

A Systematic Review Examining the Role of Radiation Therapists in Cancer Survivorship Care

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BACKGROUND

- As cancer survival rates continue to improve, there has been an increased focus on the provision of quality survivorship care.
- Radiation therapists (RTs) play a pivotal role in the delivery of cancer treatment, but their involvement in cancer survivorship care has not yet been comprehensively explored.
- Improving understanding of RTs contributions in providing survivorship care to cancer patients throughout the continuum could improve patient centred care.

AIM + RESEARCH QUESTIONS

To investigate the role of the RT in survivorship care across the cancer care continuum.

Two questions were addressed in the review:

- What interventions have been delivered by RTs and how are they mapped to the Quality of Cancer Survivorship Care Framework?
- What attitudes, skill or knowledge do RTs have in providing survivorship care?

METHODS

- A systematic search of five electronic databases (CINAHL, MEDLINE, Scopus, Web of Science and Cochrane) was conducted from inception until 20th April 2023.
- Inclusion: Studies that evaluated the effects of an intervention delivered by an RT addressing one of five key domains of quality survivorship care for patient outcomes described by Nekhlyudov et al. [1] were included (See Figure 1).

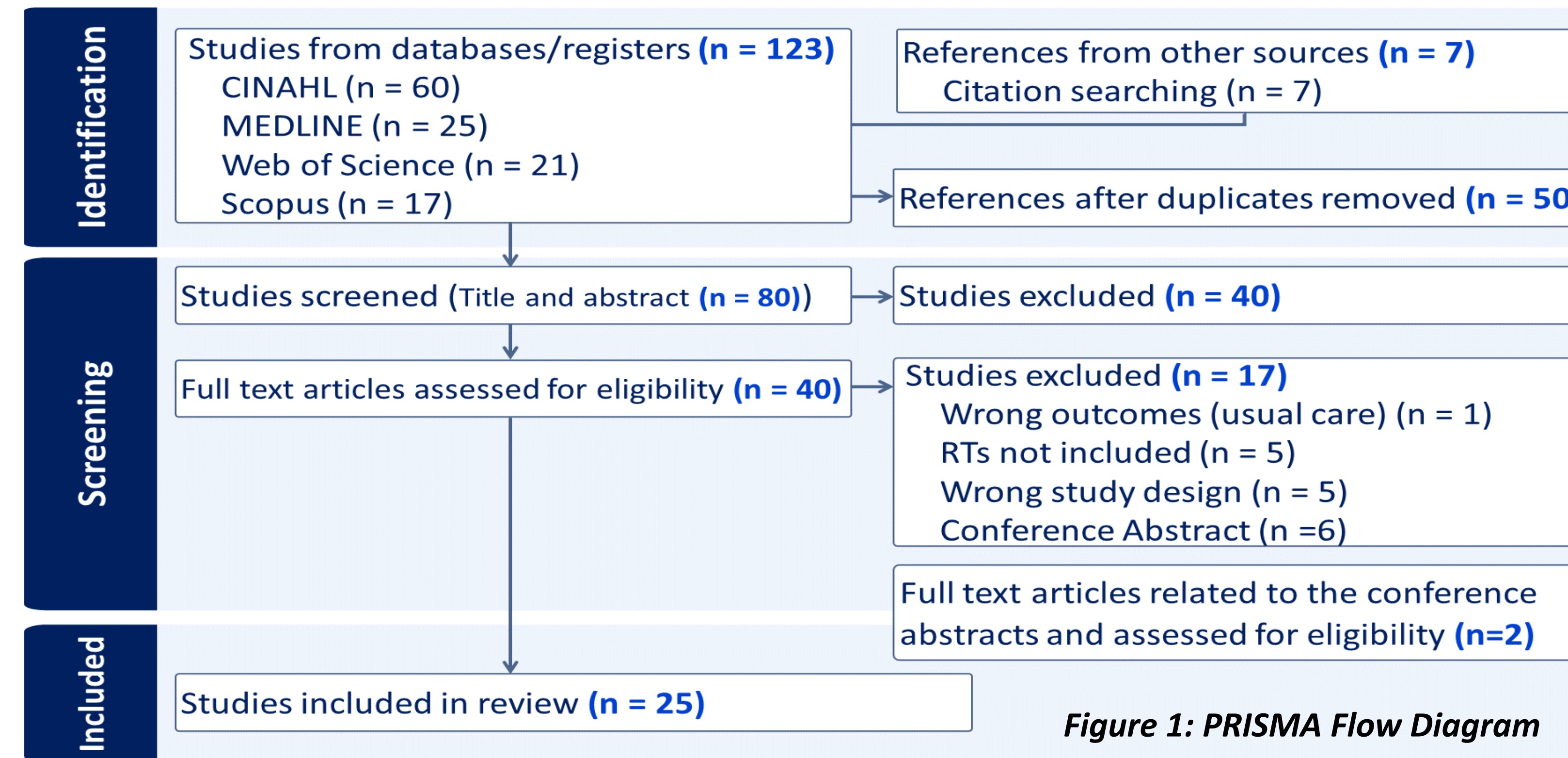


Figure 1: PRISMA Flow Diagram

RESULTS

- Studies were conducted in Australia (n=10), UK (n=7), Canada (n=6), USA (n=1) and Ireland (n=1).
- Most included studies were focused on the survivorship care framework domains of psychosocial effects and physical effects (Figure 2).
- 710 RTs were represented in the review: n=41 RTs involved in interventions.
- 2685 were patients represented in the review: 41% were breast cancer patients, 31% prostate cancer patients, with the remaining 28% from a range of cancer sites.

