

Torino, Italy

Covid-19: l'impatto sulla comunicazione e sulla relazione personale



Bevilacqua F, Preti M, Gallio N, Micheletti L, Benedetto C

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ARTICLE ATTRIBUTE

Risk **Communication** During **COVID-19**.

1 Abrams EM, Greenhawt M.

Cite *J Allergy Clin Immunol Pract.* 2020 Jun;8(6):1791-1794. doi: 10.1016/j.jaip.2020.04.012. Epub 2020 Apr 15.

Share PMID: 32304834 **Free PMC article.**

One potential way to ensure appropriate risk **communication** is using social media channels, and ensuring an ongoing consistent media presence. ...As we continue to face unprecedented times in the allergy community, an understanding and appreciation of risk **communication** ...


Protecting the psychological health of children through effective **communication** about **COVID-19**.

2 Dalton L, Rapa E, Stein A.

Cite *Lancet Child Adolesc Health.* 2020 May;4(5):346-347. doi: 10.1016/S2352-4642(20)30097-3. Epub 2020 Mar 31.

Share PMID: 32243784 **Free PMC article.** No abstract available.

Communication Skills in the Age of COVID-19

Anthony Back, MD , James A. Tulsy, MD, Robert M. Arnold, MD

[Author, Article and Disclosure Information](#)

<https://doi.org/10.7326/M20-1376>



<p>CALMER: A Talking Map for COVID-Related Proactive Planning</p> <p><u>Check in</u> Take a deep breath (yourself!) "How are you doing with all this?" (Take their emotional temperature)</p> <p><u>Ask about COVID</u> "What have you been thinking about COVID and your situation?" (Just listen)</p> <p><u>Lay out issues</u> "Here is something I want us to be prepared for." / "You mentioned COVID. I agree." "Is there anything you want us to know if you have COVID/if your COVID gets really bad?"</p> <p><u>Motivate them to choose a proxy and talk about what matters</u> "If things took a turn for the worse, what you say now can help your family/loved ones." "Who is your back-up person—who helps us make decisions if you can't speak? Who else?" (having 2 back-up people is best) "We're in an extraordinary situation. Given that, what matters to you? About any part of your life? About your health care?" Make a recommendation—if they would be able to hear it "Based on what I've heard, I'd recommend [this]. What do you think?"</p> <p><u>Expect emotion</u> Watch for this—acknowledge at any point "This can be hard to think about."</p> <p><u>Record the discussion</u> Any documentation—even brief—will help your colleagues and your patient "I'll write what you said in the chart. It's really helpful, thank you."</p>	<p>SHARE: A Talking Map for Explaining Resource Allocation*</p> <p><u>Show the guideline</u> "Here's what our institution/system/region is doing for patients with this condition." (Start the part directly relevant to that person.)</p> <p><u>Headline what it means for the patient's care</u> "So for you, what this means is that we care for you on the floor and do everything we can to help you feel better and fight this illness. What we won't do is transfer you to the ICU or do CPR if your heart stops." (Note that you talk about what you will do first, then what you won't do.)</p> <p><u>Affirm the care you will provide</u> "We will be doing [the care plan], and we hope you will recover."</p> <p><u>Respond to emotion</u> "I can see how it feels unfair."</p> <p><u>Emphasize that the same rules apply to everyone</u> "We are using the same rules with every other patient in this hospital/system/institution. We are not singling you out."</p> <p>*This talking map is used only when an institution has declared use of crisis standards of care, or a surge state. When the crisis standards or surge are discontinued, this map should no longer be used.</p>
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Figure. Talking maps for communication during the COVID-19 pandemic. COVID = coronavirus disease; CPR = cardiopulmonary resuscitation; ICU = intensive care unit.

