

Integrative Oncology: A Local Perspective

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Objectives

- * *Understand our patients' preferences regarding Integrative Oncology*
- * *Define allopathic physicians' concerns and support of integrating complementary therapies with traditional cancer treatment*
- * *Identify patient resources in our community for evidence-based integrative oncology*
- * *Explore the potential opportunities for increased collaboration between allopathic and naturopathic providers*

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Integrative Oncology (IO)

- * Integrating complementary therapies with standard of care/conventional oncology treatment.
- * These integrative or complementary therapies are also therapies that have research supporting use as a treatment modality and this is in contrast to the term “CAM” Complementary and Alternative Medicine.

Barnes PM, Bloom B, Nahin R. *CDC National Health Statistics Report #12. Complementary and Alternative Medicine Use Among Adults and Children: United States, 2007. December 10, 2008.*

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NCCIH (formerly NCCAM) Stats

- * 65% of adults diagnosed with CA reported use of CAM therapies (2007)
- * 43.3% reported CAM use within the last year
- * 77% prevent illness or promote wellness
- 73% reduce pain or treat painful condition
- 59% treat a specific condition
- * 43-80% of BrCA patients report use

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General IO Statistics

- * Significantly Improve anxiety
- * Significantly Improve depression
- * Significantly Improve fatigue
- * Significantly improves QoL

Bar-Sela G, et al. The effect of complementary and alternative medicine on quality of life, depression, anxiety, and fatigue levels among cancer patients during active oncology treatment: phase II study. Support Care Center 2015;23:1979-1985.

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QUALITY OF LIFE (QoL) IN OVARIAN CANCER (OV CA) PATIENTS RECEIVING INTEGRATIVE ONCOLOGY (IO) THERAPIES AT BASTYR INTEGRATIVE ONCOLOGY RESEARCH CENTER (BIORC)

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Figure 4

QoL in OV CA patients using IO therapies

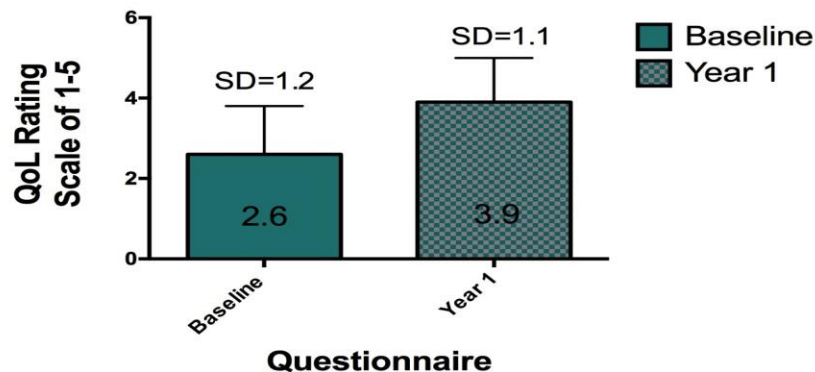
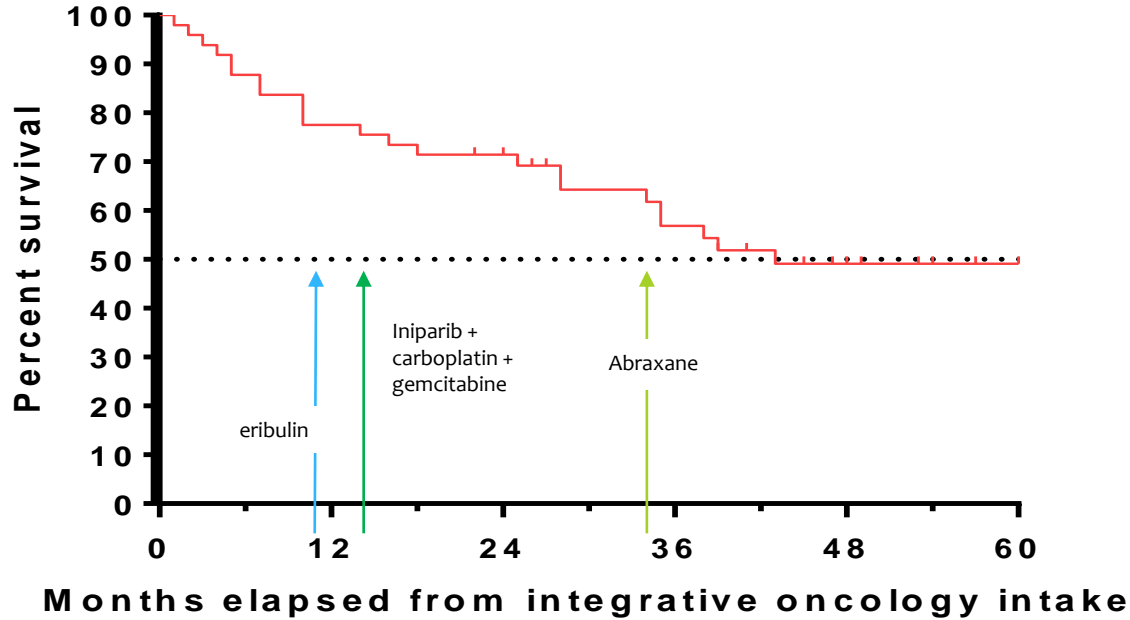


