

IMPROVING CARE OF EARLY BREAST CANCER (EBC) PATIENTS IN EUROPE

Investigators
Meeting

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CarEoTT- Care improvement for early breast cancer patients treated with oral tumor therapy

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1. Project participants

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Project participants

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2. Project timeline

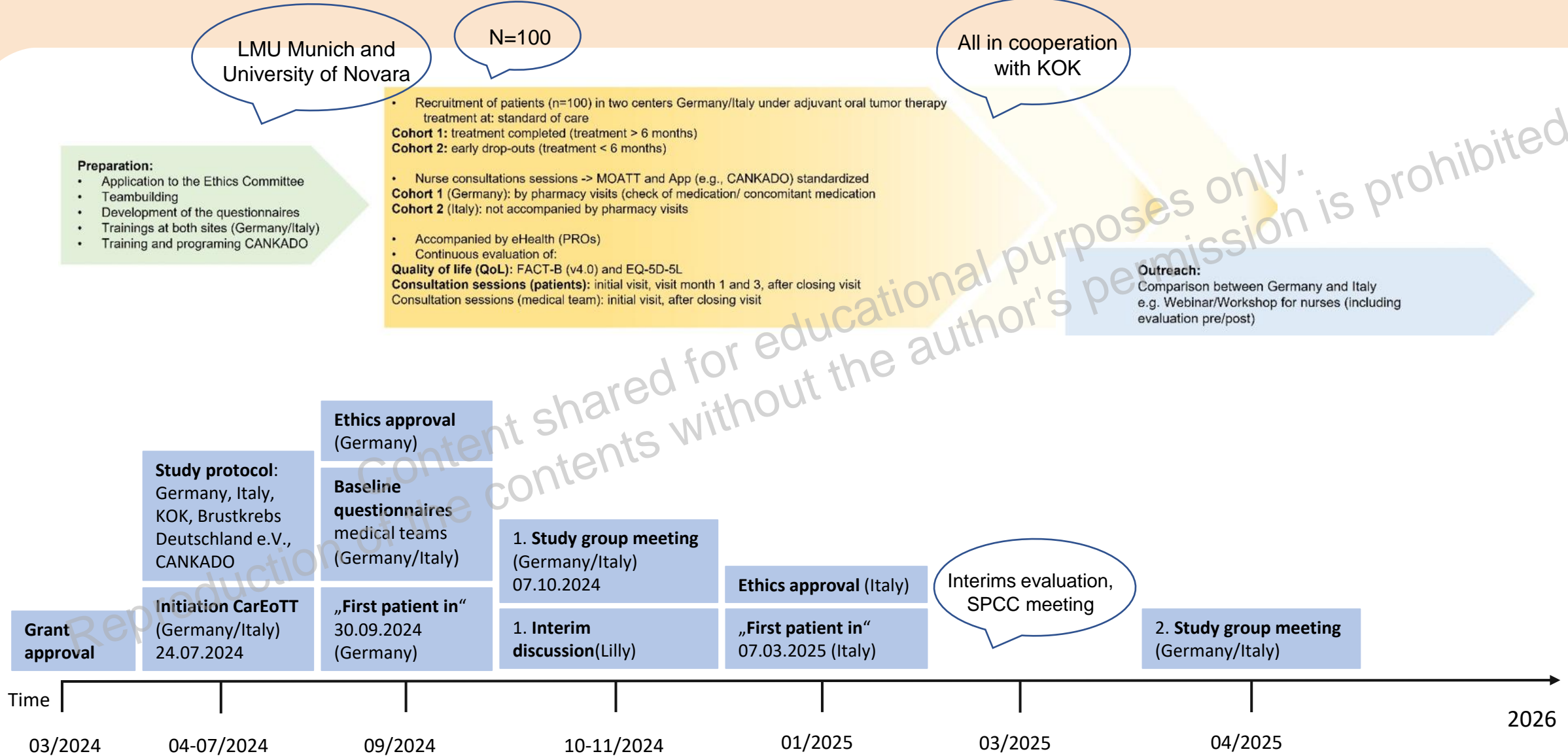


Figure1: Overall CarEoTT project timeline

3. Previous publications and experiences from further projects



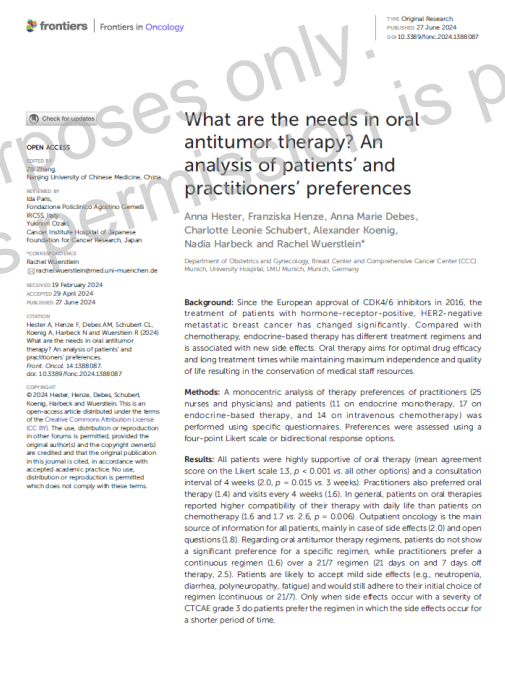
Publication "Pflegeexpertinnen begleiten orale Tumorthherapie" in "Die Schwester Der Pfleger"

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Publication "Interprofessionelles Management der oralen Tumorthherapie" in "Im Fokus Onkologie"

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Publication „What are the needs in oral antitumor therapy? An analysis of patients' and practitioners' preferences“ in Frontiers in Oncology

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4. Project

