

EVALUATION OF THE CASE MANAGEMENT MODEL OF SUPPORT FOR OVARIAN CANCER CARE IN AUSTRALIA

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INTRODUCTION

In Australia, ovarian cancer is the second most commonly diagnosed gynaecological cancer and the most common cause of gynaecological cancer death, with a five-year survival rate of 46% for all disease stages¹. While it is a relatively low incidence cancer, ovarian cancer's poor prognosis and recurrence rates of up to 70% result in significant levels of distress for affected women².

Women with ovarian cancer have complex and multifaceted unmet needs across different phases of their care pathway. Since 2019 Ovarian Cancer Australia (OCA) has established a telehealth program (**Teal Support**) to provide one-to-one holistic care and support to affected women and their caregivers. An evaluation is being conducted to assess the reach, effectiveness, adoption, implementation, and maintenance of the program.

This report presents interim results from the first 4 years of the program.



METHODS

Single prospective cohort design; multiple data sources

- 4 surveys with women at baseline, 3-, 6-, and 12-months assessing **symptom burden** [*Measure of Ovarian Symptoms and Treatment (MOST, v2)*^{3,4}], **psychological distress** [*General Health Questionnaire (GHQ-12)*^{5,6}], and **supportive care needs** [*Supportive Care Needs Survey short form (SCNS-SF34)*⁷]
- 30 individual semi-structured interviews with women
- Service utilisation data

RESULTS

- 925 women enrolled to Teal Support; 112 consented to the evaluation
- 33% undergoing initial treatment; 33% dealing with recurrence

Table 1 Characteristics of the participants (n=112)

		n (%)
Age groups (years) (n=111)	<40	4 (3.6)
	40-49	13 (11.7)
	50-59	32 (28.8)
	60-69	35 (31.5)
	≥70	27 (24.3)
Area of residence (n=112)	Major cities	75 (67.0)
	Regional	37 (33.0)
Marital status (n=106)	Married/de facto	79 (74.5)
	Other status	27 (24.5)
Highest education (n=106)	High school/TAFE college or under	52 (49.1)
	University degree or higher	54 (50.9)
	Employment (n=106)	Full/part time work
Time since ovarian cancer diagnosis (n=110)	Retired/home duties/unemployed	52 (49.1)
	Sick leave/disability	23 (21.7)
	≤6 months	27 (24.5)
	7-12 months	28 (25.5)
Treatment received (n=105)	13-24 months	28 (25.5)
	>25 months	27 (24.5)
	Surgery	93 (88.6)
	Chemotherapy	101 (96.2)
	Other treatment e.g. targeted, immunotherapy, radiation, hormone)	41 (39.0)

RESULTS

At baseline

- The most frequently reported symptoms that caused moderate/severe problems: fatigue (69%), anxiety (59%), and trouble sleeping (53%)
- 43% had high-level distress
- 54% reported moderate/high unmet needs re uncertainty about future

