

A Graduate Medical Education Curriculum for Cancer Survivorship

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BACKGROUND

Currently, the 5 year survival rates of most cancers in the United States is over 50%.

There are an estimated 15.5 million cancer survivors living in the United States as of 2015 (~5% of the total population).

Given the improved long-term survival of adults diagnosed with cancer, there is an increasing need for long-term management of the cancer survivor that exists beyond the realm of Oncology and shifts to incorporate more Primary Care.

However, Primary Care providers have not historically been comfortable managing the growing number of cancer survivors and their long term sequela, primarily due to a lack of access to Survivorship Care Plans, and a lack of understanding of the various screening guidelines for the cancer survivor

There is currently no existing ambulatory curriculum to teach resident physicians the general concepts of cancer survivorship. This novel curriculum was designed to introduce the basics of survivorship care to a cohort of internal medicine residents in the ambulatory setting.

INNOVATION

A 3-day workshop series was given over 5 weeks to 5 separate groups of learners

There were 99 total categorical internal medicine residents (Post Graduate Years 1-3) who participated.

Prior to the start of Session 1, learners were given the background article “Care of the Adult Cancer Survivor”

Learners followed a simulated geriatric breast cancer survivor case through 3 primary care visits

A multiple choice questionnaire was given at the beginning of Session 1 and the end of Session 3 to assess knowledge and track improvement

QUESTIONNAIRE

Q1. Who is NOT a cancer survivor?

- 45 yo woman just diagnosed with breast cancer
- 45 yo woman with history of Hodgkin’s Disease in childhood
- 45 yo woman with metastatic breast cancer transitioning to Hospice Care
- 45 yo woman with an 8 year old son diagnosed with Hodgkin’s Disease
- All the above are cancer survivors.

Q2. Which of the following is a common long term side effect of cisplatin chemotherapy?

- Nausea, vomiting, and diarrhea
- Peripheral neuropathy
- Diminished cardiac function
- Hair Loss
- All of the above

Q3. Which of the following is NOT a common side effect of chest radiation?

- Thyroid Dysfunction
- Esophagitis
- Pericarditis
- Pneumonitis
- Cognitive Dysfunction

Q4. Why are there more cancer survivors now than before?

