WHAT

HOW
Financial challenges
+ Missed work
+ Dating/sexuality
+ Fatigue
+ Dizziness
+ Cognitive symptoms

Cancer
The Changing Demography of Cancer Survivorship

The **majority** of those diagnosed today can expect to be alive in 5 years (approaching 70%)

Treatments for cancer have become increasingly **complex and multi-modal**

Cancer for many has become a **chronic** illness

Cancer patients receive most of their care in the **outpatient setting**, largely in the community (versus big cancer centers)
Side effects, chronic and late effects
Side effects – a secondary, typically undesirable effect of a drug or medical treatment

Chronic effects – these begin during treatment and continue after treatment

Late Effects – these begin after treatment
Chronic and Late Effects of Cancer Treatment

- **Physical/Medical** (e.g., second cancers, CVD, obesity, diabetes, lymphedema, bone loss, functional decline)

- **Psychological** (e.g., depression, anxiety, uncertainty, isolation, altered body image)

- **Social** (e.g., changes in interpersonal relationships, concerns regarding health or life insurance, job lock/loss, return to school, financial burden)

- **Existential and Spiritual Issues** (e.g., sense of purpose or meaning, appreciation of life)
New treatments, new late effects

- Immunotherapies are changing cancer care
  - Sustained benefits (remission)
  - Prolonged survival
- Work by activating the patient’s immune system by activating immune system checkpoint inhibitors
- Minimal immediate toxicities/side effects but serious autoimmune late effects
  - Colitis, dermatitis, hypophysitis, and hepatitis
Treatment ends.

Thyroid medication adjustment
Fatigue

Cognitive symptoms:
• Diminished sense of direction
• Difficulty tracking multiple people talking (divided attention)
• Reduced capacity to multi-task

Social challenges:
• Out of sync with peers and romantic partners
• Fatigue impacts social participation

Financial challenges
Cancer Survivors at Increased Risk for Late Effects

- Disease recurrence/new cancers
  - (>756K multiple CA; 16% of new diagnoses)*
- Cardiovascular disease
- Endocrine dysregulation
- Obesity
- Diabetes
- Osteoporosis
- Upper/lower quadrant mobility & functional limitations
- Functional decline → disability

* Mariotto et al., CEBP 2007
Growing Population

Unmet physical, psychosocial, spiritual and financial needs

Poor care coordination

American Cancer Society, 2014a
Smith et al., 2008
Survivorship Care

Dramatic ↑ in # survivors (particularly older adults)
Multiple comorbidities (often cause of death)
Chronic effects of treatment
At risk for late effects
Unmet physical & emotional challenges
Need to prevent spiral into disability
Need to promote healthy behaviors
Shortage of providers
WHAT CAN I DO?!
Public health

The National Action Plan for Cancer Survivorship

Public health domains and strategies

Identify, develop, and implement interventions that benefit cancer survivors

Health Systems

- Need for models, guidelines, implementation tools
  - Association of Community Cancer Centers
  - American Society for Clinical Oncology
Cancer Survivorship Clinical Practice Guidelines

**National Comprehensive Cancer Network**
- By Topic:
  - Anxiety and depression
  - Cognitive function
  - Exercise
  - Fatigue
  - Immunizations and infections
  - Pain
  - Sexual function (female/male)
  - Sleep disorders

**American Society of Clinical Oncology**
- By Topic:
  - Neuropathy
  - Fatigue
  - Anxiety and depression
  - Fertility preservation
  - Breast cancer survivorship care guideline (ACS/ASCO)

**American Cancer Society Survivorship Care Guidelines for Oncologists & PCPs**
- By Topic:
  - Holistic:
    - Surveillance
    - Screening
    - Long-term and late effects
    - Health promotion
    - Care Coordination
    - Breast (ACS/ASCO), colorectal, head and neck and prostate
ACS Cancer Survivorship Care Guidelines: Dissemination Toolkit
bit.ly/NCSRCToolkit
Innovators
Supportive Oncology is an integral part of MSTI's philosophy that healing comes from caring for the whole person, not just the disease.

Our team of experts works alongside physicians to help stabilize and strengthen patients and families during cancer diagnosis, treatment and beyond.
Who is Supportive Oncology

Supportive Oncology

Medical Team

- Social Work
- Survivorship
- Psychiatry
- Nutritional Counseling
- Financial Advocacy
- Spiritual Care
- Integrative Medicine

Patient & Caregiver
Supportive Oncology:

• Available to ALL Patients & Caregivers

• Intentional Collaboration between Disciplines

• Integrated with Treatment

• NOT only Social Work or Supportive Care Visits
Starting a Supportive Cancer Care Service:
Merging Rehabilitation & Palliative Medicine

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Supportive Cancer Care Model

Trajectory of care is independent of prognosis

Comprehensive Cancer Care

Dx / Treatment / Supportive Care

Remission

Transplant

Hospital

Palliative Consult

End of Life Care

Rehab & Palliative Consults

Maintenance

Survivorship

Rehab & Palliative Consults
Overlap in Service Lines

- Pain
- Wound Care
- Lymphedema
- Range of Motion
- Psychosocial Issues
- Home Care Assessment
- Depression / Anxiety
- CIPN & Neuropathy
- Radiation Fibrosis
- Gait & Balance
- Goals of Care
- Spirituality
- Fatigue
- SOB

Rehab

Palliative

Transplant Prgrm
- Acute Pain
- N & V
- Constipation
- Sleep
- Advcd Directives
- End of Life Care

Prehabilitation
- Equipment / WC
- Therapies
- Exercise Phys
Domains of Supportive Care

• Supportive Care Service is aligned with Oncology to help with symptoms related to cancer / treatment of cancer within three domains of care

1) **Mind**: Chemo brain, cognitive assessment, & stress (financial & personal)

2) **Body**: pain, physical symptoms, constipation, functionality, fatigue, neuropathy & cachexia

3) **Soul**: depression, anxiety, psychosocial difficulties, complex family dynamics & transitions of care
Thyroid medication stabilized….mostly
Education: tune into signs and symptoms
Reframing: physical attribution

Fatigue – discussed with PCP, sleep and exercise

Cognitive symptoms:
• Diminished sense of direction - GPS
• Difficulty tracking multiple people talking (divided attention) – asking for clarification
• Reduced capacity to multi-task - outing self as a poor multi-tasker

Social challenges: sharing and acknowledging weaknesses, therapy
• Out of sync with peers and romantic partners
• Fatigue impacts social participation

Financial challenges: Flipped a house
Summary

• Cancer survivors are a growing population that may suffer from a variety of chronic and late effects of treatment.
• Guidelines and tools are available to help implement evidence-based care.
• There are places where comprehensive cancer survivorship care is available.
Recommendations

- Find partners
- Start where they are happy to see you
- Pilot, Pilot, Pilot

*If it’s worth doing, it’s worth evaluating*