

Correlates of Long-Term Follow-Up Care in Adolescents and Young Adults



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Introduction

- ☐ Adolescent and young adult (AYA) engagement in long-term follow-up care (LTFU) is vital to the management of physical and psychosocial late effects and surveillance of relapses or new cancer diagnoses in AYA survivors.
- ☐ AYA childhood cancer survivors experience cancerrelated worries related to future risks and late effects.
- ☐ Managing AYA cancer-related worries may be important for successful engagement in LTFU.

<u>Aims</u>

- ☐ Describe engagement in follow-up care among AYA cancer survivors.
- ☐ Investigate demographic (age, gender, race/ethnicity), medical (age at dx and time off tx), and psychosocial (cancer-related worries) correlates of annual follow-up engagement.

Methods

Design

☐ Subsample (57 AYA) from a longitudinal 3-year study tracking engagement and self-management.

Participants

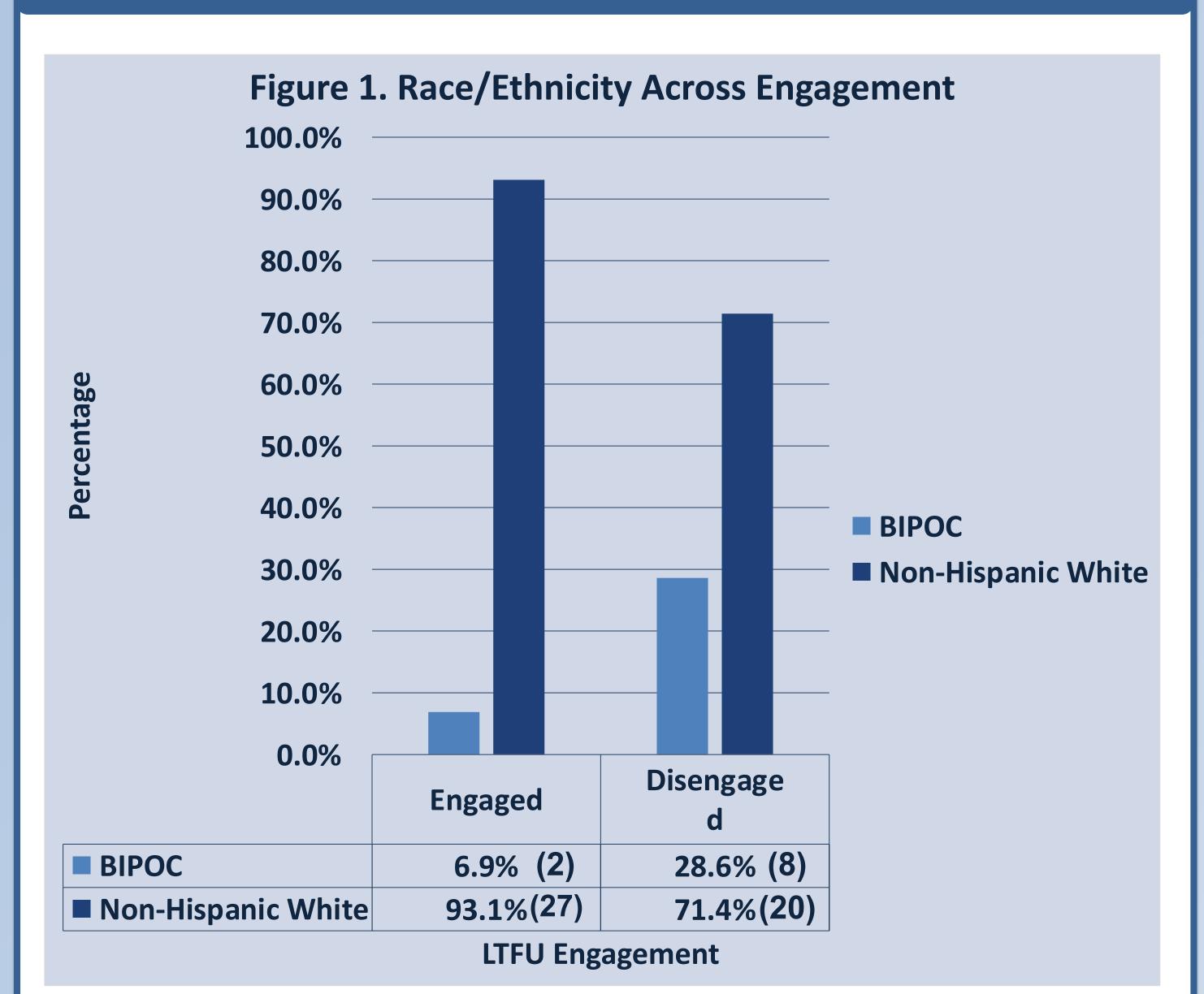
- ☐ Ages 16 to 25 AYA who have survived childhood cancer.
- ☐ At least 5 years since diagnosis and at least 2 years from end of treatment.
- ☐ Have seen a CHOP provider in the last 18 months.