Psychological effects of diagnosis and treatment of cervical intraepithelial neoplasia: a systematic review

Maria Eiholm Frederiksen, Sisse Njor, Elsebeth Lynge, Matejka Rebolj

Frederiksen ME, *et al.* *Sex Transm Infect* 2015;**91**:248–256. doi:10.1136/sextrans-2014-051754



DOI: 10.1111/1471-0528.13462
www.bjog.org

Systematic review

Adverse psychological outcomes following colposcopy and related procedures: a systematic review

M O'Connor,^a P Gallagher,^b J Waller,^c CM Martin,^d JJ O'Leary,^d L Sharp,^e on behalf of the Irish Cervical Screening Research Consortium (CERVIVA)

^a National Cancer Registry Ireland, Cork, Ireland ^b School of Nursing and Human Sciences, Dublin City University, Dublin, Ireland

^c Department of Epidemiology and Public Health, Health Behaviour Research Centre, University College London, London, UK ^d Coombe Women and Infants University Hospital, Dublin, Ireland ^e Institute of Health & Society, Newcastle University, Newcastle, UK

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Contents lists available at ScienceDirect

European Journal of Obstetrics & Gynecology and Reproductive Biology

journal homepage: www.elsevier.com/locate/ejogrb



Patients' psychological reactions to colposcopy and LLETZ treatment for cervical intraepithelial neoplasia

Susanna Kola*, Jane C. Walsh

School of Psychology, National University of Ireland, University Road, Galway, Ireland

Anxiety and distress following receipt of results from routine HPV primary testing in cervical screening: The psychological impact of primary screening (PIPS) study

Emily McBride¹, Laura A.V. Marlow¹, Alice S. Forster¹, Deborah Ridout², Henry Kitchener³, Julietta Patnick⁴ and Jo Waller¹

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²Population, Policy and Practice Programme, UCL Great Ormond Street Institute of Child Health, London, United Kingdom

³Women's Cancer Centre, Institute of Cancer Sciences, University of Manchester, Manchester, United Kingdom

⁴Cancer Epidemiology Unit, Nuffield Department of Population Health, University of Oxford, Oxford, United Kingdom

HPV Communication: Review of Existing Research and Recommendations for Patient Education

Rebecca Anhang, MS; Annekathryn Goodman, MD; Sue J. Goldie, MD, MPH

ORIGINAL ARTICLE

Information and cervical screening: a qualitative study of women's awareness, understanding and information needs about HPV

Megan R Goldsmith, Clare R Bankhead, Sean T Kehoe, Gill Marsh and Joan Austoker

J Med Screen 2007; **14**:29-33





Testing positive for human papillomavirus in routine cervical screening: examination of psychosocial impact

**Kirsten McCaffery,^a Jo Waller,^b Sue Forrest,^b Louise Cadman,^c
Anne Szarewski,^c Jane Wardle^c**

Original article

Understanding Women's Differing Experiences of Distress after Colposcopy: A Qualitative Interview Study

Mairead O'Connor, PhD^{a,*}, Jo Waller, PhD^b, Pamela Gallagher, PhD^c,
Cara M. Martin, PhD^d, John J. O'Leary, MD, PhD^d, Tom D'Arcy, MD^e,
Walter Prendiville, MD^e, Grainne Flannelly, MD^f, Linda Sharp, PhD^a,
on behalf of the Irish Screening Research Consortium (CERVIVA)

COMUNICAZIONE **PRE**-CORONAVIRUS

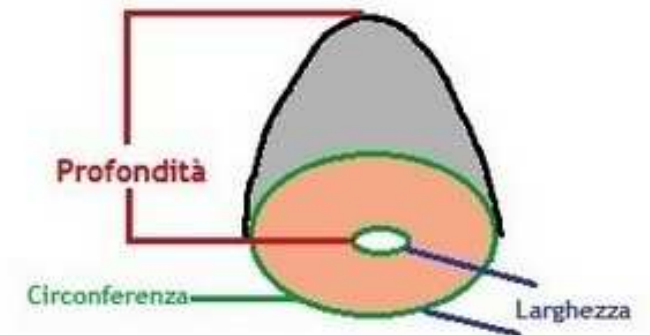
- Contatto telefonico per concordare appuntamento c/o Ambulatorio di Patologia del Basso Tratto Genitale
- Colloquio personale con la paziente e counselling riguardo:
 - Esito della biopsia
 - Necessità di intervento
 - Dettagli sulla conizzazione
 - Decorso post-operatorio
 - Possibili complicanze
 - **Ripercussioni sulla procreazione**
 - Vaccinazione anti-HPV



