WP8: Survivorship and Rehabilitation

ECPC GENERAL ASSEMBLY



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INTRODUCTION

- CANCON: European guide on quality improvement in comprehensive cancer control
- European Joint Action supported by DG SANTE (EU Commission)
- Total Budget: 5 999 985 € including 50% cofunded by EC
- Duration: 3 years (start in February 2014)
- Follow-up of EPAAC (2009-2013): European Partnership for Action Against Cancer.





INTRODUCTION

Aim of WP8: Survivorship & Rehabilitation



To elaborate policy recommendations and tools, based on the best practices and existing knowledge, to improve quality in survivorship and rehabilitation planning in Europe.





2) CANCON WP8 PARTNERSHIP

Associated partners	Collaborating partners
- Catalan Institute of Oncology (Spain)	- EU Cancer Patient Coalition (ECPC)
- Institute of Public Health (Slovenia)	- Dutch Cancer Society
- National Cancer Research Centre GPII (Italy)	- Institute of Public Health (Belgium)
	- Ministry for Energy and Health (Malta)
- Trondheim University Hospital	- International psycho-oncology society
(Norway)	- Association of EU Cancer Leagues
- Cancer Society of Finland	- EU CanCer Oorganisation (ECCO)
	 European Organisation for Research and Treatment of Cancer (EORTC)
	- European Collaborative Group on Cancer Survivorship (ECGCS)





3) CANCON WP8 METHODOLOGY

DRAFTING PROCESS

Literature review:

WP8 partners coordinated the literature review (including analysis, summary and drafting of the recommendations).

Expert meeting:

8 EU experts have been invited to review /discuss/sharpen the recommendations formulated based on the existing knowledge.

Survey on Survivorship Care Plan:

to collect information on how the survivorship follow-up care is organised in EU countries.

Deliberative process:

5 meetings have been organized with all WP8 partners where the process and content of the chapter was discussed.

KEY TOPICS:

- clinical follow-up: management of the late effects, tertiary prevention and physical activity;
- -supportive and palliative care;
- -psychological support;
- -social rehabilitation including employment issues:
- -education of survivors;
- multi-disciplinary approach and coordination of cancer care providers;
- -clinical research.

CROSS-CUTTING ISSUES

- -childhood cancer survivors' care;
- -inequalities in survivorship.





4) WP8 MAIN MESSAGES

- N° 1: Cancer survivors' follow-up, late effect management and tertiary prevention needs to be anticipatory, personalised and implemented into care pathways, with active participation of survivors and relatives.
- N° 2: The improvement of early detection of patient's needs and the access to rehabilitation, psychosocial and palliative care services is required.
- N° 3: An integrated and multi-professional care approach with a coordination of community care providers and services are needed to implement a Survivorship Care Plan (SCP) that enhances patient empowerment.





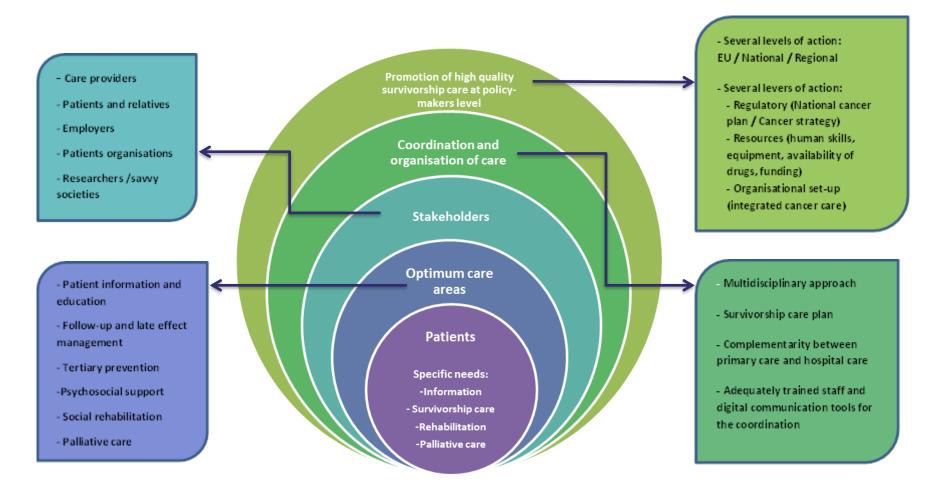
4) WP8 MAIN MESSAGES

- N° 4: For children, adolescents and young adults survivors (AYA), late health and psychosocial effects of cancer and its treatments need to be anticipated and addressed.
- N° 5: More research in the area of survivorship is needed to provide data on late effects, as well as the impact and cost-effectiveness of supportive care, rehabilitation, palliative and psychosocial care interventions.
- N° 6: To recognize and address inequalities by promoting studies and subsequent actions on the impact of socio-economic and cultural differences on cancer survivors and their coping to survival must be a priority.





5) SURVIVORSHIP & REHABILITATION CARE MODEL







6) WP8 TIMELINE

- > June 30th 2016 : Final WP8 draft chapter
- End September 2016: presentation to 'Expert Group on Cancer Control' + endorsement by the EC
- October / December 2016: revision and editing
- January 2017: production of the Guide, printing (Malta)
- February 14th-15th 2017: final CanCon meeting / high-level forum in Malta





