



Cancer Survivorship Up Close and Personal



Evidence-based Integrative Oncology Tools that
Translate into Definable Outcomes for Cancer
Survivors

Matthew P. Mumber MD

Harbin Clinic Radiation Oncology

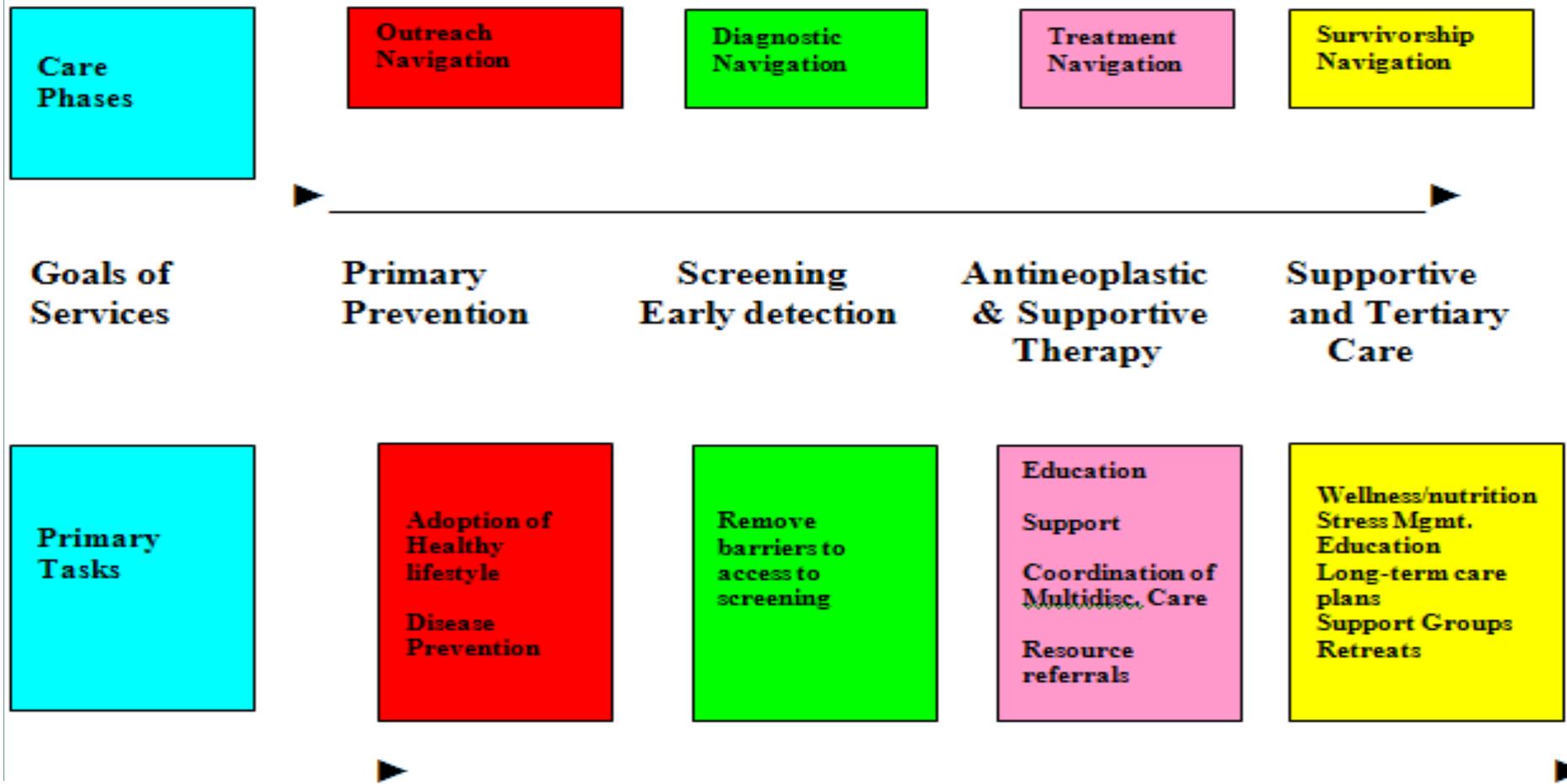
Evidence based recommendations



Guidelines For Advising Patients: Based on Evidence and Efficacy

Therapies that may be recommended:	Therapies that may be accepted:	Therapies that should be Discouraged or unacceptable:
Evidence supports efficacy	Evidence regarding efficacy is inconclusive	Evidence indicates inefficacy
and	but	or
Evidence supports safety	Evidence supports safety	Evidence indicates serious risk

Integrative Oncology Navigation through the Care Continuum





**CLINICAL PRACTICE
GUIDELINES
WE CAN TRUST**

INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES

“**Clinical Practice Guidelines** are statements that include recommendations intended to optimize patient care that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options.”

