

# Continuity of care needed from the 'front of the pathway' to the back for cancer survivors, reports study

August 2 2023

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After undergoing cancer treatment, many survivors deal with a range of psycho-social and physical issues but support for them is limited, new University of Otago research shows.

The study, published in the international journal *BMC Health Services Research*, focuses on the provision of supportive care services and programs for cancer survivors post-treatment in Aotearoa.

Lead author Dr. Jerram Bateman, of the Department of Preventive and Social Medicine, says the [support](#) available for survivors is often "fragmented and inequitable" due to [limited resources](#). "Consequently, it is likely many cancer survivors have unmet needs once they have finished their treatment."

Dr. Bateman and fellow researchers interviewed 47 health care providers involved in care for survivors after treatment, including supportive care providers, clinical and allied health providers, primary health providers, and Māori health providers.

"Participants in this study described a range of psycho-social-spiritual and physical issues cancer survivors face after they have finished active treatment, but there are very few services that specifically support people in this situation," Dr. Bateman says.

"This is very much a systems and resourcing issue. The people working in [cancer treatment](#) and supportive care are doing their absolute best to support survivors."

Understandably, resources in cancer care are focused on "front of the pathway" measures like prevention, [early diagnosis](#), and treatment, so post-treatment care is an extra on top of already stretched workloads and resources, he says.

There is also a lack of clarity around whose responsibility post-treatment care is.

That means survivors who seek support are often "shoehorned" into

services that are primarily designed for people who are at the early stages of cancer care.

"For example, a survivor seeking [emotional support](#) post treatment might end up in a support group primarily catering to people newly diagnosed or going through treatment."

Dr. Bateman says post-treatment care should be established as a distinct phase of [cancer care](#).

A group or organization taking leadership in the cancer survivorship space would give patients a clearer referral pathway and help make this care less fragmented and more equitable.

"That isn't to say that one organization needs to provide all the support needed by people post-treatment, rather that they would facilitate it."

However, this is just one of many options. Implementation of a survivorship model of care and use of survivorship care plans would also help, he says.

"I think the key thing is to try and improve continuity of care right through the cancer journey—just making sure people know who to contact if they do require support post-treatment."

Dr. Rachael Hart, Chief Executive of the Cancer Society of New Zealand, welcomes the research saying it is affirming to see the issues faced by the Society's Supportive Care teams around Aotearoa being experienced within the broader sector.

"We agree that more could be done to link [cancer survivors](#) to services after treatment. This is one of the key drivers of our new model of supportive care. This paper's recommendations will support us as we

hone that piece of work."

**More information:** Jerram Bateman et al, "Survivorship care is one big gap': a qualitative study of post-treatment supportive care in Aotearoa New Zealand, *BMC Health Services Research* (2023). [DOI: 10.1186/s12913-023-09580-8](https://doi.org/10.1186/s12913-023-09580-8)

Provided by University of Otago

Citation: Continuity of care needed from the 'front of the pathway' to the back for cancer survivors, reports study (2023, August 2) retrieved 28 April 2024 from <https://medicalxpress.com/news/2023-08-front-pathway-cancer-survivors.html>

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