

## HEART OF MAINE CHAPTER



A Message from the President Happy Holidays,

This year is coming to a close and my tenure as President will end December 31, 2024. The incoming President, Andrea Martelle, brings immense knowledge of our chapter and is an amazing leader. It has truly been a pleasure to hold this position and to work with the other members of the HOM board to expand our chapter and encourage others to join.

I look forward to being able to serve the next 2 years as treasurer and continue to assist in the growth of our chapter.

If you enjoy an evening out at a nice restaurant The Oncology Nursing with your meal paid for, consider joining the HOM Podcast chapter. It is a great opportunity to meet other\_ members, network and receive education.

Best Wishes in the New Year.

President of Heart of Maine ONS

What's Inside?

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Nicole L Brown, RN, OCN, ONN(CG)

Symposium 2024

Fall 2024 Election

Membership Benefits ℰ Board Members

Save THE DATE

Upcoming Chapter Meetings

April 10, 2025 | Location TBD

May 22, 2025 | Location TBD

June 12, 2025 | Location TBD

September 18, 2025 | Location TBD

October 16, 2025 | Location TBD

November 20, 2025 | Location TBD

## <u>ONS CONGRESS CELEBRATES</u> <u>50 YEARS</u>

The largest conference dedicated to oncology nursing!

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April 9-13, 2025 | Denver, CO

Discounted pricing by registering before the early-bird deadline of February 20, 2025!

Registration opening soon on the ONS website!

Applications accepted for scholarship through December 1, 2024.

Group registration discount offered!

Olher Ons news

## WE WANT TO HEAR YOUR IDEAS!

Do you have an idea for the next Heart of Maine Chapter Engagement or Newsletter?

Reach out to Nicole Brown or Lindsay Lapierre Swan! DID YOU KNOW?



# Listen and Learn to Propel Your Practice

Join ONS and hundreds of colleagues as we sit down with industry experts to discuss the latest clinical practice evidence for essential topics such as drug infusions and oncologic emergencies. Designed for busy nurses, more than 200 thirty-minute episodes are available with new ones every Friday. Search "Oncology Nursing Podcast" on Apple, Google, Amazon, Spetify, or Stitcher, and subscribe today so you'll never miss a weekly episode!

All podcasts are free and most offer free NCPD hours.



## Extensive Stage Small Cell Lung Cancer; A New Treatment Approved

Kerri Medeiros BSN, RN, OCN, ONN-CG

Lung cancer is the second most diagnosed cancer in the United States. It is the leading cause of cancer death in both men and women, accounting for approximately a quarter of all cancer deaths. Lung cancer is histologically divided into 2 main types: small cell lung cancer (SCLC) and non-small cell lung cancer (NSCLC). SCLC comprises about 15% of lung cancer while NSCLC comprises approximately 85% (Sone et al.,). SCLC typically occurs in the central airways and is often aggressive with a short doubling time and high mitotic rate. Symptoms are usually rapid-onset and begin 8 to 12 weeks before presentation. Signs and symptoms depend on the location of the primary tumor. They may include a cough, wheezing, and hemoptysis. Local intrathoracic tumor growth can affect the superior vena cava (resulting in superior vena cava syndrome), esophagus and airway structures. Patients with metastatic disease may present with neurological problems, recurrent nerve pain, fatigue, and anorexia. SCLC can also cause paraneoplastic syndromes. The most common paraneoplastic syndrome is syndrome of inappropriate antidiuresis which is seen in 15% to 40% of patients (Basumallik et al., 2023).

Nearly 60% of patients diagnosed with SCLC present with metastatic disease. Most common sites of metastases include the brain, liver, adrenal glands, bone, and bone marrow. If left untreated, SCLC is characterized by rapid tumor progression with a median survival of 2 to 4 months. Metastatic SCLC is not curable, and the prognosis is poor. Even with chemotherapy, the majority of patients are dead within 24 months, and less than 2% are alive at five years. For individuals with localized lung disease, treatment with chemotherapy and radiation does offer a better survival of 80% at two years, but less than 15% are alive at five years (Ju et al., 2021)

