

Welcome!

Before we begin...

Today's Pediatric,
Adolescent, and Young Adult
Cancer Survivorship ECHO
session will be recorded

Please use the link in the chat to sign-in









Pediatric, Adolescent, and Young Adult Cancer Survivorship ECHO

Session 9

Integration of Survivorship and Primary Care

Wednesday, March 26th, 2025 11:00 AM - 12:00 PM CT





Housekeeping & Disclosures



Each ECHO session will be recorded and will be posted to a publicly-facing <u>ACS</u> <u>ECHO website</u>.



Use the buttons in the *black* menu bar to unmute your line and to turn on your video.



Please sign in using the link in the chat for attendance purposes.



Remember: Do NOT share any personal health information (PHI) about any patient.



Questions about Zoom, please directly chat with Beth Graham for assistance.

Today's Agenda



Topic: Integration of Survivorship and Primary Care

Facilitator: Maggie Rogers, MPH

Topic	Moderator/Presenters	Time
Welcome & Announcements	Allison Rosen, MS	3 mins
Clinical Presentation	Kimberly Peairs, MD, FACP	15 mins
Lived Experience Presentation	Lara Diamond	10 mins
Clinical/Lived Experience Discussion	All	30 mins
Wrap-Up	Allison Rosen, MS	2 mins





Have a question? Don't wait to ask! Feel free to enter in the Chat at any time.







Integration of Survivorship and Primary Care

Kimberly Peairs, MD, FACP

Vice Chair for Clinical Affairs, Department of Medicine Medical Director for Primary Care Value and Innovation in the Office of Johns Hopkins Physician

Conflict of Interest



I have no disclosures or conflicts of interest to report.

Learning Objectives

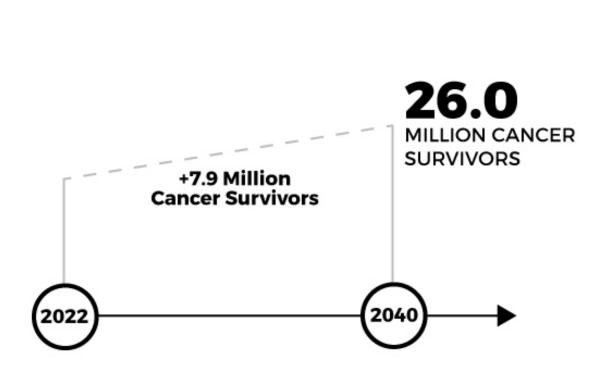


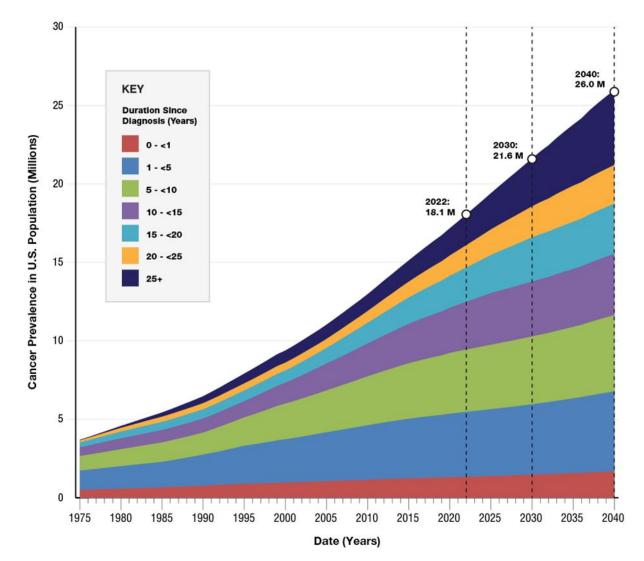
- •Describe the transition from oncology care to primary care and its associated challenges.
- •Discuss the primary care provider's (PCP) role in surveillance, prevention, and management of late-effect
- •Identify solutions for improving access to survivorship resources

Integration of Survivorship and Primary Care

Kimberly Peairs, MD, FACP
Vice Chair, Clinical Affairs, Department of Medicine
Johns Hopkins Primary Care for Cancer Survivorship Program
Department of Medicine and Sidney Kimmel Comprehensive Cancer Center
Johns Hopkins School of Medicine

A good problem to have...



