Navigation Re-Imagined: Creating an Integrative Oncology Navigation Practice

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Disclosure

• Carole O'Toole, Laura Pole and Matthew Mumber report that they have no relevant financial relationships with any commercial companies pertinent to this educational program.

• This educational activity does not include any unannounced information about off-label use of a product.

Objectives

• Define integrative cancer care navigation.
• Describe the Smith Center model for integrative cancer care navigation.
• Describe 5 evidence-based CAM therapies/methods and their value and appropriate use in the continuum of integrative cancer care navigation.
• Create a vision for developing an integrative cancer care navigation practice.

Today’s Agenda

• Introductions
• Introduction to Integrative Cancer Care Navigation
• Introduction to Evidence-Based Complementary and Supportive Methods, Techniques and Practices: Case Study; Mind-Body Skills
• Break

Today’s Agenda

• Introduction to Evidence-Based Complementary and Supportive Methods, Techniques and Practices: Nourishment and Supplements; Psychosocial Support; Movement; Spiritual Care; Revisit Case Study
• Practical Matters
• Envisioning Integration Into Your Practice
• Closing

Introducing Your Faculty

• Carole O'Toole
• Matthew Mumber
• Laura Pole
Understanding the Landscape

- Uses an intervention to get rid of the disease
- Is what the doctor does
- Comes from within
- Occurs on the physical, mental, emotional, psychological, and spiritual realm
- Is a return to wholeness
- Is always possible

Curing and Healing

Understanding the Landscape: Integrative Oncology

What is Integrative Oncology?

- What is it NOT?
  - Complementary – use of modalities with conventional medicine
  - Alternative – use of modalities instead of conventional medicine
  - Conventional – medicine practiced by MD’s, DO’s and their allied health professionals

What is Integrative Oncology?

- Integrative Oncology is an evolving evidence-based specialty that uses complementary therapies in concert with medical treatment to enhance its efficacy, improve symptom control, alleviate patient distress and reduce suffering.

- According to the Society for Integrative Oncology: Integrative Medicine is a seamless use of interventions that benefit cancer patients.

National Center for Complementary and Alternative Medicine (NCCAM)

The CAM Domains
Address Mind, Body and Spirit
in Patient, Family member, Provider (CAM and conventional), Community members, Society members
In the particular context of his/her/their experience of Self, Culture and the Natural World
(All participants, all levels of being and experience)

What is Integrative Oncology?

Include Providers?
The primary delivery system of medicine revolves around physicians/providers
Large numbers of physicians/providers experience burnout
Physicians/providers are not taught self care
Physicians/providers who care for self are more effective in counseling patients to care for self

Why Integrative Oncology?

Why Integrative Oncology?
--Incidence of Cancer is increasing – about 1 in 2 men and women will be diagnosed with some form of cancer
--Treatments are costly – 263.8 billion in 2010 (ACS)
--30-50% of all cancers can be prevented with lifestyle and nutritional interventions alone (ACS) (primary prevention)
--Higher cancer control rates with more cancer survivors requiring long term follow up, disease recurrence prevention (tertiary prevention) and emphasis on long term quality of life
--Patients often don’t tell MD of CAM use – potential interactions

Why Integrative Oncology?

Why Integrative Oncology?
• Emphasizes
  – patient participation in maximizing health
  – shared decision making – relationship centered approach
  – Therapeutic Power of doctor patient relationship itself
  – An individual’s innate healing capacity
  – Quality of life

Why Integrative Oncology?

What Does Integrative Oncology Include?
• Antineoplastic therapy
• Supportive Care
  – Translational
  – Transformational
• Preventive Care
  – Primary
  – Secondary
  – Tertiary

Across cancer care continuum from risk reduction, through screening, diagnosis, treatment, survivorship which can include recurrence and end of life care.

What Does Integrative Oncology Include?

Why Integrative Oncology?

• Patients need guidance
  – 83% of patients across a broad spectrum of cancer types use some form of CAM
  – Highest use: vitamins and herbs, movement and physical therapies
  – Patient expectations vary widely: improve Quality of life, help with symptoms, prolong life, cure their disease, boost immune system
  – Main reasons patients used CAM: increase Hope, lack of toxicity of CAM (natural), increase personal feeling of control

Integrative Cancer Care Navigation

"No person with cancer should be forced to spend more time fighting their way through the health care system than fighting their disease."
- Dr. Harold Freeman

Navigators show up with a map, a compass, a guiding hand and a compassionate heart.