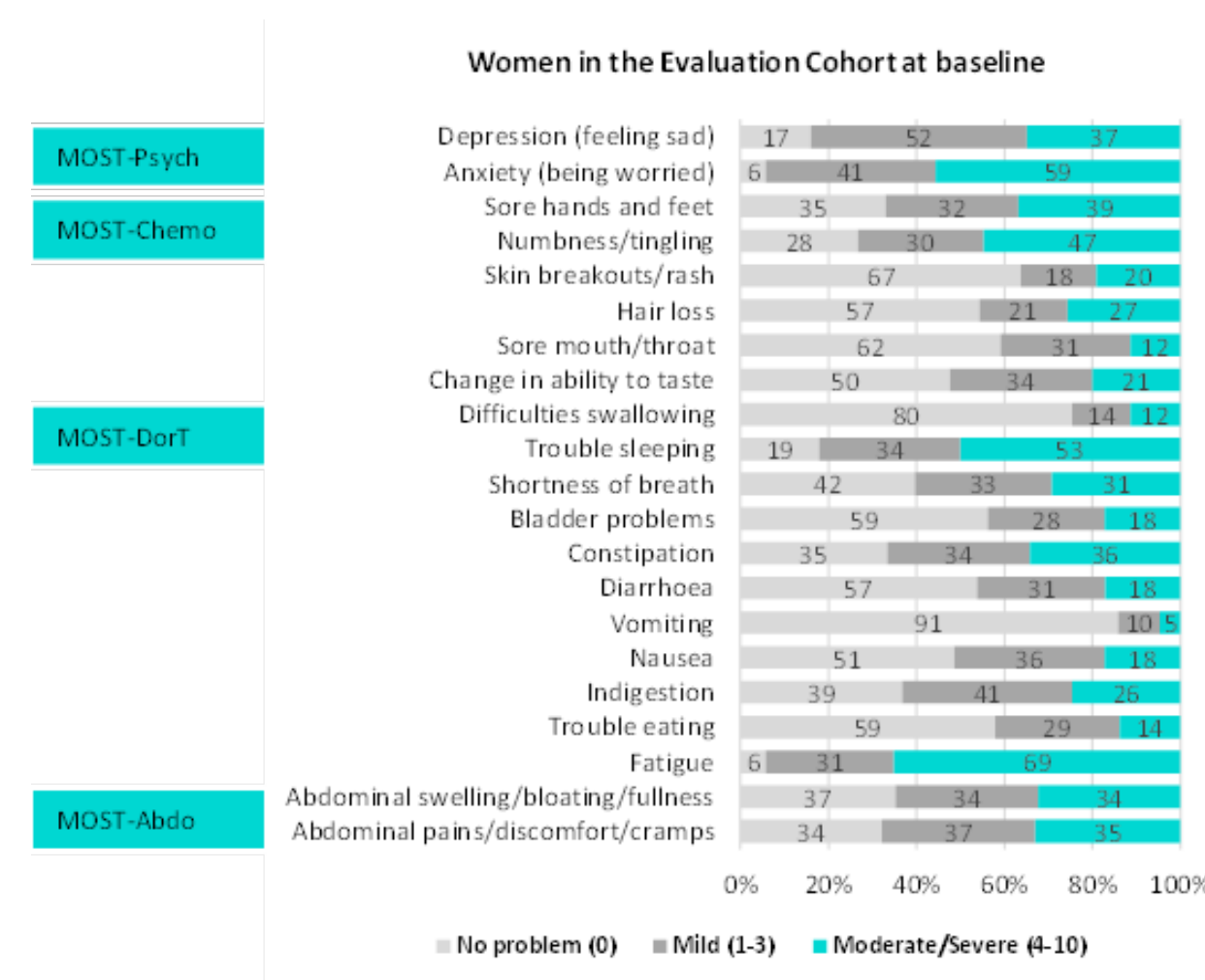


Figure 1 Prevalence of physical and psychological symptoms of the participants

Uptake of Teal Support

- Each woman received a median number of 33 episodes of services since enrolment to Teal Support
- Women who had worse overall well-being received more services in total
- Women who had worse psychosocial and treatment-related symptoms, or higher level of distress, or higher psychological needs at baseline received more care coordination support
- Women who had higher sexuality needs at baseline received more psychosocial support

At 12 months

- Significant improvements in women's overall well-being ($p=0.02$) and satisfactory with information ($p=0.03$).

RESULTS

Perspectives from women

You feel when she (the OCA nurse) rings you that she's literally holding your hand and she is going to help you through everything. ... she's got obviously excellent record keeping skills because she remembers everything about me. Like when she rings, I feel like she's one of my friends that knows me. She knows my family, she knows my son, she knows where I live, she knows what I do. (Woman16)

The dedicated support nurses are worth their weight in gold because they are able to talk about medications, they are able to talk about things that are in the pipeline. They're able to talk about research. And that was very, very important to me at the time. (Woman4)

I know when I got diagnosed my Mum was really struggling so asked if I could get her linked in with one of the social workers. ... So they (the OCA nurse) linked Mum with a social worker from Ovarian Cancer Australia and she was a really good support for Mum to kind of get her through that first couple of weeks where everything was happening. (Woman64)

DISCUSSION & CONCLUSIONS

- The program reaches women with high needs and at risk of poor outcomes. It reaches women across all stages of the cancer trajectory, all ages, and geographical settings.
- More services were made available to women with higher levels of need. There is some preliminary evidence that uptake of more support services was associated with improved outcomes in some areas.
- Significant improvements were observed over 12-months in relation to women's overall well-being and satisfactory with information.

The Teal Support program has offered services that recognise women's unique and ongoing needs and therefore addressed an important gap in health service delivery.

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