

[P4-10-13] Follow-up care of breast cancer patients who were treated in a German breast cancer centre - Survey of patients and attending physicians and analysis of treatment data

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Introduction: Breast cancer treatment leads to long-lasting impairments which, according to international guidelines, have to be identified and treated in follow-up care. It remains unclear how follow-up care is perceived by patients and if all needs are met in routine care.

Methods: All breast cancer patients who underwent surgery in a German breast cancer centre from 2007 to 2013 were asked to fill out a standardized scanner-readable questionnaire. Medical data were retrieved from their charts and statistically analyzed together with the questionnaire responses. Physicians who could possibly care for breast cancer patients after primary therapy were invited to fill out a standardized scanner-readable questionnaire as well.

Results: 920 questionnaires were filled out and returned (response rate: 61%) by patients. Median age at the time of the survey was 65 years (32-95). 58% of patients still received some form of therapy, 94% of them hormonal therapy. 94% were still in follow-up care, 5% stopped and 1% never went. Intervals of follow-up visits suggested by international guidelines were assessed as "quite right" in 93%. The following examinations were conducted throughout the whole follow-up period at least once: physical examination (93%), mammography (90%), sonography of breast (81%) and liver (22%), laboratory (56%), tumor marker (23%), bone scan (21%), MRI (20%) and CT (15%). Different items were rated on a 6-point scale ranging from "0" "not true at all" to "5" "completely true". Follow-up care was regarded as very important for the own health (4.7), reassuring and calming (4.5), well-being to be looked after (4.4) and well cared for (4.4). A continuous contact between patient and doctor was appreciated (4.4). Visits were connected only to a part with distress (2.1), the median score on the NCCN distress thermometer was 4 (0-10).

105 questionnaires were answered by healthcare professionals (response rate 12%), most of them general practitioners (51%) or gynecologists (30%). Doctors carried out or referred asymptomatic patients most often to the following examinations: medical history taking (92%), physical examination (87%), blood chemistry (63%) and tumor markers (40%). Mammography was mentioned in 45%, sonographic examinations of breast, liver and axilla in 49%, 45% and 38%, respectively. 55% were (very) satisfied with international guidelines on follow-up care. Intervals and duration of follow-up visits were assessed as "quite right" in 88% and 60%, respectively. Different items were rated on a 6-point scale ranging from "0" "not important at all" to "5" "very important". Detection of disease recurrence and secondary tumors (4.8), reassurance of patients (4.7) and detection of treatment toxicities (4.5) were assessed as most important aims in follow-up care.

Conclusions: An overwhelming majority of patients makes use of follow-up care. Most important qualities from the patient's perspective are reassurance, a feeling of security, calming and continuous care by their doctor. Examinations which are not recommended in international guidelines are used by a considerable amount of healthcare providers.

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Poster Session 4: Psychosocial, Quality of Life, and Educational Aspects: Survivorship Research (7:30 AM-9:00 AM)

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