A Pre-Treatment Clinic for High-risk Head & Neck Cancer Patients
Provision of Cancer Services
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Introduction
High-risk Head and Neck (H&N) cancer patients are seen in a specific pre-treatment clinic prior to treatment interventions.

The multidisciplinary service is conducted by the Cancer Nurse Coordinator, Dietitian, Speech Pathologist and Social Worker.

Patients’ needs are assessed, education and support on management of functional and psychosocial issues is provided.

Aim
To provide early assessment and response to the needs of people with cancer of the H&N region who require surgery, radiotherapy and/or chemotherapy.

To minimise distress from the potential psychosocial impact, improve treatment recovery and functional outcomes, enhance quality of life for the patients and carers and provide best practice.

Method
Patients are classified high-risk if their treatment plan involves:
- extensive surgery
- high radiotherapy (RT) dose
- concurrent chemotherapy and RT
- or have significant co-morbidities

Initial consultations are between diagnosis and treatment commencement.

Standardised assessments include:
- The EORTC H&N35 - Quality of Life tool
- Distress Thermometer
- Patient Generated Subjective Global Assessment (PG-SGA) - nutrition assessment
- Weight
- Speech Handicap Index
- Aspiration-Penetration scale
- Patient Satisfaction survey

Follow up assessments are at 3, 6 and 12 months.

Results
Distress Thermometer (DT) results:
134 patients between 29/01/10 to 30/06/11
71% male; 29% female
Age range: 35-93 years
Median age: 64 years
DT’s range: 0-10. Higher scores indicate higher distress
Average DT score: 2.6
Approximately one third (37.3%), 50/134 scored DT 4 or higher and thus referred for psychosocial intervention.

Of these 50 patients:
Three-quarters expressed anxiety symptoms (76% worry, 66% nervousness, 34% fear)
Two thirds expressed depression symptoms (94% sadness, 45% depression, 25% loss of interest)
Almost half (46%) expressed anxiety and depression symptoms.

Patients’ Satisfaction survey results:
35 patients (Table 1).

Clinicians’ Satisfaction survey results:
13/15 (87%): 4 consultants; 5 registrars; 3 allied health; 1 nurse (Table 2).

Conclusion
H&N cancer patients suffer a high symptom burden and have complex needs.

This pre-treatment clinic provides an opportunity for patients to have their physical functioning, emotional and social needs assessed by all four health disciplines in one consultation.

Relevant education, interventions, referrals and supportive care are thus implemented before treatment begins.

The service is time and cost effective.

Essentially it is a preventative care model versus reactive.

We catch them before they fall!

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Table 1: Patients’ Satisfaction survey – Main responses

<table>
<thead>
<tr>
<th>Satisfaction parameters</th>
<th>Result</th>
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<tbody>
<tr>
<td>Attending Pre-treatment clinic useful</td>
<td>49/50 (98%) satisfied / very satisfied</td>
</tr>
<tr>
<td>1/50 neutral</td>
<td></td>
</tr>
<tr>
<td>Support &amp; guidance provided</td>
<td>50/50 (100%) satisfied / very satisfied</td>
</tr>
<tr>
<td>Anxiety allayed</td>
<td>40/50 (80%) satisfied / very satisfied</td>
</tr>
<tr>
<td>10/50 (20%) neutral</td>
<td></td>
</tr>
<tr>
<td>Opportunity for questions</td>
<td>50/50 (100%) satisfied / very satisfied</td>
</tr>
<tr>
<td>Knowledge of staff &amp; services improved</td>
<td>50/50 (100%) satisfied / very satisfied</td>
</tr>
</tbody>
</table>

Table 2: Clinicians’ Satisfaction survey – Main responses

- Strongly Agree
- Agree
- Neither
- Disagree
- Strongly Disagree

Assessment role valuable
Improve info/support for pts
Pt attendance critical
MDT communication improved