



# Communication Between Oncology and Primary Care Providers

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Survivorship



# The State of Survivorship

- There are 1 million survivors in New York State
- 20% of all new cancers are diagnosed in people with a history of cancer



## Why is Cancer so Different?

- Complexity of the treatments
- Multi-modality/multi-disciplinary treatments
- Toxic
- Expensive
- Poorly Coordinated
- Cancer treatment occurs in isolation from Primary Cancer setting



# Why are we talking about Survivorship?

- Because cancer treatment does not leave patients the same...ever
- Because recovery from cancer treatment can mean many different things
  - Depending on treatment
  - Depending on responds to treatment
  - Depending on baseline health before and after treatment
- Because the whole family and friends and caregivers are also affected by the cancer

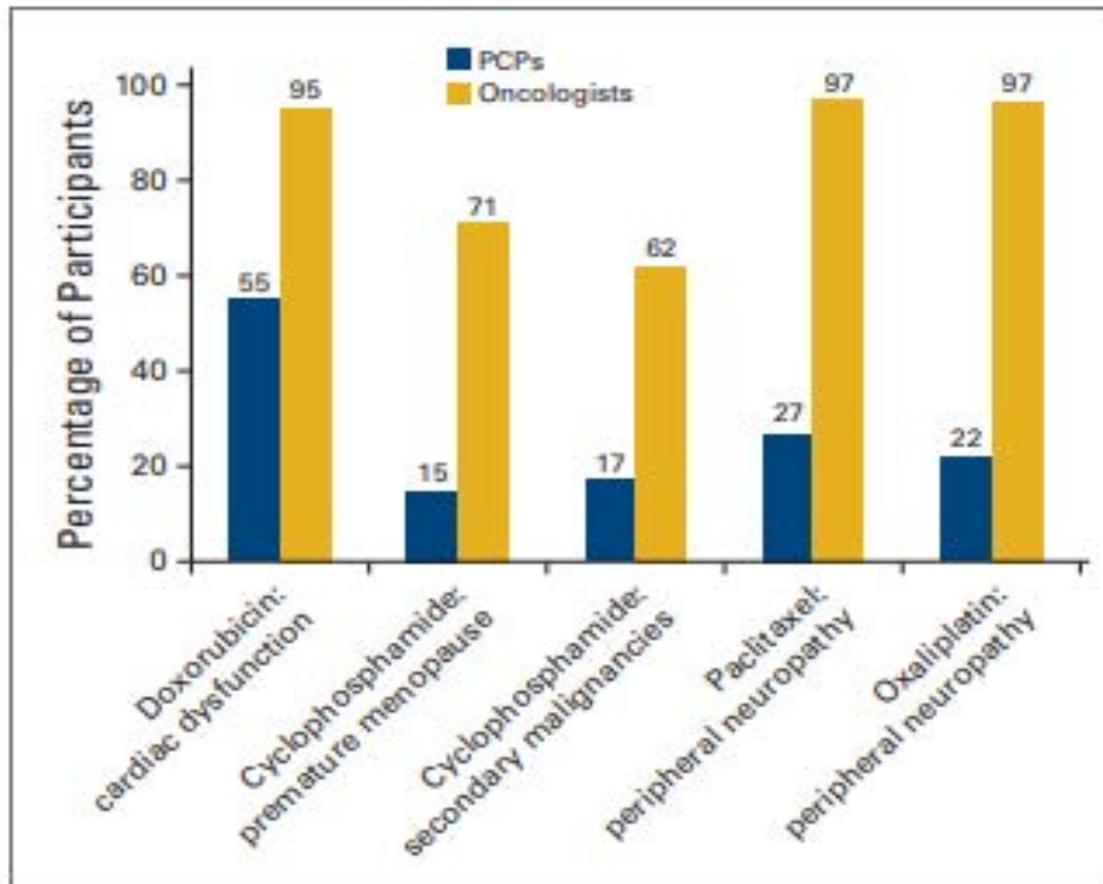


# The Key Factors Around Survivorship

- Growing numbers
- Older
- Multiple co-morbid conditions
- Scarce education and training on how to follow survivors
- Increasing costs of cancer care and post-treatment care
- Fractured resources in the communities



# Differences in Observed/Reported Effects From Chemotherapy Regimens





# Primary Care and Cancer Specialists Relationship

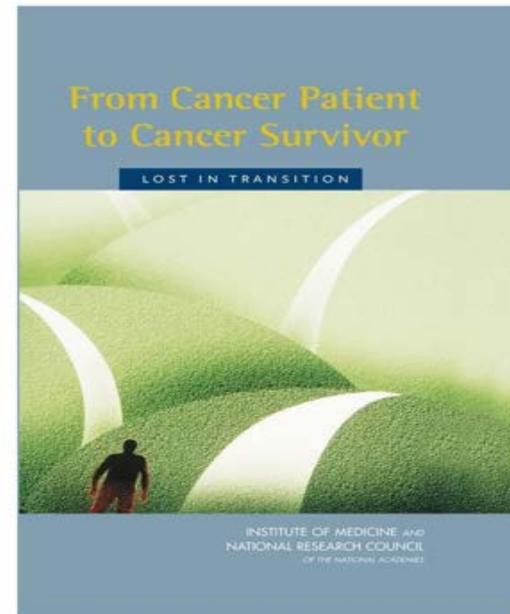
- Poor and delayed communication between PCPs and cancer specialists
- Cancer specialists' endorsement of a specialist-based model of care
- PCPs' belief that they play an important role in the cancer care continuum
- PCPs' willingness to participate in the cancer care continuum
- Cancer specialists' and PCPs' uncertainty regarding the knowledge or training of the PCP to provide care
- Discrepancies between PCPs and oncologists regarding roles and expectations