Fig. 4. An increase in the QoL score of 1.3 is noted from Baseline to Year 1 scores on the "In general how is your health" assessment question.

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Bastyr University survival outcomes 2009-2014

Stage IV breast cancer overall survival (n = 54)



Standish et al 2016. Overall survival in a cohort of 54 consecutive metastatic breast cancer patients treated by naturopathic oncologists in western Washington State

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Naturopathic Doctors in the Community Setting

- * Naturopathic Doctors do NOT TREAT CANCER
- * Offer Adjunctive and Supportive Care
 - * This may include recommending therapies to help with side effects during CA treatment
 - * Lifestyle changes to prevent future CA occurrence and increase QoL parameters
 - * Supportive therapies after CA treatment has completed
 - * Wide variety of recommended treatments

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Identifying Patient Resources in our Community for IO

- * We do not know the exact number of providers in the community that are using IO therapies or providing IO care and what types of IO care however:
- * # of Naturopathic Doctors in Bellingham and Surrounding Area according to WANP (16) and the AANP (10 with replication from WANP)
- * Acupuncturists (45 approximate)
- * Massage Therapists (173 approximate and conservative)
- * Mind/Body Practitioners (no specific licensure)

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Challenges for providers outside the system

- * Outside the EHR –communication can be difficult
- * Few to No staff besides the provider
- * Communication barriers- language/terminology
- * Continuing Education
- * Patient/Doctor Bias

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Challenges IO Therapies

- * Lack of research, Lack of funding
- * Lack of research on “popular therapies”
- * Lack of communication between providers and patients
- * Science Education discrepancies

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Collaborating CAM Decision Making

Diagnosis

INITIAL PHASE

Information Gathering Phase

Treatment

MID PHASE

Reevaluation of treatment strategy

“Are my treatments working”

Completion of
Treatment

FINAL PHASE- Return back to the initial information gathering phase.

“Is there anything I can do to prevent my cancer from returning”

Or “ is there another treatment regimen that can further treat my cancer”

Balneaves LG, Weeks L, Seely D. Patient decision-making about complementary and alternative medicine in cancer management: context and process. *Curr Oncol* 2008; Suppl 2; s94-s100.

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“Integrative Oncology is something that should be provided, both services and information, for all cancer patients”

-St. Joseph Cancer Center Patient

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Integrative Oncology at the St. Joseph Cancer Center

- * Yoga
- * Massage
- * Meditation
- * Spiritual Care
- * Exercise
- * Art Therapy
- * Pet Therapy