CarEoTT - Care improvement for early breast cancer patients treated with oral tumor therapy

- Evaluation of specialized nurse consultation sessions for patients receiving extended adjuvant oral tumor therapy in EBC (e.g. Abemaciclib, Ribociclib, Neratinib, Olaparib)
- Initiation: 24/07/24; positive ethics approval: 09/2024

- **Part 1: patient project (pilot)**

- Total patient population: n=13 (Germany), n=2 (Italy); originally planned: n=100 patients recruited at two sites
- **Duration:** 6 months of observance
Germany: baseline visit, after 4, 12, 24 weeks (including pharmacy visits: baseline, 24 weeks)
Italy: baseline visit, every 4 weeks (due to local standard)

- **Cohorts:**

- 1) treatment completed (treatment > 6 months)
- 2) early drop outs (treatment < 6 months)

- pilot project with 2 participating centers
- Experiences/differences
- Outreach

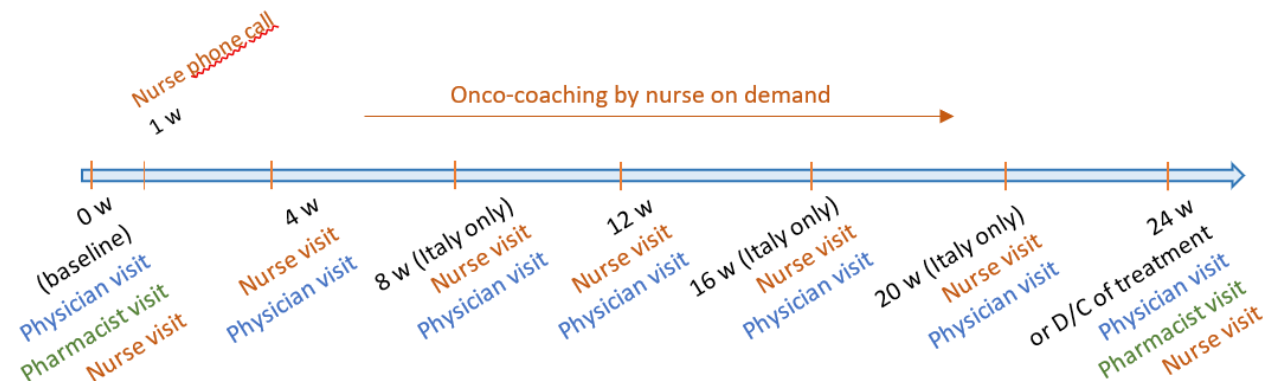


Figure 2: Overview of consultation sessions during CarEoTT in Germany and Italy

4. Project description

CarEoTT - Care improvement for early breast cancer patients treated with oral tumor therapy

