Integrative supportive care to patients with breast cancer receiving adjuvant chemotherapy

Integrative Oncology program
The Oncology Service
Lin Medical Center
Clalit Health Services, Haifa, Israel
Concepts of care

Patient with breast cancer

Battle

Survival time

Anti-cancer

Disease-centered

Mindfulness

Quality of life

Compassion

Patient-centered

Mindfulness

Compassion

Quality of
<table>
<thead>
<tr>
<th></th>
<th>Breast N=166</th>
<th>GYN N=85</th>
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</thead>
<tbody>
<tr>
<td>Age</td>
<td>61</td>
<td>62.7%</td>
</tr>
<tr>
<td>Median (Years)</td>
<td>44%</td>
<td>62%</td>
</tr>
<tr>
<td>Education</td>
<td>55</td>
<td>68%</td>
</tr>
<tr>
<td>Academic (%)</td>
<td></td>
<td>p=0.05</td>
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<tr>
<td>Religion</td>
<td>83.6</td>
<td>91.5</td>
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<tr>
<td>Jewish (%)</td>
<td></td>
<td>p&gt;0.05</td>
</tr>
<tr>
<td>Religiosity</td>
<td>57.3</td>
<td>63.5</td>
</tr>
<tr>
<td>Secular (%)</td>
<td></td>
<td>p&gt;0.05</td>
</tr>
<tr>
<td>Spirituality</td>
<td>35.0</td>
<td>30.3</td>
</tr>
<tr>
<td>High level (%)</td>
<td></td>
<td>p&gt;0.05</td>
</tr>
<tr>
<td>Tx status</td>
<td>57.9</td>
<td>70.8</td>
</tr>
<tr>
<td>During chemo (%)</td>
<td></td>
<td>p&gt;0.05</td>
</tr>
<tr>
<td>Recurrence of disease</td>
<td>21.5</td>
<td>47.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>p&lt;0.001</td>
</tr>
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</table>
CAM modalities use for cancer care.
I consider using... in an integrative setting

Potential to significantly modulate the activity of cytochrome p450 isozymes & drug transporter P-glycoprotein
1,027 patients attending ambulatory and inpatient hematology or oncology facilities at 3 hospitals

Recent CAM use was associated with

Helplessness
Needs unmet by conventional medicine
Incomplete trust in the doctor
CAM practitioners were rated more highly:

“He/she provides emotional support”

“He/she listens carefully to what I say”

Doctors were rated more highly:

“I can trust him/her to tell the truth”

“He/she is up-to-date in knowledge”
Cancer-related CIM use in the Middle-East

Turkey: 40-70%

Iran: 35%

Jordan: 35%

Israel: 50%
Integrative Oncology Program
The Oncology Service
Lin Medical Center

Dual practitioners: Social worker
Occupational therapist
Nurse
Clinical dietician
Physiotherapist

IP's
Herbal med
TCM
Family med
Homeopathy
Anthroposophy

CIM therapists: TCM Manual healing
Spiritual supporter
Music therapist
Integrative care

Patients following chemotherapy

Patients with adjuvant/palliative chemotherapy
CHS Integrative Oncology Program

Leading referral indications

Nutrition – G.I.
Fatigue
Pain neuropathy
Emotional-spiritual concerns

Women 75%

Referral to IM consultation

1/3

Localized 57%
Metastatic 43%
Recurrent 24%

Chemo
Adjuvant 55%
Neo-adjuv 17%
Palliative 28%

36%
39%
25%
17%
28%
Suzan, a 56-year-old woman, m+3, teacher

Breast cancer stage II
Lumpectomy - Axillary dissection
Adjuvant chemotherapy AC
Supportive care: Pramin Setron (ondansetron)

Seeking nausea alleviation

Post 2nd AC
Supportive care: Emend (aprepitant)

Quality Standardization
Nausea Fatigue Safety Side-effects
Herb-drug interaction

Efficacy EBM
Iran: Panahi et al. Non-blinded RCT

N=100 women with advanced breast cancer

Chemo: docetaxel, epirubicin, cyclophosphamide

Results: ↓ nausea 6 to 24 hours post-chemo

Integr Cancer Ther 2012

Warfarin-related bleeding?

Dasatinib (Sprycel), Tositumomab (Bexxar)

Ibritumomab (Zevalin)

Hypoglycemia?

Rituximab (MabThera)

Drug level?

