

SPECIAL  FEATURE

Targeting Cancer Campaign

- One Year n

In November last year, Radiation Oncologists from Australia and New Zealand united to improve recognition of radiation therapy and they established the Targeting Cancer Campaign. One year on, *Associate Professor Sandra Turner* reviews its implementation.

Targeting Cancer is an education campaign that seeks to improve the profile of radiation therapy as an effective and safe cancer treatment. While the optimal utilisation rate for

radiation therapy has been calculated at around 48 per cent, only one in three patients will access treatment. This means that thousands of patients are missing out on beneficial treatment.



“The Radiation Oncology: Targeting Cancer campaign aims to dispel myths and provide information for both patients and doctors on radiation therapy and where it can be effectively used.”



 Associate Professor Sandra Turner

A/Prof Sandra Turner is Senior Staff Specialist at the Radiation Oncology Unit, Crown Princess Mary Cancer Centre, Westmead Hospital

It is a resource for both patients and doctors to assist in the understanding of this important treatment.

Oncology Education Evenings

The campaign will also hold a series of information evenings for General Practitioners focusing on common cancer management issues, including the role of radiation therapy in everyday general practice and a tour of the radiation oncology department.

The Oncology Education Evenings aim to demystify radiation therapy, providing useful information for GPs on common scenarios that they might encounter. It also serves to build links between the GPs and the cancer centre.

The first Education Evening was held at the Crown Princess Mary Cancer Centre at Westmead Hospital. Look out for an education evening near you! →

This is largely due to the low profile of radiation therapy – patients aren't aware that radiation therapy may be a treatment option for them, and even many doctors aren't aware of its benefits.

The Radiation Oncology: Targeting Cancer campaign aims to dispel myths and provide information for both patients and doctors on radiation therapy and where it can be effectively used.

The Targeting Cancer campaign is supported by the Royal Australian and New Zealand College of Radiologists, the Australian Institute of Radiographers and the Australasian College of Physical Scientists & Engineers in Medicine.

The Targeting Cancer website

A key part of the campaign is the creation of a Targeting Cancer website with patient and health practitioner resources to provide helpful information about radiation oncology: <http://www.targetingcancer.com.au/>. It provides information about the specialty, the radiation oncology team, frequently asked questions, and can help you identify your nearest treatment centre.

There are personal stories from patients, visually appealing material and videos from patients, doctors involved in treatment and supporters.



→ GP Role in the management of cancer

GPs play a crucial role at every stage in the management of a patient diagnosed with cancer. The trusting relationship that exists between a patient and their GP optimises the delivery of health care – from the time of initial diagnosis to treatment planning, surveillance and transition to survivorship or palliative care.

As a general practitioner, your role may include some or all of the following:

- Initial investigations and diagnosis
- Informing the patient and their family of the diagnosis
- Referral to a Radiation Oncologist
- for an opinion at diagnosis
- Referral to and liaison with other specialists
- Assisting with treatment decisions
- Providing psychological support
- Optimising co-morbidities
- Continuation of preventative care
- On-going monitoring/follow-up
- Recognition and management of cancer-related symptoms
- Referral of patients for radiation therapy for palliation of symptoms such as bone pain
- Recognition of, and referral for, management of cancer-related emergencies
- Recognition and management of acute side effects and rarer long term complications of cancer therapies

- End of life care
- Assisting with the many issues arising for families and carers.

Is radiation therapy indicated for my patient?

Radiation therapy can be utilised across a variety of indications in the treatment of almost all cancers. Depending on the clinical scenario, radiation therapy may have an important role as a:

- definitive treatment (primary/radical)
- adjuvant treatment (post-operatively)
- neo-adjuvant treatment (pre-operatively)
- combined treatment with chemotherapy (chemoradiation) and/or
- palliative treatment

Radiation Therapy Clinical Indication

| Radiation Therapy | Clinical Indication |
|---|---|
| Optimal primary treatment (with or without chemotherapy) | Anal and perianal cancer Certain Hodgkins and non-Hodgkins lymphomas Early laryngeal cancer Nasopharyngeal cancer Non-melanoma skin cancers Un-resectable lung cancer |
| Optional primary treatment (with or without chemotherapy) | Bladder cancer Oesophageal cancer Early head and neck cancer Advanced lung cancer Prostate cancer Cervical cancer |
| Neo-adjuvant (preoperative) treatment | Certain advanced lung cancers Certain advanced rectal cancers Certain sarcomas |
| Adjuvant (postoperative) treatment | Breast conservation in early stage Breast chest wall and lymphatics in advanced stage Endometrial cancer Gastric cancer Gliomas Advanced head and neck cancer Pancreatic cancer Certain advanced rectal cancers Testicular seminoma |
| Palliative treatment | Bone pain Spinal cord compression Haemoptysis Dysphagia Superior vena cava obstruction Brain metastases |

Information from When to Consider Radiation Therapy for your Patient, B. Tisdale²

When should I make an URGENT referral for radiation therapy?

Cancer patients with pain should also be sent promptly for assessment by a Radiation Oncologist, Palliative Care Physician and/or other cancer specialist. Radiation therapy is a simple and effective way to alleviate pain caused by cancer,

particularly in the bones, as well as for many other sites. Short courses of radiation therapy (even a single treatment) have around an 80 per cent chance of reducing, or even eliminating pain altogether.

| Condition | Cause | Signs/Symptoms | Diagnostic Tests | Treatment |
|-----------------------------|---|---|---------------------------|--|
| Spinal cord compression | Spinal column metastasis, local spread from adjacent cancers, intramedullary metastasis | Back pain (early); neurologic deficit (especially if bilateral; sensory and/or motor lower limb deficit; impaired bladder/bowel emptying) | MRI spine | Corticosteroids, radiation therapy, surgery (sometimes), treat underlying malignancy |
| Superior vena cava syndrome | Mediastinal tumours, e.g. lung cancer, enlarged lymph nodes | Neck, facial, periocular swelling; dyspnea; cough; head pressure; hoarseness; nasal congestion; syncope | CT thorax | Corticosteroids, radiation therapy, supportive care, treat underlying malignancy |
| Brain Metastases | Common primary sites: breast, lung, genitourinary, head and neck, melanoma | Headache, cognitive deficits, focal deficits | CT Brain and/or MRI Brain | Steroids; radiation therapy (whole brain versus stereotactic) |

Information from Primary Care of the Patient with Cancer, Smith et. al.¹ and When to Consider Radiation Therapy for your Patient, B. Tisdale²

Referring to a Radiation Oncologist?

The referral pathway for a patient will vary according to each individual situation. Patients can be referred to a Radiation Oncologist by one or more of the following methods:

- Direct GP referral
- Specialist referral (Surgeon, Medical Oncologist, Haematologist, Gynaecology Oncologist, Paediatric Oncologist, Dermatologist, Palliative Care Physician etc.)
- During an inpatient admission
- At a multidisciplinary cancer care team meeting.

Patients are often seen in the first instance by a Surgeon or Medical Oncologist. They may not always be referred to a Radiation Oncologist by these specialists, even in circumstances where radiation therapy offers an equivalent curative treatment option, such as for localised prostate cancer. It is important that as a GP, both you and your patient are informed about the potential role of radiation therapy in your patient's cancer care management. Referring your patient to a Radiation Oncologist may assist your patient and their family in making an informed decision about their cancer treatment by enabling them to fully explore all therapeutic options.