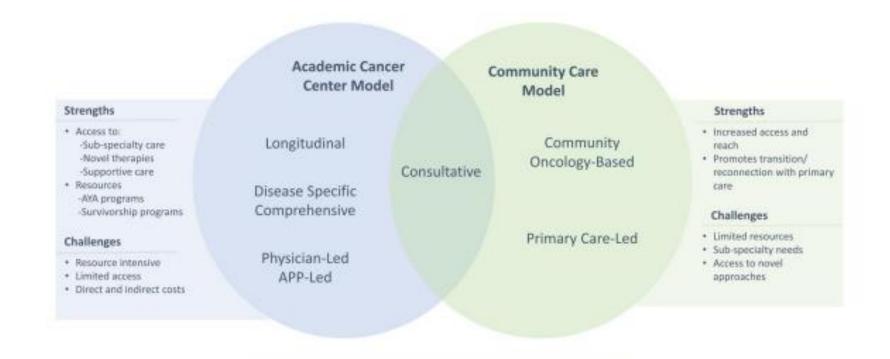


Source: Tonorezos et al, JNCI, 2024

Cancer Survivorship Care includes:

- Surveillance for recurrences and new cancers
- Surveillance and management of:
 - Chronic medical conditions
 - Physical effects
 - Psychosocial effects
- Health promotion and disease prevention

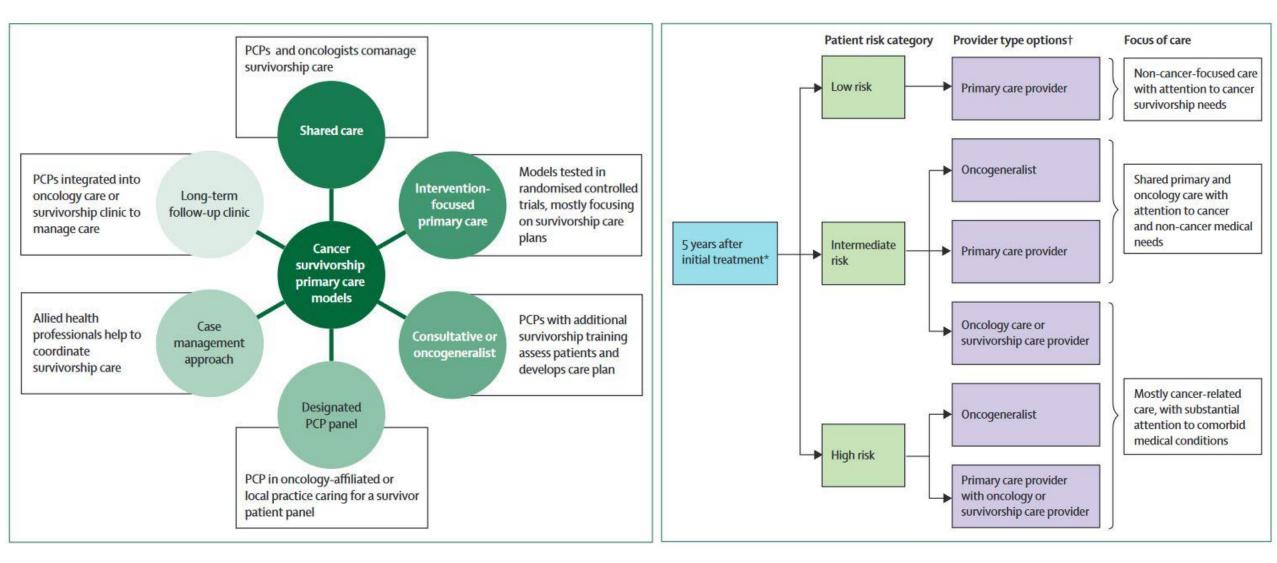
Models of Survivorship Care



Knowledge Gaps & Areas for Future Research

- · AYA utilization and sustained engagement by model
- . Leveraging centralized resources (allied care; digital integration)
- Optimal transitions between care delivery settings
- Impact on AYA outcomes

