**Study Title:** Trial of supportive care strategies for cancer patients in NSW

**Brief description of the study:** **Purpose:** Patients with advanced cancer experience considerable symptom burden, and high incidences of anxiety, depression and unmet psychosocial needs. Recent research has suggested that feedback of patient reported outcomes to either clinicians or caseworkers, alongside management strategies, may result in improved patient functioning. We have developed two computer assisted intervention models to test this in a randomized controlled trial against usual care: a telephone caseworker model (TCW) and on Oncologist/General Practitioner model (O/GP). Primary endpoints included anxiety, depression, physical and emotional functioning and unmet supportive care needs.

**Patients & Methods:** All patients were surveyed by computer assisted telephone interview (CATI) at three time points: baseline as well as three and six months. Data collected from patient CATIs in either of the supportive care models was used to generate feedback to either the patient’s designated Telephone Caseworker or their nominated Oncologist and GP. Data obtained from patients in the Usual Care model was used to assess the impact of the supportive care models in improving patient supportive care outcomes and did not generate feedback. A total of 356 patients consented to study participation, completed the baseline CATI and were randomized to the usual care, TCW or O/GP groups.

**Results:** TCW participants were significantly more likely than O/GP participants to have had their identified issues of concern discussed and referrals made to address these issues, particularly in relation to psychological needs and anxiety. Furthermore, the TCW intervention was highly acceptable, with most participants reporting that the discussions and referrals were useful to them. Many TCW participants also felt strongly that participation in the study made it easier to discuss their health needs with their other health care providers. However, no overall intervention effect over time was observed in patient self-reported outcomes. For participants in the TCW model only, physical functioning was significantly improved at the third CATI compared to the baseline CATI (p=0.01) and a trend towards fewer unmet supportive care needs was observed at the third CATI (p=0.07).

**Conclusions:** The Telephone Caseworkers appear to not only provide an additional level of support for people with advanced cancer, but they may also facilitate patients discussing issues with other members of their health care team. The TCW model holds some promise in improving patient physical functioning and addressing unmet needs, and could be implemented via existing national cancer helpline services.

**Study Methodology:** (Please mark with an x which type of study methodology)

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**Project details:**

Funding source (Optional): National Health and Medical Research Council (Palliative Care Research Grant) and the Medical Benefits Fund of Australia.
Has the study received ethics approval? | Yes | No | Not applicable
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Project starting date: | August 2003 |
Project completion date: | March 2007 |
Multi site: | Yes | No | Not applicable

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Investigator D (Name) | Christophe lecathelinais
Investigator E (Name) |

**Associated publications / reports:**

- The results have been reported to the funding body:

- Results have also been published in the following abstracts:
  2. Girgis A, Stacey F, Breen S, Neil A. Feedback of patient reported outcomes: Is it better to tell a caseworker or the patient’s oncologist and general practitioner? Psycho-oncology 17:S176, 2008 (abstr 47L-1)

**Topics (Admin only)** Patients, Cancer and cancer services, Service processes