COMUNICAZIONE PRE-CORONAVIRUS

PRO

- Possibilità di mostrare la scheda colposcopica e illustrare alla paziente visivamente la sua condizione clinica
- Possibilità di disegni schematici per spiegare la procedura di conizzazione




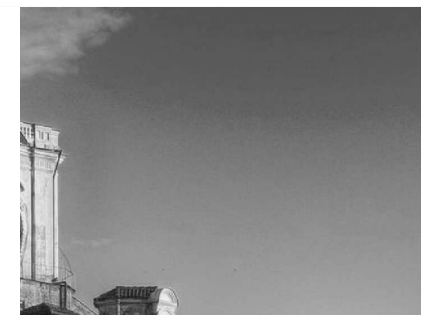
COMUNICAZIONE PRE-CORONAVIRUS

PRO



Possibilità di spiegare l'informazione ufficiale sulla vaccinazione peri-conizzazione

	INFORMATIVA VACCINAZIONE ANTI HPV	P909.xxxx	Rev. 0
S ANNA	Scheda 2	12/06/2020	Pagina 1 di 2



La vaccinazione contro il Papillomavirus Umano (HPV) rappresenta uno strumento nuovo ed efficace contro l'infezione dei principali tipi di HPV ad alto rischio, cioè quelli che causano lesioni precancerose e il tumore del collo dell'utero. I vaccini hanno dimostrato di proteggere contro i tipi specifici di HPV che sono responsabili fino al 90% dei tumori del collo dell'utero, fino all'85% delle lesioni pretumorali del collo dell'utero e fino al 90% dei condilomi genitali. La protezione è diretta anche contro altre lesioni del basso tratto genitale femminile (lesioni pretumorali vaginali, vulvari, perineali), anali e della gola.

L'HPV inoltre è responsabile anche negli uomini di cancro anale e della gola e di cancro del pene.

Nove-valente che previene le infezioni nove tipi di HPV ad alto rischio (16, 18, 31, 33, 45, 52, 58, 6, 11).

La vaccinazione è sicura e **non può**, quindi, **causare infezioni né malattie da HPV**. Deve essere somministrata per via intramuscolare (nella parte alta del braccio) in 2 o 3 dosi a seconda dell'età.

La vaccinazione è consigliata anche in corso di infezione da HPV poiché garantisce la protezione

conizzazione



COMUNICAZIONE PRE-CORONAVIRUS

Per eseguire la vaccinazione potrà prendere contatti con il **servizio vaccinale dell'ASL della Città di Torino (800.880.080 - tasto 3)** Email: vaccinazioni@aslcittaditorino.it

COMUNICAZIONE **PRE**-CORONAVIRUS

PRO



Spazio dedicato alla paziente per eventuali dubbi, paure, domande

COMUNICAZIONE PRE-CORONAVIRUS



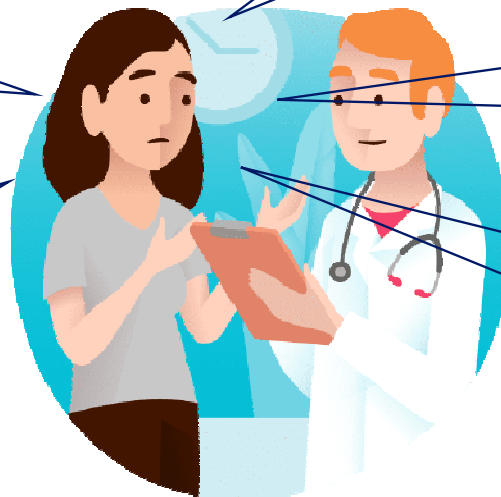
Ma se faccio
l'operazione poi
l'infezione passa?

Che senso ha vaccinarsi
se ho già contratto
l'infezione?

Ma a un anno
dall'operazione posso
cercare una gravidanza?

Se ho una relazione
stabile da anni significa
che il mio compagno mi
tradisce?

Posso avere rapporti con
il mio compagno?



Ma sarà doloroso?