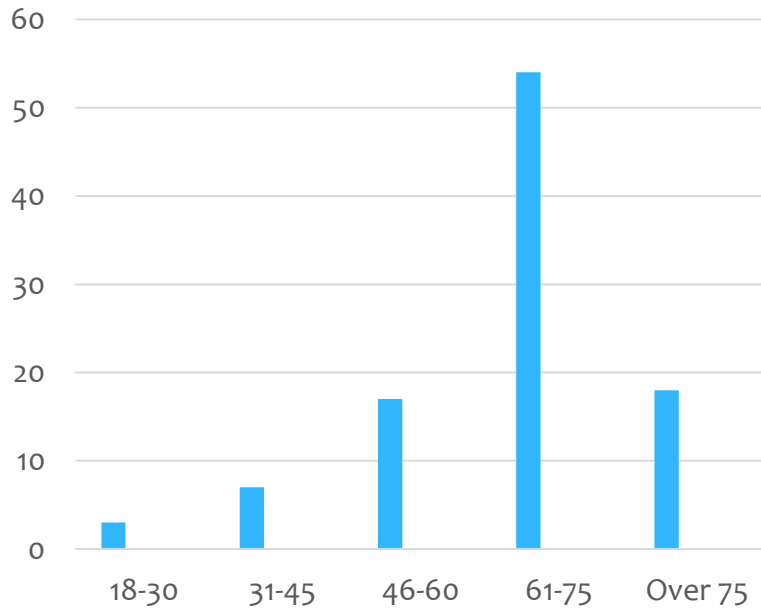
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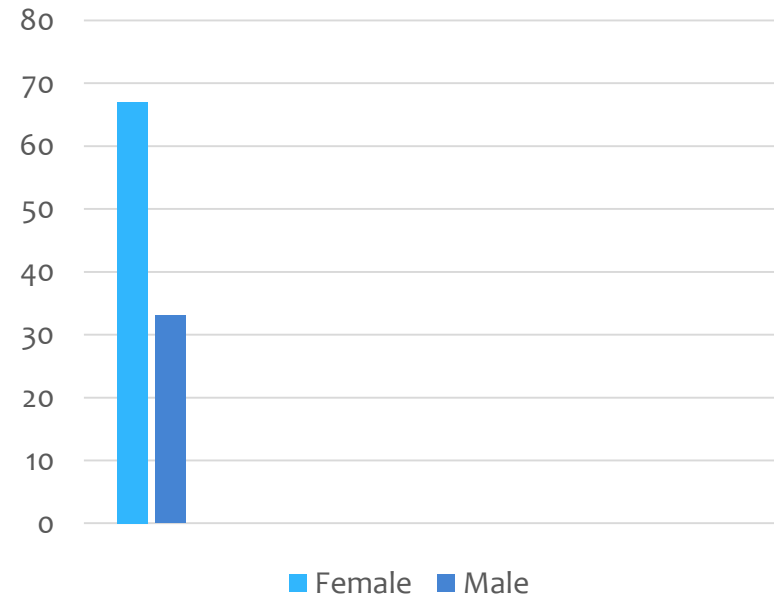
Patient Survey Responses

n= 126

% by Age



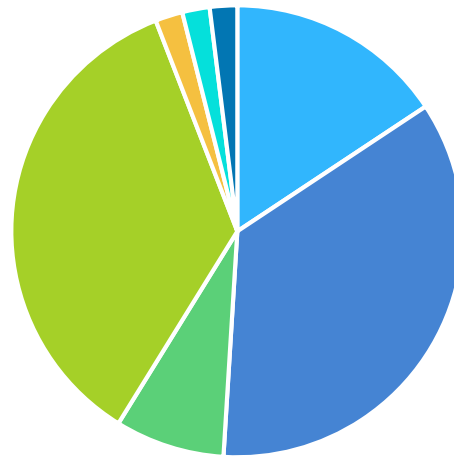
% by Gender



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48% of Patients have used one or more Complementary Therapies



- Acupuncture
- Mindy/Body
- Phototherapy

- Vitamins/Herbs/Supplements
- Cannabis
- Hyperthermia
- Oxygen Therapy

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Patient Survey Results

- * 21% have consulted a Naturopathic Physician
- * 73% would consider a consultation
- * 83% would prefer this consultation to be held at the Cancer Center

