of survivorship care. Screening for mental health morbidity should be better integrated into active cancer treatment and survivorship and it should be provided mental health later interventions.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

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## EW0427

# The impact of the type of surgical treatment on the quality of life of Portuguese women with breast cancer

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*Introduction* Breast cancer significantly impacts dimensions of quality of life such as mental health, one's level of activity, family well-being, physical concerns (symptoms and pain), treatment satisfaction, emotional well-being, sexual intimacy, and social functioning.

*Aim* The aim of this study is to evaluate the impact of the type of surgery on the quality of life of women being treated for breast cancer, based on the comparison of samples of women who have undergone different types of surgery.

*Method* Our sample consists of 90 Portuguese women divided into three groups of 30 participants each. The first group underwent radical surgery in order to treat their breast cancer. The second group of women had conservative surgery as a breast cancer treatment. Finally, the last group of women did not have any type of surgical intervention. We use a socio-demographic questionnaire and the Portuguese version of the EORTC QLQ-30 as measurement instruments. The sample consists of patients from a central hospital in Lisbon, Portugal, and the data were collected anonymously.

*Results* We find that in all dimensions of quality of life measured, including general health, physical functioning, social roles, and all emotional, cognitive, and social dimensions, the group of women who underwent radical surgery shows lower scores when compared to the other two groups. This indicates that this group has lower levels of quality of life.

*Conclusion* The use of surgery for the treatment of breast cancer leads to a diminished quality of life following surgical intervention.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

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## EW0428

# Quality of life and anxious-depressive symptoms in cancer patients undergoing mindfulness-based interventions: Feasibility and preliminary outcomes on prospective single-centre case-control study (MIND4ME St.)

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*Background* Mindfulness based interventions (MBIs) have shown efficacy in improving psychological symptoms including depression and anxiety in cancer patients (pts). The study aimed to explore feasibility and reproducibility of MBIs in an Italian Cancer Centre measuring biochemical and psychological parameters.

*Methods* In this pilot prospective case-control study, we recruited newly diagnosed pts receiving adjuvant chemotherapy (CT). A MBIs program was designed consisting of 2.5 hours weekly for 8 weeks and, including meditation, yoga and body scan. Material for 45 minutes (mn) home daily practice was provided. Primary endpoint was to evaluate feasibility. Secondary endpoints were assessment of quality of life (QoL), psychological and biochemical outcomes of stress, tested at baseline (W0), W4, W8, W24, W48. PSS (Perceived Stress Reduction), POMS (profile of mood states scores), EuroQoL (EQ-5D-3L) were administered.

*Results* Ten pts underwent MBIs program arm. We present preliminary results, while data of control arm are being collected. All pts were female, two pts (20%) dropped out. Median age was 56 years. All received adjuvant CT, 5/8 received radiotherapy and hormone therapy. Mean of sessions attending was 6.8 (76%). Median daily practice was 30 mn. EQ-5D item for depression and anxiety showed decreasing trend in mean score from moderate to light (*P* = 0.15) and significant improvement of auto-perceived QoL was observed comparing W0 and W8 (*P* = 0.02)

*Conclusions* In a sensitive setting such as start CT, we found high pts compliance to MBIs. Improvement in self-perceived QoL after starting program was found and comparing anxious-depressive symptoms outcomes with control arm is still needed.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

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## EW0429

# Psychosocial interventions to improve the quality of life for men with prostate cancer: A network meta-analysis of 31 randomized controlled trials

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*Background* The treatment of prostate cancer (PCa) can trigger a sequence of life-altering decisions that can induce depression and effects on health-related quality of life. We aimed to simultaneously compare all available psychosocial interventions using both direct and indirect data.

*Methods* In this systematic review and network meta-analysis, we searched the Embase, Medline, PsycINFO, and the Cochrane central register of controlled trials for randomized controlled trials (RCT) published before Oct, 2016, that compared active treatments dealing with psychosocial problems in PCa patients after treatment. The primary outcome was health-related quality of life improvement as measured by the 36-Item Short-Form Health Survey (SF-36). Psychological morbidity was assessed with the Hospital Anxiety and Depression Scale (HADS). This study is registered with PROSPERO, number CRD42016049621.

*Results* We screened 113 potentially eligible studies and identified 31 RCTs, that examined 7 psychosocial interventions in 3643 PCa participants. In terms of SF-36, cognitive behavioral therapy [standard mean difference (SMD) 2·48, credible interval [CrI] 0.23