



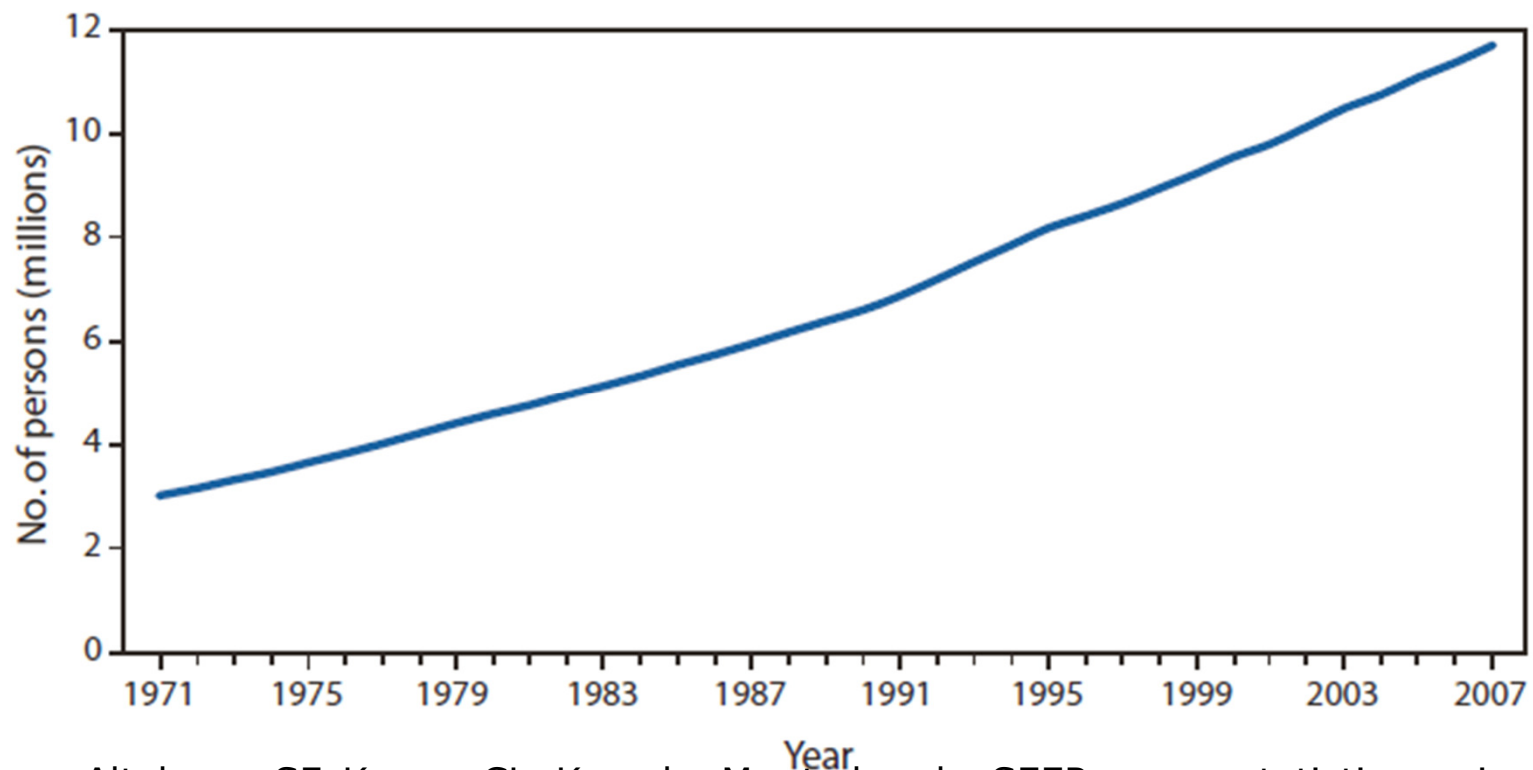
---

# Cancer Survivorship and the Legislative Agenda

**(Holistic Approaches to Patient  
Care and Treatment)**

# Cancer Survivorship Trends

**Estimated number of living persons ever diagnosed with cancer  
– United States, January 1, 1971 to January 1, 2007**



Source: Altekruse SF, Kosary CL, Krapcho M, et al., eds. SEER cancer statistics review, 1975--2007. Bethesda, MD: National Cancer Institute; 2010 (based on November 2009 data submission). Available at [http://seer.cancer.gov/csr/1975\\_2007](http://seer.cancer.gov/csr/1975_2007).



