

support life of people living with cancer, qualitatively and quantitatively which will be discussed in this paper.

P-062 NURSING INFORMATICS: NEW PERSPECTIVE FOR QUALITY IMPROVEMENT OF CANCER CARE

E. Maserat, N. Samadi, N. Mehrnoosh, M. Zali

Research Institute for Gastroenterology and Liver Disease Shaheed Beheshti

Introduction: Information have key role for effective decision making to quality nursing practice. Computer science, information science, and nursing science combined to assist in the management and processing of nursing data, information and knowledge to support the practice of nursing and the delivery of nursing care especially in cancer care. However aim of this study is applications of nursing informatics in quality improvement of cancer care. Method and material: Multiple databases of scientific contents were explored in order to assess the presence of nursing informatics or conceptually related terms. The databases were Medline (PubMed) and google scholar. Discussion: This article present application of nursing informatics in three categories. Clinical practice, education and research in cancer management are studied fields. In addition, researchers survey impact of applications in enhancing of cancer care. Conclusion: Nurses today are facing increasing information and complexity of data about cancer care. Nursing informatics simplifies this complexity and manages information in neoplasm field. Furthermore this technology facilitate on time access to accurate and complete information for best care.

P-063 MULTIFOCAL SOLID PSEUDOPAPILLARY TUMOR IN PANCREAS ;CASE REPORT

E. Kimiloglu Sahar, E. Kusku, A. Akyildiz Igdem, E. Celik, U. Tetikkurt, N. Erdogan

Taksim's Education and Training Hospital, Pathology Department, Istanbul/TURKEY

INTRODUCTION: Pancreatic solid pseudopapillary tumor (PSPT) is a rare tumor which histogenesis is still indefinite particularly. PSPT shows solid and cystic growing pattern as its name indicates. It forms %1-3 of all pancreatic tumors. It is seen in young adult females primarily, but it is also defined in males and older patients in low percentages. It is thought to be low malignant potentially because cure occurs by simple total resection. Besides the morphological and demographical characteristics of the tumor for strict diagnosis and to predict the prognosis seems to be more important. CASE: The patient was 29 years old man. He had pain in midline of the abdomen, the pain reflected to the back also. There was a 2.5 cm diameter solid mass in the body of pancreas by abdominal computed tomography. Subtotal distal pancreatectomy was performed. Macroscopically, there were two masses in the subtotal distal pancreatectomy material, one of them was 3.4 cm diameter in the body of pancreas. It was a brilliant and grey-white solid lesion. And the other was 0.7 cm diameter grey white solid lesion in the tail of pancreas. Microscopically, there was a tumoral proliferation which formed pseudopapillary formations, nests, rosette-like formations in the hematoxylin and eosin sections. The tumor cells had thin chromatin and some of the cells had groove or central small nucleol, oval or round nucleol, clear/eosinophilic cytoplasm. These cells arranged in a row along hyalinized fibrovascular cores.

P-064 A CASE OF HYPERKALEMIA IN A PATIENT WITH HEPATOCELLULAR CARCINOMA PROBABLY DUE TO SORAFENIB

U. Uyeturk, K. Helvaci, B. Budakoglu, B. Oksuzoglu, N. Zengin

Dr. Abdurrahman Yurtarslan Oncology Training and Research Hospital, 2nd Medical Oncology Department, Ankara, Turkey

Introduction; Sorafenib, a multitargeted oral tyrosine kinase inhibitor, prolongs the survival in patients with advanced hepatocellular carcinoma (HCC). Common adverse reactions include skin reaction as hand and foot syndrome and rash, cardiac ischemia and/or infarction, and hypertension. Hyperkalemia is a potentially life-threatening electrolyte disturbance that can lead to sudden death from cardiac arrhythmias. One of the frequent encountered reason for hyperkalemia is drug side-effect. We present a case of severe hyperkalemia due to sorafenib in a patient with HCC. Case; A 35-year-old man with unresectable HCC, who is HBsAg positive, was planned to be given sorafenib because of progressive disease after locoregional chemoembolization. In the second month of the sorafenib treatment, he was admitted to the emergency department with a one week history of weakness and drowsiness. Serum potassium level was 8.3 mmol/L (3.5-5.5 mmol/L) accompanied with mild elevations in liver enzymes. His electrocardiogram was suggestive of an effect of hyperkalemia. He did not have a prior use of medication that can cause hyperkalemia. Sorafenib treatment was stopped and emergency hemodialysis was applied for three times. After the treatment, his potassium level reduced to normal ranges and stabilized. Conclusion; In literature, there is only one case of sorafenib induced hyperkalemia which was observed in a patient with tumor lysis syndrome. Our case did not have other signs of tumor lysis syndrome. Besides, he was not using any other drugs that can cause hyperkalemia and his potassium levels recovered after cessation of sorafenib which are remarkable for sorafenib induced hyperkalemia.

P-065 PRIMARY UTERINE EWING'S SARCOMA: A VERY RARE CASE REPORT

U. Uyeturk, I. Turker, B. Budakoglu, B. Oksuzoglu, N. Zengin

Dr. Abdurrahman Yurtarslan Oncology Training and Research Hospital, 2nd Medical Oncology Department, Ankara, Turkey

Introduction; and objectives; Ewing sarcoma (ES) is the second most common malignant bone tumor after osteosarcoma. Atypical extraskeletal ES is rare however but atypical primary sites like uterus is even rarer. Case; A seventeen-year old single woman was admitted to hospital with the complaints of vaginal bleeding. Suspected uterine myoma, she was underwent myomectomy. The diagnosis of ES were reported. Immunohistochemical staining of the pathology specimen revealed diffuse positive staining with CD 99, neuron specific enolase (+), all others including CD10, LCA, chromogranin, EMA were negative. Staging computed tomography (CT) of the thorax and the abdomen only showed 2 cm lymphadenopathy (LAP) near iliac bifurcation in the abdomen. To confirm the staging FDG-PET was done. Pathological FDG uptake was only seen in the intraabdominal LAP, defined in CT. NCI chemotherapy protocol including vincristine, adriamycine, cyclophosphamide alternating with ifosfamide, etoposide was initiated. After 12th week, she was performed laparotomy and total abdominal hysterectomy and LAP dissection were done. Pathological examination of the operation material showed residual tumor in the obturator lymph node and other findings were within normal limits. She has still having chemotherapy. Conclusion; Uterus ES is a very rare and aggressive tumor seen in women with reproductive age. Local and distant metastases are commonly seen. Early diagnosis and treatment is important in achieving high cure rates. Multimodality