Survivorship care models with primary care



Source: Nekhlyudov et al, Lancet Oncol 2017, 18 (1): e30-38

Primary Care for Cancer Survivors Clinic





We are here to help you get connected with a primary care physician who understands the unique needs of cancer survivors. Once you have completed your cancer treatment, you may not need to see a cancer specialist (or oncologist) as often.



Our team of internal medicine experts is here to help make your transition from active treatment with a cancer specialist to life beyond cancer therapy. We will create a personalized health and wellness plan for you and address specific issues you may have, such as long-term effects from chemotherapy and radiation treatment.



Our team of primary care physicians, nurse practitioners and nurses will work closely and communicate with your Johns Hopkins Kimmel Cancer Center oncology team to provide the best health care after cancer. We look forward to partnering with you and are happy to answer any questions you may have.

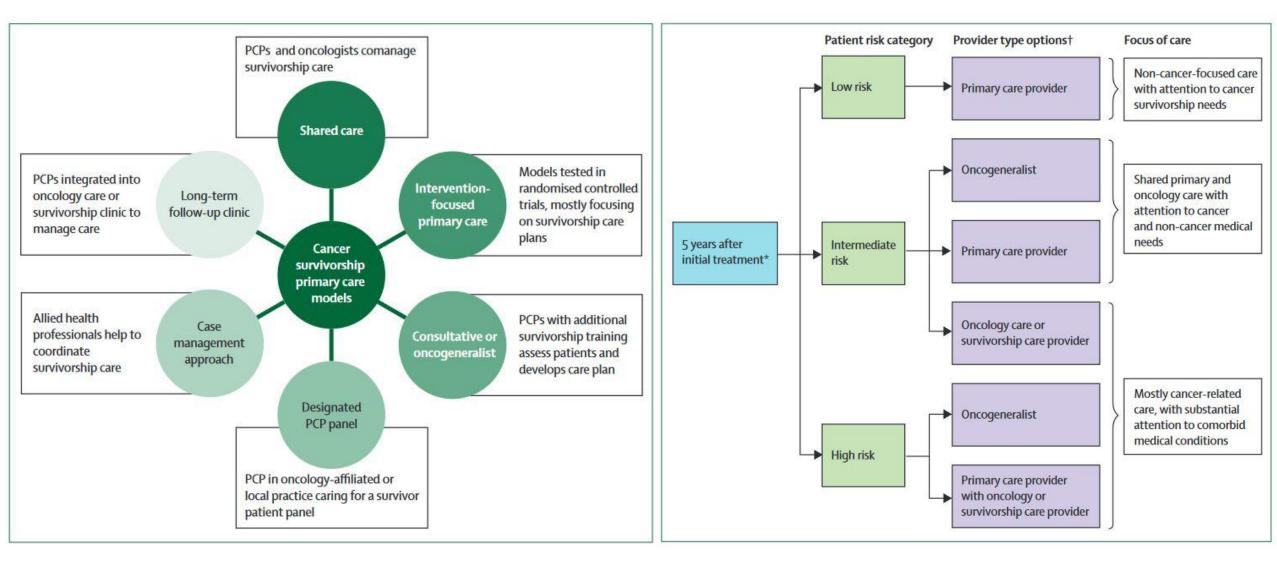
To make an appointment, call 410-583-2774, Ext. 8. Request the Primary Care for Cancer Survivors Program.

