

Health care utilisation and unmet needs in survivors of head and neck cancer in regional/remote Australia: a cross-sectional survey

Dr Poorva Pradhan, Ms Ashleigh Sharman, A/Prof Judith Lacey, Professor Jonathan Clark, Dr Patrick Dwyer, Dr Jacques Hill, Dr Kimberley Davis, Dr Steven Craig, Dr Raymond Wu, A/Prof Bruce Ashford, Ms Jenny Mitchell, Dr Rebecca Venchiarutti

Background and Aim:

- The post-treatment survivorship period presents unique challenges for head and neck cancer (HNC) patients transitioning from acute care.
- Complex treatments often result in physical and psychosocial unmet needs, influenced by factors like culture, socio-economic status, and location.
- Urban residents generally have better access to healthcare, whereas rural populations face restricted access, complicating survivorship care.
- This study aims to identify the unmet survivorship needs and healthcare utilisation of HNC patients in rural New South Wales (NSW).

Materials and methods

- Eligibility Criteria:
- > Aged 18 years and older.
- > Lived in regional or remote areas of NSW
- > Had been diagnosed with HNC (excluding cutaneous and thyroid cancers) and at any point in their survivorship phase.
- · Procedure:

This cross-sectional study was conducted across multiple tertiary cancer institutions from July 2023 to January 2024.

• <u>Measures:</u> Cancer survivor unmet needs (CaSUN) measure, investigator-designed health utilisation questionnaire

Results

- 116 patients completed the questionnaire (Mean age = 70.1 years)
- Gender Distribution: Males = 65%; Females = 35%
- Over half of the patients had oropharyngeal cancer (n=61)
- Inner Regional participants (n=107; 92.2%).

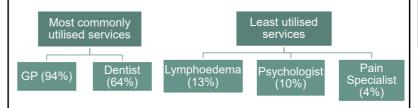
UNMET NEEDS:

Two-thirds of participants reported at least one need.

Half of the participants had one unmet need.

TOP UNMET NEEDS	
Fear of cancer recurrence	25%
Financial support	15%
Availability of local health services	15%
Access to complementary health services	15%

HEALTHCARE UTILISATION:



OPEN-ENDED RESPONSES:

- > Not being well informed about psychosocial support
- ➤ Distance and Travel Burden



Conclusions

- 1. Rural HNC survivors face substantial unmet psychosocial needs, and yet demonstrate low utilisation of professional psychosocial support.
- 2. This highlights a potential service gap or accessibility challenges
- 3. These gaps could be addressed with shared models of care that utilise both GP-led and telehealth services to address psychosocial concerns in rural settings.

Reference:

Bhatia, S., et al., Rural-Urban
Disparities in Cancer Outcomes:
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Further information

Dr Poorva Pradhan

poorva.pradhan@lh.org.au



@PoorvaPradhan