# ESTABLISHING AN INTEGRATIVE ONCOLOGY (IO) SERVICE: BARRIERS AND OPPORTUNITIES

Alissa Huston<sup>1</sup>, Judith Lacey<sup>2</sup>, Gabriel Lopez<sup>3</sup>, Julia Ruiz Vozmediano<sup>4</sup>, Chun Sing Lam<sup>5,14</sup>, Santhosshi Narayanan<sup>3</sup>, Weidong Lu<sup>6</sup>, Ursula Wolf<sup>7</sup>, Ishwaria M Subbiah<sup>8</sup>, Patrick Richard<sup>9</sup>, Ana Maria Lopez<sup>10</sup>, Santosh Rao<sup>11</sup>, Moshe Frenkel<sup>12,13</sup>

<sup>1</sup>Pluta Integrative Oncology & Wellness Center, Wilmot Cancer Institute University of Rochester, Rochester, NY, USA, <sup>2</sup>Supportive Care and Integrative Oncology, Chris O'Brien Lifehouse, Camperdown, NSW, Australia, <sup>3</sup>Integrative Medicine Center, Department of Palliative, Rehabilitation and Integrative Medicine, University of Texas MD Anderson Cancer Center, Houston, TX, USA, <sup>4</sup>Onconature Integrative Oncology Center Orgiva, Granada, Spain, <sup>5</sup>School of Pharmacy, Faculty of Medicine, The Chinese University of Hong Kong, Shatin, NT, Hong Kong, <sup>6</sup>Zakim Center, Dana-Farber Cancer Institute, Harvard Medical School, Boston, MA, USA, <sup>7</sup>Institute of Complementary and Integrative Medicine, University of Bern, Bern, Switzerland, <sup>8</sup>Cancer Care Equity and Professional Wellness, Sarah Cannon Research Institute, Nashville, TN, USA, <sup>9</sup>Radiation Oncology, Rocky Mountain Cancer Centers, Boulder, CO, USA, <sup>10</sup>Integrative Oncology, Sidney Kimmel Cancer Center, Thomas Jefferson University Cherry Hill, Cherry Hill, NJ, USA, <sup>11</sup>Integrative Oncology, University Hospitals Connor Whole Health. Beachwood, Beachwood, OH, USA, <sup>12</sup>Complementary and Integrative Medicine Service, Oncology Division, Rambam Health Care Campus, Haifa, Israel, <sup>13</sup>Department of Family Medicine, The University of Texas Medical Branch at Galveston, TX, USA, <sup>14</sup>Integrative Medicine Service, Department of Medicine, Memorial Sloan Kettering Cancer Center.

## Introduction

Over the last two decades, integrative oncology (IO) has seen exponential growth combining evidence-based complementary therapies with conventional treatments to improve the well-being and quality of life for individuals with cancer. The Society for Integrative Oncology's (SIO) Clinical Practice Committee (CPC) published a paper in 2024 on "Establishing an Integrative Oncology Service: Essential Aspects for Program Development."

#### Establish a Solid Foundation

Creating a robust foundation for an IO service is crucial to ensure seamless integration of complementary therapies with conventional treatments and enhance patient outcomes

#### Streamlined **Consultation Process**

Develop an efficient process for initial medical consultations. streamlines patient care, optimizes treatment planning and facilitates the incorporation of complementary therapies

#### Provide Essential Tools for Consultations

Equipping healthcare providers with necessary tools such as patient history templates, symptor assessment forms, and information resources enhances the effectiveness of consultations and aids in creating personalized care plans



### Inpatient

- Adapting therapies to inpatient delivery
- Touch, mind/body, music
- Reduced stress and pain and improved emotional wellbeing
- Specific inpatient considerations

High quality, evidence-based research is pivotal for advancing the field of IO. Identifying and embedding research within a growing IO clinical program is a critical component and there are many essential elements to consider.

### **Diverse Study** Designs

- Use of real-world clinical data
- Study design, leveraging data sources
- Incorporation of PROMs, QOL and patient preferences

### Pragmati Research

- Bridging the ga between real world practice evidence-base interventions
- Offers continu assessment

## **Methods**

Drawing upon the expertise of leaders in IO from the SIO's CPC representing a diverse group of individuals both from a geographical and clinical perspective, we explored barriers and opportunities in IO Center development as an extension of our previous work.