THE SIDNEY KIMMEL
COMPREHENSIVE CANCER CENTER

DIVISION OF GENERAL INTERNAL MEDICINE



Survivorship care models with primary care



Source: Nekhlyudov et al, Lancet Oncol 2017, 18 (1): e30-38

Risk-stratified Model of Survivorship Care

- Survivors differ by:
 - Risk of recurrence
 - Risk of ongoing and late toxicities of therapy
 - Ongoing therapies
 - Comorbid conditions
 - Psychosocial needs
 - Risk of second primary cancers
 - Genetic predisposition
 - Lifestyle
- Content and intensity of survivorship care should differ based on different needs of different survivors
 - This is sometimes difficult to assess

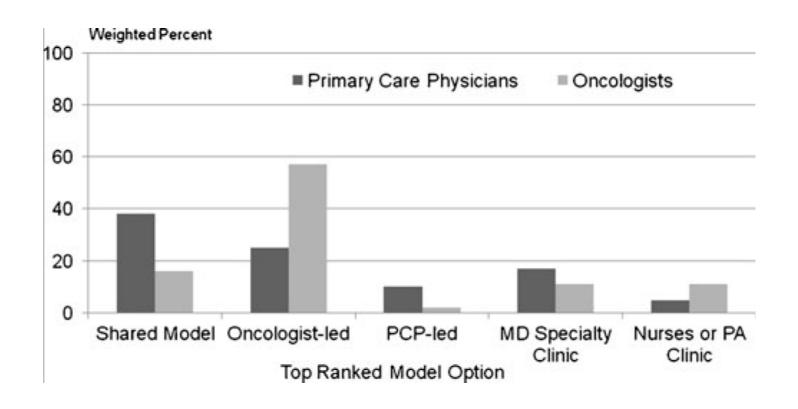
Transitioning from Oncology to Primary Care: Training the Clinicians

- Acknowledgement
 - Primary care will be involved in some capacity

- Engagement
 - Communication and Updates

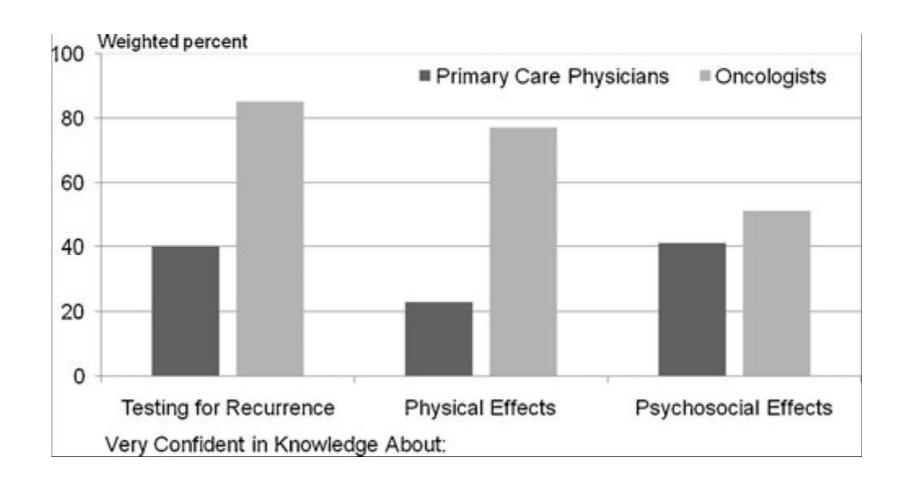
- Education
 - O What is a necessary?

Preferred Model for Care of Cancer Survivor: the Physician's Preferences



Source: Potosky et al., JGIM 2011

Physicians' Confidence about Cancer Follow-up Care



Primary Care Physician Knowledge and Confidence in Cancer Survivorship Care

2023 Systematic Review

- 33 papers
- PCPs had more confidence in managing psychosocial effects > physical effects
- PCP had the knowledge to detect recurrences but less confidence to do so
- Perceived need for education on:
 - Long-term and late physical effects
 - Cancer surveillance guidelines

What is Helpful for PCPs to Provide Survivorship Care?

