

# Evaluation of a Breast and Colon Cancer Survivorship Program

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This article describes a cancer survivorship program that addressed quality of life (QOL) changes related to chemotherapy. The program focused on adult breast and colon cancer survivors at a community oncology practice in the southeastern United States, and consisted of an educational visit designed to identify and address QOL changes that occurred as a result of chemotherapy. The QOL of Cancer Survivors (QOL-CS) survey administered before and after the visit analyzed QOL metrics, which were combined with program evaluation data to assess physical, psychosocial, social, and spiritual well-being changes that may have occurred as a result of program participation. Differences in QOL-CS scores did not represent statistically significant changes in QOL for program participants. However, program evaluation responses identified perceived changes in QOL as a result of participating in cancer treatment and a subsequent cancer survivorship program, which demonstrated clinical significance for program participants. Physical, psychosocial, social, and spiritual well-being measures were affected by program participation. Improvement in distress related to the initial cancer diagnosis and family distress were the most significant reported changes, and male gender and advanced age were associated with improved psychosocial well-being.

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Early cancer detection and improved treatments have resulted in survivorship trends whereby individuals are living years beyond the acute treatment phase of cancer (Patterson, 2010). These survivors face many physical, psychosocial, financial, social, and spiritual challenges as a result of their cancer treatment and diagnosis. In addition, cancer survivors suffer from a variety of symptoms such as fatigue, aches and pains, depression, cognitive difficulties, insomnia, and decline in social functioning (Bennett et al., 2010). In the past, cancer support groups served as the conventional modality to provide emotional support and help patients cope with the fear of dying and recurrence (Samarel, Fawcett, & Tulman, 1993). Following the 1990s, issues related to postchemotherapy care became a topic of increasing contemporary relevance, and the paradigm of studying and providing ongoing cancer survivorship care emerged as an important area of public awareness and scholarly endeavors (McCollum, 2012).

Modern survivorship programs are greatly needed and are mandated by patient and community need, but unfortunately of

ten are hindered by institutional, societal, and personal perceived impediments to their creation and viable success (Shulman et al., 2009). The Institute of Medicine's report *From Cancer Patient to Cancer Survivor: Lost in Transition* (Hewitt, Greenfield, & Stovall, 2005) and a National Cancer Institute (NCI) Office of Cancer Survivorship (2012) report made recommendations that tasked researchers to further define and improve quality-of-life (QOL) issues among long-term survivors of cancer. The purpose of this article is to describe the implementation and evaluation of a cancer survivorship program that identified and addressed various QOL changes that occurred as a result of receiving chemotherapy.

## Cancer Survivorship and Uncertainty in Illness

The uncertainty of an individual's health status after cancer treatment presents many survivors with significant psychological