

Navigating Patients with Gynecologic Cancer

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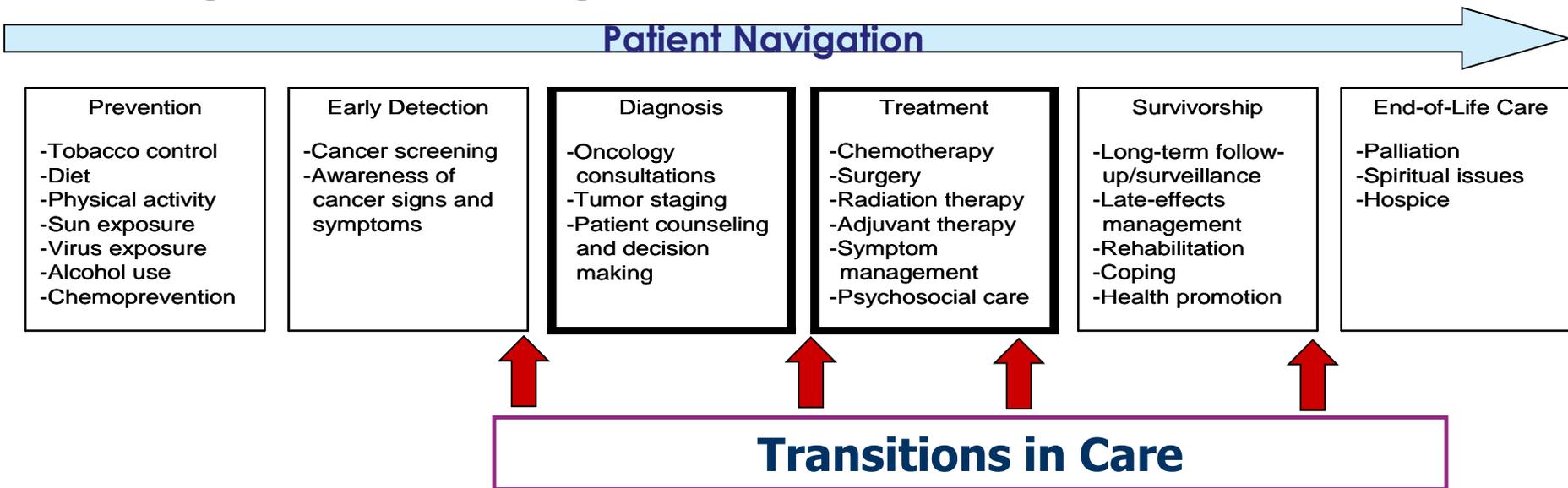
Program Overview

- Discuss barriers to implementation of nurse navigator program
- Review strategies to improve cervical cancer screening
- Explore approved and emerging treatments for GYN cancer
- Highlight symptom management and survivorship issues

What is a GYN Navigator?

- A single point of contact for the patient who journeys with the patient and family from initial diagnosis through survivorship/end-of-life care
 - Ensure women have access to the resources they need in a timely and efficient manner
 - Act as liaison to the multidisciplinary team

Navigation Along the Cancer Care Continuum



Barriers to Navigation Program Implementation

- Who Pays?
- Scope of Role
- Communication Across Departments
- Access to Multidisciplinary Team

Overcoming Barriers

- Buy-in by institution/providers
- Multidisciplinary meetings
- Clear vision/definition of role
- Ongoing communication
 - Weekly huddles

National Breast and Cervical Cancer Early Detection Program

- CDC provides low-income, uninsured, and underserved women access to timely breast and cervical cancer screenings and diagnostic services
- **In calendar year 2016**, the NBCCEDP
 - Provided cervical cancer screening and diagnostic services to 139,199 women
 - 172 invasive cervical cancers diagnosed
 - 5,878 premalignant cervical lesions, of which 39% were high-grade
 - » Retrieved from <https://www.cdc.gov/cancer/nbccedp/about.htm>
- Planned Parenthood is used by many women for initial screenings