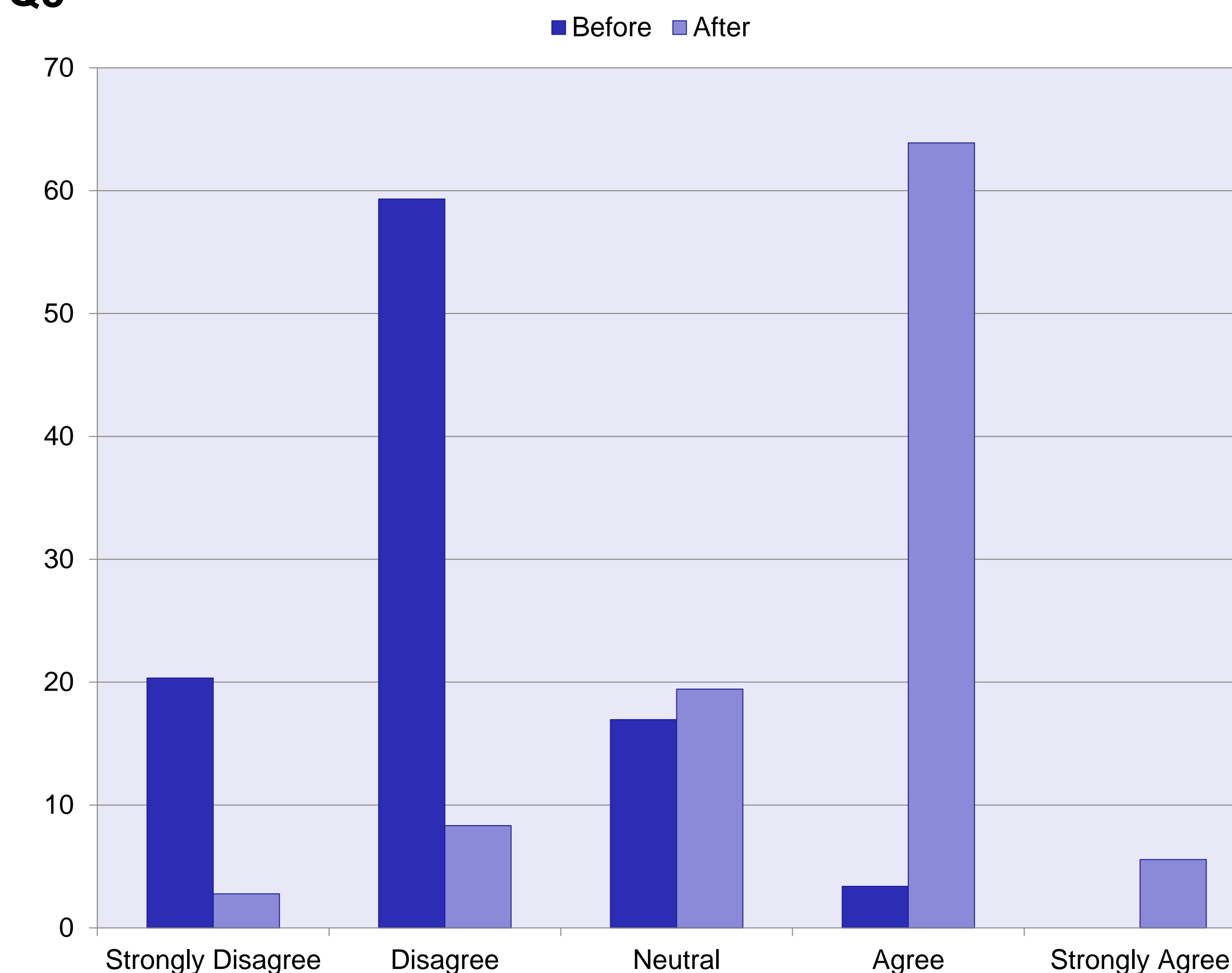
- Earlier diagnoses through increased screening
- More effective treatment
- Prevention of secondary disease and cancer recurrence
- Decreases in mortality from other causes
- All of the above

Q5. I feel competent in knowing how to find or create a Survivorship Care Plan (Likert)

Q6. I feel comfortable in screening for excess mortality in cancer survivors (Likert)