COMUNICAZIONE **POST**-CORONAVIRUS



Riduzione degli accessi ospedalieri alle prestazioni urgenti e indifferibili



Counselling telefonico



COMUNICAZIONE **POST**-CORONAVIRUS

CONTRO

Impossibilità di mostrare la scheda colposcopica alla paziente e impossibilità di spiegare la procedura chirurgica con l'ausilio di disegni

Impossibilità di comprendere l'impatto della comunicazione attraverso il linguaggio corporeo

Impossibilità di spiegare in dettaglio alla paziente l'informativa sulla vaccinazione

Impossibilità di tranquillizzare la paziente con espressioni calme quando, ad esempio, si pronunciano parole come «lesione pretumorale»



COMUNICAZIONE **POST**-CORONAVIRUS

PRO

- ➔ **Possibilità di** raggiungere le pazienti in orario extra-ambulatoriale
- ➔ Minor discomfort della paziente che riceve le informazioni senza doversi recare in ospedale
- ➔ Riduzione dei tempi in sala d'attesa



COMUNICAZIONE **POST**-CORONAVIRUS

CONSEGUENZE:

Spesso le pazienti arrivano il giorno dell'intervento dicendo «Non mi è stato spiegato nulla»

«Mi hanno spiegato al telefono, ma sinceramente non ci ho capito niente, vorrei che me lo rispiegaste»

«Mi sono venute in mente delle domande dopo che ho attaccato il telefono»

Aumento dei casi di gravidanze insorte tra la comunicazione dell'esito e l'intervento



COMUNICAZIONE CORONAVIRUS-ADAPTED

Sperando di poter tornare presto a guardare le nostre pazienti negli occhi




**CHE COSA POSSIAMO FARE
NEL FRATTEMPO?**


COMUNICAZIONE CORONAVIRUS-ADAPTED



Assicurarsi di avere l'attenzione della paziente durante la telefonata.




Utilizzare un tono di voce calmo, scandire bene le parole, evitare parole come «tumore», «operazione chirurgica», «sanguinamento»




Prevenire le domande della paziente con un discorso organico, ben strutturato, che sia il più possibile standardizzato al fine di evitare dimenticanze

COMUNICAZIONE CORONAVIRUS-ADAPTED



Consegnare alle pazienti afferenti all'ambulatorio l'informativa sulla vaccinazione a prescindere dalla possibilità o meno di essere sottoposte a conizzazione



In alternativa inviare via email l'informativa

COMUNICAZIONE CORONAVIRUS-ADAPTED



Fornire a tutte le pazienti afferenti all'Ambulatorio informative materiali e siti web attraverso cui possono trovare le risposte alle domande

Possible Problems

Although problems seldom occur with LEEP, there can be some complications. You may feel faint during the procedure or have some bleeding. Electrocautery may be used to control bleeding. There is also a risk of infection after the procedure. These complications are rare and can be treated easily.

You should contact your doctor if you have any of the following:

- Heavy bleeding (more than your normal period)
- Bleeding with clots
- Severe abdominal pain
- Fever (more than 100.4°F)
- Foul-smelling discharge

Your Recovery

It may take a few weeks for your cervix to heal. While your cervix heals, you may have:

- Vaginal bleeding (less than normal menstrual flow)
- Mild cramping
- A brownish black discharge (from the medicated paste used)

It's important to help your cervix heal. For a few weeks after the procedure, you should not have sexual intercourse or use tampons or douches. If you have any of these five, your doctor may prescribe the pain medication.

Staying Healthy

After the procedure, you will need to see your doctor regularly for follow-up appointments during the year. At these visits your doctor will check the health of your cervix. After 1 year of normal results, you may return to having exams once a year. If you have another abnormal Pap test, your doctor may prescribe treatment.

By making a few lifestyle changes after the procedure, you can help protect the health of your cervix.

- Have regular gynecologic exams and Pap tests.
- Stop smoking—smoking increases your risk of cervical cancer.

- If you have more than one sexual partner, limit your number of partners and use condoms to reduce your risk of STDs.

Finally...