On May 16, 2024, the Food and Drug Administration granted accelerated approval to tarlatamab-dlle (Imdelltra) for extensive stage small cell lung cancer with disease progression after receiving a platinum-based chemotherapy. The major efficacy outcome measures were overall response rate was 40% and duration of response was 9.7 months (FDA, 2024). As a lung cancer navigator this new drug offers hope. Small cell lung cancer has very few treatment options, and when a new drug shows promise, it is exciting Like all treatments for cancer, there are side effects and adverse reactions. The most common adverse reactions (>20%) were cytokine release syndrome, fatigue, pyrexia, dysgeusia, decreased appetite, musculoskeletal pain, and constipation, anemia and nausea. The most common Grade 3 or 4 laboratory abnormalities (≥5%) were decreased lymphocytes, decreased sodium, increased uric acid, decreased total neutrophils, decreased hemoglobin, increased activated partial thromboplastin time, and decreased potassium (FDA, 2024).

As a result of advancements in diagnosis, treatment, supportive care, and new therapies the population of people living with advanced lung cancer is growing. As a lung cancer navigator, I love to be able to share this information and hope with my patients who are diagnosed with lung cancer. Fifteen years ago when I started in oncology, a lung cancer diagnosis did not offer a lot of hope and treatment options were few. Today, I can confidently tell patients new treatments are always coming out and hope should be alive and well even with a lung cancer diagnosis.

#### References

Basumallik N, Agarwal M. Small Cell Lung Cancer. [Updated 2023 Jul 10]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2024 Jan-. Available from: https://www.ncbi.nlm.nih.gov/books/NBK482458/

FDA grants accelerated approval to tarlatamab-dlle for extensive stage small cell lung cancer (05/16/2024) Available from: <u>FDA grants accelerated approval to tarlatamab-dlle for extensive stage small cell lung cancer | FDA</u>

Ju, M. H., Kim, H. R., Kim, J. B., Kim, Y. H., Kim, D. K., & Park, S. I. (2021). Surgical outcomes in small cell lung cancer. The Korean journal of thoracic and cardiovascular surgery, 45(1), 40–44. https://doi.org/10.5090/kjtcs.2012.45.1.40

Sone, H., Igawa, S., Kasajima, M., Ishihara, M., Hiyoshi, Y., Hosotani, S., Ohe, S., Ito, H., Kaizuka, N., Manaka, H., Fukui, T., Mitsufuji, H., Kubota, M., Katagiri, M., Sasaki, J., & Naoki, K. (2018). Amrubicin monotherapy for elderly patients with relapsed extensive-disease small-cell lung cancer: A retrospective study. Thoracic cancer, 9(10), 1279–1284. https://doi.org/10.1111/1759-7714.12833

## Survivorship in Advanced Lung Cancer

Nicole L Brown, RN, OCN, ONN(CG)

Every two minutes someone in the United States is diagnosed with lung cancer and an average of 357 patients die of lung cancer daily. Lung cancer remains the leading cause of cancer deaths among both women and men, but there is hope. Over the past five years, the survival rate for lung cancer has increased (American Lung Association, 2023) and there are more new lung cancer survivors than ever before. Earlier detection and better treatment over the past 10 years have dramatically improved the outcomes for people with lung cancer with many patients now living many years after their initial diagnosis. There are now more than 380,000 lung cancer survivors in the United States and this number is expected to increase by 33% over the next 10 years (to over 500,000) (CDC, 2024). As new targeted therapies emerge and more people receive lung cancer screening these numbers will continue to rise. As more people are diagnosed earlier the disease is often more treatable. This has led to lung cancer survivors being the fastest growing group of cancer survivors, with the death rate dropping faster than for any other cancer. Despite these improvements and the growing population of people surviving lung cancer, survivorship issues have received little attention.

Unfortunately, there currently is no standard for survivorship care for lung cancer survivors despite the increasing need for standardization, ways to measure quality, models to pay for survivorship care, and better working relations between cancer care, primary care, and behavioral health/mental health care settings and providers (C. Presley, 2024). People in rural areas such as Maine are at a particular disadvantage since availability of health services is limited compared to urban areas. Cancer survivorship covers many domains such as surveillance, preventing side effects from treatment, care coordination between specialists and generalists, and managing comorbidities. This care is becoming more complex as well. The American College of Surgeons is developing a lung cancer survivorship model called "Living Well with Lung Cancer." The novel survivorship clinic model provides the opportunity for patients and caregivers to meet one-on-one with specialists in multiple domains (including medical oncology, palliative care, integrative medicine, nutrition, or psychosocial oncology) to develop a personalized approach to education and symptom management (C. Presley, 2024).

