Enhanced supportive care in early phase clinical trials

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Background: Enhanced Supportive Care (ESC) is a fresh approach to supporting patients through cancer treatment and recognised nationally by NHS England. The Supportive Care Team (SCT) and Experimental Cancer Medicine Team (ECMT) at the Christie Hospital applied the validated ‘Integrated Palliative care Outcome Scale’ (IPOS; http://pos-pal.org/) in a pilot study examining the impact of ESC for patients (pts) entering early phase clinical trials. The main aims of this study were to maximise patient recruitment and retention and enhance the patient experience within the context of experimental cancer medicine clinical trials.

Methods: The IPOS tool was used to assess the effect of ESC on patient outcomes in pts on an ECMT trial. It was administered by the SCT healthcare professionals to any pts with baseline symptoms thought to be related to their underlying cancer diagnosis and at all pt visits as per trial protocol. Analysis is based on patient data where both an initial and subsequent form had been completed. Three aspects of the IPOS tool were reviewed: the overall IPOS score, the score for all symptoms as a whole and individual pain score.

Results: Data was collected from 24 pts within ECMT trials during a four-month period in 2016. The mean age was 56 years (31 to 79); 10 male and 14 female. Performance status at initial assessment was 0 (3 pts); 1 (18 pts); 2 (1 pt); unknown (2 pts). 16 pts had no previous contact with SCT services. The commonest reason for referral to the SCT was for optimisation of pain control (24/24 pts) followed by general symptom control (8/24) and psychological issues (2/24). 21 pts were seen on the day of referral; 3 pts seen ≤ 8 days of referral. 16/24 pts (67%) reported improvement in pain (and IPOS scores) within 4 weeks and 17/24 pts (71%) reported improvement in overall symptom control within 4 weeks.

Conclusions: This study has demonstrated the effectiveness of ESC on the outcomes of patients being reviewed by the SCT on ECMT clinical trials. There were considerable reductions in the overall IPOS scores and in pain score specifically. ESC has now been adopted into routine practice by our ECMT, and we are the first unit to do so in the UK. We next plan to measure the impact of ESC on patient experience, adverse events on trials, hospital admissions and treatment duration.

Legal entity responsible for the study: Experimental Cancer Medicine and Enhanced Supportive Care Team

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