

# ACCESS TO SUPPORTIVE CARE: THE INNOVATIVE ROLE OF THE COORDINATING NURSE PRACTITIONER IN A CARE PATHWAY FOR WOMEN WITH ADVANCED OVARIAN CANCER

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## Introduction

To manage women with ovarian cancer, at the Oscar Lambret Center, a national comprehensive cancer center, a care pathway standardizes the sequence of therapeutic steps. The management of advanced ovarian carcinoma will require chemotherapy, surgery, and maintenance treatment (1).

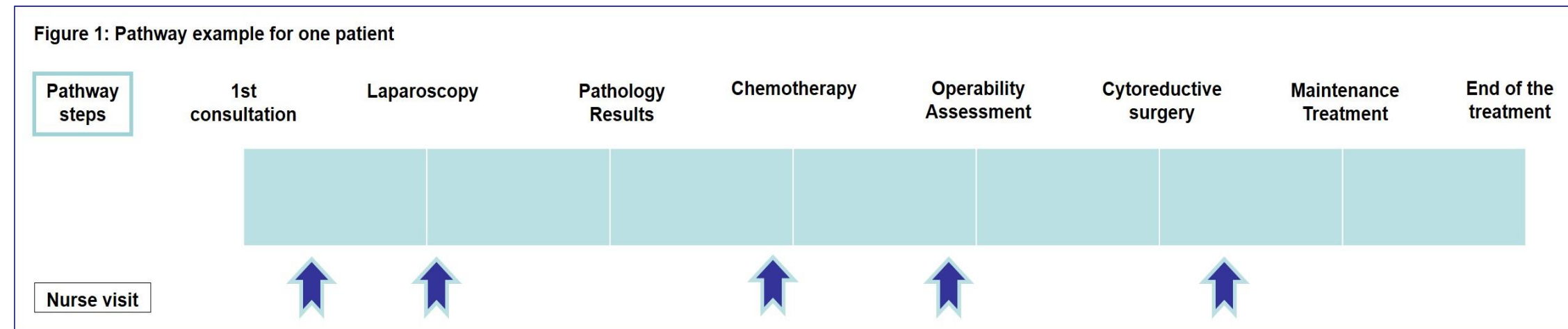
The different sequences of treatment can be realized in our center or sometimes, the chemotherapy is realized near the home's patient and the patient is addressed for his cytoreductive surgery. Since 2019, a real-time assessment of clinical pathway is available (2). A coordinating nurse practitioner is integrated into the team of caregivers to tailor each pathway to each woman.

**The aim of this study is to examine the impact of the coordinating nurse practitioner accessing to supportive care.**

## Methods

Oscar Lambret Center is an accredited center for advanced ovarian surgery (3). Since January 2023, a nurse with extensive experience was added to the program. After a period of additional training for the coordinating nurse in ovarian pathology, a support system was set up, with multidisciplinary team discussions, to assess frailties and support care needs. All dimensions are assessed from the pathway beginning: psychological, social, nutritional, (4). The necessary supportive care resources are set up either at our center or as close as possible to the patient's home.

An initial nursing coordination session is organized from the patient's first arrival at the Oscar Lambret Center. Other consultations are performed at key stages and the patient can asset moment contact the nurse of coordination if necessary or for asking questions.



## Results 1/2

Between January 2023 and may 2024, 164 initial consultations and 587 follow-up consultations were carried out, enabling personalized, organized, and coordinated care. The coordinating nurse practitioner meets each patient individually and assesses their needs in terms of supportive care. Appointments are coordinated via the pathway secretary, in and out of our center.

Between 2019 and 2022, 72 patients out of a total of 341 (31,1%) had upfront cytoreductive surgery, in 2023 and 2024 13 patients (13,4%).

These patients presents an ovarian cancer, FIGO stage III or IV.

In table 1, all supportive care visits are all done in our Center.

Supportive care visit realized close to home are not counted.

Between 2019 and 2022, in total, 174 supportive care visits had been realized in our center ; Since 2023 to may 2024, 122 supportive care visits had been realized.

