FROM THE EDITOR

A More Personalized Approach to Survivorship Care?

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ince the 2005 publication of From Cancer Patient to Cancer Survivor: Lost in Transition by the Institute of Medicine (now the National Academy of Medicine), the healthcare community has become more aware of the needs of cancer survivors and responded by developing survivorship services and programs. Though these survivorship programs incorporate different models of care, the backbone is providing the patient with a survivorship care plan, a document that intuitively should enhance understanding of both the care received and the transition back to primary care and ultimately improve outcomes. Yet, there is limited evidence that survivorship care plans do so. A recently published article in The Oncologist may shed some light on why and guide us on future design of survivorship programs.

The study, a cross-sectional needs assessment of cancer survivors, found heterogeneity in the survivors’ needs that fell into four clusters:

- Low needs
- Mainly physical needs
- Mainly psychological needs
- Both physical and psychological needs.

The low-needs cluster of survivors was the largest, representing 40 percent of the 292 respondents and half of this group (20 percent) had no needs identified. The authors concluded that a measurable benefit of survivorship care plans do so. A recently published article in The Oncologist may shed some light on why and guide us on future design of survivorship programs.

The provision of survivorship care can also be challenging for cancer programs. From inadequate reimbursement for survivorship care services to overly burdensome accreditation standards and requirements, cancer programs struggle to provide survivorship care in the most impactful, cost-effective manner to an exponentially expanding patient population. To help ease some of these burdens and better align with patient-centered care delivery, accrediting organizations should use these data to develop more appropriate survivorship standards that truly meet the needs of cancer survivors rather than assuming a one-size-fits-all approach.

Reference