LEEP is an effective and simple way to treat dysplasia. The procedure can be done in only a few minutes, and your recovery time is usually brief.

Glossary

Anesthesia: Relief of pain by loss of sensation.

Biopsy: A tissue surgical procedure to remove a small piece of tissue for its later examination under a microscope in a laboratory.

Cervix: The lower, inner end of the uterus, which protrudes into the vagina.

Colonoscopy: Viewing of the colon, cecum, or sigmoid under magnification with an instrument called a colonoscope.

Cone Biopsy: Surgical removal of cone-shaped wedge of cervical tissue.

Cryosurgery: A freezing technique used to destroy abnormal tissue (also known as "cold conization").

Dysplasia: A precancerous condition that occurs when normal cells on the surface of the cervix are replaced by a layer of abnormal cells. Its spread is classified as mild, moderate, or severe.

Electrocautery: A procedure in which an instrument works with electric current to destroy tissue.

Laser: A small, intense beam of light used as a surgical tool.

Loop Electrosurgical Excision Procedure (LEEP): A surgical procedure that uses an electrical loop of wire to remove abnormal tissue from the cervix.

Speculum: An instrument used to spread the walls of the vagina so that the cervix can be seen.

Uterus: A muscular organ located in the female pelvis that contains and nourishes the fetus during pregnancy.

The Patient Education Pamphlet was developed under the direction of the Committee on Patient Education of the American College of Obstetrics and Gynecologists. Designed as an aid to patients, it was made possible through the generous support of Johnson & Johnson. The information in this pamphlet does not constitute an exclusive means of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations in ability and anatomy of the individual patient, symptoms, and treatment may require the use of other procedures that may be appropriate.

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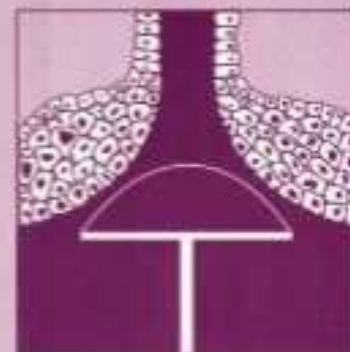
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ACOG
Patient
Education



Loop Electrosurgical Excision Procedure

How effective is the vaccine?

- ✔ HPV vaccination (**and regular cervical screening in females**) is a safe and reliable way to protect young people from getting a range of HPV related cancers and diseases.
- ✔ Almost all HPV infections that cause abnormal cells and cancer can be prevented by the HPV vaccine.
- ✔ Studies have shown that the vaccine is proving very effective in Australia. There has been a big decrease in HPV infections, pre-cancers of the cervix and genital warts.
- ✔ The vaccine works best when given at a younger age and before exposure to HPV.



How safe is the vaccine?

HPV vaccines used in Australia are very safe. The vaccine has been provided through school-based programs in Australia since 2007 for females and 2013 for males. Millions of doses have been given all over the world.

Scientists and medical researchers from around the world, including Australia, have tested all HPV vaccines available in Australia to make sure they are safe. In Australia, as in other countries, there is ongoing monitoring of vaccine safety.

Some people might experience mild side effects from the vaccine. These can include:

- ✔ soreness, swelling and redness at the injection site
- ✔ mild temperature
- ✔ feeling faint and fainting.

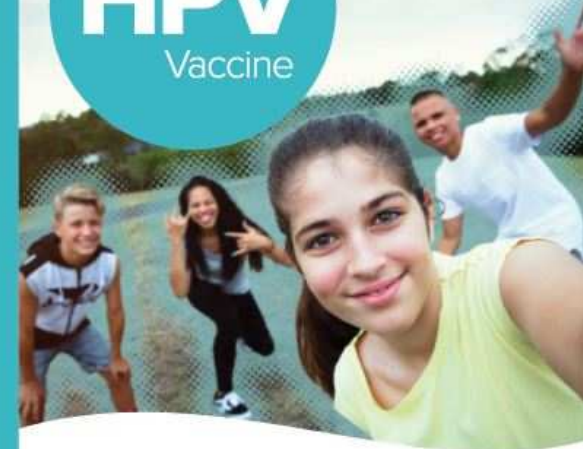
Like other vaccines, a very small number of people can have an allergic reaction shortly after getting the vaccine. Vaccination providers are prepared to manage these types of reactions.

