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PSYCHOLOGICAL EXPERIENCES RELATED BY CISTECTOMIZED AND/OR PROSTATECTOMIZED OUTPATIENTS IN THE SOUTHEAST BRAZIL FACING THEIR LEADING CONDITION IN THE FAMILY STRUCTURE: A CLINICAL-QUALITATIVE STUDY L.A.M.C. Trigo¹, R. Magdaleno Jr¹, U. Ferreira², E.R. Turato³

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Introduction: The bladder and prostate cancer have similar invasive treatments, which imply in psychological alterations for the patient. They face changes in their way of life, have their male fragility exposed and they still charge themselves as the provider role in their families. Objectives/aims: To discussemotional meanings related to cistectomized and/or prostatectomized outpatients who exercise the leading condition in their family structure. Method: Clinical-qualitative with semi-directed interviews with open-ended questions and using saturation sampling closed with 9 married patients between 40 and 77 years old. Interviews were recorded and transcribed for later psychological interpretation.

Results: It is emerged five topics as patients' biggest concerning on postoperative:

- (1) Ego and Probe: There is a physiological and psychological discomfort about using a probe. They are afraid of what people will think, affecting their self-esteem and making them feel incapable;
- (2) Lack of Bladder Control: They reported "moral decay" and prefer being away of their day-to-day activities instead of using a diaper and deal with limitations;
- (3) Sexuality: The most important topic. There is an important loss of sexual practice and frustration. There is a connection between fear of being impotent and development of new ways to find pleasure and sexual satisfaction:
- (4) Relationship: Marriages were not shaken by the situation and intimacy increased; and
- (5) Escape of Reality: They said they had "lived life" as a way not to feel private about everything they had lost.

Conclusion: It is important to have a bigger emotional and psychosocial support for these patient's postoperative.