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Background: There is strong evidence that psychological interventions are effective in treatment of anxiety and depression experienced by cancer patients. Currently screening for distress in Australia occurs inconsistently and there is also a gap in care once screening identifies distress. To address the inherent variability of patterns of referral, treatment, and follow-up post-screening, the Psycho-oncology Cooperative Research Group (PoCoG) has developed an evidence-based clinical pathway. Through a consensus methodology, the aim of this study was to identify key referral and management recommendations necessary to improve patient outcomes.

Method: A two round Delphi study was conducted to gain consensus among Australia oncology and psycho-oncology clinicians about the validity of 39 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 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 39 items after 2 Delphi rounds. Formal screening for anxiety/depression was strongly endorsed and there was consensus that once identified, further assessment of the nature and severity of anxiety/depression was required. Participants endorsed the proposed stepped care model of management incorporating recommendations for length of treatment and time to review. Consensus was not reached on items related to roles and responsibilities.

Conclusions: This study 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/depression and proposes a stepped care model for their management, based on the nature and severity of symptoms.