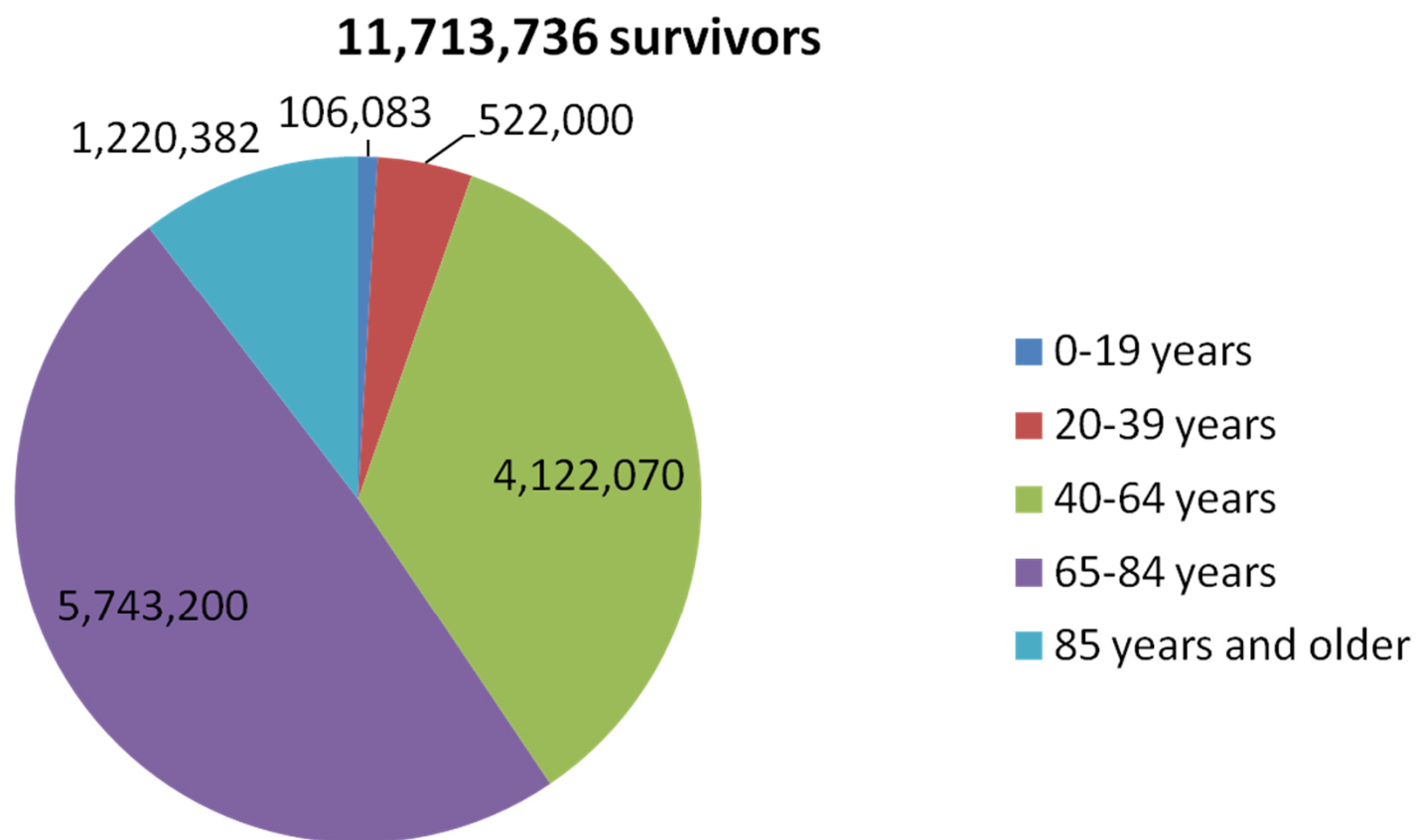
# Thinking about survivorship

---

- Who are the survivors?
- What are their health problems?
- What are their long-term needs?
- What are the policy options that are best able to support survivors?

