

Dansk kræftforskningsdage 2022

Rekruttering og fastholdelse af deltagere i klinisk forskning - Erfaringer fra Models of Cancer Care

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NO CONFLICT OF INTEREST

MODELS OF CANCER CARE
RIGSHOSPITALET



Kræftens Bekæmpelse

novo nordisk fonden



MODELS OF CANCER CARE – A COMPREHENSIVE SYMPTOM SCIENCE RESEARCH PROGRAM

Siden 2017

Center for Kræft og Organsygdomme

<https://www.rigshospitalet.dk/mcc>

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Mette Schaufuss Engedal (1)





Models of Cancer Care – cancer symptom research

To develop knowledge and new strategies for management of early and late cancer and treatment-related symptoms in partnership with patients and families to achieve better quality of life during and after cancer treatment

Models of Cancer Care Programs

Project 1: PAS Patient Ambassador
Kristina Holmegaard Nørskov PhD

Project 2: PACE-Mobil Engaging
randomized controlled trial
Marta Kramer Mikkelsen PhD

Project 3: CARES Addressing Cancer
family nursing and network consultation
Karin Piil PhD

Project 4: Neat-decision Needs assessment
and Neck Cancer Rehabilitation – a randomized
Annelise Mortensen PhD

Project 5: FAMCARE Family Ambassador
Iben Husted Nielsen PhD student

Project 6: PACE-AL Patient Activation through
Mary Jarden PhD

Project 7 and Project 8: Simply Care e-PRO system
during follow-up Care – a feasibility trial & a randomized
Maja Pedersen PhD student

Projekt 9: INTACTatHome Anti-Cancer Treatment
Louise Ingerslev Roug PhD student

Projekt 10: Connect trial ePRO-GynOncology
Mille Guldager Christiansen PhD student

Projekt 11: SEX_HEM Sexual Health in HSCT
Kristina Holmegaard Nørskov PhD postdoc

Projekt 12: Stay strong Sarcopenia and muscle training in lymphoma
Charlotte Grønset PhD student

Projekt 13: Believe@BC—better life after breast cancer
Trine Lund-Jacobsen PhD student

Project 14: FAM-PAC Family-focused care in patients with pancreatic cancer and relatives
Marta Kramer Mikkelsen PhD postdoc

Project 15: Support Zone Patient and family caregiver support zone in hematology
Iben Husted Nielsen PhD postdoc

Project 16: ACT Compassionate Communication at end of life in hematology
Cæcilie Borregaard Myrhøj PhD student

Project 17: Symptoms and late effects in patients after HSCT
Mette Schaufuss Engedal MSch

Project 18: Symptom Database Anders Tolver PhD, Giulia Locatelli PhD student, Karin Piil
with Hematological Malignancy

Participants and Interventions

Patients (diagnoses)

Hematological malignancies (adults (9) & children (1))

Pancreatic, biliary tract and non-small cell lung cancer (>65) (2)

High grade glioma (1)

Head and neck cancers (1)

Ovarian (1) and breast cancer (1)

Family Caregivers

High grade glioma (1)

Hematological malignancies (4)

() number of projects

Non- pharmacologica l interventions

Exercise and strength training & consultations (3)

Family and network counseling (2)

Diagnosis-specific IT-based decision tool (1)

ePRO in patient consultations (2)

APP and symptom tracker (1)

Peer-to-peer ambassador support in patients and caregivers (2)

Home chemotherapy in children (1)

Sexual health intervention (1)

Compassionate communication (1)

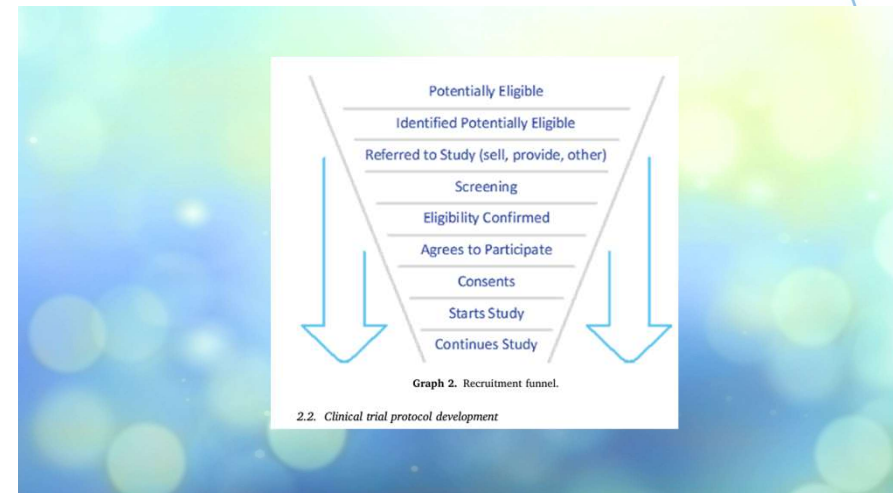
Patient and caregiver support zone (1)

Late effects clinic (1)

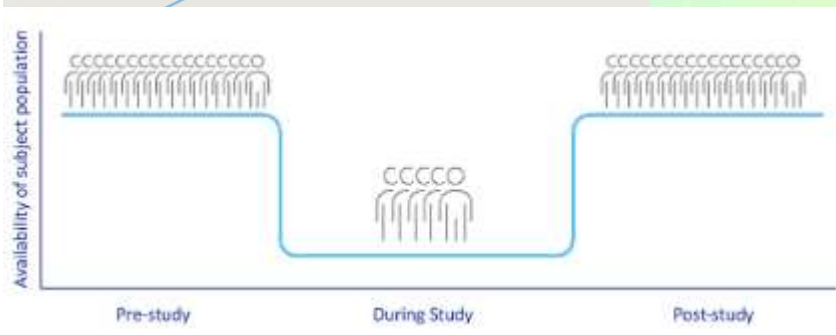
() number of projects

RECRUITMENT AND RETENTION

MODELS OF CANCER CARE



Bogin V. Lasagna's law: A dish best served early. Contemporary Clinical Trials-Communications Vol 22, April 2022



”THE INCIDENCE OF PATIENT AVAILABILITY SHARPLY DECREASES WHEN A CLINICAL TRIAL BEGINS AND RETURNS TO ITS ORIGINAL LEVEL AS SOON AS THE TRIAL IS COMPLETE”

LASAGNE’S LAW 1970

Bogin V. Lasagna’s law: A dish best served early. Contemporary Clinical Trials Communications Vol.22, April 2022

CHALLENGES

MODELS OF CANCER CARE



STRATEGIES

MODELS OF CANCER CARE



Sum up

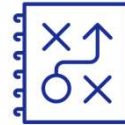
ACHIEVING BETTER RECRUITMENT AND RETENTION



**Bottlenecks
Roadblocks**



Monitoring



Strategies



**Engaging
people**

MODELS OF
CANCER CARE
– A COMPREHENSIVE
SYMPTOM SCIENCE
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<https://www.rigshospitalet.dk/mcc>



THANK YOU

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