Value of Patient Navigation

- Improves early detection & treatment compliance rates
- Improves use of/access to appropriate care and resources
- Improves patient/family quality of life
- Positive impact on cancer experience

"Each of the 4 times I have received a cancer-related diagnosis, I felt like I had been drop-kicked into a foreign country: I didn’t know the language, I didn’t understand the culture, I didn’t have a map and I desperately wanted to find my way home."
- Jessie Gruman, President and Founder, Center for Advancing Health
Integrative Patient Navigators

- Facilitate timely access to any medical treatment and supportive resources selected by the patient, including integrative cancer care resources
- Honor the individual’s cultural heritage, religious beliefs and individuals circumstances
- Increase patient’s knowledge of available resources, tools and skills to better cope with their illness and reduce stress
- Introduce patients to the healing power of evidence-based complementary therapies and their role in treatment and survivorship

Integrative Patient Navigators

- Support the patient and caregivers emotionally and spiritually
- Improve the quality of the cancer experience
- Empower individuals to become more engaged in their health care and their healing process
- Be available to the patient throughout the course of the cancer experience, from screening through diagnosis, treatment, recovery, survivorship, including recurrence and/or end-of-life.

Role of Integrative Navigators Across the Continuum of Care

Forces Shaping Navigation

- Cancer workforce shortage
- ACOS standards
- Climate of survivorship

The Call for Integrative Navigation

- Growing number of survivors
- Identity as consumers
- Cultural awareness of health and cancer
- Medical/Tech advances
- Accessibility of Resources
- Increased use of CAM
“As navigation evolves, all individuals working in navigator roles will need to be well-versed in helping patients to identify and access integrative therapy resources throughout their cancer experience.”

- Cantril and Haylock, Seminars in Oncology Nursing 29(2); May 2013

**Unique Features of Training**

- Focus on Holistic Care
- Exposure to Integrative Modalities
- Didactic & Experiential
- Intensive On-Site Training with Ongoing On-line Instruction

**What Our Navigators Are Saying**

- Training positively impacted their work
- More effective in their practice
- Now include complementary modalities

**Navigator Training Follow-Up Survey**

- 82% applied what they learned at Smith Center to their practice
- 87% observed patients benefitting from what they had learned at Smith Center
- 94% reported training influenced self-care

**Benefits of Integrative Navigation**

- Improvements in symptoms/concerns
- Stress reduction
- Improved patient satisfaction
- Increased knowledge
- More confidence
- Better able to make informed choices
- Increased use of supportive therapies
- Improved self-care
- Better outcomes overall
When we are doing healing work, we honor something innate in the person—something which is sometimes deeply buried. The healing work is to bring that out into the light, into the day and allow it to do its work.

—Rachel Remen

**Integrative Therapies: The Vital Quintet**

- Physical Exercise: Yoga, Qigong, Walking, Etc.
- Stress Reduction
- Diet and Nutrition: Plant Based, Whole Foods
- Psychosocial: Community, Therapy, Group
- Spiritual: Prayer, Meditation, Faith, Community

**Case presentation**

- 46 year old mother of 2 grade school aged boys diagnosed with stage IV triple negative breast cancer metastatic to a single bone site.
  
  **Conventional Interventions**
  - Screening mammogram, ultrasound biopsy, MRI breasts, PET CT scan. Bone biopsy, MRI brain.
  - IV chemotherapy for close to 6 months. Bilateral mastectomy. Radiation to bone met. Continued IV Zometa therapy.
  - Continued monitoring of blood work and physical examinations in long term follow up.
  - Took high dose antioxidants and herbs during chemo and RT and did not tell MD. Missed multiple appointments due to social, family concerns. Did not complete all therapy. Continued Standard American Diet.
  - When fatigue set in, slept more often. Developed arm lymphedema. Lost to follow up. Went to faith healer who prescribed homemade herbal supplements.
I. Mind-Body Medicine

Mind Body Medicine

Mind Body Stress Management

APPENDIX A: EXAMPLES OF GRADE RECOMMENDATIONS

<table>
<thead>
<tr>
<th>Grade</th>
<th>Quality of evidence</th>
<th>Strength of supporting evidence</th>
<th>Implication</th>
</tr>
</thead>
<tbody>
<tr>
<td>IA</td>
<td>Strong recommendations</td>
<td>High-quality evidence</td>
<td>Benefits clearly outweigh risks and harms, or vice versa</td>
</tr>
<tr>
<td>IB</td>
<td>Strong recommendations</td>
<td>Moderate-quality evidence</td>
<td>Benefits clearly outweigh risks and harms, or vice versa</td>
</tr>
<tr>
<td>IC</td>
<td>Strong recommendations</td>
<td>Low-quality evidence</td>
<td>Benefits clearly outweigh risks and harms, or vice versa</td>
</tr>
<tr>
<td>IA-A</td>
<td>Weak recommendations</td>
<td>High-quality evidence</td>
<td>Benefits are balanced with risks and harms</td>
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<tr>
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<td>Weak recommendations</td>
<td>Moderate-quality evidence</td>
<td>Benefits are balanced with risks and harms</td>
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<td>Low-quality evidence</td>
<td>Benefits are balanced with risks and harms</td>
</tr>
<tr>
<td>IC-C</td>
<td>Very weak recommendations</td>
<td>Very low-quality evidence</td>
<td>Uncertainty in estimates of benefits, risks, and harms, may be clearly balanced</td>
</tr>
</tbody>
</table>

BCT = behavioral change technologies

Mind-Body Therapy

Experiential

Mind-Body Skills—Facilitation Practice