

#### This session will discuss:

- Unique issues related to survivorship for transplant patients beyond GVHD.
- Include both adult and pediatric survivorship issues
- Suggestions for good health behavior and support resources.

#### Objectives

- Explain unique survivorship issues that transplant patients may experience.
- Describe support materials that will assist transplant patients through the survivorship continuum.

#### Goal of Stem Cell Transplantation

- Disease cure
  - · Long term remission
- Full restoration of health and quality of life

Tichelli, 2008

Survival is improving and patients are experienceing better quality of life during treatment and in the early recovery period.

- Expanding pool of stem cell sources
- More effective, less toxic regimens
- New supportive care drugs
- Maintenance therapy

#### Cause of Death

 Disease relapse or progression is the most consistent variable that limits long term survival in the stem cell transplant recipient, both autologous and allogeneic.

Majhail, 2008

#### Cancer survivor

- One who has been diagnosed with cancer from the time of diagnosis through the balance of that person's life
- The National Coalition of Cancer Survivors (2009) definition includes
- the patient family,
- caregivers and
- friends

#### Stem Cell Transplant Survivor

- When providing survivorship care the definition may be:
- One who has lived through stem cell transplant
  - From the end of active treatment and acute recovery
  - through the evidence of disease relapse, progression or death.

#### Stem Cell Transplant Survivorship

- Encompasses all aspects of the survivors life experience
  - Physical
  - Functional
  - Developmental
  - Cognitive
  - Psycho-emotional
  - Social
  - Spiritual

#### The Goals of Survivorship Care

- > provide education for empowerment,
- promote wellness,
- identify problems early,
- intervene quickly, and
- provide communication and direction to community health care providers

## Long term effect

 Disease or treatment related adverse effect which is active during treatment and continues beyond the end of treatment for months to years.

#### Late effect

 Disease or treatment related influence on the patients health/life experience months to years after the completion of treatment.

#### Labels in transition

- ▶ Long term follow up clinic/program
- Late effects clinic/program
- Survivorship clinic/program
- All of these programs generally have the same goal.

# Risk Factors for Development of Long-Term or Late effects

- Age at diagnosis/treatment
- Comorbid conditions
- Past treament(s)
  - Consider previous cancers
- Graft versus host disease

#### Age at diagnosis and treatment

- important in children and adolescents because of developing organs in the growth phase vulnerable to damaging effects of treatments
- · developing brains, skeletons and sex organs
- important to remember developmental stage for both the pediatric and adult survivor
- · Schwartz, 2007

#### Comorbid conditions

- Diabetes
- · Cardiovascular disease
- · Pulmonary disease
- Depression

# Treatment history

- Surgery
- Chemotherapy
- Intrathecal chemotherapy
- Radiation
- · cranial radiation PRIOR to transplant conditioning
- chest
- Dose, duration and site of treament
- Take into account past cancers and the impact of those treatments

#### **Development of GvHD**

- Drugs used to treat graft versus host disease and the myriad of adverse effects
  - · Infectious complications
  - Microvascular damage
  - Renal function changes
  - · Steroid myopathy
- Site/extent of GvHD

Autologous versus allogeneic

# Survivorship Care

- Surveillance
- Risk reduction and early detection
- Monitoring for late effects
- Quality of Life

# Survivorship Care

- Surveillance:
  - Disease
  - Graft versus Host Disease
  - Immune Status

## Survivorship Care

- Risk Reduction and Early Detection
  - Wellness promotion
  - · Weight control, Nutrition, Exercise
  - · Sun protection
  - · Meticulous self exams: oral and skin
  - $\boldsymbol{\cdot}$  Aggressive management of comorbid conditions,
  - · ie DM, HTN, Dyslipidemia, B/P control
  - Re-vaccination
  - · Risk factor and age related screening
  - Cancer
  - · Blood pressure
  - Lipid

· Domino 2009

## Survivorship Care

Monitoring for late effects

# Hematologic

- Hematologic
- · Secondary malignancy:
  - · myelodysplasia, Acute myeloid leukemia
  - $\cdot$  B cell lymphoproliferative disorder (PTLD)
- · Iron overload

Demarosi, 2005; Majhail, 2008; Ortega, 2005
 Argyropoulou, 2007; Rizzo, 2006

## Other secondary malignancies

- Solid tumors
  - Squamous cell carcinoma of oral tissues, head, neck and vulva
  - Thyroid cancers
- Melanoma and non melanoma skin cancers
- Breast cancer
- CNS tumors

Demarosi, 2005; Majhail, 2008; Ortega, 2005; Rizzo, 2006

## Neurologic

- Neurologic
- cognitive
- · memory, concentration/focus, word finding
- neuropathy
- pain
- hearing

## **Immunologic**

Late Infection

Robin, 2007; Socie, 1999

#### Endocrine

- Endocrine
  - Growth and development (pediatric)
  - Skeletal linear growth and body composition (growth hormone related)
  - Organ

Gonadal failure/Early Ovarian failure/premature menopause Infertility

Thyroid disease: hypothyroidism

Diabetes

Bone mineral changes Osteopenia, osteoporosis, avascular necrosis pathologic fracture

· Vance, 1999; Socie, 2008

## Ophthalmologic

- Dry Eyes
- · Sicca Syndrome
- Cataract
- Retinopathy

Ogawa, 2002; Leite, 2006
 Socie, 2003

#### Oral/Dental

- Oral/Dental
  - Sicca syndrome
  - Infectious: viral, fungal, bacterial
  - Dental caries
  - ▶ Tooth development in pediatric survivors
    - > Agenesis: lack of development of permanent teeth
    - Microdontia: reduced size of permanent teeth
  - ▶ Taste alterations

