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IPOS 2014 Abstract

Development of clinical pathways for anxiety and depression for patients with cancer in Australia: A Delphi Consensus Study.

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Background: People with cancer and their families experience high levels of psychological morbidity. Despite being readily treatable, few cancer services in Australia routinely screen patients for anxiety and depression and there are currently no standardized clinical referral pathways for anxiety and depression. This study aimed to develop clinical pathways that incorporated referral and management recommendations according to the nature and severity of symptoms, tailored to the Australian context.

Method: A two round Delphi study was conducted to gain consensus among Australia oncology and psycho-oncology clinicians about the validity of 41 items related to screening, assessment, referral and management, including role definitions, timing and care coordination, within a stepped care model. The expert panel comprised 87 multidisciplinary clinician members of the Psycho-oncology Cooperative Research Group (PoCoG). Respondents were asked to rate their level of agreement with each statement on a 5-point likert scale (from strongly disagree to strongly agree). Consensus was defined as >80% of respondents scoring within 2 points on the likert scale.

Results: Consensus was reached for 21 of 41 items after 2 Delphi rounds. Formal screening for anxiety and depression was strongly endorsed. There was also consensus that once identified, further assessment of the nature and severity of anxiety and depression was required. The proposed stepped care model of management was endorsed, as were recommendations for inclusion of length of treatment and time to review. Consensus was not reached on items related to roles and responsibilities. Respondents highlighted that institutional staffing and resources as well as staff training impact on care coordination and responsibility for assessment and follow up.

Conclusions: The study has identified a core set of evidence-based principles considered essential to the identification, referral and management of anxiety and depression in adult cancer patients. The clinical pathway outlines formalized screening and assessment to identify anxiety and/or depression and proposes a stepped care model for their management, based on the nature and severity of symptoms. The recommendations outlined in the clinical pathway serve as a best practice guideline to be individualized for institutions based on available resources and appropriately trained staff.

Research Implications: Implementation of clinical pathways across Australian oncology settings will contribute to ongoing systematic evaluation of anxiety and depression experienced by patients with cancer, providing more accurate estimates of the incidence of psychological distress amongst Australian patients with cancer. Standardised treatment and referral protocols across institutions will support ongoing quality improvement research.

Clinical Implications: Implementation of clinical pathways across Australian oncology settings will contribute to ongoing systematic evaluation of anxiety and depression experienced by patients with cancer, providing more accurate estimates of the incidence of psychological distress amongst Australian patients with cancer