

Abs 1937 **MASCC 2024**  1: Gustave Roussy, Villejuif, France; 2: Clinique Mutualiste de Saint Étienne, France; 3: Oncopôle Toulouse, France; 4: Patient Partner, Entends-Moi, Lyon, France; 5: Pharmacie des Verts Coteaux, Chatenay Malabry, France; 6: CHU Lille, Lille, France; 7: Patients en réseau, Paris, France; 8: Stargen, 8 AV DUVAL LE CAMUS, 92210 SAINT-CLOUD; 9: Institut Sainte Catherine, Avignon, France; 10: Centre Georges François Leclerc, Dijon, France

## Introduction

Supportive care has been developed in France over the past 20 years, and access is now a compulsory part of cancer care facilities. We need to take stock of the situation and assess the need for further development to strengthen care pathways.

## **Methods**

A national quantitative prospective survey was carried out among healthcare professionals involved in cancer care from 02.10.2023 to 06.12.2023. A questionnaire was sent out in digital format by emailing and via various networks (associations, healthcare institutions, socialmedia). Data collection was performed on the LimeSurvey software platform. The study was ethics-approved.

# Results

A total of 1259 healthcare professionals completed the questionnaire, including 275 oncologists (based on 544 physicians), 456 nurses (including 81 nurse practitioners) and 28 pharmacists. 13% reported no specific supportive care organization within their healthcare institution. The main supportive care services offered were psychological support (92%), nutritional support (91%), pain management (87%) and social support (85%), while 58% of facilities offered access to complementary activities (table 1). SCCs are systematically set up at the metastatic stage in 50% of cases, 45% in the event of toxicity and 20% in the posttreatment phase. Coordination with ambulatory care services is carried out in 66% of cases. Needs assessment is mainly done in recurrence situations (84%) or if toxicity occurs (83%) (table 2). The communication between patients and professionals outside of the consultation is primarily done by phone (86%). Digital platforms are used by 31% of professionals. Areas for improvement include more systematic needs assessments, accessibility to SCC provided outside of a hospital setting and information (table 3). The survey with patients' perspective is presented in the oral session patient's partners.

# Conclusions

Needs assessment and implementation of SCCs must be more systematic, particularly in conjunction with SCC operators outside of a hospital setting, to improve cancer care pathways.

# Supportive Care organization, leverages and barriers, A French National Survey based on Healthcare Professional's perspectives.

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Table1: Main supportive care services offered in institutions

Q8- Can you propose SCC within your institution or in the vincinity ? (several answers possible)

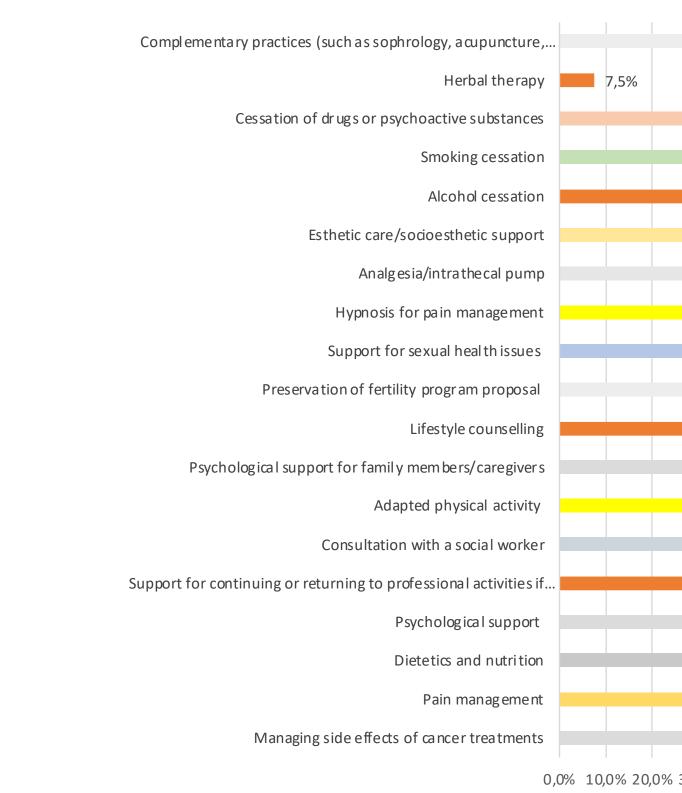
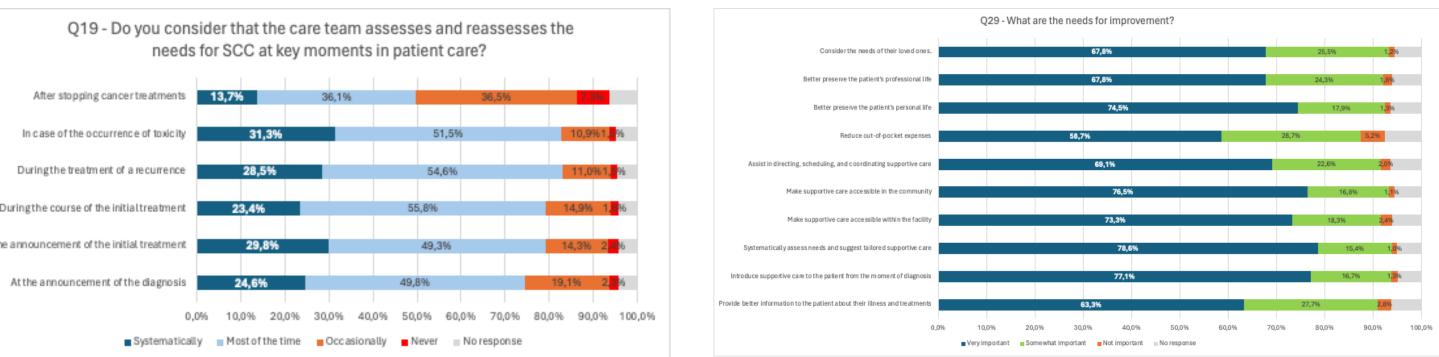


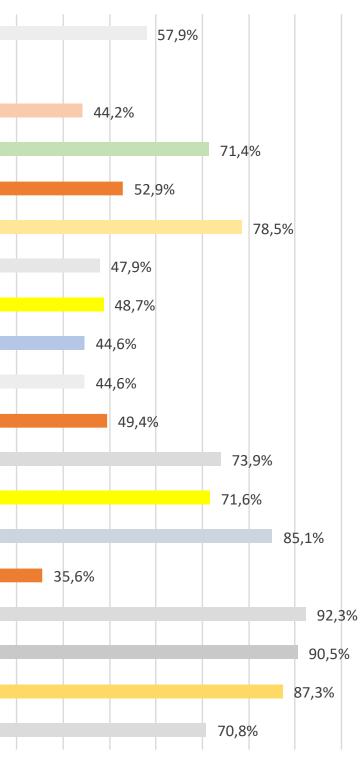
Table 2: Time of needs assessment



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10,0% 20,0% 30,0% 40,0% 50,0% 60,0% 70,0% 80,0% 90,0% 100,0%



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