- **Part 2: Evaluation + Outreach:** Transfer pilot into global management for specialized nursing consultation in adjuvant OTT for EBC
 - Evaluation of documentation, questionnaires, satisfaction with care of patients
 - Evaluation of medical teams at baseline and end of 2025: Germany / Italy
 - Inclusion of eHealth (CANKADO)
 - Optimization of resources within the oncological team
 - Assessment of an efficient and effective approach of side effects and drug interaction management
 - Evaluation of similarities and differences in OTT management in different healthcare settings: Germany / Italy
 - Publication

5. Healthcare pathway – Germany / Italy

Germany	Italy
<p>Postoperative tumor conference</p> <ul style="list-style-type: none"> ➤ evaluation of operative and pathological results ➤ adjuvant treatment indication ➤ determination of treatment plan 	<p>Postoperative tumor conference</p> <ul style="list-style-type: none"> ➤ evaluation of operative and pathological results ➤ adjuvant treatment indication ➤ determination of treatment plan
<p>Appointment with oncologist & breast care nurse</p> <ul style="list-style-type: none"> ➤ explanation of treatment plan ➤ start of endocrine therapy ➤ diagnostics (e.g. ECG, check of laboratory parameters) 	<p>Appointment with nurse</p> <ul style="list-style-type: none"> ➤ collection of general and medical information ➤ case history/anamnesis
<p>Transmission to department of (gynaeco)-oncology</p> <ul style="list-style-type: none"> ➤ explanation of treatment plan (all substances) ➤ informed consent ➤ if necessary: diagnostics (e.g. ECG, check of laboratory parameters) ➤ prescription of OTT 	<p>First appointment with oncologist of breast team</p> <ul style="list-style-type: none"> ➤ explanation of treatment plan (all substances) ➤ informed consent ➤ diagnostic ECG, check of laboratory results etc. ➤ Presumption of OTT
<p>Appointment with OncoCoach/Nurse</p> <ul style="list-style-type: none"> ➤ further education of OTT, explanation and management of side effects and interactions; supportive options ➤ Regular consultation with oncologists according to protocol // SoC of institution (every 1-3 months) ➤ Checklists for interaction oncology team ➤ offer and explanation of supporting Apps: PINK, Sidekick, possibly CANKADO 	<p>Monthly appointment with oncologist of breast team</p> <ul style="list-style-type: none"> ➤ reviewing results ➤ permission of treatment ➤ prescription of OTT
<p>External pharmacy</p> <ul style="list-style-type: none"> ➤ information on medication ➤ receiving medication (1-3 months) 	<p>Hospital pharmacy</p> <ul style="list-style-type: none"> ➤ receiving medication ➤ medication per prescription lasts for 1 month

5. Healthcare pathway – Germany / Italy

Germany	Italy
<p><u>Months 1-2</u></p> <ul style="list-style-type: none"> ➤ general care oncologist and OncoCoach/nurse every 14 days ➤ check of laboratory results (in clinic or external) and possible side effects ➤ prescription of OTT ➤ pharmacy 	<p><u>Months 1-2</u></p> <ul style="list-style-type: none"> ➤ general care oncologist every 14 days ➤ check of laboratory results (in clinic or external) and possible side effects ➤ prescription of OTT ➤ hospital pharmacy
<p><u>Month ≥3</u></p> <ul style="list-style-type: none"> ➤ appointment with OncoCoach/nurse and if needed also with oncologist every 4 weeks ➤ close cooperation between nurse and oncologist ➤ evaluate and review laboratory results from general care physician ➤ permission of treatment continuation ➤ new prescription of OTT ➤ pharmacy 	<p><u>Month ≥3</u></p> <ul style="list-style-type: none"> ➤ appointment with oncologist every 4 weeks ➤ evaluate and review laboratory results ➤ permission of treatment continuation ➤ new prescription of OTT ➤ hospital pharmacy
<p><u>Month ≥6</u></p> <ul style="list-style-type: none"> ➤ appointment with OncoCoach/nurse and if needed also with oncologist every 4 weeks or quarterly (if medication is well tolerated) ➤ visit to external pharmacy ➤ receiving medication for 1 month up to 3 months 	<p><u>Month ≥6</u></p> <ul style="list-style-type: none"> ➤ appointment with oncologist every 4 weeks ➤ hospital pharmacy ➤ receiving medication for 1 month
<p>Follow-up</p> <ul style="list-style-type: none"> ➤ gynaecologist (external) 	<p>Follow-up</p> <ul style="list-style-type: none"> ➤ oncologist