The importance of working with lung cancer survivors to understand and meet their needs is being recognized by national organizations. Survivorship has been identified as a priority by both the Lung Cancer Research Foundation and the National Lung Cancer Round Table which recently formed a Survivorship Task Force (National Lung Cancer Roundtable, 2023). In the state of Maine, the Maine Lung Cancer Coalition (MLCC) has built a statewide coalition of community and health care system members committed to improving survival rates in lung cancer survivors in Maine. Lung cancer prevention and screening services are offered at many Maine hospitals. The American Lung Association chapter, Free ME from Lung Cancer, and the Maine Public Health Association have been working on improving awareness and care for lung cancer for many years (MLCC, 2024)

Patients with advance lung cancer are a unique and neglected group of survivors whose needs have been largely unmet. Focus and attention must be turned to those patients living longer with advanced lung cancer. Hopefully, through new models of survivorship care we can help them live comfortably and meaningfully.

#### References

Carolyn J. Presley et al., Survivorship in Advanced Lung Cancer: Understanding a New Landscape and Opportunities. Am Soc Clin Oncol Educ Book 44, e433298(2024). DOI:10.1200/EDBK\_433298

Centers for Disease Control and Prevention. U.S. Cancer Statistics Lung Cancer Stat Bite. U.S. Department of Health and Human Services; 2024.

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Maine Lung Cancer Coalition, June 2024

National Lung Cancer Roundtable Newsletter. June 2024



# HEART OF MAINE SYMPOSIUM

Harraseeket Inn | *Freeport, ME* April 6, 2024





## A Huge Thank You to our 2024 ONS Symposium Guest Speakers!













## Another Big Thank You to our 2024 ONS Symposium Attendees!



THE VOTES ARE IN.

Congratulations to our newest elected board members!

PRESIDENT ELECT

Micole Brown RN, OCN

TREASURER

Patricia Brown RN

PROGRAM CHAIR

Levi Medeiros RN, BSN, OCN, ONN-CG



INCOMING PRESIDENT

EFFECTIVE 1/1/25

Andrea Martelle
RN, OCN, ONN-CG

MIND OF O'N

## Why should YOU join ONS and attend local chapter meetings?

### National Membership Benefits:

#### \$\$\$ Savings

- Save \$120 on all ONCC certifications
- Save \$150 on ONS Congress
- Access to discounted / free CEU's through www.ons.org

Scholarships towards Bachelor's and Master's degrees!

<u>FREE</u> subscription to ONS journals including CJON.

#### **Student Nurses join for FREE!**

Heart of Maine Chapter Board Members

Patty Brown RN

President

Andrea Martelle, RN, OCN, ONN-CG *President Elect* 

Mary Eddleston RN, OCN, ONN-CG Secretary

Kerri Medeiros BSN, RN, OCN, ONN-CG *Treasurer* 

Nicole Brown RN, OCN, ONN-CG *Program Chair* 

Victoria Dick BSN, RN, CRNFA *Director at Large* 

Sacha Genest RN *Nominating Chair* 

Lindsay Lapierre Swan BSN, RN Newsletter & Medía

### **Local Chapter Benefits:**

#### YEARLY \$500 SCHOLARSHIP

For Any Member Who:

- Has been an ONS member for at least 1 year
- Attends 75% of the Heart of Maine programs

\*To use towards a conference or other approved educational offerings.

Attendees are entered to win a \$25 Amazon gift card drawn at the end of each meeting.

Attend 4 of the 6 chapter meetings will receive a FREE ONS MEMBERSHIP!

Talk to a board member for more information!



### <u>Upcoming Board Meetings</u>

March 7-9 | Board Retreat June 12 | Location TBD September 18 | Location TBD November 20 | Location TBD

Thank you for reading!

ONCOLOGY NURSING SOCIETY

HEART OF MAINE CHAPTER