– 2011, *US Institute of Medicine*



INSTITUTE OF MEDICINE

In November 2007, AICR and the World Cancer Research Fund published *Food, Nutrition, Physical Activity and the Prevention of Cancer: a Global Perspective*, the most comprehensive report on diet and cancer ever completed.



These ten recommendations for cancer prevention are drawn from the WCRF/AICR Second Expert Report. Each recommendation links to more details.

- 1. Be as lean as possible without becoming underweight.
- 2. Be physically active for at least 30 minutes every day. Limit sedentary habits.
- 3. Avoid sugary drinks. Limit consumption of energy-dense foods.
- 4. Eat more of a variety of vegetables, fruits, whole grains and legumes such as beans.
- 5. Limit consumption of red meats (such as beef, pork and lamb) and avoid processed meats.
- 6. If consumed at all, limit alcoholic drinks to 2 for men and 1 for women a day.
- 7. Limit consumption of salty foods and foods processed with salt (sodium).
- 8. Don't use supplements to protect against cancer.
- 9.* It is best for mothers to breastfeed exclusively for up to 6 months and then add other liquids and foods.
- 10.* After treatment, cancer survivors should follow the recommendations for cancer prevention.

World Health Organization



At least one-third of all cancer cases are preventable. Prevention offers the most cost-effective long-term strategy for the control of cancer.

- Tobacco and alcohol use
- Physical inactivity, dietary factors, obesity and being overweight
- Infections, environmental pollution, occupational carcinogens, radiation exposure

Transformation versus Translation

from Mumber MP, Integrative Oncology: Principles And Practice, Taylor and Francis, 2006.



Table 1.5 Differentiating characteristics of interventions with translational and transformational intent

Translational

A specific tool, technique or instrument designed to deliver a specific measurable outcome

Outcome is measurable quantitatively

External locus of control

Reductionistic; can be broken into parts

Definable, discrete, deliverable and replicable

Understandable on a rational level

Has levels of effect

Transformational

A highly individualized experience which involves a profound perspective shift of the essence of one's true nature, bringing a larger sense of purpose, meaning and/or fulfillment

Outcome is qualitative and difficult to define or measure

Internal locus of control

Irreducible; whole

Ultimately mysterious; can set up condition but cannot force

Frequently indescribable

All or nothing

Integrative medicine use among breast cancer survivors



- 2.8+ million breast cancer survivors in the US
- 48-80% of breast cancer patients use CIM
- Intended uses of CIM after diagnosis include:
 - Side effects
 - Quality of life
 - Physical functioning
 - Prevention
 - Comorbidities
 - Increase efficacy of conventional cancer therapies
 - Meet needs not addressed by conventional therapies

Need for clinicians and patients to be able to make evidence-based decisions on CIM use

MONOGRAPHS

The Role of Integrative Oncology in Cancer Survivorship

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Greenlee H et al, **Clinical Practice Guidelines on the Use of Integrative Therapies as Supportive Care in Patients Treated for Breast Cancer**, *JNCI Monograph 2014*

<http://jncimono.oxfordjournals.org>

+ 80 pages of supplemental materials

Grade A and B Recommendations



Table 1: A and B grade recommendations from a systematic review of randomized controlled trials on the use of integrative therapies during breast cancer treatment

Clinical Population:	Breast cancer (BC) patients during treatment, including surgery, chemotherapy, hormonal/biological therapy, and radiation therapy.	
Clinical Question:	What integrative therapies can be used to prevent, treat and manage symptoms and side effects encountered during breast cancer treatment?	
Clinical Applications	Recommendations	Strength of Evidence
Anxiety/Stress Reduction	Music therapy is recommended for reducing anxiety during radiation therapy (RT) and chemotherapy (CT) sessions.	B
	Meditation is recommended for reducing anxiety in BC patients and those undergoing RT.	B
	Stress management is recommended for reducing anxiety during treatment, but longer group programs are likely better than self-administered home programs.	B
	Yoga is recommended for reducing anxiety in BC patients undergoing RT +/- CT and suggested for fatigued patients.	B
Depression/Mood	Meditation, particularly MBSR, is recommended for treating mood disturbance and depressive symptoms in BC patients undergoing RT.	A
	Relaxation is recommended for improving mood and depressive symptoms when added to SC.	A
	Yoga is recommended for improving mood in women undergoing RT +/- CT and for fatigued BC patients in addition to SC.	A
	Massage is recommended for improving mood disturbance in post-treatment BC patients.	B
	Music therapy is recommended for improving mood in newly diagnosed BC patients.	B
Fatigue	Energy Conservation Counseling is recommended for the treatment of fatigue.	B
Quality of life and Physical Functioning	Meditation is recommended for improving quality of life among BC patients.	A
Chemotherapy Induced Nausea	Acupressure can be considered for BC patients receiving CT as an addition to antiemetics to help control nausea and vomiting during CT.	B