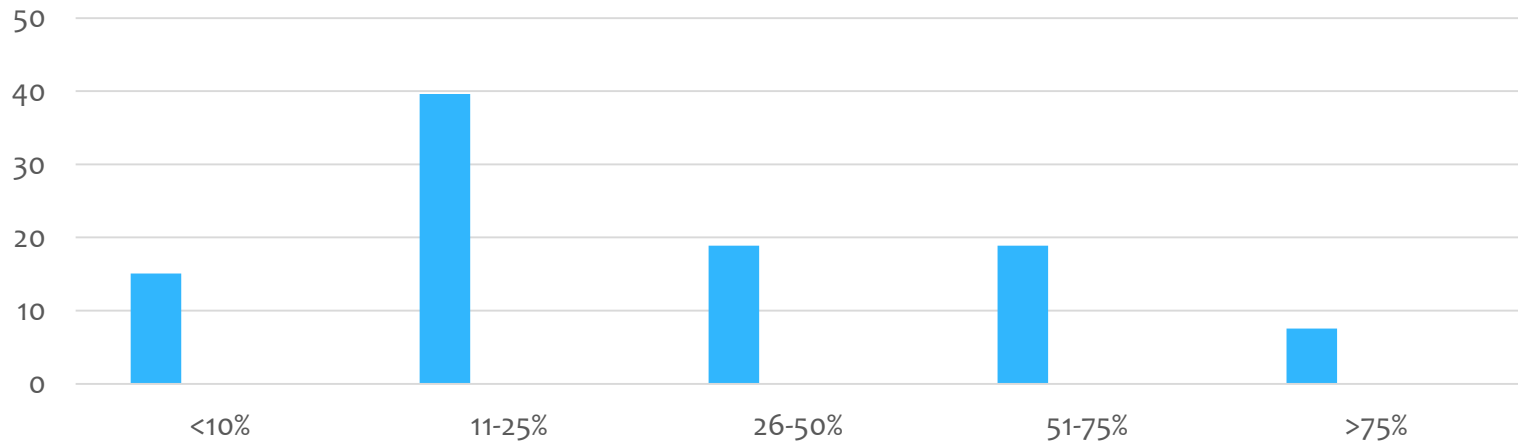
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Physician Survey Results

n=52

Estimate # of your patients with cancer who are using CAM

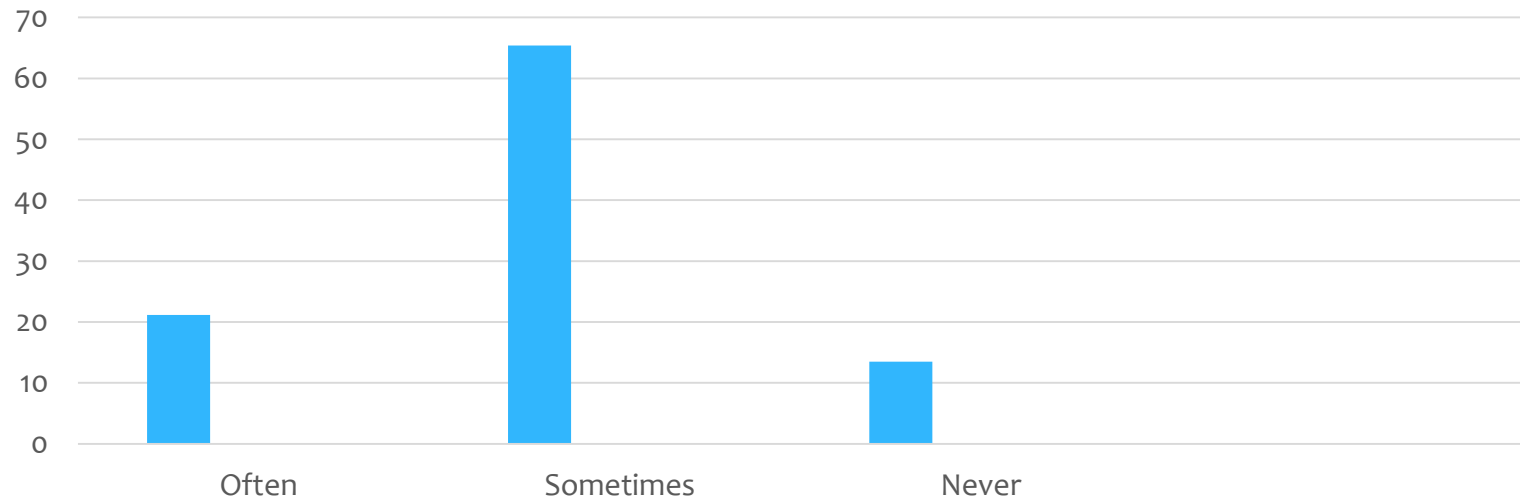


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Physician Survey Results

Do you discuss CAM with your patients?

