

349. MEDICO-SOCIAL PARTICULARITIES OF CHILDREN WITH ONCOLOGICAL PATHOLOGIES BY THE PRISM OF THE QUALITY OF LIFE

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Introduction. The quality of life of children with haematological-oncological diseases which refers to: the emotional, social, physical well-being and the ability to function normally - suffers, because the long-term treatment and its adverse effects have a major impact on all spheres of activity of the cell of society. Studies in the quality of life of children and their families are very important because of the strategic particularities in the elaboration of the therapeutic behavior and the psychological / emotional particularities.

Aim of the study. Studying aspects of the quality of children life with haematological/oncological pathologies grouped by age, socio-economic level and rural-urban living environment.

Materials and methods. The analytical selective study accomplished (February 2020) via the sections of pediatric oncology and hematology of the Oncological Institute through the WHO *standardized questionnaire–PedsQL*. The sample included 45 children aged 5-18 years and parents. Information agreements were signed regarding the confidentiality of data, without disclosure of personal data.

Results. The standardized tool allows the highlighting of the following items in the research groups: *pain and hurt*– 71.71% (95%CI: 58.25–85.17); *nausea*– 71.58% (95% CI: 55.38-87.78); *procedural anxiety*– 66.67% (95%CI: 48.20-85.14); *treatment anxiety*– 81.14% (95% CI: 67.29-94.99); *worry* -59.65% (95%CI: 41.19-78.11);*cognitive problems*- 66.84% (95% CI: 51.26-82.42);*perceived physical appearance*– 53.51% (95% CI: 34.61-72.41); *communication*– 69.3% (95%CI: 51.4-87.2). It has been shown according to the living environment that 87% of patients are from rural areas and 13% from urban areas.

Conclusions. The results of the questionnaires indicate a low level of quality of life of the children with oncological diseases and their families. The studies carried out highlighted a number of factors that could influence the quality of life: Family, Health, Friends, School and activity, Social life, Safety, Emotional well-being. A large number of patients have treatment anxiety, changes in appetite, disturbances in their relationships with others, changes in body image, as well as changes in the cognitive sphere. Thus, during the treatment as well as after it is necessary the psychological and spiritual counseling of all family members.

Key words: quality of life; oncological diseases; treatment anxiety; perceived physical appearance.