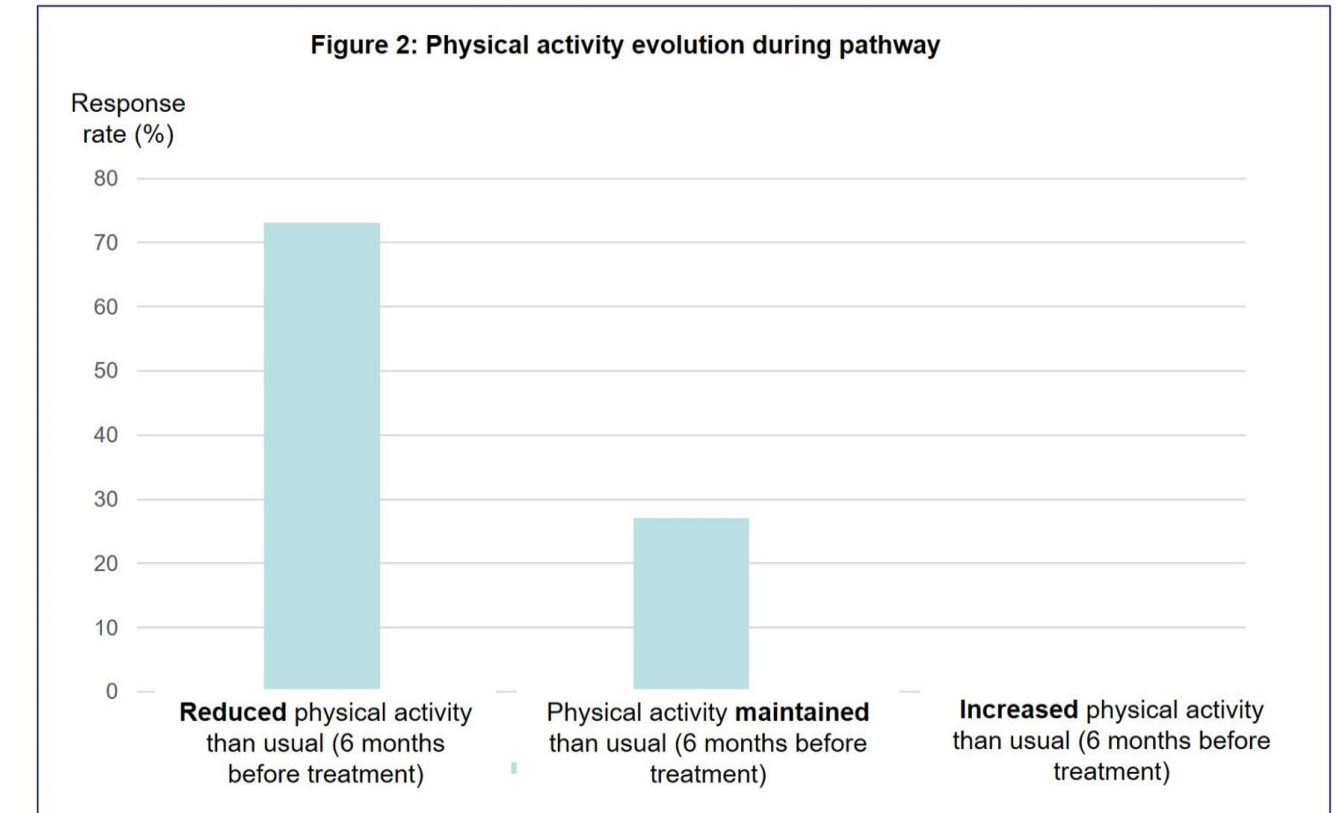
Table 1 and Figure 3 take account the first consultation with the supportive care professional, and not the necessary follow-up consultations.