See your GP if you are worried about your child's reaction.

HPV
Vaccine

You can learn more about the safety of the HPV vaccine at the Therapeutic Goods Administration website tga.gov.au

HPV
Vaccine



Preventing human papillomavirus (HPV) cancers and diseases by vaccination

Helping to protect young people from a range of cancers and diseases caused by the human papillomavirus (HPV)

health.gov.au/immunisation



+ SUPPORT GROUP

The Cervical Cancer TRAIL Support Group was established in 2008 by a group of passionate nurses and doctors to provide peer support among women who are diagnosed with cervical cancer and to help gynaecologists at the National University Cancer Institute, Singapore (NCIS) located at the National University Hospital (NUH). TRAIL is our awareness colour and also represents women who go. Truly Empowered and Actively Living! Activities are conducted quarterly which include individual talks, seminars, workshops, excursions and year end parties.

Membership is free. For more information, please call Cancer Care Nurse at 6732 0444 (Mon - Fri 8.30am - 5.30pm) or email CancerCare@nus.edu.sg

+ ABOUT NCIS

The National University Cancer Institute, Singapore (NCIS) is the only comprehensive public cancer centre in Singapore treating both paediatric and adult cancer in one facility. Located at the National University Hospital (NUH), NCIS offers a broad spectrum of cancer care with expertise in prevention, screening, diagnosis, treatment, rehabilitation and palliative care.

+ CONTACT INFORMATION

National University Cancer Institute, Singapore (NCIS)

Radiation Therapy Centre and Breast Care Centre,
NUH Medical Centre, Level 8

Chemotherapy Centre and Stem Cell Therapy Centre,
NUH Medical Centre, Level 8

Cancer Centre,
NUH Medical Centre, Level 10

Opening Hours: 9.00am - 5.30pm
8.00am - 5.00pm on Public Holiday
For appointments, please contact
Tel: 6732 0444
Email: CancerApp@nus.edu.sg

For International Patients and Visitors

The International Patient Liaison Centre (IPLC) is a one-stop centre to support all the medical needs of our foreign patients.

Tel: 6732 2773 (24-hour Helpline)
Fax: 6732 77 0061
Website: www.nuh.com.sg/ipic

For all other general enquiries, please contact

National University Cancer Institute, Singapore (NCIS)
1E Kent Ridge Road,
Singapore 119228
Email: ncis@nus.edu.sg
Website: www.ncis.com.sg



Nearest MRT Station - Kent Ridge Station (Circle Line)

Conductors can alight at the Kent Ridge Station, right at the entrance of the NCIS Medical Centre. Please use the station via Exit C. (NUH is located on levels B, 7 and 10 which are accessible via Lift Lobby B)

For more information on directions to NUH, log on to www.nuh.com.sg

For more information for any specific directions to NCIS, please log on to www.ncis.com.sg



National University Hospital
1 Lower Kent Ridge Road,
Singapore 119074
Tel: 6732 77 0000
Fax: 6732 77 0078
Website: www.nuh.com.sg

Information in this brochure is given as a guide only and does not replace medical advice from your doctor. Please seek advice from your doctor if you have questions related to the surgery, your health or medical condition.

Information is correct as time of printing. Our jobs and subject to review without notice.

National University
Cancer Institute, Singapore



PATIENT INFORMATION

ABOUT

CERVICAL CANCER

A member of the NUSMC

COMUNICAZIONE CORONAVIRUS-ADAPTED

Utilizzare piattaforme come Meet o Zoom per effettuare il counselling in videochiamata.

Possibilmente la paziente dovrebbe essere contattata dal professionista che eseguirà l'intervento di conizzazione o da parte dell'equipe sanitaria che sarà presente quel giorno



COMUNICAZIONE CORONAVIRUS-ADAPTED

Quale personale????

→ Creare una Linea Verde per le pazienti.
Un numero dedicato a cui le pazienti possano fare riferimento in caso di dubbi e/o domande e/o comunicazioni importanti.*

*Possibilmente un cellulare, creare turni di «reperibilità telefonica» tra i professionisti responsabili dell'ambulatorio.



