

# Abstract #256: Assessing Comprehensive Care Deficits in United States (US) Ovarian Cancer Programs to Inform Quality Improvement Initiatives

Authors: Matthew Smeltzer<sup>1</sup>, Monique Dawkins<sup>2</sup>, Leigh Boehmer<sup>2</sup>, Sarah Madhu Temkin<sup>3</sup>, Premal H. Thaker<sup>4</sup>, Leigha Senter<sup>5</sup>, Anna Yemelyanova<sup>6</sup>, Michelle Bigg<sup>7</sup>, Jennifer Bires<sup>8</sup>, Sean Christopher Dowdy<sup>9</sup>, Anthony Magliocca<sup>10</sup>

<sup>1</sup>University of Memphis, School of Public Health; <sup>2</sup>Association of Community Cancer Centers; <sup>3</sup>National Institutes of Health; <sup>4</sup>Washington U. School of Medicine, Department of Gyn Onc; <sup>5</sup>Ohio State University; <sup>6</sup>Weill Cornell; <sup>7</sup>HCA Healthcare Las Vegas; <sup>8</sup>George Washington U. Medical Center; <sup>9</sup>Mayo Clinic; <sup>10</sup>Protean BioDiagnostics

## Background:

- Ovarian cancer is the leading cause of gynecologic cancer mortality in the US
- Multidisciplinary approach is critical to optimal care delivery due to the high burden of disease and complexities in care
- In 2019, Association of Community Care Centers (ACCC) launched a multiphase, stakeholder-driven initiative to improve care for this population
- ACCC conducted a national survey of cancer programs to identify the needs of ovarian cancer patients

## Methods:

- 20 question survey developed by steering committee including gynecologic oncologists, pathologists, genetic counselors, nurse navigator, and cancer center administrators
- Survey designed to collect data about cancer programs, key ovarian cancer patient needs, and barriers to and opportunities for improving ovarian cancer care
- Survey distributed via email to ACCC and Society of Gynecologic Oncology members
- Survey open for participation for 4 weeks using the Qualtrics platform

Multidisciplinary care for ovarian cancer was common across a range of cancer programs

Integration of palliative care, social work, dietetics, and financial counseling could be improved

Expanding clinical trials and genetic testing and counseling were the most frequently identified opportunities to improve ovarian cancer care



This project is funded by AstraZeneca.

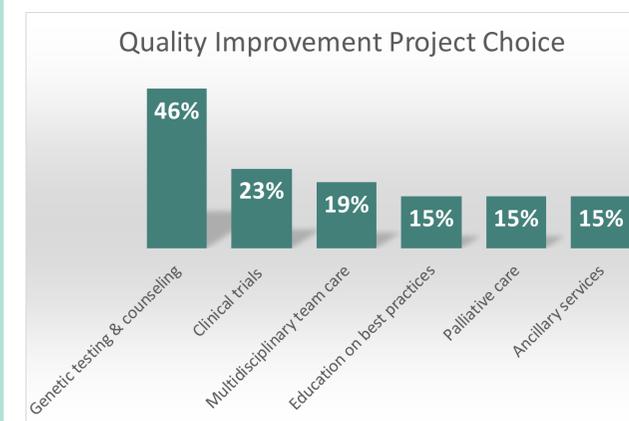
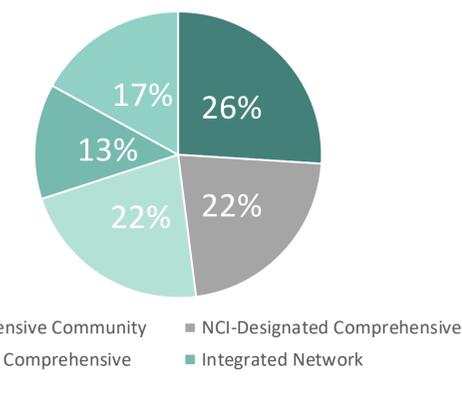
Copies of this poster obtained through Quick Response (QR) Code are for personal use only and may not be reproduced without permission from ASCO® and the author of this poster.

Corresponding author: msmltzer@memphis.edu

## Results:

- **26 total responses**
- Annual ovarian cases ranged from 22 to 190 (median 50.5)
- 85% of programs have a multidisciplinary team for ovarian cancer and 61% are part of a referral network
- On average, programs have 1.5 phase II and 2 phase III trials currently available for ovarian cancer
- Palliative care was most commonly available by consult (81%), integrated into first appointment (15%), at time of recurrence (4%)
- 79% of patients received germline multi-panel testing, 71% germline BRCA only, 50% somatic multigene, 51% somatic BRCA only

Responses by program type



Consultation frequency

Genetic counseling	75%
Nurse navigation	75%
Social work	50%
Dietetics	40%
Financial counseling	25%

## Future Directions for Research:

- Design, implement, and assess effectiveness of quality improvement projects