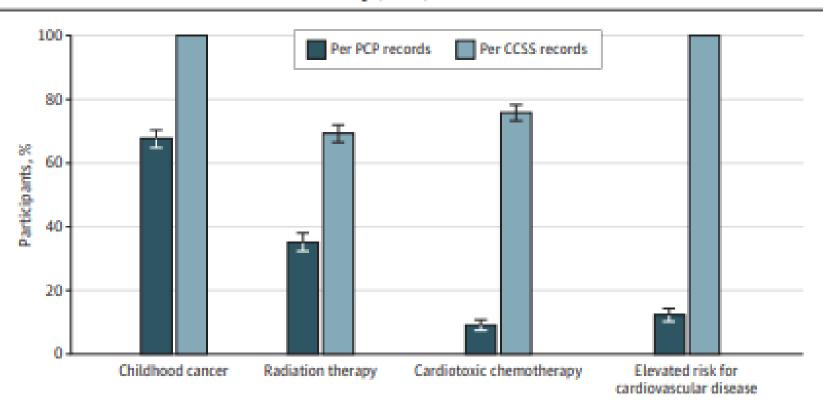
Table 4. Usefulness of Various Modalities to Help PCPs Provide Follow-Up Care to Cancer Survivors

Modality	No.	%†
Patient-specific standardized letter from specialist(s) with follow-up details for the primary care physician‡§ (n = 326)	311	95.4
Printed guidelines regarding the follow-up of cancer patients in remission¶# (n = 327)	300	91.8
Expedited routes of re-referral to cancer specialists (n = 326)	302	92.7
Expedited access to investigations for suspected recurrence $\ddagger \P \P$ (n = 325)	296	91.1
Ability to telephone/e-mail specialist for advice ^{**} †† (n = 326)	281	86.1
Medical education seminars/courses regarding cancer follow-up care (n = 326)	255	78.2
Expedited access to "support services," eg, social work, psychology, etc.‡ ‡‡ §§ (n = 325)	243	74.8
Patient-specific standardized letter from specialist(s) with follow-up details given to the patient (n = 326)	217	66.5
Web-site with information and opportunity for questions and answers¶ §§ (n = 321)	172	53.5
More medical/support staff in primary care office§§ ∭ (n = 319)	156	48.9
Pamphlets on follow-up cancer care§§ (n = 324)	146	45.1
	Patient-specific standardized letter from specialist(s) with follow-up details for the primary care physician‡§ (n = 326) Printed guidelines regarding the follow-up of cancer patients in remission¶# (n = 327) Expedited routes of re-referral to cancer specialists (n = 326) Expedited access to investigations for suspected recurrenceদ (n = 325) Ability to telephone/e-mail specialist for advice‡**†† (n = 326) Medical education seminars/courses regarding cancer follow-up care (n = 326) Expedited access to "support services," eg, social work, psychology, etc.‡‡‡ §§ (n = 325) Patient-specific standardized letter from specialist(s) with follow-up details given to the patient (n = 326) Web-site with information and opportunity for questions and answers¶§§ (n = 321) More medical/support staff in primary care office§§ (n = 319)	Patient-specific standardized letter from specialist(s) with follow-up details for the primary care physician‡§ (n = 326) Printed guidelines regarding the follow-up of cancer patients in remission¶# (n = 327) Expedited routes of re-referral to cancer specialists (n = 326) Expedited access to investigations for suspected recurrenceদ (n = 325) Ability to telephone/e-mail specialist for advice‡**†† (n = 326) Medical education seminars/courses regarding cancer follow-up care (n = 326) Expedited access to "support services," eg, social work, psychology, etc.‡ ‡‡ §§ (n = 325) Patient-specific standardized letter from specialist(s) with follow-up details given to the patient (n = 326) Web-site with information and opportunity for questions and answers¶ §§ (n = 321) More medical/support staff in primary care office§§ (n = 319)