▶ Epstein, 2002; Curtis, 1994; Holtta, 2005

#### Cardiovascular

- Stroke
- Coronary Artery Disease
- Peripheral Artery Disease
  - Hypertension
  - Dyslipidemia
  - Metabolic syndrome
- Cardiomyopathy

Tichelli, 2007; Tichelli, 2008; Couriel, 2005; Biederman, 2002

## **Pulmonary**

- Pulmonary
- Obstructive
- Restrictive
- · Diffusion disorders

• Socie, 2003; Bunin, 2007

#### Gastrointestinal

- hepatitis,
- cholestasis,
- gastroparesis,
- failure to thrive,
- weight gain

#### Renal

- Donal
  - · chronic kidney disease

· Hingorani, 2006; Kersting, 2007; Rizzo, 2006

# Genitourinary

- hemorrhagic cystitis,
- urinary urgency
- erectile dysfunction

## Muscular/joint

- atrophy
- pain
- joint contractures

Syrjala, 2010

#### Integumentary

- Integumentary
- Skin changes and lesions
- · Hair thinning and poor regrowth
- · Hair pattern distribution changes
- Nail growth pattern changes

#### Survivorship Care

- Quality of Life
  - Psychosocial screening
  - · Work/School
  - Financial
  - · Social integration
  - Sexuality
    - Schulmeister, 2005. Worel, 2002. Mosher, 2008. Tierney, 2004

#### Fatigue

- Sleep disorders
- Body image disturbance
- Sexuality/sexual function impairments
  - Poor libido
- $_{\circ}$  Vaginal dryness, Loss of pleasure, pain,
- Erectile dysfunction
- Anxiety disorders, depression
- Post traumatic stress disorder
- Post traumatic growth
  - Socie, 2003. Chatterjee, 2000, Syrjala, 2009.

#### An interesting concept

- Post traumatic growth
- The concept of thriving after stem cell transplant
  - Bishop, M.M. and Wingard, J.R. (2004). Thriving after hematopoietic stem cell transplant: a focus on positive changes in quality of life. Expert Reviews in Pharmacoeconomics Outcome Researdh, 4(1), 111– 123.
  - Lee, S.J. et al. 2003. Optimistic expectations and survival after hematopoietic stem cell transplantation.
     Biology of Blood and Marrow Transplantation, 39, 595– 603.

# The importance of survivorship assessment

- Review systems
  - Zero in on the negative and the positive responses
- Look at some "snapshots" of life and living
- Tell me about your usual day...
- Tell me some of the things you have been doing for fun
- How are those kids/pets/grandkids?
- · What activities do you do with the...

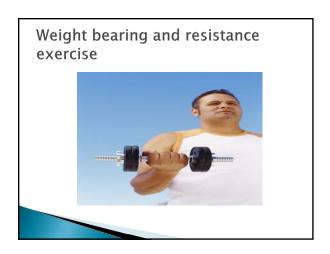
#### **Immersion Tips**

- Remember that every moment you are spending with the survivor is an "assessment"
- Discuss the positive first
- Help the survivor get some perspective from an outside observer (you), reading materials
- Ask what their priority "issues" when looking at review of systems.
  - Teach, discuss, suggest, counsel, provide written materials, websites etc.
- · Help with goal setting

























#### Know your resources

- www.bmtinfonet.org
- www.marrow.org
- www.nbmtlink.org
- www.supersibs.org
- www.cancercare.org
- www.stupidcancer.com
- http://www.planetcancer.org/
- www.fertilehope.org
- www.oncofertility.northwestern.edu/
- www.resolve.org/
- www.lls.org

- www.cancer.org
- http://www.cancer.gov/
- http://www.vitaloptions.org/
- http://www.youngsurvival.org/
- Books
  - Woman Cancer Sex Anne Katz
  - Man Cancer Sex

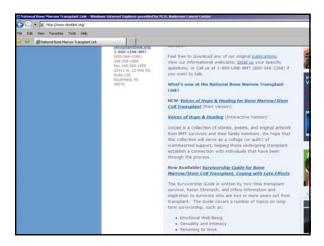






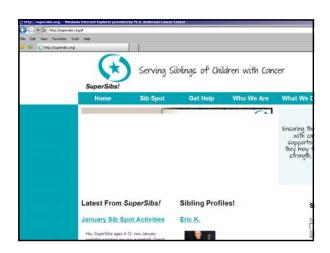










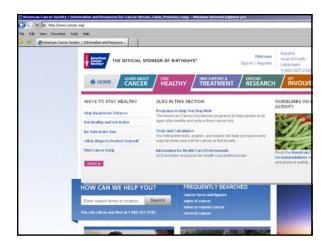


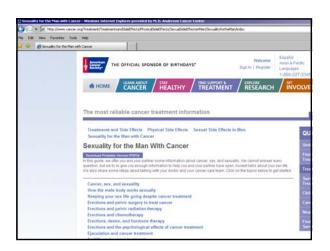




















## Conclusions

- Assess each survivor considering all aspects of their life
- Encourage aggressive management of comorbid conditions
- Make a plan and include age/risk related screening
- Use every opportunity to teach, teach, teach
  Use those teachable moments!
- Survivorship care is done across a life continuum, it does not end at day xxx...