

Cancer Coordination Unit

Programs Branch,
Metropolitan Health & Aged Care Services Division.

- Newly established. Responsible for coordinating that Victorian Government's cancer reform agenda.
 - cancer service reforms
 - integrated cancer services
 - service improvements across tumour streams

Guidelines and Frameworks

- NHMRC clinical practice guidelines
- Victorian Cancer Services Framework
- Fighting Cancer policy
- National Services Improvement Framework in Cancer
- Lessons from BSEP over last four years
- Supportive Care

Psychosocial needs of patients with cancer

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Inner and Eastern Melbourne Breast
Services Enhancement Program

How big is the problem?

- Prevalence of emotional distress is high in patients with cancer
- Depression 20 - 35%
- Anxiety 15 - 23%

Impact of psychosocial interventions

- Psychosocial interventions are effective in reducing distress, and promoting adjustment of patients with cancer, much of the data being Level I or II evidence.
- May also reduce the severity of physical symptoms suffered by the cancer patient

Psychological therapy in patients with cancer

- Meta-analysis of 45 randomised controlled trials of adults with cancer
- Those receiving psychological therapies showed statistically significant mean improvements in a number of areas compared to those not receiving psychological therapy

Improvements of:

- 12% in emotional adjustment
- 10% in social functioning
- 14% in treatment and disease-related symptoms
- 14% in overall improvement in quality of life

- In most trials, the therapy was provided by a specially trained counsellor, nurse, social worker or psychologist
- Greater effects have been demonstrated when psychological therapies were conducted by more highly trained therapists and continued for longer periods of time

- Local circumstances and the availability of resources may limit the opportunity to implement some of these recommendations
- Some interventions may be appropriately provided by a GP or specialist registered nurse

Cognitive behavioural therapy: Impact on patients with cancer

- Benefits include improvement in emotional distress, coping, anxiety, depression and psychiatric morbidity
- Decrease in nausea, vomiting and insomnia
- Increase in control over illness
- Level I, II, III-1 and III-2 evidence

- Collaboration between the treatment team, including the GP and mental health specialists, is crucial to decreasing the psychological burden experienced by people with cancer with significant psychological problems

Meeting the psychosocial needs of people with cancer: Identification and assessment

- Identifying the problem
- Assessment of psychosocial needs
- Regular review of psychosocial status

Meeting the psychosocial needs of people with cancer: Referral

- Referral and access to specialist services or appropriately qualified health professionals
- Referral may be delayed, cost may be prohibitive, and difficult to access in the community

Meeting the psychosocial needs of people with cancer: Collaboration

- Sharing of relevant information regarding both physical and psychosocial issues across health care sectors
- Multidisciplinary approach
- GP's role in the 'team'