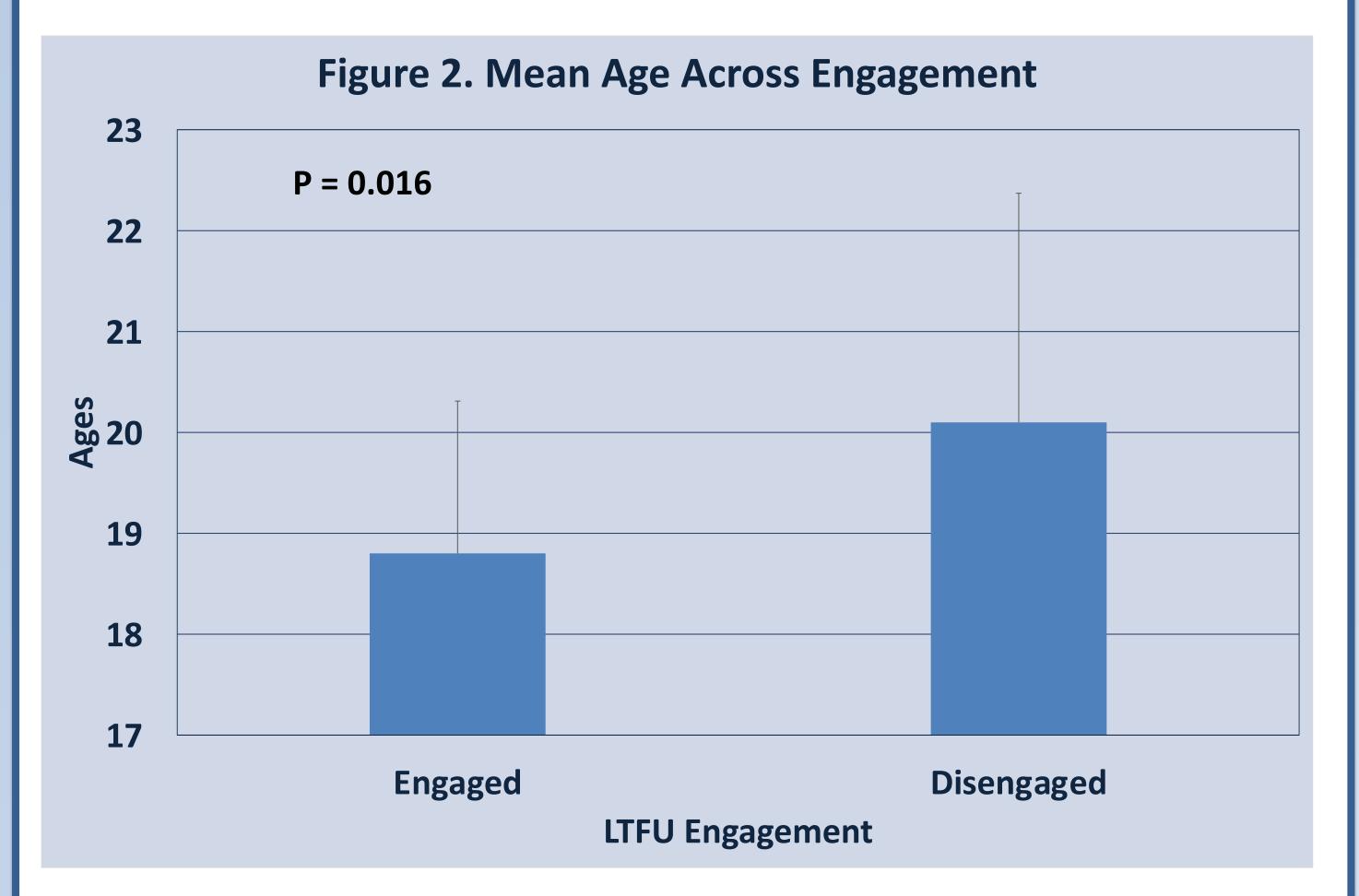
<u>Procedures</u>

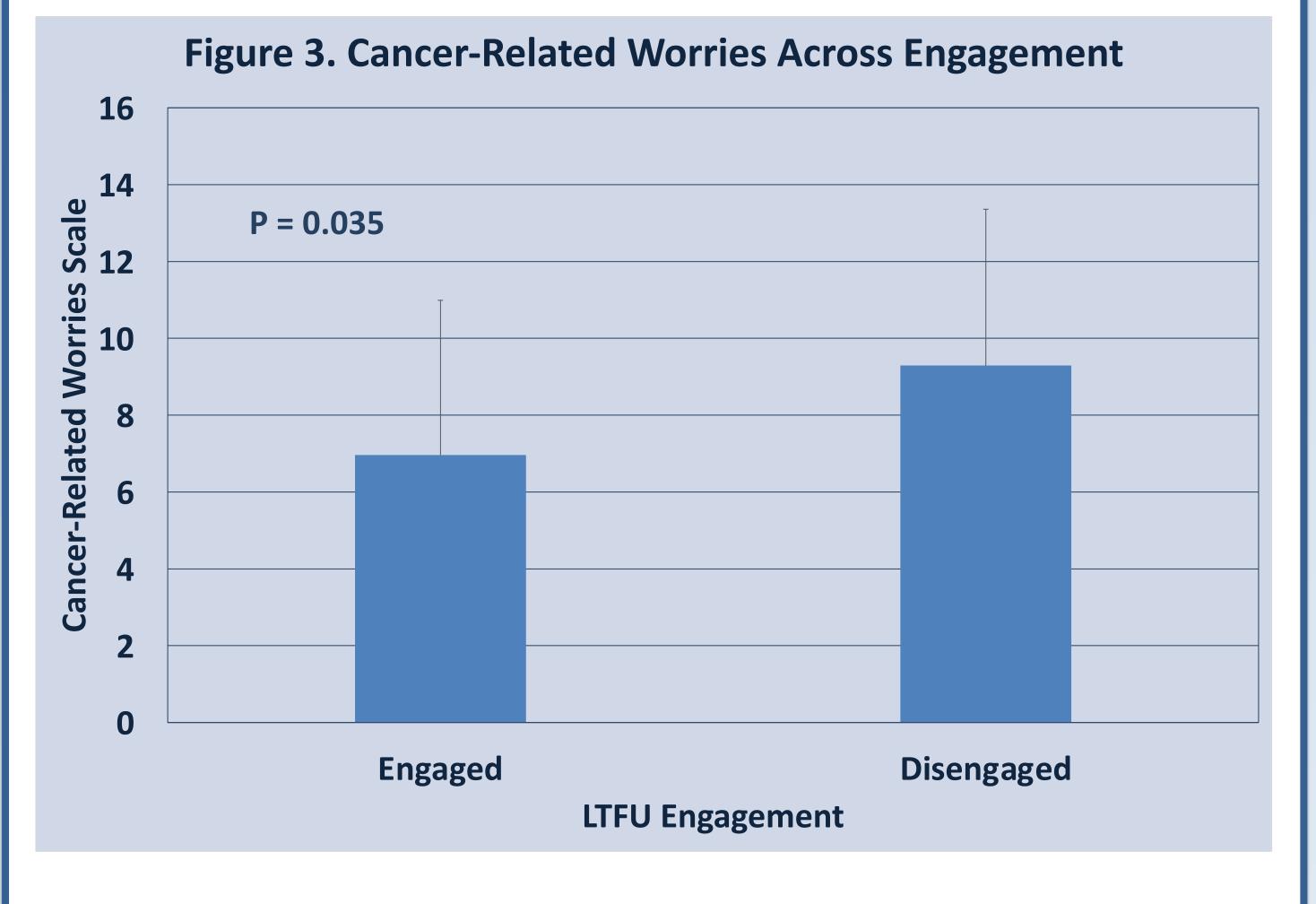
- ☐ At baseline, AYA reported on demographics and completed the cancer-related worries scale (6 items, 0-3 scale). A total cancer worry score was computed (/18).
- □ Electronic health record review ascertained dx/tx history and whether participants had attended and/or had an appointment scheduled 1-year post enrollment.
- ☐ Independent sample t-test examined age and psychosocial correlates and chi-square test examined correlates in BIPOC.

