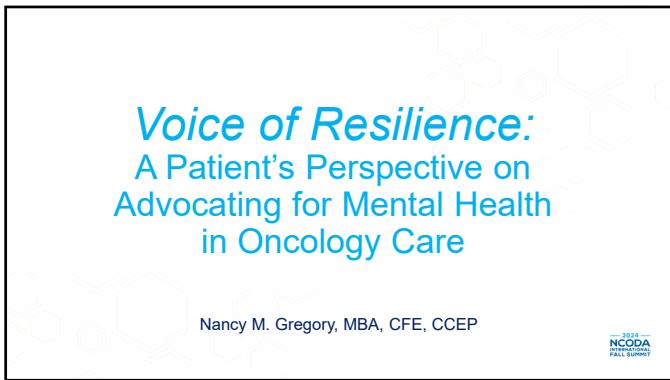
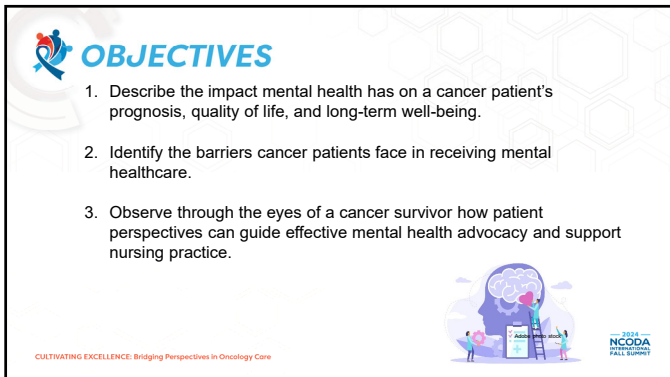





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 **DISCLOSURE**


No relevant financial relationships from the past 24 months have been identified for the following faculty and planners of this CE Activity:

- Nancy Gregory, MBA, CFE, CCEP
- Amanda McCauley, BSN, RN, OCN
- Mary K. Anderson, BSN, RN, OCN
- Daisy Doan, PharmD

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4

 **QUESTION 1**

Are mental health practitioners integrated as part of your multidisciplinary cancer care team?


- Yes, mental health practitioners are well integrated into our multidisciplinary cancer care team
- No, we do not have a mental health practitioner associated with our multidisciplinary cancer care team
- Only some of our cancer programs have a mental health component
- I'm not sure if we have a mental health program associated with our cancer programs

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5

Diagnosis Reaction



"The drama of the moment in which you are told you have leukemia cannot be overstated. The world stops spinning. Priorities shift. Your brain can't function. Your rawest emotions, your worst fears, are laid bare, and yet somehow you have to regain your footing enough to make decisions about treatment and to define a new normal ..."

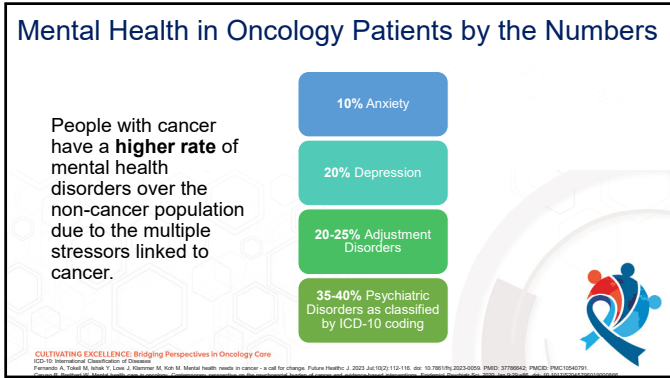
Mikkael A. Sekeres, MD
When Blood Breaks Down

