



Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/frontlines-metastatic-breast-cancer/advancing-patient-centered-care-in-her2-positive-metastatic-breast-cancer/35461/

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Advancing Patient-Centered Care in HER2-Positive Metastatic Breast Cancer

Announcer:

Welcome to *On the Frontlines of Metastatic Breast Cancer* on ReachMD. On this episode, we'll hear from Dr. Megan Kruse. She is a member of the Department of Hematology and Medical Oncology, primarily based at the Cleveland Clinic Main Campus. She will discuss managing side effects and quality of life in patients with metastatic breast cancer. Here's Dr. Megan Kruse now.

Dr. Kruse:

When it comes to assessing side effects for patients on HER2-targeted medications for metastatic breast cancer, we really need to hear a lot from our patients directly, so communication is absolutely crucial. And many times our patients are communicating with us either by phone calls or by electronic portal messages. And I always encourage my patients that if they have a particularly significant side effect—something that's really bothering them or becoming more intense over a period of a couple days—to reach out by phone because that's the most automatic way and the quickest way to be able to assess side effects and jump in and manage them. I think the electronic portal messages are really great. It's a way for patients to get their thoughts down on paper, essentially, and flesh it all out, but it's a little bit harder in real time for doctors to assess and ask follow-up questions.

There's a lot of interest in real-time electronic patient-reported outcome tools, and we actually know from some early studies that have been presented at major medical conferences about these tools that they can improve patient experience and tolerability of the medications, essentially because you're able to act on side effects much faster and then have that two-way conversation so that if an intervention that you are suggesting to help a patient manage a side effect is not working, you can jump in and do something faster. So we don't see a lot of use of these more immediate electronic tools or apps in clinical practice right now, but I think they're coming, and they will have a very positive impact on how we manage patients.

When I think about managing and treating metastatic breast cancer, I have to keep two main goals in mind. The first is to help our patients live longer, and the second is to help them live better. And so, from the clinical trials we have and all of the research that we do, we know which medications should help our patients live longer. Helping them live better is often a more complicated discussion and decision-making process because living better can have a different look for each patient. This is where our patients being honest about what their goals and their values are is really important, plus open communication between a patient and their doctor so that their doctor is able to have flexibility in the plan that will help an individual patient achieve their goals. And I think about this a lot because on paper, diarrhea may be tolerable, right? You may have four or five bowel movements a day, and in a clinical trial, people say, "Oh, that's fine," but if you're out living your life, and you're traveling on the road, or you're teaching in a classroom, or you're taking care of your kids, having that many bowel movements might not be possible, and it may have a significant impact on somebody's functioning, quality of life, and ability to maintain a job. And so when we're treating metastatic breast cancer, we have to be very cautious not just to do the thing that's right by the book and by the guidelines, but also making that plan for the actual patient that's in front of us.

And oftentimes, having multidisciplinary care can help us get there, and this is where I think about taking care of patients both physically and emotionally. We have wonderful colleagues in psychiatry, psychology, and social work who can really help us attend to a whole person, taking care of both their body and their mind, helping them process everything that is going on with them.

I think there's also a lot of interest in patients getting involved with integrative medicine, so thinking about how nonprescription medications, whether that's supplements or vitamins—or other medical disciplines like chiropractic care, acupuncture, massage—can actually help patients feel better and tolerate their treatments better. And so I think about the care of a patient with metastatic breast cancer as a team effort, and when you have more minds involved, you can really get to the root of how to help someone function the





best and feel the best so they can get whatever they want out of their life and have their treatment be successful.

Announcer:

That was Dr. Megan Kruse talking about the management of side effects and the quality of life in patients with metastatic breast cancer. To access this and other episodes in our series, visit *On the Frontlines of Metastatic Breast Cancer* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!