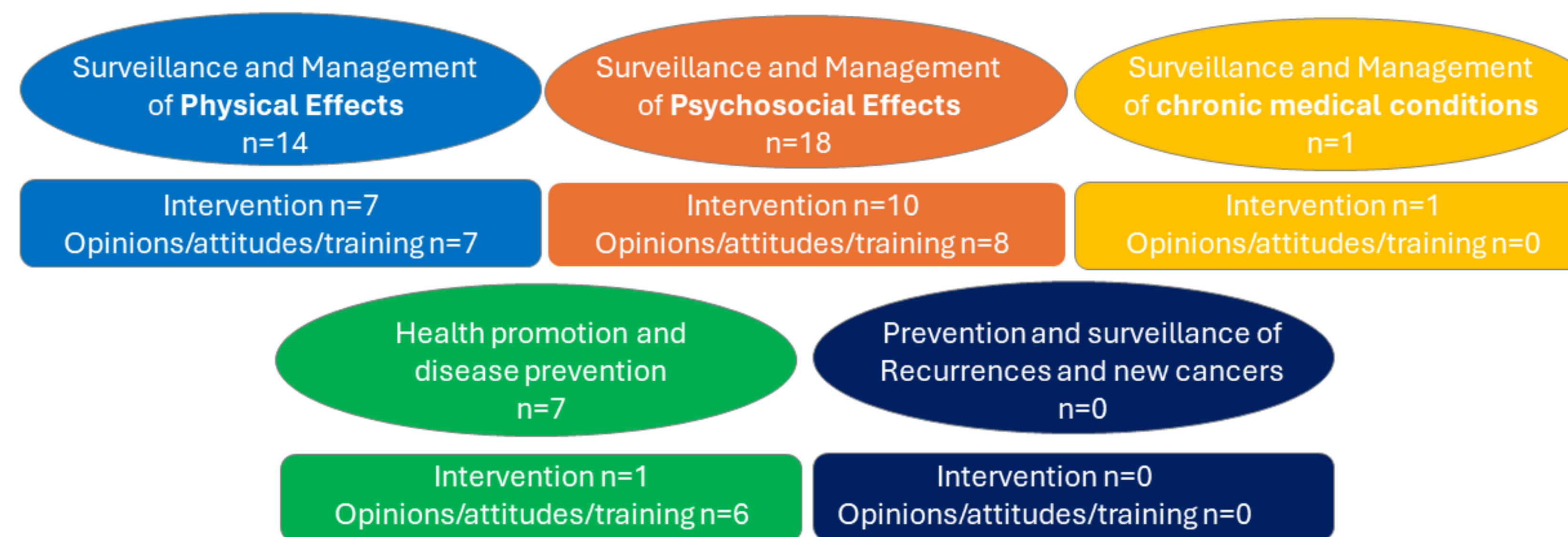


Figure 2: Survivorship Domains

Results - Interventions

RTs involved in delivery of 11 different survivorship interventions in three main categories:

- RT Led Follow up (FU) – n=3 telephone FU interventions; n=1 clinic FU comparing RT FU vs Radiation Oncologist FU.
- RT Specialist roles – n=2 in palliative care and sexual care after radiotherapy.
- RT Led Supportive care initiatives – n=3 in distress screening; n=1 in fear of cancer recurrence (FCR); and n=1 in sensitive practice for breast cancer patients.

Results – Attitudes, Skills, Knowledge

| Psychosocial care n=6 | Healthy behaviours n=2 | Smoking Cessation n=2 | Communication Skills n=1 |
|--|---|---|--|
| Most RTs believed discussing psychosocial issues was part of their role. However, they felt less confident addressing depression, fertility, body image, and relationship concerns. Barriers included lack of training and time. | Most RTs felt responsible for giving healthy lifestyle advice. They were most confident about sun safety and least confident about weight management. Lack of knowledge was a barrier, but training courses improved their expertise. | While RTs believed smoking affects cancer outcomes, they lacked confidence in discussing smoking cessation. Over 80% cited lack of training as the main reason. | Training boosted RTs' confidence in handling patients' emotions and enhanced their knowledge and attitudes toward using screening tools. |

CONCLUSIONS

- Radiation therapists can play a role in the provision of survivorship care for cancer survivors, however, there is limited research reporting this.
- The most common RT-led interventions provided follow up and supportive care: these were well received and had high levels of patient satisfaction.
- Opinion surveys indicate that RTs believe they should be involved in survivorship care initiatives, but that lack of knowledge/ training and time can be barriers.



SCAN FOR REFERENCES

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