall 121 patients with lung, renal and gynaecological cancers were invited to attend an event. Of those invited 19 patients/carers attended.

Feedback was received from 74% (14/19) of attendees. 94% participants rated the workshops as being 'very helpful' or 'helpful'. 100% rated the overall event positively: 'Exceptional' 79% or 'Excellent' 21%. One month post event feedback, positive experience recall of the event was maintained. Many attendees stated the events were helpful, useful and, comforting. Many stated that they got benefit from hearing and sharing other people's experience.

**Conclusion/discussion** The support event programme for people with advanced cancer appears effective in supporting patients and family in improving their well-being. Whilst the initial numbers were small attendees appreciated peer support and networking during the events.

There were also constructive suggestions of how to further improve the events that can be implemented.