National Breast and Cervical Cancer Early Detection Program

- Clinical breast examinations
- Mammograms
- Pap tests
- Pelvic examinations
- Human papillomavirus (HPV) tests
- Diagnostic testing if results are abnormal
- Referrals to treatment

Strategies to Improve Cervical Cancer Screening

- Non-financial barriers for screening
 - Knowledge
 - Language
 - Health Literacy
 - Geography
 - Culture
 - Social Support

Strategies to Improve Cervical Cancer Screening

- Evidence-based interventions
 - Provider
 - Recommend screening to patients during visit
 - Feedback to providers about % of patients screened
 - Client directed
 - Small media: Brochures, fliers, info about screening
 - Reminder calls/letters/text messages
 - Decrease barriers
 - Extend clinic hours
 - Transportation to appointments

Coordinate Services for Newly Dx Cervical CA

- Via ED
 - More advanced cancer → bleeding, LE edema
 - May initiate treatment during inpatient stay
 - Coordination of treatment from inpt to outpt setting
- Via OB/GYN or PCP-abnormal pap
 - Strategies to improve compliance for f/u abnl PAPs
 - Streamline referral to GYN ONC

Approved and Emerging Treatment Options

- Ovarian Cancer
 - Prevention
 - BRCA 1,2 screening
 - Prophylactic surgery
 - Treatments
 - Bevacizumab (Avastin)
 - PARP inhibitors - pharmacological inhibitors of the enzyme **poly ADP ribose polymerase**
 - Rubracarib
 - Niraparib
 - Olaparib
 - Immunotherapy — MSI-high

Case Study PARP Inhibitor

- GS dx with stage IIC papillary serous Ovarian CA 2006
 - Treatment with surgery and adjuvant chemo
 - 2008 rising CA125
 - Secondary debulking surgery and more chemo 2009 Carbo/Tax/Bev
 - 2011 relapse — more chemo
 - 2013 Avastin maintenance
 - 6/2014 recurrent disease noted on laparoscopic surgery
 - HIPEC and surgery followed by chemo
 - 2015 multiple bowel obstructions — clinical trial Niraparib
 - 2018 continues on Niraparib, disease controlled, working part time

Case Study Questions

- Relapsed/recurrent cancer is quite devastating for patients
 - What strategies do you use for these patients to keep them hopeful? Realistic?
- Bowel obstructions are a common problem for this patient population
 - What tips do you give to patients to lower their odds of developing a bowel obstruction?

Approved and Emerging Treatment Options

- Cervical
 - Prevention
 - HPV vaccine-room for improvement — not just for girls
 - US rates 2016 according to CDC — 60% teens ages 13-17
 - Boys (56%) vaccinated at lower rate than girls (65%)
 - Not completing series — only 43% teens up to date on all doses
 - » Start prior to age 15 — only 2 doses needed
 - » Start after age 15 — 3 doses needed
 - Treatment
 - Chemotherapy + Bevacizumab (Avastin)
 - Immunotherapy — MSI-high tumor

Approved and Emerging Treatment Options

- Endometrial Cancer
 - Prevention/Early detection
 - Weight management - Obesity a major risk factor
 - » Setiawan V., et. Al. 2013
 - Increased awareness of abnormal uterine bleeding/Post menopausal bleeding
 - Treatment
 - Integrate molecular/histologic stratification
 - ex. Foundation One, GPS Cancer - comprehensive genomic profile
 - Molecular targeted agents
 - Immunotherapy

Counseling Patients with GYN Cancers

- Side effects/Symptom management
 - Surgical related
 - Chemotherapy related
 - Radiation related
 - Disease related
 - Bowel obstruction
 - Ascites
 - Prevention
 - Encourage maintenance of healthy weight/weight loss if obese

Survivorship Issues

- What is expected follow-up?
 - NCCN guidelines are a good tool
- Fear of recurrent disease
- Sexuality
- Change in body image
- Financial hardship
- Workplace issues

Questions????



FEARLESS COMMITMENT.
ENDLESS COMPASSION.

References

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