

Celebrating Cancer Survivorship- A focus on Breast Cancer

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Commentary

A person is considered to be a survivor from the time of cancer diagnosis until the end of life [1]. There are almost 14.5 million cancer survivors alive in the US today, and that number will grow to almost 19 million by 2024 [2]. Follow-up care and psychosocial needs of cancer survivors are often unmet or inappropriately addressed. In 2006, the Institute of Medicine (IOM) issued a milestone comprehensive report, *From Cancer Patient to Cancer Survivor: Lost in Transition* [3]. Of the 10 recommendations regarding cancer survivorship by the IOM, the issues receiving the utmost attention to date have been the provision of a summary of diagnosis, treatment received (treatment summary), future follow-up care plans, and healthy lifestyle recommendations [3]. These recommendations mainly focused on the majority of cancer survivors who have completed active cancer treatment.

It is estimated that there will be 3.4 million breast cancer survivors in 2015 in the US, an increase from 2.8 million in 2014 [4]. Long-term survival rates after a diagnosis of breast cancer are steadily rising. This is good news, but this brings new challenges to the medical community as breast and other cancers become a chronic condition rather than a life-threatening illness. Generally, the prevalence of behavioral disturbances and long term mental and physical consequences of cancer and its treatment can be significant among breast cancer survivors. Therefore, various intervention programs should be utilized to address the various problems including the psychological ones among breast cancer survivors. Evidence suggests that interventional proactive programs developed for women who have completed treatment for breast cancer addressing survivorship issues like psychological well-being and functional wellness are useful for a successful transition to survivorship following breast cancer. These programs may potentially improve recovery and quality of life for survivors of breast cancer [5-8]. Specifically, Mindfulness Based Stress Reduction (MBSR) has been utilized in various health care settings and is intended for individuals experiencing stress, pain, and illness. MBSR was chosen as a promising intervention that clinically improves overall psychological and physical well-being. A randomized control trial of MBSR was conducted with breast cancer survivors diagnosed with Stages 0 to 3 breast cancer who completed surgery, adjunctive radiation and/or chemotherapy [9]. Results indicate that participants who received MBSR reported lower symptoms of depression and anxiety and increased energy and physical functioning as compared to participants who received "usual care."

In low- and middle-income settings, appropriate survivorship care may be particularly challenging. As indicated in a pilot study conducted at the Garbar Breast Care Center (GBCC), to evaluate the breast cancer survivors' quality of life and psychological needs. Survivors seen at the GBCC have physical and mental health below national population averages for both healthy women and breast

cancer survivors [10]. Based on these results, we developed a Breast Cancer Survivorship Program at the nationally accredited GBCC, as part of a research initiative. We proposed to offer a combined intervention of oncological, psychological, dietary and life style care consultations to improve overall quality of life. We implemented MBSR as an essential component of the program [11]. The survivorship program enrolled around 90 breast cancer survivors to date and provided psychological and nutritional support, along with oncological follow up care. The research is ongoing but early results showed a significant improvement in the quality of life and mental health of survivors and reduction in anxiety, depression and stress [11].

We believe that health systems should provide supportive care services for their cancer survivors after curative treatment. To that end, we recommend the implementations of the following 3 key elements: 1) Health professional education that focuses on the management of physical and psychosocial long-term treatment complications, including lymphedema, fatigue, insomnia, pain, and women's health issues, monitoring survivors for recurrences, screening for second cancers, and providing well-documented patient care records; 2) Patient education to help survivors transition from an active -intense cancer treatment to follow-up care in partnership with their provider, including education on recognizing disease recurrence or metastases, management of treatment-related sequelae and psychosocial complications, and the importance of maintaining a healthy lifestyle including physical activity when possible, as well as maintaining a healthy weight; 3) Increasing community awareness of cancer survivorship issues , an essential component in developing resources to assist cancer survivors many of whom suffer not only from physical and mental consequences related to their diagnosis and cancer treatment but also from "financial toxicity" due to consequences of losing a job and accumulating medical bills, among others.

In summary, the theme in cancer progress over the last two decades will continue to dominate. We will continue to see progress in molecular, targeted and more personalized therapies moving away from maximal- tolerated treatment and one-size-fits-all approach to minimum effective treatment and more tailored therapy leading to declining cancer mortality. However, enhancing cancer outcome requires a multifaceted approach including efforts not only aimed at improving cancer mortality rates and better treatments, but also research and interventions aimed at reducing life disruption and improving well-being after cancer diagnosis. A particular attention should be paid to cancer survivors in ethnic minorities to minimize disparity in providing essential survivorship and psychosocial services, as well as lifestyle care to breast cancer survivors, many of whom do not have the knowledge or the means to pursue these issues. Culturally appropriate survivorship program could improve the quality of life of cancer survivors, help them in their psychosocial adjustment, and

empower them in their transition from cancer treatment to survivorship.

A collaborative effort is needed among health providers, health care systems and the community to establish a smooth transition from patient with cancer to survivor of cancer. This will potentially reduce the human cost of cancer.

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