6. Baseline evaluation– patients and medical teams (Germany / Italy)

Germany and Italy

- Questionnaires for physicians, nurses and pharmacists (Germany only) at baseline and after 24 weeks of treatment (end of nurse consultation) or at discontinuation of therapy
- Questionnaires for patients at baseline, after 4 weeks, 12 weeks and 24 weeks of treatment (end of nurse consultation) or at discontinuation of therapy



6. Results – Baseline questionnaires of medical team (Germany / Italy) (preliminary data)

Germany

- N=13
- Gender: 92,3% female; 7,7% male
- Average age: 43,8 years



Figure 3: qualification of medical team Germany

Figure 4: experience in oncology of medical team Germany

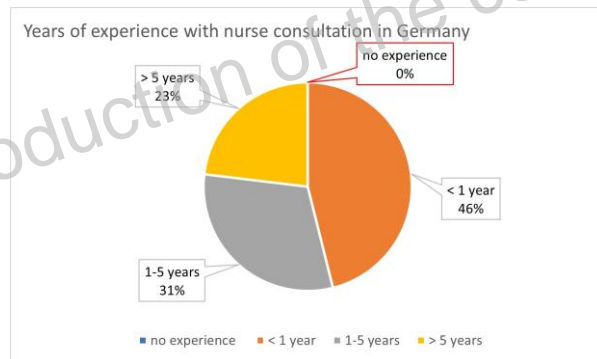


Figure 5: experience with nurse consultation of medical team Germany

Italy

- N=16
- Gender: 100% female
- Average age: 41,6 years

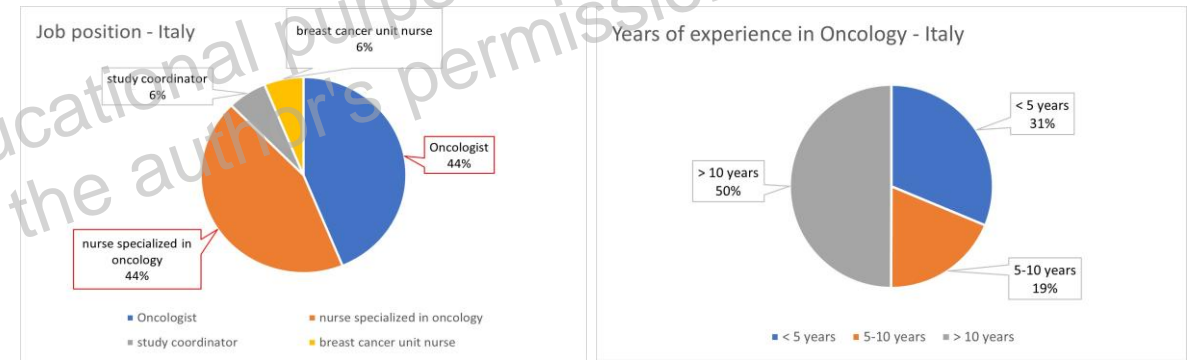


Figure 6: qualification of medical team Italy

