**Poster 269**
**Arresting’ psychological issues for better health outcomes in parents of infants and young children with cystic fibrosis**

C.A. Branch-Smith1, J.A. Pooley2, L. Shields3, S. Stick1,4, T. Douglas4,5, on behalf of AREST CF 1Telethon Institute for Child Health Research, Clinical Sciences, Perth, Australia; 2Edith Cowan University, School of Psychology and Social Science, Perth, Australia; 3James Cook University, School of Nursing, Midwifery and Nutrition, Townsville, Australia; 4University of Western Australia, School of Paediatric and Child Health, Perth, Australia; 5Curtin University, School of Psychology, Perth, Australia

**Background:** Children enrolled in the AREST CF early surveillance program undergo annual CT scan thorax and bronchoscopy under general anaesthetic to detect signs of early lung disease. How well caregivers cope with the annual procedures and with knowledge of their child’s covert disease progression is unknown.

**Objectives:** To report the range of caregiver coping behaviours and maladaptive coping that may benefit from psychosocial intervention.

**Methods:** A qualitative research design using semi-structured interviews for caregivers of children with CF recruited from Perth and Melbourne CF Clinics. Items explored coping strategies and effectiveness related to the annual surveillance program. Thematic analysis identified a range of coping strategies.

**Results:** 49 caregivers (11 fathers, 38 mothers) of children aged 1–6 years (m=3 years) participated. Coping with annual surveillance procedures is predominantly emotion-focused, whilst coping with the knowledge of covert disease progression is problem-focused. The primary maladaptive coping strategy was cognitive avoidance. Overall, coping among caregivers was adaptive with many drawing positive value from negative events. The perceived benefits of early detection and treatment of lung disease enables parents to cope with the knowledge of covert disease progression.

**Conclusions:** Caregiver coping influences the emotional wellbeing of young children. Screening for coping styles could identify caregivers and children who may benefit from targeted psychosocial family support and surveillance.

**Poster 270**
**The experiences of young people and their parents in the move from paediatric to adult cystic fibrosis services in Bristol: recommendations for an improved transition pathway**

H.M. Wood1, S. Phillips2, 1University of Bath, Clinical Psychology, Bath, United Kingdom; 2University Hospitals Bristol NHS Foundation Trust, Paediatric and Adult Cystic Fibrosis Teams, Bristol, United Kingdom

**Objectives:** Transition to adult healthcare services requires careful planning and preparation. The paediatric and adult CF services in Bristol aim to improve transition experiences, to ensure patients and families are adequately prepared and ultimately reduce risk of health deterioration in young adulthood.

**Methods:** This qualitative study explored the experiences of young people with CF and parents in the transition from Bristol Royal Children’s Hospital to the adult service at the Bristol Royal Infirmary. Semi-structured interviews with five young people and three parents took place and were thematically analysed.

**Results:** A key theme to emerge was the perception of suddenly leaving the familiar, secure “family” of the paediatric team, who many had known since birth. Denial, anger and anxiety were all evident. Patients had to build new relationships with the adult team, starting at a very different time in life, making decisions and choices as adults in charge of their own health. Transition was viewed as the discrete transfer point rather than a process. Parents took a step back, a change that some found challenging.

**Conclusion:** Rich data emerged highlighting the complexities of transition and the need to support both patients and parents. Themes are discussed along with service recommendations including a transition focused parents evening hosted by the adult team. Traditionally provided by paediatric services, it is hoped that this approach will help manage the development of new relationships which is crucial for successful transition. A further area for investigation is the experience of families transferring to the central adult service from smaller regional teams.