Table 1: Participant Characteristics (n=57)	
Age M (SD)	19.4 (2.0)
Age at diagnosis M (SD)	6.8 (4.6)
Years of treatment M (SD)	11.1 (4.5)
Non-Hispanic White n (%)	47 (82.5%)
BIPOC n (%)	10 (17.5)
Gender n (%)	
Male	22 (38.6)
Female	35 (61.4)
Highest level of education completed n (%)	
College degree or higher	4 (7.0)
Some college	14 (24.6)
High school diploma	20 (35.1)
< High school	19 (33.3)
LTFU Engagement n (%)	
Yes, attended an appointment	16 (28.1)
No, but one is scheduled	13 (22.8)
No, and none scheduled	28 (49.1)
Cancer-Related Worries Total Score M (SD)	8.1 (4.2)

Results







- 80% of BIPOC were in the disengaged group, making up 28.6% of the total disengaged group, in contrast to the 20% BIPOC in the engaged group, making up 6.9% of the total engaged group (X2 = 4.626, p = 0.031).
- □ Participants in the engaged group were younger [(M (SD) = 18.8 (1.51)] compared to those in the disengaged group [(M (SD) = 20.1 (2.27)] (t = 2.50, p = 0.016).
- □ Participants in the engaged group had lower cancer-related worries [(M (SD) = 6.96 (4.03)] compared to the disengaged group [(M (SD) = 9.29 (4.07)] (t = 2.16, p = 0.035).

Results, cont.

- ☐ Participants in the disengaged group reported greater worry on the "I worry about late effects that might happen to me" item (t = 2.29, p = 0.026).
- ☐ Participants in the engaged group reported greater worry on the "Cancer is always at the back of my mind" item (t = 2.47, p = 0.017.
- ☐ There were no differences in gender, age at dx, or time of tx between both engaged and disengaged groups.

Conclusion

- ☐ Despite a small sample size, a significantly smaller proportion of BIPOC engaged in their annual follow-up care.
- ☐ Older AYA being more likely to be disengaged supports findings of decline in LTFU engagement during young adulthood.
- ☐ Unexpectedly, disengaged AYA reported greater cancerrelated worries compared to those who were engaged, indicating that worry/anxiety may function as a barrier to LTFU care engagement. Consistent with a traumatic stress framework, those who have elevated worries may be avoidant of reminders of cancer.

Future Directions

- ☐ That a greater percent of AYA of BIPOC disengaged from their follow-up care may be influenced by a variety of factors.
- ☐ There is a need to conduct further research to better understand relationships between race/ethnicity and cancer-related worries and their impact on LTFU engagement.
- □ Examining individual cancer-related worries items along with perceptions of healthcare systems will reveal the barriers to LTFU engagement in AYA of BIPOC populations.

References

- □ Rosenberg-Yunger, Z. R., Klassen, A. F., Amin, L., Granek, L., D'Agostino, N. M., Boydell, K. M., ... & Nathan, P. C. (2013). Barriers and facilitators of transition from pediatric to adult long-term follow-up care in childhood cancer survivors. Journal of adolescent and young adult oncology, 2(3), 104-111.
- ☐ Granek, L., Nathan, P. C., Rosenberg-Yunger, Z. R., D'Agostino, N., Amin, L., Barr, R. D., ... & Klassen, A. F. (2012). Psychological factors impacting transition from paediatric to adult care by childhood cancer survivors. Journal of Cancer Survivorship, 6(3), 260-269.

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