Source: Del Giudice et al. JCO. 2009

Under Screening of Cardiovascular Disease in Adult Survivors of Childhood Cancer

Figure 2. Frequency of Documentation of Treatment Exposures by Primary Care Provider (PCP) Records vs Data Abstracted From Childhood Cancer Survivor Study (CCSS) Research Records



Source: Ohlsen, et al. JAMA Network Open. 2023

Factors Associated with Doing Appropriate Cardiac Testing in Cancer Survivors

In multivariate model:

- Documentation of increased CVD risk
- Documentation of need for late-effects surveillance
- Presence of existing CVD risk factors in medical record

Core Competencies

- Survivorship
- Surveillance
- Long-term and Late effects
- Health promotion and disease prevention
- Psychosocial care
- Childhood and AYA Cancer Survivors
- Older adult cancer survivors
- Caregivers of cancer survivors
- Communication and coordination of care

ASCO Core Curriculum for Cancer Survivorship Education

Charles L. Shapiro, MD, Paul B. Jacobsen, PhD, Tara Henderson, MD, MPH, Arti Hurria, MD, Larissa Nekhlyudov, MD, MPH, Andrea Ng, MD, MPH, Antonella Surbone, MD, PhD, Deborah K. Mayer, PhD, RN, and Julia H. Rowland, PhD

Opportunities to Strengthen Primary Care of Cancer Survivors

- Education and Training
- Clinical Practice Guidelines
- Risk Stratification to guide care team composition
- Enhancing care provider teams (addition of APPs, nurses, etc.)
- Payment incentives/ financial models for success

ASCO Tr	eatment Summar	y and Survivorship C	are	Plan
	General I	nformation		
Patient Name:		Patient DOB:		
Patient phone:		Email:		
Healt	h Care Providers (Ir	ncluding Names, Instit	utior	n)
Primary Care Provider:				
Surgeon:				
Radiation Oncologist:				
Medical Oncologist:				
Other Providers:				
	Treatme	nt Summary		
		gnosis		
Cancer Type/Location/Histology Subtyp	e:			Diagnosis Date (year):
Stage: □I □II □III □Not applica	ble			
	Trea	itment		
Surgery ☐ Yes ☐ No Surgery Date(s) (ye		Surgery Date(s) (yea	r):	
- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Surgical procedure/location/findings:				
Radiation ☐ Yes ☐ No	Body area treated	:	End	Date (year):
Systemic Therapy (chemotherapy, horm	nonal therapy, other	-) □ Yes □No		
Names of Agents Used		•		End Dates (year)
				.,
Persistent symptoms or side effects at o	ompletion of treatr	nent: No Yes (enter	er ty	pe(s)):

ASCO Survivorship Care Plan Updated based on consensus conference held on 9.27.13 and the ASCO Survivorship Committee

Cancer surveillance or other recommended related tests				
Coordinating Provider			What/When/Ho	ow Often
Please continue to see your primary	care	provider for all	general health care recomme	ended for a (man) (woman) your
age, including cancer screening tests	. Any	y symptoms shou	ald be brought to the attention	on of your provider:
 Anything that represents a b 	rand	d new symptom;		
Anything that represents a p	ersis	stent symptom;		
Anything you are worried ab	out 1	that might be rel	ated to the cancer coming ba	ack.
Possible late- and long-term effects	that	someone with th	is type of cancer and treatm	ent may experience:
r coolbic late and long term enects		oomeone wan a	ns type of carroer and troutin	систа, ехропенсе.
Cancer survivors may experience issu	ues v	with the areas lis	ted below. If you have any co	oncerns in these or other areas,
please speak with your doctors or nu	ırses	to find out how	you can get help with them.	
☐ Emotional and mental health		Fatigue	☐ Weight changes	☐Stopping smoking
☐ Physical Functioning		Insurance	☐ School/Work	☐ Financial advice or assistance
☐ Memory or concentration loss		Parenting	☐ Fertility	☐ Sexual functioning
☐ Other				
A number of lifestyle/behaviors can	affec	ct your ongoing h	ealth, including the risk for t	he cancer coming back or
developing another cancer. Discuss t	these	e recommendation	ons with your doctor or nurse	e:
☐Tobacco use/cessation			☐ Diet	
☐Alcohol use			☐Sun screen use	
\square Weight management (loss/gain)			☐ Physical activity	