COMUNICAZIONE CORONAVIRUS-ADAPTED



Sottoporre alle pazienti un questionario di feedback prima di sottoporsi all'intervento con domande riguardanti la loro condizione clinica, l'intervento, le implicazioni



Capire l'efficacia dei nostri metodi comunicativi + discutere con la pz le risposte sbagliate prima dell'intervento + migliorare la comunicazione per le future pz dell'ambulatorio

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The outbreak of COVID-19 coronavirus and its impact on global mental health.

1 Torales J, O'Higgins M, Castaldelli-Maia JM, Ventriglio A.

Cite Int J Soc Psychiatry. 2020 Jun;66(4):317-320. doi: 10.1177/0020764020915212. Epub 2020 Mar 31. PMID: 32233719 Review.

Share BACKGROUND: The current outbreak of **COVID-19** coronavirus infection among humans in Wuhan (China) and its spreading around the globe is heavily impacting on the global **health** and **mental health**. Despite all resources employed to counteract the spreading ...

Mental health outcomes of the CoViD-19 pandemic.

2 Talevi D, Socci V, Carai M, Carnaghi G, Faleri S, Trebbi E, di Bernardo A, Capelli F, Pacitti F.

Cite Riv Psichiatr. 2020 May-Jun;55(3):137-144. doi: 10.1708/3382.33569. PMID: 32489190 Review.

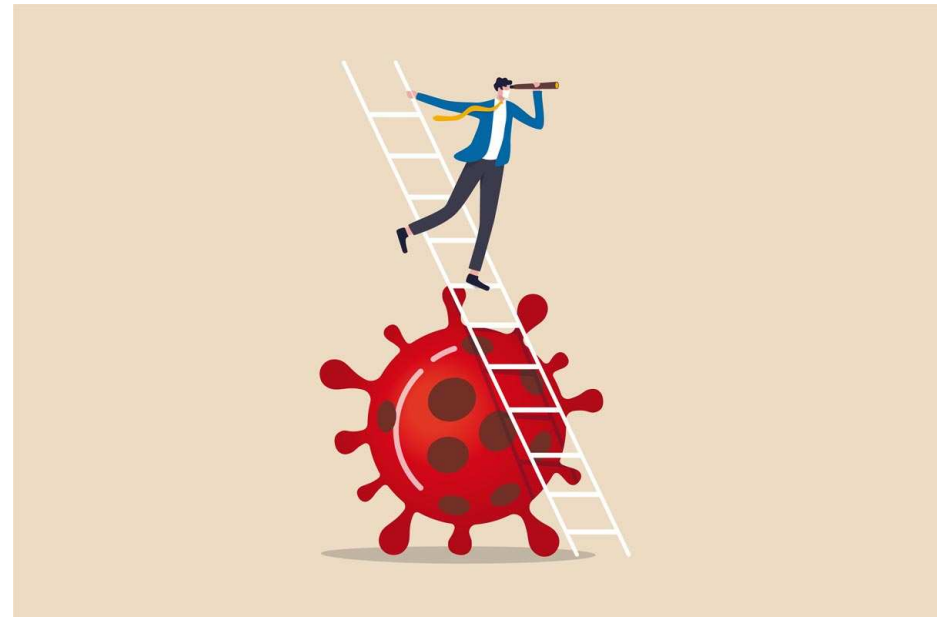
Share On January 30, 2020, the World **Health** Organization declared that the **CoViD-19** outbreak is a public **health** emergency of international concern. The virus has already had a direct impact on the physical **health** of million people, and besides, it is suppose ...



COMUNICAZIONE CORONAVIRUS-ADAPTED



Imparare a convivere con il virus non significa soltanto indossare DPI e mantenere il distanziamento sociale





COMUNICAZIONE CORONAVIRUS-ADAPTED

→ Tuteliamo le nostre pazienti e la loro salute, che non è solo fisica ma anche psico-emotiva

→ **Impariamo a comunicare secondo le nuove regole**





Thank You!