Cyclosporine

Dosage: 0.5-3 gr/d

Standardization: Gingerol

Efficacy

Safety

= EBM

Suzan a 56-year-old woman, m+3, teacher

Quality
Acupuncture and CINV

South Korea  Suh. RCT N=120
Breast CA  Chemo: 2nd adjuvant cycle
Tx: P6 acupressure & nurse counseling
Results: Improved nausea day 2-5
*Support Care Cancer* 2012

USA Dibble et al. RCT N=160
Breast CA  Chemo: 2nd /3rd adjuvant cycle
Tx: P6 acupressure
Results: Improved delayed CINV
*Oncol Nurs Forum* 2007

China Sima et al. Cross-controlled
N=66  Chemo: Cisplatin-based
Tx: Acupuncture: ST 36, P6, SP 4
auricular point Wei (stomach)
Results: Improved nausea day 2-5
*Zhongguo Zhen Jiu* 2009

Turkey Genç et al. Single-blinded RCT
N=120 women with breast/GYN/lung cancer
Chemo: doxorubicin/cisplatin-based
Tx: acupressure wristband
Results: no added effect
*Support Care Cancer* 2012
**IM in treatment of CINV** chemotherapy-induced nausea & vomiting

**India** Raghavendra et al. RCT N=62 early operable breast cancer pts. during chemo Tx: Supervised & home practice of yoga sessions lasting for 60 min daily

Results: Improved post-chemotherapy-induced nausea frequency & anticipatory nausea intensity

**South Yoo** et al. RCT N=60 pts. 6 cycles of adjuvant chemotherapy – Breast CA Tx: Guided imagery+PMRT vs. control

Results: Lesser anticipatory nausea and vomiting & postchemotherapy nausea and vomiting Improved anxiety depression hostility

*Eur J Cancer Care* 2007

*Eur J Cancer Care* 2007
CRF – Chemotherapy related fatigue

**UK**  Molassiotis et al  RCT  N=302  Breast CA
Tx: Acupuncture 1/wX6 vs. usual care group
Results: Improved Fatigue depression anxiety QOL
*J Clin Oncol* 2012

**Germany**  Listing et al  RCT  N=86  early stage breast CA
Tx: 30-min back and head-neck massage 2/wX5
Results: ↓ physical discomfort & fatigue
↑ mood disturbances  *Psychooncology* 2009

**Israel**  Bar-Sela et al
Anthroposophic art therapy
Improved fatigue depression
*Psychooncology* 2007

**Taiwan**  Wen-Hung Kuo et al
Chinese herbs: Tien-Hsien
Improved fatigue QOL in patients with metastatic breast CA
*Evidence-based CAM* 2007

Astragalus membranaceus
Taraxacum Mongolicum
Atractylodes macrocephala
**IM in treatment of emotional & spiritual distress**

**UK**  Hoffman et al.  RCT  N=229 pts.  
after surgery/chemo/radiotherapy  
for stage 0 to III breast cancer  
Tx:  8-week **MBSR** program  
mindfulness-based stress reduction

**USA**  Wyatt et al.  RCT  N=385  
advanced-stage breast cancer  
receiving chemo/hormonal therapy  
Tx:  Reflexology vs. lay foot  
manipulation vs. conventional care  
Results:

**J Clin Oncol 2012**
USA Butler et al. RCT N=124 women with metastatic breast cancer
Tx: Group therapy with hypnosis over 12 months
Results: Less increase in the intensity of pain and suffering over time
Health Psychol 2009

USA Crew et al. RCT N=51 pts. women with early-stage BC
Tx: Acupuncture 2/wX6 vs. sham
Results: Decreased pain severity, pain-related interference
J Clin Oncol 2010
**USA** Carson et al. RCT N=37 pts. breast cancer survivors
Tx: 8-week Yoga of Awareness vs. wait-list
Results: Improved hot-flash frequency & severity, joint pain, fatigue, sleep
*Support Care Cancer* 2009

**USA** Elkins et al. RCT N=51 pts. breast cancer survivors with hot flashes
Tx: *Hypnosis* – 5 weekly sessions

**USA** Walker et al. RCT N=50 pts. hormone receptor-positive breast cancer
tx: 12 weeks of acupuncture or venlafaxine (*Effexor*)
Results: Similar efficacy in decreasing hot flashes, depression, QOL. Acupuncture was better in post-treatment effects, side-effects, & increased sex drive
*J Clin Oncol* 2010

**IM in treatment of hot flashes** vasomotor symptoms
IM in treatment of hematologic toxicity

**Israel** Yaal-Hahoshen et al.  RCT N=65 pts. with localized breast cancer receiving anthracycline- and taxane-based chemo

**Oncologist** 2011
Concepts of care

Breast patient

Battle

Survival time

Anti-cancer Disease-centered Patient with breast cancer Mindfulness Compassion Patient-centered Survival time Quality of life

Il tutto è maggiore della somma delle sue parti