Figure 7: experience in oncology of medical team Italy

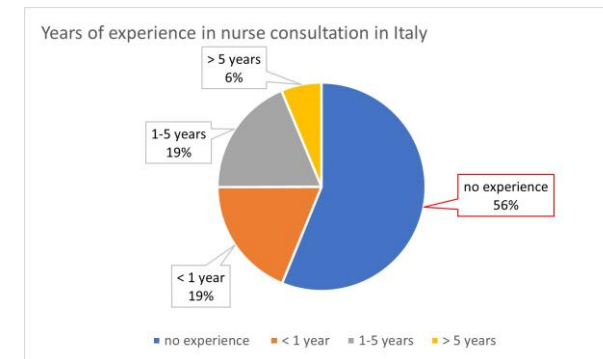


Figure 8: experience with nurse consultation of medical team Italy

6. Results – Baseline questionnaires of medical team (Germany / Italy)

Germany

- Average number of evaluated patients per months
 - Breast cancer patients: 133
 - Early breast cancer patients: 70
 - Patients with indication for OTT: 58
(only for Oncologists)

On a scale from 0 to 10 (0 = little/hardly; 10 = high), I currently rate the following points with regard to the support of patients undergoing extended adjuvant oral tumor therapy...

.. In terms of

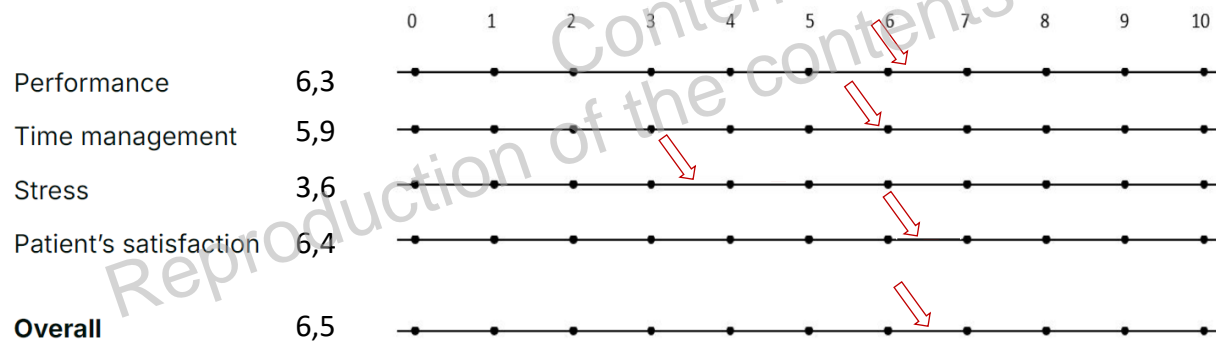


Figure 9: General informations in OTT management of medical team Germany

Italy

- Average number of evaluated patients per months
 - Breast cancer patients: 126
 - Early breast cancer patients: 75
 - Patients with indication for OTT: 67
(only for Oncologists)