**Table 1: Pathway results**

Pathway visit	2019-2022	2023-2024 (may)	
Patient number	341	129	
Nurse visit	0	751	
Supportive care visit: in %			p
dietician	9	28	<0.001
psychologist	1	5	0.005
social worker	6	9	0.001
sport trainer	-	3	0.01
algologist	4	6	<0.001
socio-esthetician	32	47	0.001

## Results 2/2

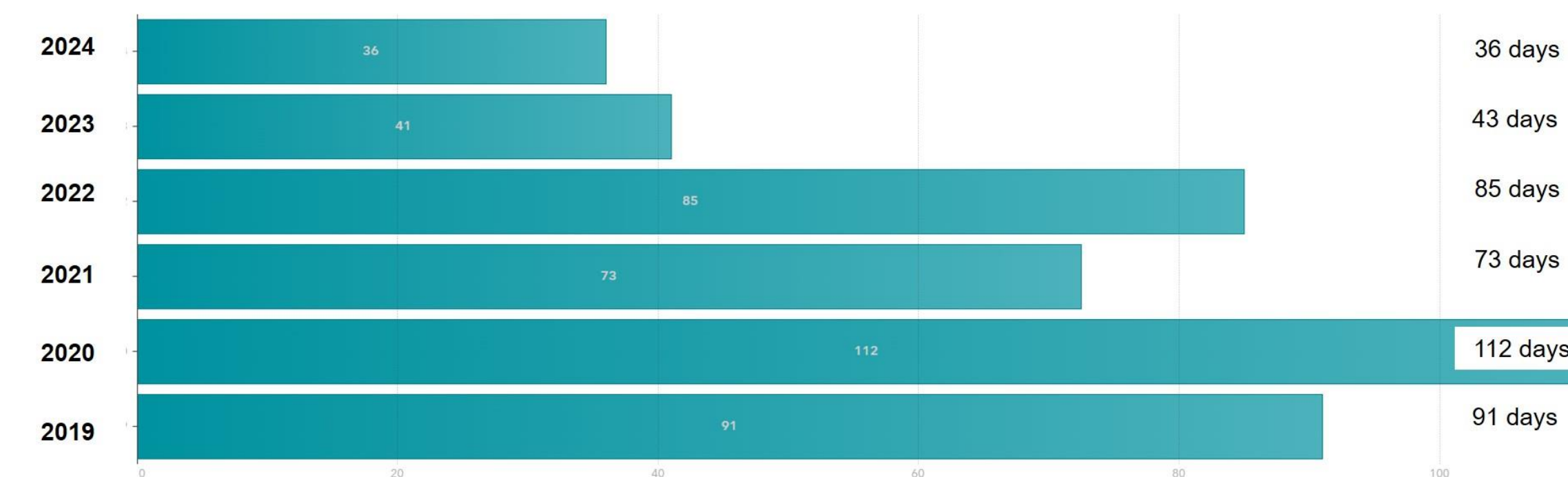
Adapted physical activity consultations were set up from 2023 onwards, following an assessment of physical activity during the pathway patient's treatment.



Since the organization of the pathway, nutritional consultations are carried out more frequently and earlier in the pathway.

Physical activity is encouraged earlier and along the pathway, with home physiotherapy and adapted physical activity.

**Figure 3: Delay between first visit and first appointment in supportive care**



## Conclusions

More supportive care has been provided since 2023 (122 visits over a period of 17 months instead of 174 visits over 4 years).

The study is only partial as it assesses the supportive care offered to patients internally, whereas structures close to home (for example cancer resource areas and associations are also used and connected. However, the results are already significant.

The nurse's involvement with the initiation of the pathway has enabled us to assess needs earlier and set up support care earlier.

The coordinating nurse practitioner provides essential expertise, transforming a standardized care pathway into a patient-focused one (5).

The inclusion of a coordinating nurse in the care pathway helps o improve the quality of care.

## References

- 2019 Lheureux S, Gourley C, Vergote I, Oza AM. Epithelial ovarian cancer. *Lancet*
- 2021 Trimarchi L, Caruso R, Magon G, Odone A, Arrigoni C. Clinical pathways and patient-related outcomes in hospital-based settings: a systematic review and meta-analysis of randomized controlled trials. *Acta Biomed.*
- 2020 Fotopoulou C, Concin N, Planchamp F, et al. Quality indicators for advanced ovarian cancer surgery from the European Society of Gynaecological Oncology (ESGO): 2020 update. *Int J Gynecol Cancer.*
- 2020 Yahim F, Sebai J. [Activités des infirmiers de coordination des parcours complexes.Propostion de typologie]. *Management Avenir Santé*
- 2022 Silva F, Pereira T, Neves I, et al. Towards Machine Learning-Aided Lung Cancer Clinical Routines: Approaches and Open Challenges. *J Pers Med.*