

PS-010 ADAPTATION TO LIFE AFTER CANCER IN CHILDREN— DOES TYPE OF MALIGNANCY AND GENDER INFLUENCE IT?

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Background Little is known about how children adapt to life after cancer and what factors influence this process.

Aim To investigate psychological and social aspects of life of paediatric cancer survivors (PCS).

Material and methods Questionnaire survey included 69 PCS (F/M 35/34; mean age 14 years), 2–6 years after oncologic treatment in Department of Paediatrics, Haematology and Oncology, Medical University of Gdansk, Poland. Data was categorised by gender and cancer type (leukaemia and lymphomas, LL-44 and solid tumours, ST-25).

Results 40% of PCS found adjusting to new life difficult. 67% of girls with ST admitted to depression and constant thinking and learning about disease. 40% of patients felt afraid of recurrence (mainly boys with ST) and avoided thinking and talking about it. Half of patients complained of unsatisfactory health. Patients with ST (24%) and after surgery (58%) reported the worst self-estimation, which was associated with visible sequelae of disease/therapy. Cosmetic evidences concerned mostly ST patients while functional-LL. Losing hair was problematic mainly for girls; 30% of PCS felt uglier/worse than peers. 40% of girls and of ST patients felt bullied and reported problems with meeting new people. Instead, PCS kept close contacts with other patients met in clinic. 70% of respondents planned to have children, but 65% of them feared they may also develop cancer.

Conclusions Adaptation to life after cancer is influenced by type of malignancy and gender and is particularly problematic in children with visible sequelae of disease/therapy. Psychological and social support of PCS is essential.

Adolescent Health

PS-010a EFFECT OF TRAINING PROGRAMME ON HIGH SCHOOL TEACHERS' KNOWLEDGE AND ATTITUDE TOWARDS ADOLESCENT REPRODUCTIVE HEALTH EDUCATION IN RURAL SCHOOLS IN ILE-IFE, SW NIGERIA

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Aims Adolescents in Nigeria as in other Countries of the world are facing many reproductive Health problems nowadays which includes high rate of risky sexual activities, unintended pregnancy, abortion and STIs/HIV/AIDS. To address these problems, constant suggestions and recommendations have been made for the introduction of compulsory adolescent reproductive health education (ARHE) at all levels of educational institutions in Nigeria. Previous studies in Nigeria showed that teachers themselves had poor knowledge of and negative attitude towards ARHE. This study assessed the effect of training programme on teachers' knowledge and attitude towards ARHE in five

randomly selected rural schools in Ife- North local government area (IFLGA), SW Nigeria.

Methods All the 84 teachers in the selected schools in the LGA were voluntarily recruited for the study. They (84 Teachers) were all given training in ARHE for one month. Their knowledge and attitude towards ARHE was assessed pre- and post-training programme.

Results The results showed a significant increase in percentage of those who had good knowledge in general areas of ARHE at post- training assessment compared with pre- training assessment (from 14.3% to 53.6%, $p = 0.0001$). Also, pre-post attitudinal disposition assessments showed that there was an increase in percentage of those who were favourably disposed to the teaching of ARHE in Nigeria Schools at post- training assessment (from 17.9% to 45.2%, $p = 0.011$).

Conclusions The study suggests that teachers should be equipped in handling the teaching of ARHE in Nigeria schools.

Cardiac Function in the Neonate

PS-011 QUANTITATIVE ASSESSMENT OF PRETERM LEFT VENTRICULAR ANATOMICAL DEVELOPMENT AND REMODELLING USING NEONATAL CARDIAC MRI AND ATLASING TECHNIQUES

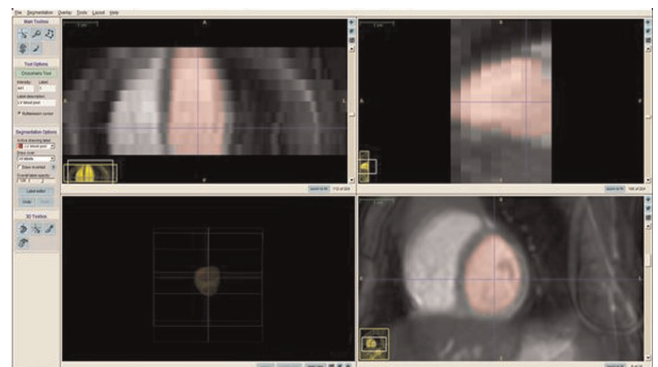
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Background and aims Cardiac development and myocardial maturation continues through the third trimester of gestation. Moderately preterm birth at 30–36 weeks adversely affects long-term cardiovascular health and impacts left ventricular size and geometry at young adulthood.

We aim to quantify and characterise normal and pathological neonatal cardiac development using cardiac MRI and computational atlas construction.

Methods Preterm neonates and healthy term controls underwent neonatal 3 Tesla cardiac MRI. Data from short axis stack sequences was manually segmented at end-diastole (ITK-SNAP software) providing volumetric measurements of the left ventricular myocardium and blood pool. Sub-group analysis compared 10 preterm neonates born at 32–35 weeks, scanned within 7 days of birth and at term-corrected age, with 4 healthy term controls (39–42 weeks).



Abstract PS-011 Figure 1