

## Research prioritisation of clinical recommendations for cancer survivors living with chronic pain post cancer treatment

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**Background**: Approximately 40% of cancer survivors experience chronic pain<sup>1,2</sup>. To better support people with chronic cancer-related pain (CCRP), recommendations have been generated<sup>3-5</sup> (Figure 1).



Aim: To identify what cancer survivors living with chronic cancer-related pain consider to be research priorities

Method: Recommendations ranked from first to fifth priority by people with lived experience of CCRP in 'ideal' and 'real' world within four online Nominal Group Technique (NGT) workshops. Participants were sent information in advance. Workshops included introduction, silent generation, clarification, ranking, round robin, close and thanks. Data were analysed to 1) identify recommendation chosen most often as top priority 2) calculate weighted score for all five recommendations (with 'first' = 10, 'second' = 8. 'third' = 6, 'fourth = 4, 'fifth = 2)

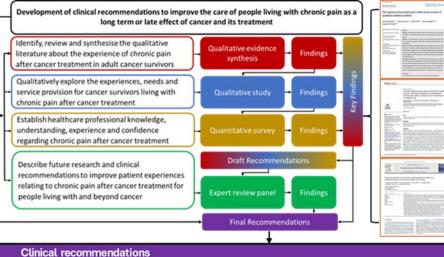
Results: There were 12 participants, all experienced CCRP, all were white, seven were over 55 years, 11 were women, six had breast cancer. 'Assess acknowledge and listen' was scored top priority in the 'ideal' and 'real' world (figure 2) and ranked as top priority most frequently in the 'real world' (Figure 3).

Figure 2: Priorities as overall weighted score

Figure 3: Top priority for people with CCRP

'Ideal' world	Weighted score	'Ideal' world	n	%
Assess, acknowledge and listen	98	Increase HCP* awareness	6	8
Increase HCP* awareness	92	Assess, acknowledge and listen	5	42
Name and diagnose	64	Prepare and inform	1	50
Services and supported self-management		Name and diagnose	0	0
interventions	60	Services and supported self-management		
Prepare and inform	46	interventions	0	0
'Real' world		Real' world	n	%
Assess, acknowledge and listen	92	Assess, acknowledge and listen	6	50
Increase HCP* awareness	90	Increase HCP* awareness	4	33
Name and diagnose	62	Prepare and inform	2	17
Prepare and inform	58	Name and diagnose	0	0
Services and supported self-management		Services and supported self-management		
interventions	58	interventions	0	0

Figure 1: Development of clinical recommendations



Curicat recommendations			
	Prepare and inform	Prepare and inform people living with and beyond cancer about the risks of chronic pain after cancer treatment	
	Assess, acknowledge and listen	Assess for pain and acknowledge and listen to experiences of living with chronic pain after cancer	
	Increase healthcare professional awareness	Increase healthcare professional knowledge about the risks, impact and management of chronic pain after cancer treatment	
	Name and diagnose	Name and diagnose chronic pain after cancer treatment to educate, inform and validate experiences	
	Services and supported self-management interventions	Services and supported self-management interventions are required to provide support and rehabilitation for people living with and beyond cancer who experience chronic pain	

Conclusions: People with lived experience of CCRP regard pain assessment and acknowledgement and listening as the most important areas for research. This work should be expanded to include stakeholders and develop research proposals.

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