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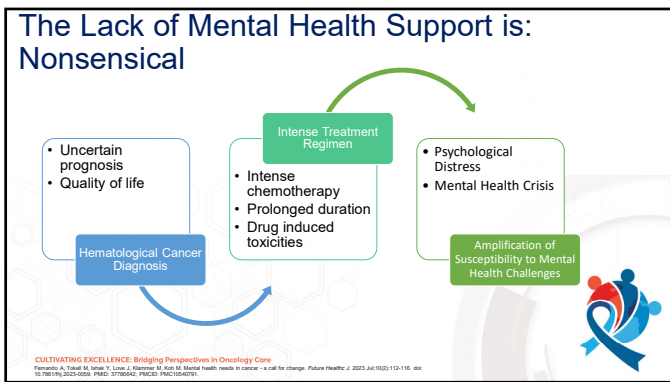
Sekeres, Mikkael A. and Mira Lavi. When Blood Breaks Down: Life Lessons from Leukemia. WestBridge. April, 2022. <https://www.westbridge.com/when-blood-breaks-down/>. Accessed September 25, 2024.



6



10



11




12

My Barriers to Mental Health Support

One Licensed Social Worker (LSW) <ul style="list-style-type: none">Two inpatient floors of leukemia, lymphoma, stem cell transplant patientsShort, infrequent, unscheduled visits	Lack of In-Person or Virtual Patient Support Groups <ul style="list-style-type: none">Should be offered inpatient and in between treatments
Later in Treatment <ul style="list-style-type: none">Offer to speak with recovered patientLimited to one phone callLow impact	Post-Treatment <ul style="list-style-type: none">Outpatient LCSWs at hospital – inexperiencedGeographically distantNo telehealth

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13

Why is Mental Health Overlooked?

- ❖ Historically taboo subject
- ❖ Urgency of diagnosis requires a laser focus on disease treatment
- ❖ Old school perspective of seasoned oncologists
- ❖ Patients and caregivers not knowing what they need
- ❖ Belief that anxiety and depression are part and parcel of a severe cancer diagnosis
- ❖ Patient reluctance to ask for help
- ❖ Failure of medical teams to listen and validate the patient voice

Don't Ignore Me!

Adobe stock photo



14

Lack of Psychological Support for Cancer Patients is Common

“... the mental health needs of people with cancer, with or without a prior psychiatric history, are often given little attention during and after cancer treatment, which is primarily focused on monitoring physical health symptoms and side effects”


(Niedzwetz et al, 2019)

PLEASE HELP!

Adobe stock photo

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Henderson, D., Miller, S., Pugh, A., Kavanagh, D., Smith, G. Development and delivery among people living with and beyond cancer: a growing clinical and research priority. BMC Cancer. 2019 Oct 11;19(1):1043. doi: 10.1186/s12885-019-6181-4



15

QUESTION 2

How does the suicide rate among cancer patients compare to that of the general population?

- a) 10% increase
- b) 15% increase
- c) 20% increase
- d) 30% increase

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Medications Used in Treatment May Affect Mental Well-Being




- ❖ **Chemotherapy:**
 - Short-term memory problems
 - Loss of executive function
 - Lack of concentration
 - Spatial perception challenges
 - Aphasia
 - Transposition of written words and numbers
 - Misuse of homonyms
- ❖ **Lorazepam** - agitation, confusion, nightmares
- ❖ **Steroids** - aggression, appearance (bloating), hyperactivity, inability to sleep, depression

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17

Phase II



```

    graph LR
    A[AML relapse: 03/27/2019  
• Life expectancy 2-3 months without stem cell transplant] --> B[Hospital readmission: 04/03/2019  
"Conditioning"  
• Extreme reaction to MEC  
• Constant blackouts  
• Team fears brain damage]
    B --> C[Apheresis:  
• Required to remove antigens to donor's blood  
• Complicated transplant timeline]
    C --> D[Stem cell transplant: June 6, 2019  
• Reactions  
• Mouth sores  
• No appetite  
• Fainting  
• Acute GVHD rashes]
    D --> E[One-year recovery period  
• Nine months at home]
    
```

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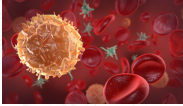
REC: Observation, Diagnosis, and Curative

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18

Additional Mental Health Challenges for Stem Cell Transplant Patients

- Can a donor match be found timely?
- Will the individual be willing to donate?
- Will the donor change their mind?
- Will the stem cells engraft?
- Will the graft fail within the first 90 days?
- Who is willing to be my caretaker for three months?
- Will I develop Chronic GVHD that will affect quality of life?
- Is the risk of a 2ndary cancer worth having a transplant?




