

# Survey Highlights Breast Ca Survivor Care Issues

BY RICHARD HYER

FROM THE ANNUAL MEETING OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY

CHICAGO – Primary care physicians and oncologists expressed their concerns about continuity and coordination of care for cancer survivors in a survey of more than 2,000 physicians.

The degree of concern about different survivor care issues varied by specialty.

For example, primary care physicians were more likely than were oncologists to be concerned about malpractice suits and about a lack of adequate training.

The Survey of Physician Attitudes Regarding the Care of Cancer Survivors (SPARCCS) is the first nationwide study to focus on physician beliefs, knowledge, attitudes and practices regarding breast and colorectal cancer survivorship care.

“Increased coordination of care is needed to ensure continuity of care,” said lead author Katherine S. Virgo, Ph.D., director of health services research at the American Cancer Society, which cosponsored the study with the National Cancer Institute.

“Yet barriers to achieving care remain in our fragmented health care system.”

A total of 1,072 primary care physicians (internists, family

physicians, and ob.gyns.) and 1,130 medical oncologists were asked about their perceptions of the barriers to care for survivors of breast and colorectal cancer.

The survey asked about problems encountered when caring for breast or colon cancer survivors who had completed active treatment at least 5 years earlier. Five problem areas were identified in the survey: increased testing as malpractice protection; uncertainty regarding general preventive health care responsibility; duplicated care; missed care; and lack of adequate knowledge or training.

“Bivariate results show that the physicians’ specialty was significantly associated with all five barriers,” Dr. Virgo said.

Almost 60% of oncologists said malpractice was never or rarely a barrier, versus almost 50% of primary care physicians.

More primary care physicians said fear of malpractice was sometimes (40% vs 31%) or often/always (16% vs. 10%) a barrier, (*P* less than .001 in all cases).

As for missed care, 43% of primary care physicians said it was never/rarely an issue, vs 40% of oncologists. More oncologists said it was sometimes an issue (48% vs. 42%), but more

primary care physicians said it was often or always (15% vs. 12%) an issue, (*P* less than .0047 in all cases).

“PCPs were also significantly more likely to be concerned about lacking adequate training to manage patient problems,” said Dr. Virgo.

Indeed, almost 90% of oncologists said lack of training was never or rarely an issue, versus 54% of primary care physicians (*P* less than .0001 in all cases), she said. ■



**‘Increased coordination of care is needed to ensure continuity of care.’**

DR. VIRGO

VITALS

**Major Finding:** Medical oncologists and primary care physicians perceive different barriers to care when dealing with survivors of breast and colon cancer. Barriers include inadequate physician training, the practice of defensive medicine (against malpractice), and confusion about responsibility and delivery of care. More education and survivorship care planning are needed.

**Data Source:** Survey study of 2,202 physicians (from an AMA cohort of 5,275).

**Disclosures:** Cosponsored by the National Cancer Institute and the American Cancer Society. Dr. Virgo reported no relevant financial conflicts.

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