Message from the Editorial Team

Welcome to the August edition of MASCC Society News. This month we feature an update from two conferences earlier in the year: the American Society of Clinical Oncology Congress in Chicago and the Oncology Nursing Society Congress in Washington. We also profile CAPhO: the Canadian Association of Pharmacy in Oncology and the MASCC Nutrition and Cachexia Study Group. We have a list of selected publications by MASCC members and we also would like to introduce and welcome two new members to the MASCC community, Rebecca Verity (UK) and Leanne Kolnick (USA). We hope you enjoy the August edition, and we look forward to bringing you all the news from the 2013 MASCC Congress in Berlin in the September issue!

From the editors, Anna & Anna

Update from the American Society of Clinical Oncology Congress!

Supportive care was on the agenda at ASCO 2013, with Eduardo Bruera and Mellar Davis (pictured) in conjunction with Daniel Morganstern presenting a key education session to over 400 delegates on June 2nd. The presentation was entitled: Early Integration of Palliative and Supportive Care in the Cancer Continuum: Challenges and opportunities.

Terminology was a key feature of this session with Dr Bruera discussing the history, importance and implications of the terms Supportive Care, Palliative Care and Hospice Care. He underscored how Palliative Care is considered by most medical oncologists as an end of life service, rather than a service to be utilised in early stage cancer. In what he described as 'the branding problem of palliative care', he reminded attendees that the name of a service actually conditions the results of that service. Dr Bruera provided a fascinating example of this in practice, where a service name change from Palliative Care to Supportive Care resulted in a 41% increase in referrals to the service and a change in patient referral time from 4.7 to 6.2 months before death. The key components of a palliative care consultation were described and the fact that palliative care involvement reduces intensive care mortality and complicated bereavement, and improves quality of life and symptom management, were reinforced.

Dr Davis focused on the barriers to implementing best practice models. He stated that symptom control and quality of life have traditionally been viewed as secondary outcomes in oncology clinical care and research. Results from a MASCC international study were discussed - 80% of cancer centres considered integration of palliative care into oncology as important, but only 17% of institutions were prepared to financially resource integration. Additionally, exposure to palliative care is limited from both a clinical and general public point of view and research to establish an evidence base for specialist palliative care services requires complex intervention trials and well defined patient outcomes. In concluding the session, Dr Davis stated that the potential of palliative care could only be realised when it is provided by a team of palliative care specialists as a cross-sectional network integrated into early cancer care. This session generated a great deal of discussion and interest.
Effective Symptom Management profiled at Oncology Nursing Society

From the 25th – 28th of April, the Oncology Nursing Society ran the 38th annual congress in Washington, DC. One highlight was the clinical lecture at the meeting entitled: Effective Symptom Management to Optimize Care with Oral Cancer Therapies led by Peg Esper DNP©, MSA, RN, ANP-BC, AOCN. Ms Esper praised the MASCC Oral Agent Teaching Tool (MOATT) in her lecture and sent attendees to our booth where we were able to hand out copies and explain how to use the tool. We also had copies of the MOATT User’s Guide to help the attendees use the MOATT in clinical and research settings. Pictured is MASCC Executive Director, Dr Åge Schultz, at the MASCC booth!

The Canadian Association of Pharmacy in Oncology

We often use the opportunity in our newsletters to profile different groups that may be relevant to MASCC members. This month, we share our talk with Chris Ralph, from the Canadian Association of Pharmacy in Oncology (CAPHO).

Who is CAPHO and what are the goals of your organisation?

The Canadian Association of Pharmacy in Oncology (CAPHO) is the national forum for oncology pharmacy practitioners and other health care professionals interested in oncology pharmacy. CAPHO promotes the practice of oncology pharmacy in Canada by conducting educational events, maintaining appropriate professional practice standards, facilitating communication between oncology pharmacists and other interested health professionals and advocating for oncology pharmacy as an area of specialty practice.

What is unique about CAPHO?

The annual National Oncology Pharmacy Symposium (NOPS) is Canada’s only national conference that supports oncology pharmacy as a specialty practice.

How many members do you have?

285, comprised of pharmacists, pharmacy technicians, pharmacy assistants and students.

What events or programs are CAPHO currently involved in?

2014 will be an especially exciting year for CAPHO as we will jointly host ISOPP (The International Society of Oncology Pharmacy Practitioners: http://isopp.org/) conference in Montreal. Additionally, Oncology Practice Essentials is CAPHO’s newest series of educational programs, to enhance one’s ability to practice in the field of oncology pharmacy. The first released program is Oncology Basics. Also in November, this year’s National Oncology Pharmacy Symposium is in beautiful Vancouver, BC, which will be held November 14-17 at the Hyatt Regency Vancouver (http://vancouver.hyatt.com/en/hotel/home.html). We also have a CAPHO Compass blog which is a way to keep up to date with what is happening with CAPHO as well as providing unique and important information in oncology pharmacy.

