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SUPPORTIVE CARE IN CANCER

OUTCOMES FROM A VIRTUAL CLINIC DEVELOPED TO MANAGE GI CONSEQUENCES OF COLORECTAL CANCER DURING THE COVID-19 PANDEMIC

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INTRODUCTION

- Recent reductions in cancer mortality rates are the result of better screening and the use of improved treatments[1].
- There is little emphasis on dealing with the debilitating bowel symptoms that are a frequent complication of treatment[2].
- At the United Lincolnshire Hospitals Trust, over 400 patients are diagnosed and treated for colorectal cancer annually.
- We sought to develop a unique virtual service to help patients who have developed gastrointestinal symptoms post treatment.

METHODS

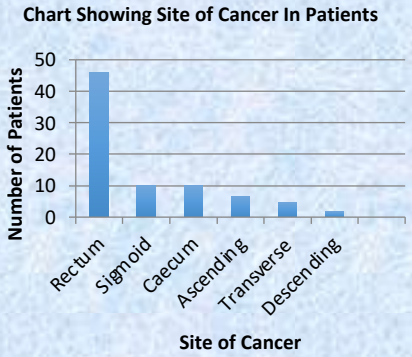
CRC Survivorship Clinic Referrals from:
- CRC Nurse Specialists
- CRC Surgeons
- Oncology Specialists

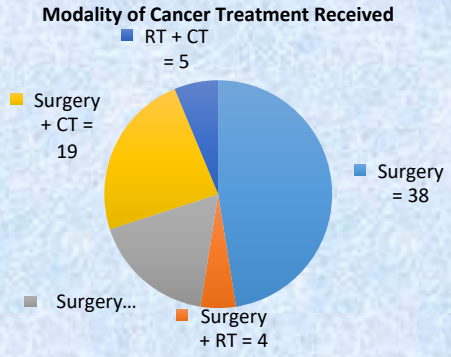
Primary aim – improve HRQoL

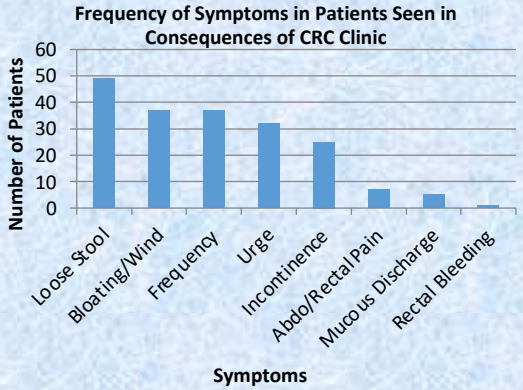
Telephone clinic
Started October 2020

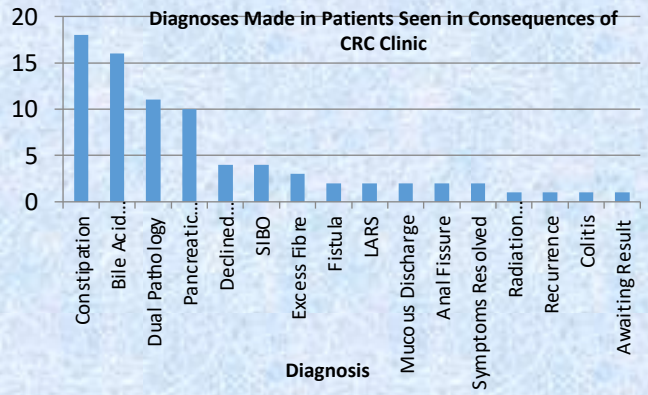
Investigations included:
Bloods, Faecal Elastase, Faecal Calprotectin, SeHCAT scan, AXR, Breath Test

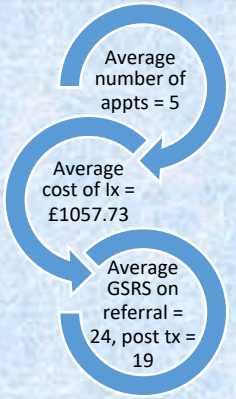
RESULTS











CONCLUSION

In most patients referred to our specialist clinic, one or more causes for their symptoms were identified.

Treatment frequently led to a dramatic improvement in symptoms.

Future recommendations include earlier recognition of patients in need of specialist referral through the use of objective questionnaires.

Results from our virtual clinic are consistent with previously reported data from face-to-face consultations[3].

References:

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2. Andreyev, J., *Gastrointestinal symptoms after pelvic radiotherapy: a new understanding to improve management of symptomatic patients.* Lancet Oncol, 2007. **8**(11): p. 1007-17.
3. Andreyev, H.J., et al., *Algorithm-based management of patients with gastrointestinal symptoms in patients after pelvic radiation treatment (ORBIT): a randomised controlled trial.* Lancet, 2013. **382**(9910): p. 2084-92.