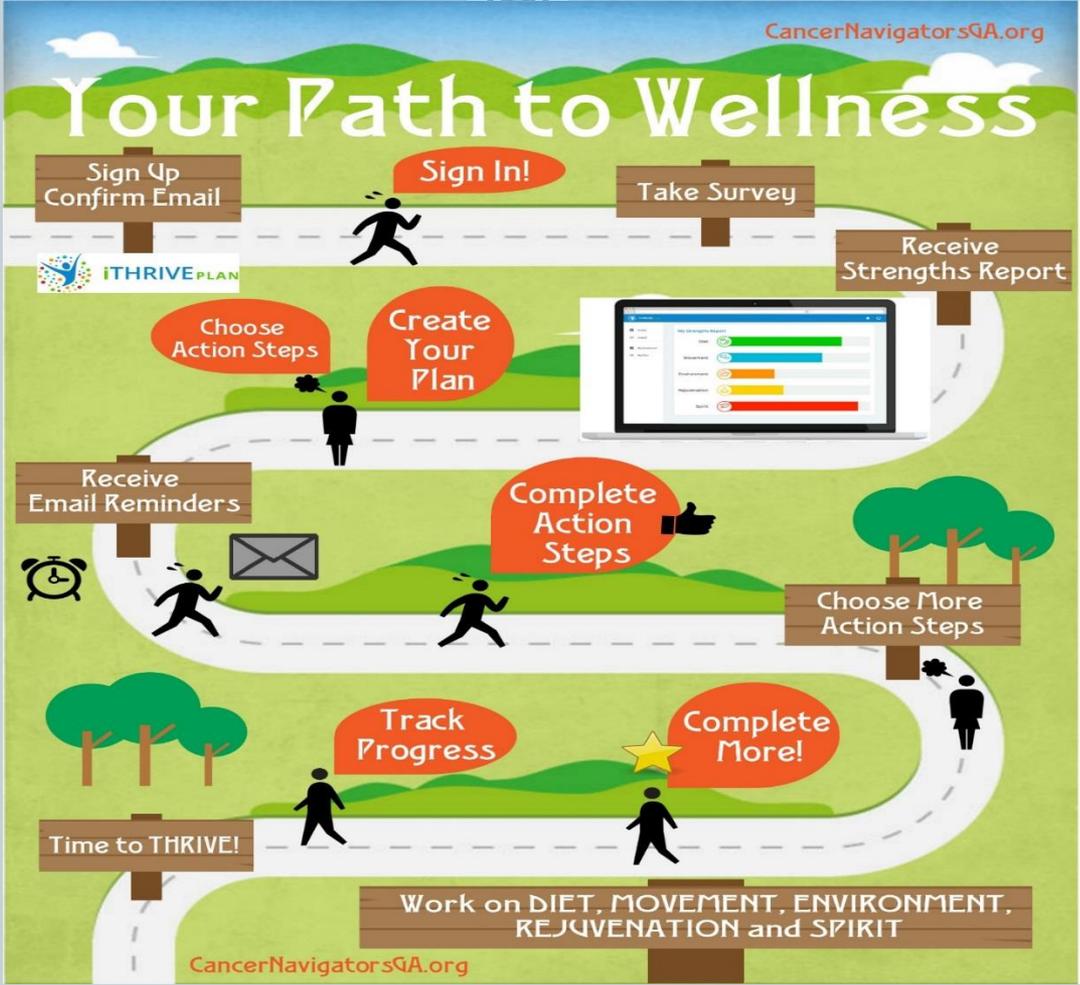
Examples of addressing these issues



Harbin Complete Cancer Care program

iThrive program

iThrive



Harbin Clinic Complete Cancer Care



Complete Cancer Care focusses on the use of evidence based complementary medicine such as massage, yoga, acupressure, meditation and music therapy along with conventional medical approaches like chemotherapy, radiation and surgery. Your Harbin medical team will make referrals to complementary providers and services to address your specific needs.

These complementary approaches are very valuable as supportive care during cancer therapy but are not currently paid for by insurance. Harbin has teamed up with Cancer Navigators to remove cost as a barrier for patients to benefit from these therapies.

Democratic process



“Under democracy one party always devotes its chief energies to trying to prove that the other party is unfit to rule - and both commonly succeed, and are right.”

~H.L. Mencken

Power of gratitude



"The seasons come and go, and go and come, to teach men gratitude."

—Prudence Jenkin