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Image: Dana-Farber Cancer Institute. <https://blog.dana-farber.org/ncod17059/difference-stem-cell-transplantation-types-cellular-therapies/>. Accessed September 22, 2024.

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19

Barriers to Providing Mental Health Care

- Paradigm of treating disease in isolation, rather than holistically
- Availability of insurance coverage, out-of-pocket cost for patient
- Failure to appreciate the mind-body connection on disease
- Lack of consensus about appropriate psychological screenings
- Shortage of Psychologists & Psychiatrists
- Funding limitations at hospitals/medical centers
- Lack of robust body of research on how mental health impacts prognosis and quality of life during treatment and in survivorship



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Image: Healthy. <https://www.healthy.com/ncod17059/2024/09/22/break-down-the-barriers-with-sitting-up-of-these-20-mental-barriers/>. Accessed September 22, 2024.

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20

QUESTION 3

What is a substantive intervention that could improve the mental health of patients undergoing cancer treatment?

- Evaluate mental health needs early and often
- Offer support groups
- Create environments that promote physical and mental well-being
- Incorporate complementary therapy options into standard of care
- All of the above


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21

Advocating for Mental Health in Oncology Practice

- **ASSESS** patient mental health at diagnosis prior to treatment plan
- **INCORPORATE** pre-treatment/admission mental health counseling
- **SELECT** hospital rooms with attention to view
 - no rooms overlooking parking lots, HVAC units, brick walls
- **PROVIDE** mental health care as part of standard cancer care
- **EDUCATE** staff on therapeutic communication and mental health resources
- **REFER** to outside telehealth mental health care if in-house options unavailable
- **MONITOR** for indicators of patient mental health distress – primary nurse, medical team, and daily rounding team




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Additional Ways to Advocate for Mental Health in Oncology Care

- **Promote** continuity of care (oncologist, nurse practitioner, nurse)
- **Provide** organized, professionally-led inpatient and outpatient, patient support groups (virtually and in-person)
- **Distribute** resource list for various support services
- **Access** to alternative stress management resources available in health care facilities
 - Reiki sessions
 - Meditation
 - Music therapy
 - Low impact exercise equipment access
 - Curated care packages
 - Ability to visit an alternative space
 - Subscription streaming channels
 - Electronic magazine access
- **Arrange** for outpatient mental health support in survivorship
- **Eliminate** one-year waiting period for post-transplant patient support groups



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23


The Continuum

Ideally ...

"It is likely that collaborative care interventions which involve partnership between psychiatry, clinical psychology and primary care, overseen by a care manager, are likely to be most effective in the management and treatment of depression amongst people with cancer." (Fernando, A., et al, 2023)

As for post-cancer care ...

"... patients want to know how they can manage their health after cancer – including their mental health. Often the emotional impact of the cancer diagnosis and treatment does not crop up until 6 months or a year after treatment ends." (Ben-Ari, E., 2022).



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24

SUMMARY

- Mental health support for cancer patients is alarmingly under resourced.
- Mental health support is critical for those who face ...
- Without mental health support at diagnosis, during treatment, and in survivorship, there are negative effects on ...
- Suicide rates are higher among those who are living with or have survived cancer than those who have never had the disease.
- Mental health care for cancer patients must be treated with the same urgency as the disease.
- Nurses are in the best position to watch for signs of mental health distress in their patients and to
 - ADVOCATE for a myriad of inpatient and outpatient services that can better enable patients to stay in the game of life.

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25

QUESTION & ANSWERS

Voice of Resilience:
A Patient's Perspective on Advocating for Mental Health in Oncology Care

Nancy M. Gregory
MBA, CFE, CCEP

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26

CE CODE

Voice of Resilience:
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27