.. In terms of

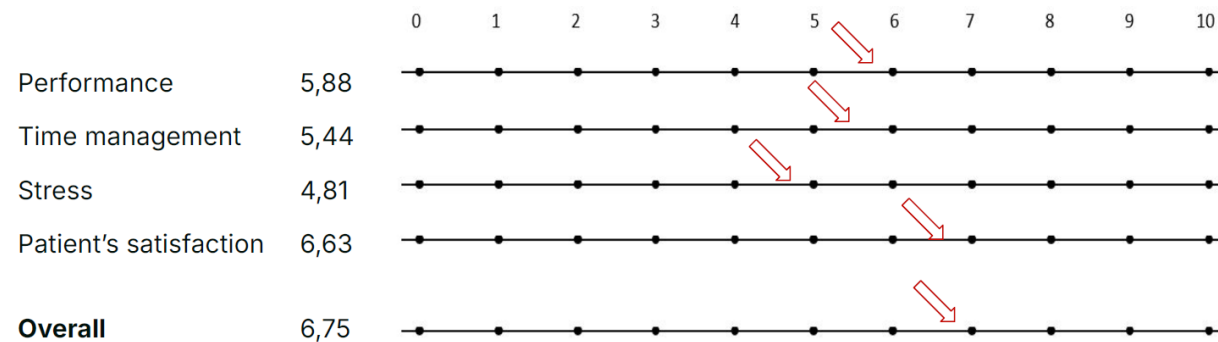


Figure 10: General informations in OTT management of medical team Italy

6. Results – Baseline questionnaires of medical team (Germany / Italy)

Germany

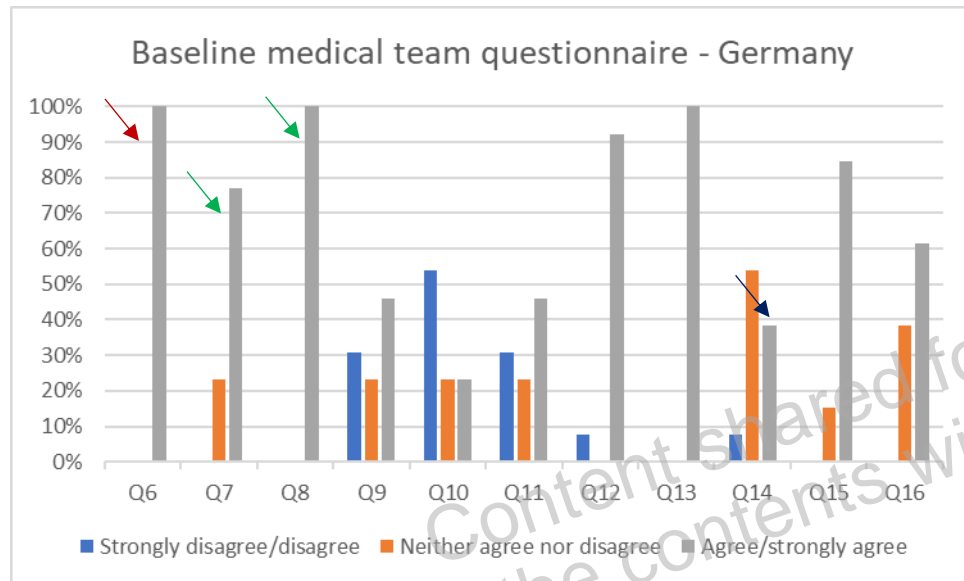


Figure 11: Representation of questionnaires medical team Germany

Italy

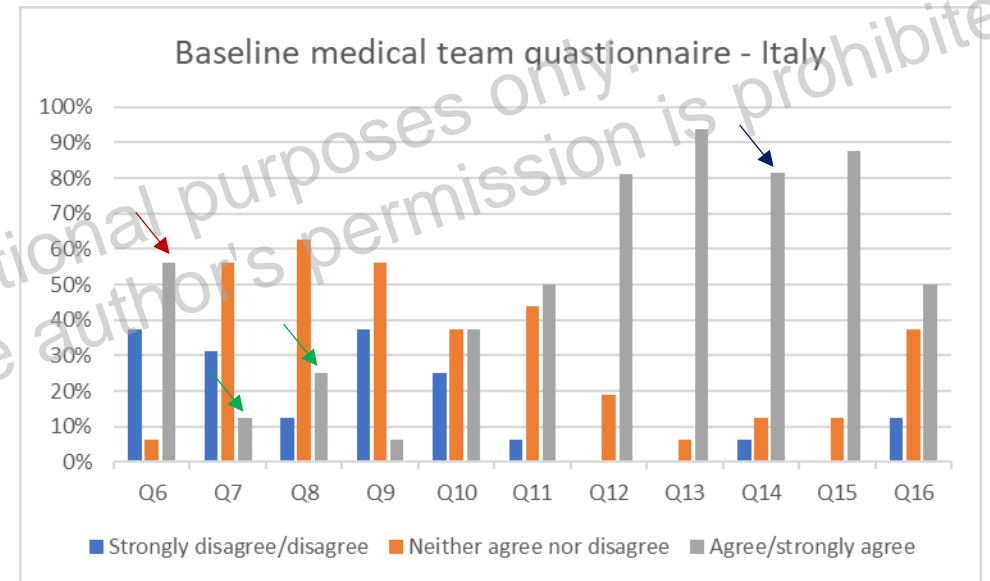


Figure 11: Representation of questionnaires medical team Italy

- Q6: I feel well informed in the management of oral tumor therapies for EBC
- Q7: The supervision effort for a patient before starting extended adjuvant oral tumor therapy is high
- Q8: The supervision effort for a patient in the first 3 months of extended adjuvant oral tumor therapy is high
- Q9: The supervision effort for a patient in further course of extended adjuvant oral tumor therapy is high
- Q10: I am satisfied with the current care situation of patients with extended adjuvant oral tumor therapy
- Q11: I am satisfied with the interdisciplinary cooperation between all involved departments and persons
- Q12: The introduction of a nurse consultation in oral tumor therapy (by a specially trained nurse) would reduce my workload
- Q13: Breast cancer patients could benefit in their healthcare by introducing a nurse consultation in oral tumor therapy
- Q14: Using an eHealth-based system (CANKADO) could help reduce my workload
- Q15: Breast cancer patients could benefit from the use of an eHealth-based system (CANKADO)
- Q16: the possibility of regular trainings in OTT would reduce my workload

Main differences

- well informed in management of OTT for EBC: 100% (Germany), 56% (Italy)
