

Paszkowska A., Janczewska K.
**TRANSITION TO ADULTS AMONG CHILDHOOD CANCER SURVIVORS IN
POLAND – AN INTERDISCIPLINARY ISSUE**

*Tutors: prof. MD, PhD Krawczuk-Rybak M.,
MD, PhD Sawicka-Żukowska M.*

*Department of pediatric oncology and hematology
Medical university of Białystok, Białystok*

Relevance. Childhood neoplasm is a very uncommon condition, making up to only 0,5-2% of cancers in the whole population. A significant progress has been done in the treatment of those diseases recently. Nowadays the curability of cancer in children comes to 80%. Nevertheless, its long-term complications could develop when the patient is no longer under the medical care of pediatric oncologist, but many specialist of adult health care. Therefore, it is very important to provide the interdisciplinary medical attention to every childhood cancer survivor transitioning to adult health care.

Aim: the aim of the study was to evaluate the methods and quality of the transition to adults performed among patients treated for neoplastic diseases in the childhood in all of the pediatric oncology centers in Poland.

Materials and methods. The data were obtained from the questionnaire, consisted of 20 questions about transition to adults, which was sent to pediatric oncology centres (n=20) in Poland. 65% (n=13) fully filled up questionnaires were received back and analyzed.

Results and its discussion. The study revealed, that 54% of pediatric oncology centres finishes special patients care and observation completely, when the neoplasm survivor turns 18 years old (y.o.). 92% of clinics informs children and their parents about long-term side effects and the beginning of the treatment and during it, but only 23% informs about all possible complications (77% focuses consistently on selected, probable side effects). In 70% of clinics patients are educated again just before the transition to adults. Only 23% of centres transits the patient to adults fluently, starting 0,5-1 years before the main transition; in the rest of cases it is an one-time process. 62% of clinics sends the patient to the specialist only when the side-effects occur, the rest 38% in case of their probable existence (before demonstration). Mean age of children being informed about long-term complications of the neoplastic treatment is 13-15 y.o.

Conclusions. Considering wide range of long-term side effects of antineoplastic treatment in the childhood, survivors should be educated frequently - at the beginning, during the treatment, at the end of the therapy and before transition to adults. Study revealed, that transition in Polish centres is non-fluent, one-time process. Furthermore, improving the methods and quality of the survivors medical care - sending them to specialists before demonstration of side effects and reorganization of the transition as a continuous process - will help the survivors to avoid long-term complications and improve the quality of life.