

# Recommendations for the Development of Cancer After-Care



**TYPE  
STATUS**

CanCon Guide that consists of four recommendations for the development of cancer after-care  
Published document

**LAST  
UPDATE**

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**EUROPEAN UNION**  
Cancer after care

## PROBLEM & OBJECTIVE

**PROBLEM** Lack of evidence or organization

### OBJECTIVE

Recommendations for easier development of cancer after-care to be used by guideline developers

## KEY COMPONENTS / STEPS

- Manage cancer as a continuous process where patients seamlessly pass different phases and stages. It is important to:
  - reflect the current level of knowledge in cancer treatment but also the specifics of the country's health care system and its organization;
  - secure the necessary resources, human, financial, equipment and medicines, at all stages of the pathway;
  - develop the segment of the pathway for the cancer patients' after-care in close collaboration between specialized oncological care and PCPs;
  - organize an information exchange platform that enables all providers involved in cancer patient care to share the data and files relevant to the patient.
- Organize the education and training for PCPs in order to strengthen their capacity to cope with the increasing population of cancer patients in after-care.
- Develop guidelines and guidance, at least for each of the most frequent cancers, on what to include and not to include in the long-term monitoring of patients. This should include the following segments:
  - recurrence detection, indicating the best frequency to perform diagnostic tests to detect cancer recurrence, the description of the signs and risk of recurrence in a given category of patients and, defining and elaborating for the patients' after-care in terms of the responsibilities of GPs;
  - long-term effects of cancer, where there should be more information on the potential complications of individual types and locations of cancer and how these should be prevented and treated; furthermore, more knowledge and recommendations on psychological support for cancer survivors are warranted;
  - recurrence prevention, where there should be more research into the value of recurrence prevention and specific recommendations for cancer survivors.
- Coordinate services between the health and other sectors for many patients not only for those who become disabled or are terminally ill.

## KEY CONTEXTUAL FACTORS

- Cancer after-care is the period when care is provided to patients who are in remission and have completed the planned disease-specific oncological care. They are monitored for recurrence and late effects of treatment but can be generally classified as cured. The modalities of organization of cancer after-care differ largely across EU countries and may be through arrangements in hospitals and their outpatient departments, through community care providers or in a combination of the two. It is important that quality cancer after-care is developed in all EU countries.

## MAIN IMPACTS / ADDED VALUE

- These recommendations aim to shed light on the vital importance of the preparation, adoption and implementation of quality cancer after-care guidelines in European countries. They give policy-makers/guideline developers the opportunity to discuss different after-care topic actions, tests and awareness, sometimes supplied with frequencies that could be included into their own guidelines on after-care for a specific tumor type. It also shows that preparing a comprehensive/integrated patient pathway is important for several reasons (seamless care is needed and expected; patient information is crucial; guideline implementation is needed to structure care around the evidence-based milestones).

## LESSONS LEARNED

- The presented recommendations are a deliverable of the CanCon Joint Action Community-level cancer care Work Package (WP). The results of the work of the WP are published in the Chapter »EU Policy Recommendations for Quality improvement in Cancer After-Care at the Community Level« in the book entitled European Guide on Quality Improvement in Comprehensive Cancer Control. The content presents:
  - an inventory of what information on after-care is available for GPs and
  - an overview of national and regional practices on how the phase of cancer after-care is organized in five countries: Bulgaria, Denmark, the Netherlands, Norway and Slovenia.

## CONTACT

National Institute of Public Health  
Center for Health Care  
Prof. Tit Albreht  
[tit.albreht@nijz.si](mailto:tit.albreht@nijz.si)

## REFERENCES & DOCUMENTATION

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