

CHT-PX application. The assessment was made by 100 mm visual analogue scale (VAS), which assessed physical symptom severity and Hamilton Anxiety Rating Scale (HAMA) on the first day after CHT-PX application, on the 7th, 14th and 21th day. Effective PG dose was 300 mg/day with EST, KLO and TRA previously taken. On the first day after CHT-PX, patient rated pain level as 9 according to VAS. During TRA and KLO treatment, pain level on VAS was 6 from the 7th till 14th day after CHT-PX, on 21th day deceased to 2. HAMA score was 49. After PG augmentation, according to VAS, pain level was 3 on the 7th day and 0 on 14th day. HAMA score was 20. Tapering off the dose of TRA and KLO started till discontinuation of both medications. Pregabalin efficiency in pain and anxiety control increase compliance of oncological patient and reduce harm of drug abuse.

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EV0815

Severe mental illness and cancer – A program for psychiatric patients in a cancer center

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Introduction The prevalence of severe mental illness (SMI) is estimated to be 4%. There are increased risk factors for cancer in SMI patients. People with SMI have deficient access and referral to routine cancer screening and psychiatric illness is often associated to late oncological diagnosis.

Objectives Characterize the population of SMI patients that undergoes oncological treatment; establish a comparison with the general population in terms of stage at the time of diagnosis and the type of follow-up that ensued; characterize the psychiatric care available to these patients; propose the necessary changes to ensure adequate healthcare for SMI patients.

Aims To assess and improve the quality of oncological care for SMI patients in our hospital.

Methods We analyzed the data from SMI patients suffering from SMI observed by our group during a 12 month period.

Results Low percentage of SMI patients being treated in our center regarding general rates; surprisingly high referral time to psychiatry unit; good compliance with treatments and appointments; have mostly been submitted to the standard oncological protocols of treatment.

Conclusion In spite of serious psychiatric co-morbidity and psychosocial deficits, our SMI patients are able for standard cancer treatment and present sufficient compliance. We value the help of family members and social workers. We have to insist in educational sessions and psychiatric screening procedures for oncological teams. It is also fundamental to implement educational programs for mental health centers in Lisbon in order to sensitize for cancer risks among SMI and alert for the pivotal role of mental health staff, namely the psychiatrists.

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Clinical personality patterns in patients with acute lymphoblastic leukemia waiting for bone marrow transplantation

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Introduction Personality disorders are rather widespread in oncology settings demanding special attention of clinician. Serious illness threatening person's life as well as severe treatment and side effects lead to specific self-regulatory emotional and cognitive efforts. Personality could both play an important role in this process predicting adjustment and survival and change in line with illness pathogenesis.

Objectives The personality patterns could be important predictors of operation success and further adjustment for patients with acute lymphoblastic leukemia (ALL) waiting for bone marrow transplantation.

Aim To reveal personality patterns specific for patients with ALL. *Methods* Twenty-five patients with ALL (11 males, 37.4 ± 9.5 years old) filled Millon Clinical Multiaxial Inventory–III and Big Five Questionnaire–2. Comparison group included 180 people of the same age and gender without history of mental or severe somatic disorders.

Results Male patients comparing to healthy males were lower on emotional control and higher in negativistic personality pattern ($P < .05$). Female patients were higher on dynamism but lower in openness to culture and antisocial pattern ($P < .05$). They rarely expressed patterns of borderline disorder and drug dependence but reported more compulsive traits ($P < .05$).

Conclusions Severe illness could increase likelihood of emotion regulation difficulties and passive-aggressive coping in male patients while stimulate activity and compulsive behaviour in females. These patterns should be taken into account in psychological support of patents to bone marrow transplantation.

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Low income deteriorates quality of life in early breast cancer survivors

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Background Patients who have survived cancer and have lower socio-economic status, are more likely to leave the workforce. Financial problems are widespread among many of the breast cancer survivors, but their effect on the quality of life are not sufficiently explored. The aim of this study is to assess the effect of low income onto quality of life in early breast cancer survivors.

Methods In this study, 214 consecutive early female breast cancer patients, with mean age of 60 years (range 30–90), were interviewed for psycho-social aspects, depression (MINI) and quality of life (EORTC QLQ-Core 30 and BR-23). All patients were cancer free at the moment of interview and all initial oncological treatments were