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An Oncology, Lifestyle Medicine, and Cardiac Rehabilitation Partnership in the Development of a Group Medical Visit Model for Cancer Survivors

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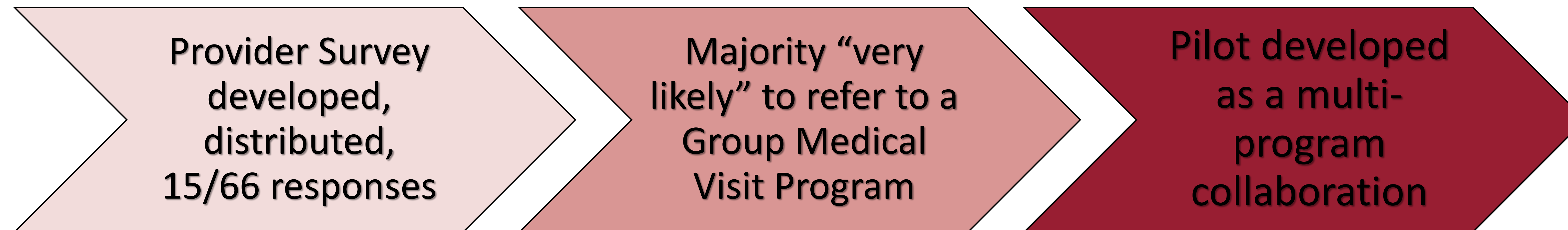
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An Oncology, Lifestyle Medicine, and Cardiac Rehabilitation Partnership



The Development of a Group Medical Visit Model for Cancer Survivors

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Background & Purpose

- Cancer survivors experience a multitude of late and long-term effects of cancer treatment, as well as individual and diagnosis-specific risk factors.
- Prevention of and risk reduction for cancer treatment-related effects and subsequent cancers requires a dedicated effort.
- Survivorship care targets awareness education and clear communication between patient and providers.
- Positive lifestyle and behavioral modifications including a healthy diet, physical activity, weight management, avoiding substance use, stress management, restorative sleep, and routine follow-up care can have substantial impact on survival and health-related quality of life.
- The purpose of this initiative was to first explore attitudes of oncology providers, and then partner with key stakeholders in the development of a Lifestyle Medicine Group Medical Visit (GMV) Model for adult cancer survivors.

Methods

- A survey was designed to assess oncology provider attitudes regarding perspectives on cardio-oncology, rehabilitation, and Lifestyle Medicine.
- The 27-item multiple choice and Likert-style REDCap survey was distributed via email on three separate occasions to MaineHealth Cancer Care Network providers (n=66) in spring, 2022.

Results

- Fifteen responses were received with the largest discipline of respondents was medical oncologists (40%).
- The majority (60%) rated their frequency of cardio-oncology consultation referrals as “sometimes” with the most common reason (73.3%) an abnormal finding on cardiac testing, followed by “patient presenting with cardiac symptoms” (53.3%).
- Most (40%) provide exercise counseling “very often”, and most counsel patients on the cardiovascular effects of cancer treatment (“always” [38%]; “very often” [23.1%]).
- The most common rehabilitation referral was for physical therapy (“very often”; 60%), while referrals to cardiac rehabilitation occurred “rarely” (53.3%).
- Regarding GMV, most reported this would “likely” be helpful to survivors (mode; 33%) while most were “very likely” (46.7%) to refer to a survivorship GMV program.
- The anticipated age range of referred patients was geriatric adult (66.7%).

Discussion

- A survivorship GMV model to provide lifestyle medicine strategies appears to be of interest to oncology providers with an expected benefit to their patients.
- Our future direction is ongoing collaboration with the experienced Lifestyle Medicine team, and cardiac rehabilitation for a supervised physical activity option, to launch a successful survivorship GMV program in spring, 2023.