Survivorship Care Plans (SCP)

- Care Team
- Treatment Summary
- List of Potential Late Effects
- Schedule of Screening Tests for Late Effects
- Recommended Health Behaviors

Source: http://www.asco.org/practice-research/cancer-survivorship

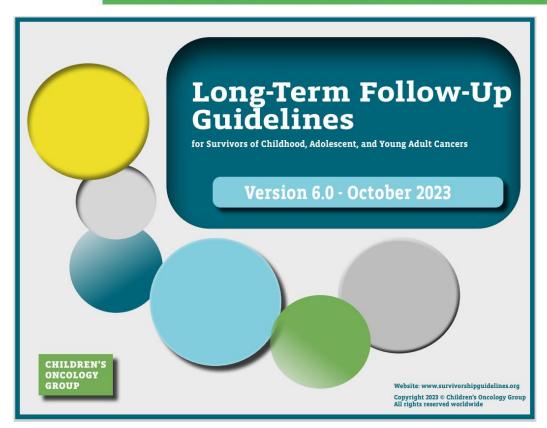
Long-Term Follow-Up Guidelines for Survivors of Childhood, Adolescent, & Young Adult Cancers Version 6.0 (October 2023)





OUR MISSION

To cure and prevent childhood and adolescent cancer through scientific discovery and compassionate care.



Source: www.survivorshipguidelines.org





Thankyou







Lived Experience Expert

Lara Diamond





Open Discussion: Questions & Answers





Wrap Up

ECHO Post Session Survey Time









- 1. **Turn on** your phone camera
- 2. **Aim** the camera at the code
- 3. A link will show up
- 4. **Tap** the link to go to the survey

Upcoming ECHO Program Topics





Genetic
Counseling &
Testing for Cancer
Survivors

Healthy Living:
Exercise &
Nutrition for
Cancer Survivors

Case Study Overview

Presenting a Case Study

- ✓ The presentation should range from 3-5 mins
- ✓ Complete and submit the case presentation form electronically
 - ✓ Presenter info
 - ✓ Presenter headshot and brief bio
 - √ 3-5 case-related questions
- ✓ Submit **two weeks prior** to the scheduled session
- ✓ If you have any questions, please feel free to email Allison.Rosen@cancer.org





Pediatric, Adolescent, and Young Adult Cancer Survivorship ECHO- Case Presentation Form

Case presentations are a critical component of ECHO's All Teach, All Learn model. Thank you for preparing your case! This form has two sections: 1. Presenter Information and 2. Case Information.

- Choose either a patient or system/workflow case for your case presentation.
- Case presentations will be 3-5 minutes allowing for time for recommendations from your peers and our Subject Matter Experts.
- Exclude patient identifiers on this form or use any identifiers during the presentation.

Presenter Prefix (e.g. Mr., Mrs., Ms., Dr., etc.)				
Presenter Full Name(s)*				
as you wish it to appear on the PowerPoint slides				
Presenter Credentials*				
as you wish it to appear on the PowerPoint slides				



Wrap-Up







Next ECHO Session 10, April 23rd, 2025, 11:00 AM – 12:00 PM CT **Topic: Genetic Counseling and Testing for Cancer Survivors by Jessie Corredor, MS, CGC, MD Anderson Cancer Center**

Slides, Recordings, & Resources will be made available within one week. All resources will be available on the **ACS ECHO Website**.



iECHO calendar invites have been sent out for **Sessions 10-11**NOTE: Zoom invitations/links to join will not come until **60 minutes** before the session



Questions? Allison Rosen - Allison.Rosen@cancer.org







Thank You