

Objectives: To provide an overview of the most recent researches that have examined the role of Islam religion in cancer treatment.

Methods: PubMed database was screened using the keywords, "Islam, religion, cancer, treatment".

Results: Patients expressed a lack of religiosity/spirituality support and it is connected to a significantly lower quality of life compared to those who adequately addressed their spiritual needs. The study which included 800 Muslim cancer patients showed that cancer patients (82.8%) prayed more than non-cancer individuals (72.5%). Many Muslim patients do not consider disease as a penance, but rather, as a redemption of sins, because they have trust and faith in God's will. There are studies postulating the positive effects of fasting on cancer treatment.

Conclusions: Muslim cancer patients are more religious and spiritual than the non-cancer Muslim population, and they are in need of spiritual support with the aim to reduce depression, anxiety, and stress. Health care professionals may encourage the patients to use their religious beliefs to cope with the challenges of therapy.

Disclosure of Interest: None Declared

EPV0692

Diagnosis announcement among mothers of children with leukemia

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Introduction: The diagnosis of leukemia in a child is a difficult moment for the therapist and for the parents. Nevertheless, this moment is crucial and determining in the course of care and the therapeutic relationship.

Objectives: Determine the quality of diagnosis announcement among mothers of children with leukemia.

Methods: A cross-sectional study was conducted at Aziza Othmana hospital department of haematology in Tunisia between June and July 2021.

We have questioned the mothers about the announcement of the diagnosis: the space frame, the time provided and the availability of the doctor.

Results: We included 31 mothers, their middle age was 41 years old. Acute lymphoblastic leukemia is the most frequent type of cancer in our sample (94%).

According to 4 mothers (13.3%), the diagnosis of leukemia was not announced before the start of treatment.

The quality of the diagnostic announcement was judged to be good in 40% of cases (n=12), average in 12.7% (n=8) and mediocre in 20% of mothers (n=6).

The space frame of the announcement was perceived as appropriate with respecting confidentiality in 18 mothers (69.2%).

The time provided for the announcement was considered sufficient for 17 mothers (65.4%).

The doctor who announced the diagnosis was described as available by 69.2% of the mothers and unavailable by 30.8% of the mothers.

Conclusions: The quality of the diagnosis announcement among mothers of children with leukemia in our context is not optimal. Oncologists must be trained in diagnostic announcement and must be aware of the importance of this moment in the subsequent therapeutic relationship.

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EPV0693

The characteristics and risk factors for common psychiatric disorders in patients with cancer

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Introduction: The incidence of psychological disorders in patients with cancer is very high (30–60%), with approximately 29–43% fulfilling the diagnostic criteria for psychiatric disorders. The most commonly encountered mental problems encompass depressive symptoms associated with mixed anxiety and adjustment disorder or depressive mood or major depression.

Objectives: The aim of this research is to highlight the characteristics of psychiatric manifestations in patients with cancer and to analyse the risk factors that influence the occurrence of these psychiatric manifestations.

Methods: A bibliographical review was performed using the PubMed platform. All relevant articles were found using the keywords: cancer, psychiatric manifestations, risk factors.

Results: Sleep problems, irritability, tendency to cry easily, sadness, and pain were among the leading symptoms at baseline. Women reported sleep problems, tendency to cry easily, irritability, pre-occupation with the illness, and sadness as the first five most frequent issues, and men reported sleep problems, irritability, pain (usually incompatible with their medical conditions), sadness, and tendency to cry easily as the most frequent problems.

Conclusions: Significant risk factors that increased the mood disorders were recurrence, presence of secondary cancer, other chronic medical illnesses, history of psychiatric disorder, low income level, poor social support, and being single or divorced.

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"The cat and the calcium". A case of delirium secondary to hypercalcaemia.

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Introduction: Interconsultation with the psychiatry service is frequently requested from other specialties for the assessment and treatment of patients who present neuropsychiatric symptoms secondary to organic alterations. On the other hand (and in relation to this case), within the possible causes for the elevation of calcaemia figures, the most frequent are hyperparathyroidism and neoplasms, representing between these two entities 90% of cases (1). Among the organic mental disorders, Delirium stands out, with an approximate prevalence between 1 and 2% (general population), which increases in hospitalized and elderly patients (2).

Objectives: Presentation of a clinical case about a patient with delirium secondary to hypercalcaemia, with hallucinations and behavioral disturbance.

Methods: Bibliographic review including the latest articles in Pubmed about delirium (causes and treatment) and hypercalcaemia secondary to neoplasms.

Results: We present a 52-year-old male patient, who went to the emergency room accompanied by his wife, due to behavioral alteration. Two days before, he had been evaluated by Neurology, after a first epileptic crisis (with no previous history) that resolved spontaneously. At that time, it was decided not to start antiepileptic treatment.

The patient reported that he had left his house at midnight, looking for a cat. As he explained, this cat had appeared in his house and had left his entire bed full of insects. His wife denied that this had really happened, and when she told the patient to go to the emergency room, he had become very upset.

As background, the patient used to consume alcohol regularly, so the first hypothesis was that this was a withdrawal syndrome. However, although the consumption was daily, in recent months it was not very high, and at that time no other symptoms compatible with alcohol withdrawal were observed (tremor, tachycardia, sweating, hypertension...).

We requested a general blood test and a brain scan. The only relevant finding was hypercalcaemia 12.9mg/dL (which could also be the origin of the previous seizure). It was decided to start treatment with Diazepam and Tiapride in the emergency room, with serum perfusion, and keep under observation. After several hours, the patient felt better, the hallucinations disappeared, and calcium had dropped to 10.2mg/dL. A preferential consultation was scheduled, due to suspicion that the hypercalcaemia could be secondary to a tumor process.

Image:



Conclusions: It is important to rule out an organic alteration in those patients who present acute psychiatric symptoms. Hypercalcaemia is frequently associated with tumor processes (1) due to secretion of PTH-like peptide (4), so a complete study should be carried out in these cases.

Delirium has a prevalence between 1 and 2% in the general population (2).

Psychopharmacological treatment is used symptomatically, with antipsychotics (3). For the episode to fully resolve, the underlying cause must be treated.

Disclosure of Interest: None Declared

Others

EPV0696

Predictors of caregiver burden among parents of children with neurological impairment

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Introduction: Many neurological, sensory and behavioural deficits, are linked with significant limitations in the overall functioning not