Moving Forward After Cancer

a Learning Suite for Family Medicine and Oncology Postgraduate Trainees
Overview of the Learning Suite

Online Self-Study Course

- Six multimedia modules at www.cancersurvivorshipcourse.ca
- Clinical recommendations for survivorship care for breast, prostate and colorectal cancer
Overview of the Learning Suite

**Workshop**

- Case based with mix of disciplines if available
- Case based approach exploring clinical challenges in survivorship care
- Foster a culture of collaboration in practice
Overview of the Learning Suite

Clinical Experience

- Opportunity to apply learning in a clinical setting
- Better understand the cancer patient experience
Disclosure

• We have received no funding from commercial sources

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• Thanks to Cheryl Moser for preparation of the slides
Workshop: Learning Objectives

1. Reflect on the common concerns that patients have as they enter the survivorship phase

2. Discuss the perspectives of FPs and oncologists on their specialty's role in the care of cancer patients

3. Collaborate to develop a management approach to a case that exemplifies the common challenges in survivorship care

4. Refer to local, provincial and national resources available to cancer survivors
Workshop | Format

1. Short presentations and videos
2. Case-based reflection
3. Individual and group work
4. Learning about local survivorship resources
5. Wrap up, follow-up activities
Ground Rules for our Small Groups

1. Active listening
2. Everyone heard
3. Avoid interruptions
4. Learn from each other
5. Appoint a reporter
Defining Survivorship

**Cancer survivorship** – period of well follow-up care and rehabilitation following cancer treatment and lasting until recurrence or death from other causes
Defining Survivorship

5-year relative survival rate (RSR)

63% for all cancers

Prognosis is better for those who survive one year - 81%

Breast: 88%
Lung: 17%
Colorectal: 64%
Prostate: 96%
Four Domains of Survivorship Care
CASE STUDY
Oncologist Video 1
2. Challenges in Survivorship Care
With the **number of cancer survivors growing**, follow-up care is increasingly being entrusted to **primary care providers** rather than long term follow-up in cancer centres.
Following cancer treatment, survivors often require rehabilitation and supportive care services to address many dimensions of health.
Role of the **Oncologist**

- Safely transitioning the patient back to primary care for exclusive or shared care
- Guidance re long-term follow-up
- Educating the FP and patient about what to expect
- Responding to questions, consultations and referrals, especially when recurrence is suspected
- Managing cancer therapy changes
Role of the **Family Physician**

- Managing co-morbidities
- Assuming responsibility for ongoing surveillance
- Addressing the patient’s physical and psychosocial status
- Managing long term side-effects
- Coordinating follow-up with the patient and specialists
Role of the Patient

- Assuming a proactive role in preventive health
- Keeping appointments for surveillance tests

When feasible, and often with family:
- Organizing information
- Sharing knowledge at times of transition
- Assisting with coordinating ongoing care
Oncologist Video 2
3. Survivorship Care Plans
Coordinated, Shared Care

Success of coordinated, shared care hinges on the transfer of essential information between oncologist, FP and patient.

Best practice is a patient-centred survivorship care plan.
Helpful tool in transitioning patients back to primary care

Standardizes the information being shared

Not always a full substitute for a formalized handoff at the time of transition in care in complex cases!
Review of Survivorship Care Materials and Programs in your Community
PREDICT Tool: Breast Cancer Survival; Results

Five year survival
88 out of 100 women are alive at 5 years with no adjuvant therapy after surgery
An extra 3 out of 100 women treated are alive because of hormone therapy
An extra 6 out of 100 women treated are alive because of hormone therapy & chemotherapy

Ten year survival
71 out of 100 women are alive at 10 years with no adjuvant therapy after surgery
An extra 7 out of 100 women treated are alive because of hormone therapy
An extra 14 out of 100 women treated are alive because of hormone therapy & chemotherapy

To view the numbers in bars hover pointer over each bar-segment
(Or tap segment if using a mobile device)

Overall Survival at 5 and 10 years (percent)

- Survival with no Adjuvant treatment
- Benefit of Adjuvant Hormone therapy
- Additional benefit of Adjuvant Chemotherapy
- Additional benefit of Trastuzumab

Disclaimer: PREDICT can only provide a general guide to possible outcomes in any individual case. As we are all different, for the more complete picture in your case, you should speak to your own specialist. You may wish to print this page out and share it with your specialist.
Let’s Conclude
Review of our Learning Objectives

1. Reflect on the common concerns that patients have as they enter the survivorship phase

2. Discuss the perspectives of FPs and oncologists on their specialty's role in the care of cancer patients

3. Collaborate with colleagues to develop a management approach to a case that exemplifies the common challenges in survivorship care

4. Refer to local, provincial and national resources available to cancer survivors
Clinical Exposure

Handouts

Your Learning Highlights

Your Evaluation
Thank You!
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