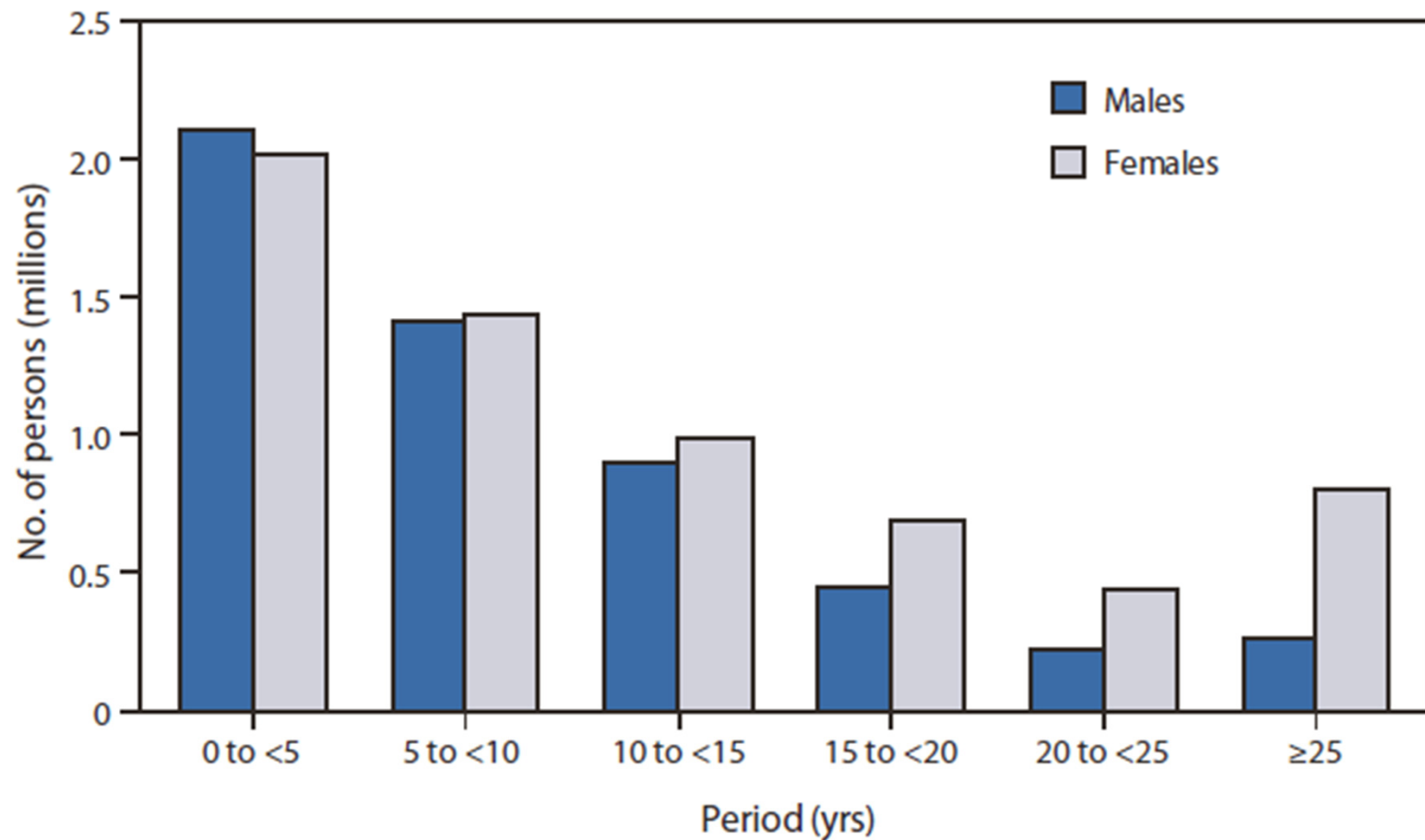
# Who are the cancer survivors?