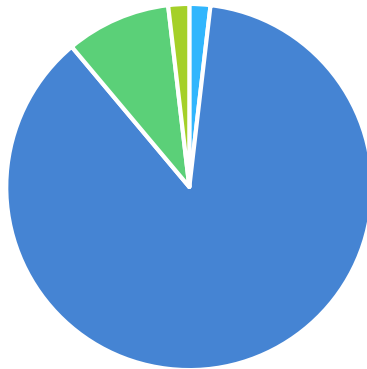


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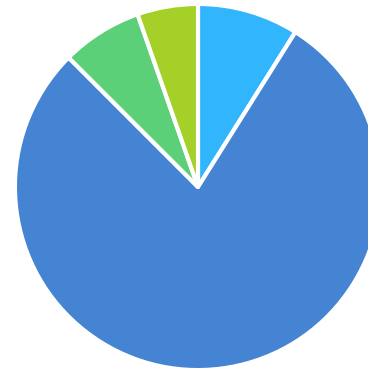
Physician Survey Results

Mind/Body Therapy



- Do not agree with use
- Support with traditional Rx
- Support as alternative to traditional Rx
- No opinion

Supplements/Herbs

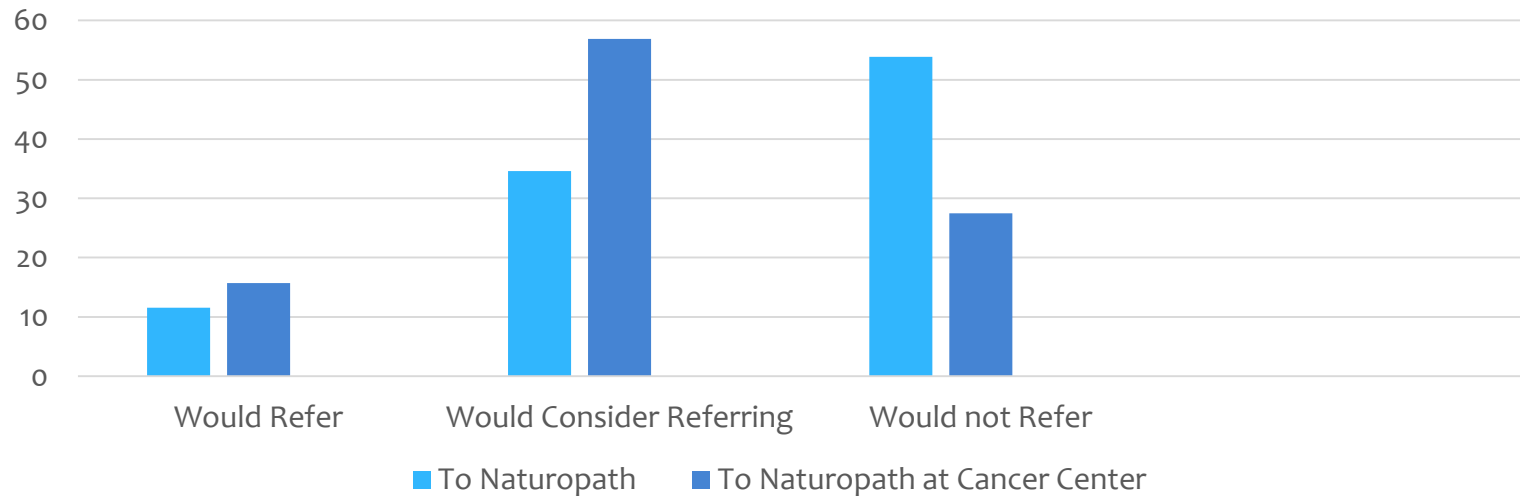


- Do not agree with use
- Support with traditional Rx
- Support as alternative to traditional Rx
- No opinion

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Physician Survey Results

Would you refer your patient to a Naturopathic Provider?



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Survey Conclusions

- * Cancer patients are interested in CAM
- * Wide variety of CAM use by our patients
- * Patients want collaboration between Naturopathic Providers and Other Providers as a Cancer Team
- * Physicians underestimate CAM use by their cancer patients but are willing to discuss
- * Physicians are more comfortable with a CAM approach that uses evidence-based care and is integrated with traditional therapies

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Opportunities for increased collaboration

- * Identify Patient Goals
- * Awareness of CAM decision making as early information is important for decision making.
- * Communication with other providers and patients
- * Better navigation of community resources
- * Better communication with patients regarding realistic goals and the state of the evidence.

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