To expand on the essential aspects of IO program development through a collaborative process by drawing on the global and clinical experience within SIO's Clinical Practice Committee focusing on:

- 1) Delineation of specific models of care delivery
- 2) Embedding research into programs
- 3) Identifying challenges and barriers for programmatic development



## Models of Care Delivery in Integrative Oncology

We evaluated the strengths and challenges of each different model as it relates to the implementation of an IO program recognizing the importance of identifying a model that works best within the program's medical structure and unique needs.

5 models (as depicted) were identified for delivering IO based care.

| Outpatient                             | Virtual                            | Hybrid                | Community<br>Based  |  |
|--|------------------------------------|-----------------------|---------------------|--|
| <ul> <li>Integrated with</li> </ul>    | • Expansive growth                 | • Merger of in person | • High quality IO   |  |
| existing care                          | during pandemic                    | and virtual           | programs in         |  |
| <ul> <li>Collaboration with</li> </ul> | <ul> <li>Various models</li> </ul> | Adaptable format:     | community-based     |  |
| Oncology                               | Continuity, access                 | inpatient-            | settings            |  |
| Departments                            | and economic                       | outpatient and        | Parallels academic  |  |
| • Therapies such as:                   | advantages                         | community-            | IO programs         |  |
| acupuncture,                           | Critical role of                   | academic              | • Financial         |  |
| massage,                               | infrastructure and                 | Collaboration of      | commitment          |  |
| mind/body and                          | resource sharing                   | services and          | • Bridging the gap: |  |
| nutrition $\rightarrow$                | Technology                         | providers for         | education,          |  |
|  |                                    |                       |                     |  |

improved QOL • Education is key

- success
- community-based IO providers, virtual

## **Challenges and Barriers to Sustainability**

#### **Economic Needs of** Program Development

- Costs from establishing and maintaining a program
- Cost-effectiveness evaluations of IO based interventions
- Cost-savings from decreased hospitalizations, improved treatment adherence and symptom management

Roadmap

national

Globally, IO's role in both academic and community-based practices is growing rapidly. There remains an ongoing critical need to provide resources to assist programs in overcoming the challenges faced in implementation. Through a collaborative effort from the SIO Clinical Practice Committee, we developed a roadmap to assist in guiding and supporting new programs as they begin which will drive future educational tools and overarching IO standards of care.

## **Embedding Research into Clinical Practice**

limitations, limited

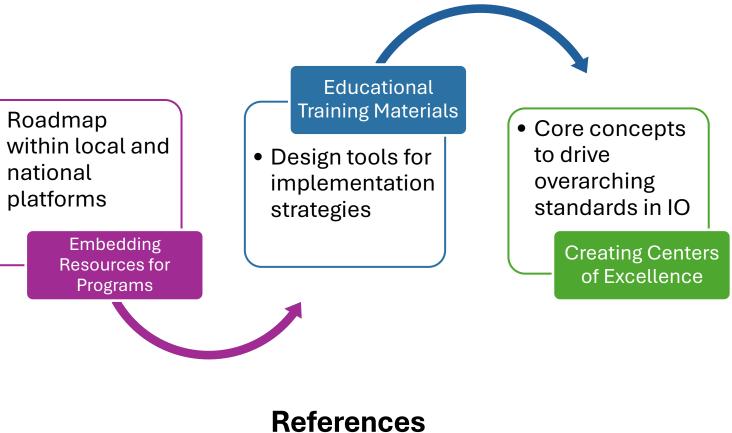
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|                    |   |   |   |  | platforms   |
|--------------------|---|---|---|--|---|
| ic<br>h            | Research<br>Funding                           | Ethical Approval                                      | Translating<br>Research Results   | Research<br>Collaboration  | Embed<br>Resourc                                    |
| gap<br>l           | External sources                              | <ul> <li>Informed consent</li> </ul>                  | Communication   | <ul> <li>Academic and<br/>community-based</li> </ul>                                     | Progra  |
| ce and<br>sed<br>S | <ul> <li>Institutional<br/>support</li> </ul> | <ul><li>IRB approval</li><li>Data integrity</li></ul> | <ul> <li>Information<br/>exchange leading<br/>to incorporation of<br/>evidence-based</li> </ul> | <ul> <li>programs</li> <li>Researchers and practitioners</li> <li>Co-designed</li> </ul> |   |
| nual               |   |   | recommendations   | <ul><li>interventions</li><li>Increased<br/>community<br/>engagement</li></ul>           | J Lacey, et a<br>Essential As<br><i>Oncology Re</i> |





## **Conclusions/Future Directions**



al. "Establishing an Integrative Oncology Service: Aspects of Program Development." Current Reports. Vol 26, issue 3 2024.