Dosett et al. The Primary Care Provider (PCP)-Cancer Specialist Relationship: A Systematic Review and Mixed-Methods Meta-Synthesis. *CA Cancer J Clin* 2017;67:156-169  
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## IOM Findings: Survivorship Care

- Survivorship care is a neglected phase of the cancer care trajectory
- Cancer recurrence, second cancers, and treatment late effects concern survivors
- Few guidelines on follow-up care
- Providers lack education and training



2006

Presented By Patricia Ganz at 2018 Cancer Survivorship Symposium: Advancing Care and Research





# The Role of Survivorship Care Plans (SCPs)

- Serve to educate patients and PCPs regarding general cancer survivorship-related needs
- Developed in oncology settings, must be shared with PCPs and their patients
- Communication between the oncology team and the PCP must entail more than a document
- Establishing relationships is important to answer questions regarding management of comorbid medical conditions



# What's in a care plan?

- Diagnosis, date of diagnosis, age at diagnosis
- Treatment summary (surgery, radiation, chemotherapy, IT)
- Names of treatment team
- Possible short/long-term side effects from treatment
- On-going medications (hormonal)
- Frequency of surveillance testing
- Cancer screening recommendations
- Support services referrals suggested
- Genetic testing recommendations
- Testing that should be done by the PCP

This serves as a major communication tool from oncology to the PCP and the patient



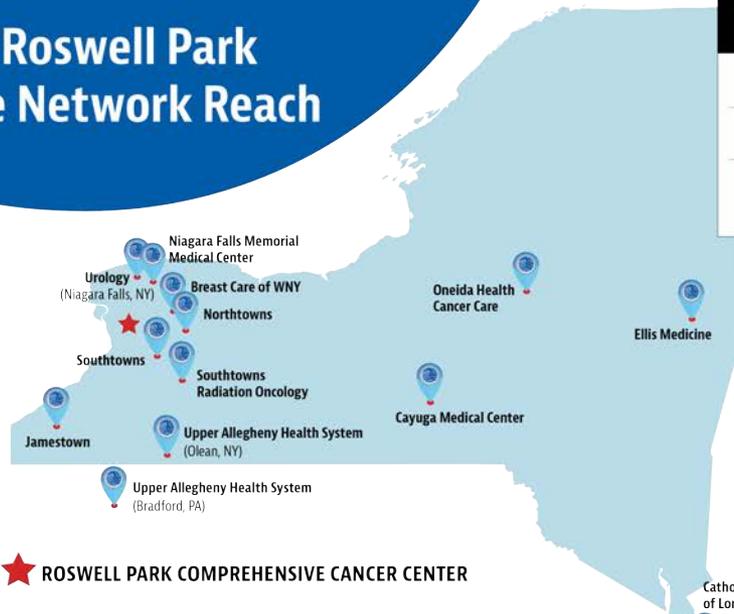
# CoC Recommended Support Services for Survivors

- treatment summaries and survivorship care plans
- screening for cancer recurrence
- screening for new cancers
- physical therapy
- nutritional services
- psychological support
- cardiac consultation



# Roswell Park Care Network (RPCN)

## The Roswell Park Care Network Reach



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# The Survivorship Program in the Roswell Care Network

- To Support each patient and family-with patient-oriented care
- To Individualize a survivorship care plan that will provide a map for the future
- To Maximize the level of health and wellness for every survivor and their support system through education, experiences, therapies
- To Improve the quality of life for survivors and their support networks



# Survivorship Strategy Across the Roswell Care Network

- Establish designated survivorship appointments in each site
- Utilize Advance Practice Providers
- Develop a list on community-based support services and specialists
- Utilize a structured follow-up note containing “SCP” information





# Support Services

- Physical, occupational, lymphedema therapy
- Rehabilitation (before and after treatment)
- Nutrition support (Survivorship nutritionist)
- Pain control
- Psychology/Psychiatry/Social work
- Endocrine/Hearing/ Ophthalmology
- Smoking cessation
- Sexual Health clinics
- Restorative dermatology clinic
- Wellness and Integrative medicine, including acupuncture and yoga



# Cancer Screening

- Cancer screening for second cancers
- Dental referrals
- Colon Cancer screening
- Lung cancer screening
- Mammograms
- Skin checks
- Pancreatic screening clinic



## What Can PCP Do About Survivorship Care?

- Clarify the cancer history for each patient (location, data of diagnosis and treatment)
- Participant in CME on cancer treatment side effects
- Maintain complete cancer screening coverage for Survivors
- Utilize Survivorship Clinics or Consultations if available
- Consider cancer history when working up new problems
- Reach out to local oncologists with questions



## Strategies for Managing Survivors

- Stratification of patients by risk
- Low (early, common cancers with low risk of recurrence)
- Moderate (multiple treatments, low doses of risky drugs, and at some risk of treatment related effects)
- High-risk (rare cancers, complicated treatments, high risk of treatment-related effects)



## Where do We Go From Here?

- Oncology must educate providers along the whole continuum about the needs of Survivors.
- ASCO Oncology-PCP Task Force
- Survivors must be informed so that they advocate for themselves as they embrace life after cancer
- Widely promoted SCP-like tool to establish the communication
- Strive to coordinate care, in a shared-care model
- Focus on cancer-related effects, comorbid medical conditions, socioeconomic disparities and wellness

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Thank you!

