

ANTICOAGULANT PRIMARY PROPHYLAXIS

TACKLING THE AWARENESS GAP IN CANCER-ASSOCIATED THROMBOSIS: IMPACT OF A BRIEF EDUCATIONAL INTERVENTION IN PATIENTS WITH GYNECOLOGICAL CANCERS

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Background. Education and patient awareness regarding cancer-associated thrombosis (CAT) remain an unmet need in patients with cancer. A global online-based survey conducted by the World Thrombosis Day Steering Committee among 2,262 patients with cancer showed that only 67.8% received instructions to seek medical attention in case of suspected thrombosis, 36.9% reported poor understanding of thrombotic risk, and 32.4% experienced psychological distress after becoming aware of CAT.

Aims and Methods. Within the GynCAT study (NC-T06284343), patients with gynecological malignancies undergoing systemic therapy received a single 5-7-minute educational intervention on CAT risk, related risk factors, and management, delivered by internists/angiologists during chemotherapy. At least six months later, 509 patients were invited to complete the online-based survey previously used by the World Thrombosis Day Steering Committee to assess awareness of CAT.

Results. Of 509 questionnaires distributed, 354 responses were received (response rate 69.5%). Most respondents were aged 50-79 years (80.8%) and ethnicity was mainly Caucasian (89.4%). Cancer sites included ovary (68.7%), uterus (28.5%), cervix (8.0%). Overall, 90.3% patients re-

called having received information about CAT risk. Overall understanding of thrombotic risk was rated on a 1-10 scale, with a median score of 7 (Interquartile Range 6-8). Patients identified chemotherapy (61.9%), reduced physical activity (47.4%), recent surgery (39.0%), previous thrombosis (33.7%), central venous catheter (21.8%), as thrombotic risk factors. Signs and symptoms considered indicative of thrombosis included swelling (80.6%), sensation of warmth or heaviness (54.9%), redness (49.4%), and limb pain (43.1%), dyspnea (32.0%), chest pain (21.1%), irregular or rapid heartbeat (16.9%), and cough with blood (10.3%). Instructions on how to access medical care in case of symptoms were recalled by 84.4% of respondents. After receiving information on CAT risk, 52.1% reported no particular concerns, only 17.5% perceived anxiety, 1.6% reported frustration or sadness, and 28.9% unsure. Information was considered absolutely essential by 43.3% of patients and very important by 41.1%.

Conclusions. A brief, single educational intervention delivered during chemotherapy sessions was associated with high recall of information on CAT, satisfactory understanding, and high perceived importance among patients with gynecological cancers. □