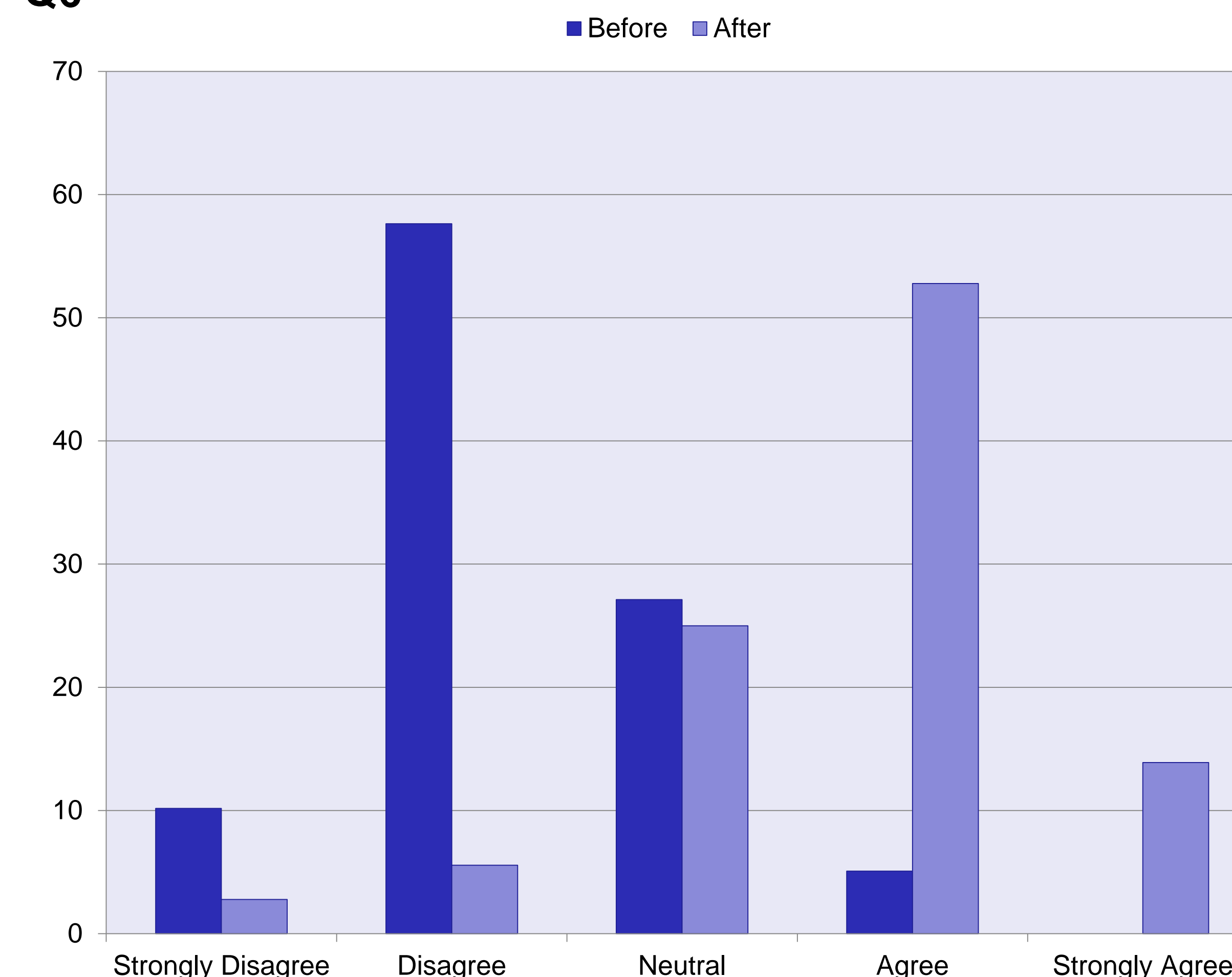
RESULTS

Q5



Percentage of learners who reported competence in knowing how to find or create a Survivorship Care Plan, before and after the curriculum.

Q6



Percentage of learners who reported comfort in screening for excess mortality in cancer survivors, before and after the curriculum.

General knowledge of the common side effects from cancer treatment modalities was well known prior to the curriculum and was therefore unchanged (Questions #1-4 were answered correctly (>95%) both before and after the curriculum).

LEARNING OBJECTIVES

Session 1

- To understand basic terminology used in survivorship care – background mortality, excess mortality, secondary malignancies, and primary recurrence.
- To be able to create an individualized survivorship care plan for the adult breast cancer survivor.
- To be able to identify appropriate screening tests for long term surveillance of the breast cancer survivor.

Session 2

- To identify common short term side effects of various cancer treatment modalities.
- To be able to recognize physical symptoms that could be early indications of secondary malignancies.
- To be able to recognize physical symptoms that could be early indications of primary recurrence.
- To identify appropriate diagnostic tests for concerning physical symptoms in the adult breast cancer survivor.

Session 3

- To create awareness of chronic morbidities that arises from various cancer treatments.
- To be able to address mental health concerns in the cancer survivor.
- To be able to recognize physical symptoms that could be early indications of long-term side effects of cancer treatments and excess mortality.

CONCLUSIONS & LIMITATIONS

Resident physicians were unfamiliar with the specific terminology used in survivorship care which resulted in a lack of comfort in caring for the cancer survivor, despite adequate knowledge of the long-term side effects of various cancer treatment modalities.

Once resident physicians were informed of and engaged in creating a survivorship care plan, their overall comfort in providing long term care for the cancer survivor significantly improved.

Survivorship Care Plans can improve the transition of care from oncologists to primary care providers—which may, in turn, improve primary care provider comfort in the long-term care of the cancer survivor.

Major limitations include 1) inconsistent learner attendance throughout the curriculum, and 2) learner retention could not be adequately measured given this being a novel curriculum.