- high supervision effort before starting and in the first 3 months of OTT for EBC: 78% and 100% (Germany), 13% and 25% (Italy)
- using eHealth (CANKADO) could help reduce workload: 38% (Germany), 81% (Italy)

7. Interims analysis – patient project (Germany)

CarEoTT - Care improvement for early breast cancer patients treated with oral tumor therapy

Part 1: Nursing consultation under adjuvant OTT

- Total patient population (status 15/02/2025): n=13; age: 49,4 [32; 75] years
- Ongoing: 12 patients
- Drop-outs: 1 patient: diagnose of metastasis
- Total number of dose reductions: 1 (Abemaciclib)
- Total number of dose increase: 2 (Neratinib)
- Total number of non permanent discontinuations: 5
 - 3 patients with 1 interruption: 20 [8; 39] days
 - 2 patients with 2 interruptions: 22 [4; 53] days
 - Radiation, diarrhea, Cold, fatigue, urinary tract infection, exanthema, mastectomy

OTT	n=13 patients	Distribution
Abemaciclib	7	53,8%
Ribociclib	2	15,4%
Olaparib	2	15,4%
Neratinib	2	15,4%
Tumor therapy		
AI	13	100%
Tamoxifen	0	0%
GnRH	9	69,2%
Bisphosphonate (Zometa)	7	53,8%

Figure 13: Distribution of tumor therapy (N=13)

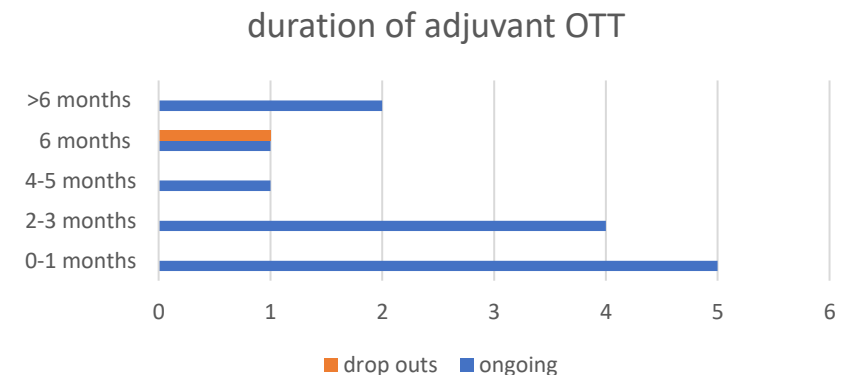


Figure 14: duration of adjuvant OTT (N=13)

8. Next steps (Germany / Italy)

- Evaluation of the first 10 patients' getting pharmacist visit (Germany only)
- Interim analysis of baseline questionnaires of pharmaceutical team (Germany only)
- 2. Study group meeting in 04/2025 (team Germany / team Italy)
- Continuation of patient recruitment – let's continue!

Thank you

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Sharing Progress in Cancer Care

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