



PRESENTER:  
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# Time to treatment and hospital visits for patients undergoing neoadjuvant chemotherapy in a single payer system



## BACKGROUND:

- Expanded indications have increased the number of breast cancer patients undergoing neoadjuvant chemotherapy (NAC) prior to surgical management.
- Neoadjuvant chemotherapy requires the coordination of various services and specialists to ensure timely and accurate delivery of care.
- This process can result in multiple visits to the hospital and extend the time period from consultation to treatment.
- As more evidence emerges surrounding improved outcomes with timely receipt of chemotherapy, reducing the time from initial consultation to the initiation of chemotherapy is imperative to patient care

## METHODS

- Quality Improvement Retrospective chart review
- Population:** Women 18+ who underwent neoadjuvant chemotherapy
- Timeframe:** Jan. 1, 2002 to Dec. 31, 2018
- Primary Outcome:** Total number of hospital visits prior to initiation of neoadjuvant therapy (excluding the initial consultation appointment).
- Secondary Outcomes:** Number of visits based on specialty and time to receipt of first therapy.

Women who undergo **neoadjuvant chemotherapy** require **multiple visits** (median: 5) prior to initiating breast cancer treatment. We should coordinate **diagnostic imaging and streamline care** to reduce visits, improve the patient experience, and save time and money.



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## RESULTS:

- # of patients with neoadjuvant chemotherapy: **286**
- Median # of days from first consult to first neoadjuvant chemotherapy date: **22 (range 5 - 105)**
- Median # of visits between first consult and first chemotherapy date: **5**
- Majority of additional visits were for **diagnostic imaging or biopsies**, with a median number of **4 visits** (range 0-10) after the first consultation.
- Neither **age, lymph node status, breast density or tumor histology** impacted the number of additional visits.

## CONCLUSIONS:

- Women who undergo neoadjuvant chemotherapy require **multiple visits** prior to initiating treatment.
- Majority of these visits are with **diagnostic imaging**.
- Despite these additional visits, the **median time to treatment initiation is <30 days**
- To improve the patient experience and potentially reduce the time and financial burden of repeat hospital visits, **coordination of additional diagnostic imaging** either prior to consultation or as part of a **streamlined line process of care** should be considered

\*References available upon request