---



Cancer Survivors—United States, 2007. MMWR 60(09):269-272. 2011

# How long have they survived?



Cancer Survivors—United States, 2007. MMWR 60(09):269-272. 2011

# What cancers did they have?

---

## **Overall**

- Female Breast—22.1%
- Prostate—19.4%
- Colorectal—9.5%
- Melanoma—6.8%

## **40-64 year olds**

- Female Breast—25.3%
- Prostate—11.2%
- Melanoma—9.5%
- Colorectal—6.6%
- Thyroid 6.1%

# What are their health problems?

---

- Cancer recurrence and new primaries
- Other problems related to the thing that caused the cancer
- Other problems related to the treatment
- Problems unrelated to the cancer or its treatment

# Health Problems related to cancers and their causes

---

- Environmental exposure
  - Tobacco
  - Occupational exposures
- Genetic risk
  - BRCA 1 & 2 associated with Breast and Ovarian cancers, maybe also with other cancers including prostate and pancreatic cancer.
  - Other mutations not well understood may impact DNA repair

# Problems related to cancer treatment

---

- **Main approaches to cancer treatment**
  - Surgery
  - Radiation
  - Chemotherapy
  - Others (hormonal therapy, immunotherapy, etc)
- **Factors determining which approach is used**
  - Stage at diagnosis (how big the tumor is and how far it has spread throughout the body)
  - Age at diagnosis

# Health Problems Experienced by cancer survivors related to treatments

---

Not well understood, but include:

- Fatigue
- Mental health issues
- Lymphedema
- Incontinence and impotence
- Cardiac problems
- Osteoporosis and bone damage
- Early menopause
- Cognitive problems
- Infertility
- Nerve damage

\*\*\* WE DO NOT KNOW THE PERCENTAGE OF SURVIVORS EXPERIENCING COMPLICATIONS DUE TO THEIR CANCER OR ITS TREATMENT\*\*\*

# Unrelated to the cancer or its treatment

---

- **Lightning can strike twice**
  - Some percentage of cancer survivors will experience a second cancer due to bad luck alone
  - In many cases, these second cancers are found at earlier stages than usual

# Focus of 'clinical' efforts

---

- **Promote healthy lifestyles**
  - Weight loss
  - Diet
  - Smoking
- **Supportive Care**
  - Hospice, home health care
- **Chemoprevention**
  - E.g., tamoxifen
- **Prevention and early detection**
  - Fear and delayed follow-up of symptoms

# Other problems

---

- **Financial**

Survivors of childhood cancers have lower incomes than their siblings

Lost income

Copayments, insurance deductibles

- **Health insurance**

Ability to get work

Job lock

- **Time from work, return to work or not**

# **Federal Legislative Approaches to meeting the needs of survivors**

---

- Family and Medical Leave Act
- Americans with Disabilities Act
- Accountable Care Act
- Breast and Cervical Cancer Early Detection Program
- Medicare and Part D Medicare
- Funding of research

# State Legislative approaches to meeting the needs of survivors

---

- **Access issues**

  - Certificate of need issues

- **Data privacy/access issues**

- **Medicaid**

- **Funding of education programs**

- **Medicaid**

- **Paid sick leave/short-term disability**

- **Insurance mandates**

- **Oral chemotherapy bills**

  - Should copayments and deductibles categorize them with oral medications or with chemotherapies?

# Cautionary notes

---

- **Don't get ahead of the science--Insurance mandates should not be adopted until the scientific evidence is complete**
  - In 2002, it was reported 11 states had mandates requiring insurers cover BMT for breast cancer. The clinical trials data summarized 3 years later showed no benefit.
  - There is an important distinction between cancer-specific and all-cause mortality.
- **Cancer patients are diverse and may not be that different than other people with chronic diseases.**

Is a cancer-specific approach always needed?



MASONIC CANCER

RESEARCH BUILDING

**Masonic Cancer Center**

**UNIVERSITY OF MINNESOTA**



A Comprehensive Cancer  
Center Designated by the  
National Cancer Institute