Meet a new MASCC Member! - Rebecca Verity

I am a National Institute for Health Research (NIHR) Doctoral Research Fellow from King’s College London. My PhD study aims to identify and develop potential interventions and strategies health professionals could use to prepare and support family and friends in the chemotherapy setting. My professional background is cancer nursing and before I was awarded the NIHR doctoral fellowship, I was a Lecturer in Cancer Nursing at the Florence Nightingale School of Nursing and Midwifery, King’s College London. I have joined MASCC as I believe it would provide valuable opportunities to learn from and network with other experts in the field.

For more information about CAPHO, visit the website: http://www.capho.org
Profile of the MASCC Nutrition and Cachexia Study Group

This month we profile the Nutrition and Cachexia Study Group, which comprises some 100 members.

**Why does MASCC need a nutrition and cachexia study group?**
Nutritional problems such as poor appetite and cachexia syndrome are common in patients with cancer, and particularly those receiving treatment. Yet, these problems are often under-recognised and hence go un-managed or are poorly managed, thereby adversely affecting patients’ quality of life and participation in treatment.

**Who is in the group?**
The Nutrition and Cachexia study group is chaired by Dr Florian Strasser and co-chaired by Dr Jann Arends, Dr Sami Antoun and Dr Liz Isenring. There are over 100 members worldwide, including oncologists, dietitians and nutritionists, nursing, pharmacists, other allied health professionals and palliative care specialists.

**What are the goals of this group?**
The goals of this group are to improve the supportive care of oncology patients with nutrition and cachexia related conditions and to increase the awareness of current evidence-based practice guidelines. These include the ESPEN Guidelines on Enteral Nutrition: Non-surgical Oncology produced by the European Society for Clinical Nutrition and Metabolism [www.clinicalnutritionjournal.com/article/S0261-5614(06)00040-9/abstract](http://www.clinicalnutritionjournal.com/article/S0261-5614(06)00040-9/abstract) and the Clinical Oncology Society of Australia (COSA) Evidence based practice guidelines for the nutritional management of adult patients with head and neck cancer. These guidelines are kept constantly updated via a wiki platform and can be accessed via the link below:


When gaps in the literature are identified, the group encourages research to improve patient care by focusing on research efforts relevant to the interface between clinical nutrition, cachexia and oncology disciplines.

**What recent achievements are you proud of?**
We ran a successful joint workshop with the Fatigue study group at the MASCC / ISOO Symposium in Berlin in June. This combined workshop was chaired by Karin Olson and Florian Strasser and presented state-of-the-art information on recognition, practical assessment and management in oncology practice based on current definitions, mechanistic understanding and clinical research developments. The session provoked lively discussion on current definitions and standardized strategies for screening and assessment of cachexia and fatigue as well as the comparison of mechanisms of cachexia and fatigue in the context of anti-cancer treatment.

**What is the group looking forward to in the near future?**
Welcoming new members to our study group!

If you wish to become a member of the MASCC Nutrition and Cachexia Study Group, please visit: [http://www.mascc.org/join-study-groups](http://www.mascc.org/join-study-groups). Remember that you can join up to three study groups as a part of your MASCC membership.

Meet a new MASCC Member! - **Leanne Kolnick**

I am a third year Oncology fellow at Vanderbilt University Medical Center in Nashville, TN, USA. In the coming year I will be a chief resident of our program. I am interested in supportive care because a growing number of survivors face a lifetime living with chronic side effects. It is at this juncture that I felt I could have a significant impact on their lives. To me, the convergence of the art and science of medicine is Supportive Care. In medical school, I began my path towards Supportive Oncology and Palliative Medicine through my community-health based research project on volunteerism and end-of-life care and I successfully applied for a grant to study symptom burden in patients with metastatic or recurrent Head and Neck Cancer. The goal is to identify symptoms related to recurrent cancer, including both residual symptoms and current side effects from treatment that may be alleviated by palliative interventions. I am fortunate to have a dedicated and knowledgeable mentor, Dr. Barbara Murphy, who heads our Supportive Oncology group and is active in MASCC. She encouraged me to join as a means of sharing my work, collaborating with like-minded professionals, and broadening my exposure to other aspects in the Supportive Care field.
Call for Stories! We would like to hear from you with any stories relevant to MASCC members, including publications, presentations, reports on supportive care research at conferences, profiles from new members, awards and academic achievements. To contact us, please email: anna.ugalde@svhm.org.au or anna.boltong@petermac.org

Some New Supportive Care Publications by MASCC Members


Have any news items to share? Please send contributions for the MASCC News to MASCCnews@mascc.org or the co-editors: Anna Ugalde - anna.ugalde@svhm.org.au & Anna Boltong - anna.boltong@petermac.org

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