

SHARED VOICE

INDIVIDUALIZING PATIENT-CENTERED COMMUNICATION
FOR ADVANCED LUNG CANCER PATIENTS

VIDEO 3



Supportive Care Discussions and Planning With Patients and Their Families

Featuring Dr. Walter Baile, Moderator, and oncologist panelists Dr. Corey Langer, Dr. Benjamin Levy, and Dr. Antoinette Wozniak

Video Synopsis

This video is an excerpt of a moderator-led panel discussion of the communication issues that may commonly arise around the time of treatment planning and initiation; two prerecorded videos of an ongoing treatment discussion between a hypothetical patient and her oncologist are presented and discussed by the panel.

Video Key Takeaways

- Early palliative/supportive care has been associated with improved quality of life, lower use of aggressive end-of-life care, and better management of patient expectations regarding long-term prognoses^{1,2}
- Palliation, often misconstrued as end-of-life care, provides support for physical and mental symptoms and is recommended to be included in cancer care, regardless of treatment, curative intent, or timeline for survival¹⁻³
- The treatment planning conversation is valuable for outlining treatment goals, aligning with patient values, and properly setting patient expectations^{3,4}
- Treatment planning conversations might also include discussion around the potential for continued therapy or later lines of therapy, which may help minimize any element of surprise and strengthen the therapeutic alliance

Discussion Starters

- How do you describe palliative care to your patients and when do you integrate it into their treatment plans?
- How do you approach discussions about the treatment plan and goals of care with your patients and their caregivers? How do you handle misperceptions about prognosis and treatment goals?
- When and how do you discuss the potential for continued therapy or later lines of therapy with your patients?

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Supporting the Conversation



Patients want choice of treatment options and help understanding the factors involved⁵

83%

83% of patients reported they would be willing to continue treatment indefinitely if it helped keep their disease under control

75%

75% of patients reported they were likely to choose to continue treatment of some sort after the cancer stops growing

43%

43% of patients agreed that they completely understood the treatment plan at the time of diagnosis

14%

14% of patients and 12% of caregivers erroneously believed the treatment was stopped because the cancer was gone

References

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3. Levit LA, Balogh EP, Nass SJ, et al. *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis*. Washington, DC: The National Academies Press; 2013.
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5. Langer CJ, Evans TL, Belani CP, et al. Patient (Pt) and caregiver (Cg) perspectives in non-small cell lung cancer (NSCLC). *J Clin Oncol*. 2012;30 (34 Suppl): Abstract 4.