Multi-Professional Breast Cancer Pre-habilitation: Education and Self-Empowerment

Gillian McCollum
Lymphoedema Lead
Belfast HSC Trust
Overview

• Background to the pathway
• Aims of the pathway
• How the pathway works
• Key development principles
• Key outcomes
• Key summary points
• Questions for the future
• Future plans
Background to the Pathway:
Key Documents

• 2011 Transforming Your Care
• 2012 Transforming Cancer Follow Up
• 2012 Macmillan: The importance of physical activity for people living with and beyond cancer: A concise evidence review
• 2013 National Cancer Survivorship Initiative (NCSI) report ‘Living with and beyond cancer: taking action to improve outcomes’
Background: Patient Focused

• Only 32% of breast cancer survivors participate in the recommended levels of physical activity at 3 years post diagnosis

• Survivors have been shown to have a VO$_{2\text{max}}$ 20-30% lower than healthy aged-matched women due to deconditioning, notably loss of muscle mass and long term effects of cancer therapies
Background: Patient Focused

• 2016 patient focus group feedback:
  “The physical activity element should be earlier in the process”

• Early intervention at the point of diagnosis or soon after is the time patients are most receptive to new ideas and ways of living. Described as the ‘teachable moment’
  (Prof Jane Maher, Macmillan Cancer Support CMO)
Aims of the Pathway

• Educate breast cancer patients, from the point of diagnosis, on the benefits of physical activity

• Educate patients on potential barriers to physical activity eg lymphoedema, fatigue, cording, reduced range of movement and muscle strength, pain

• Provide timely self-referral access to Physiotherapy and Occupational therapy if required

• Support patients in carrying out physical activity throughout their treatment including access to tailored physical activity programmes

• Provide patients with the information and self-efficacy to continue with this activity independently, long-term, in their own community
How the Pathway Works

1. Patient diagnosed with breast cancer and surgery recommended

2. BCN give the patient a letter asking them to attend a pre-habilitation education session, as part of their overall treatment pathway

3. Patient attends education session, ideally pre surgery. Education focuses on importance of PA and potential barriers to being PA as a direct result of cancer treatment modalities

4. 6 weeks post surgery all patients are sent a letter to ‘opt-in’ to Physiotherapy, Occupational Therapy or Cancer PA Coach. Patients can access these HCPs for up to 12 weeks post completion of all treatment
Who is Involved?

- Breast Care Nurse
- Social worker
- Oncology Specialist Nurse
- Physio
- OT
- Cancer PA Coach
- Surgeons
- Oncologists
- Community classes + Macmillan
Education Session

• Post-surgical exercises
• Importance of PA in improving QOL, rehabilitation and preventing recurrence
• Recommended levels of PA (DHSSPS, 2011)
• Barriers to PA and how to manage e.g. cording, lymphoedema, fatigue
• Work place issues and financial support
• Other support available - fatigue management classes, PA coach, exercise classes, Macmillan information centre
Key Development Principles

- Redevelopment of Physio breast cancer service
- Changing culture and embedding practice
- Partnership working
- Correct skill mix
- Standardised approach for all patients
- Patient education and self-empowerment
- Patient self-referral
- Peer support
Key Outcomes

- Attendance rates at education session = 60.4% of those asked to attend

- Percentage of patients phoning up for follow up with Physio, OT or Cancer PA Coach = 16%

- 100% of those who attended felt it was an important part of their treatment plan
Key Outcomes

- Positive feedback from 2017 Patient focus group

- Of those patients who attended the physical activity sessions – Psycho-social scores and 6 min walk test scores improved

- Cost savings from timely self-referral process - including reduced GP appointments and timely management of the more acute issues (and not chronic stages)
Key Summary Points

• Gain full support from Surgeons, BCNs and Oncology

• Educate patients at the ‘teachable moment’

• Focus on survivorship through patient self-efficacy especially now with self directed after care

• Have robust PA support in place and timely access to Physio and OT when most needed
Questions for the Future

• Does the pathway improve early intervention for lymphoedema thus reducing the need for intensive treatment and reliance on services?

• Is there an increase in physical activity during and post treatment in this patient group?

• Does it improve QOL, return to work?
Future Plans

- Partnership with Friends of Cancer Centre to purchase ‘pulleys’ to further aid self-managed range of movement

- Sharing with other breast cancer teams via local Physio and OT specialist clinical interest groups

- Intra-trust rollout of weekly education model for other tumour groups
References

• DHSSPS (2011). Physical Activity Guidelines for Adults
• DHSSPS (2012) Transforming Cancer Follow Up
References


• National Cancer Survivorship Initiative (NCSI) (Department of Health (DH), Macmillan Cancer Support, NHS Improvement (2013). Living with and beyond cancer: Taking action to improve outcomes. London