THE ROLE OF OCCUPATIONAL THERAPY IN INTERDISCIPLINARY CANCER REHABILITATION

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INTRODUCTION

- NCI: research center and hospital
- Interdisciplinary cancer rehabilitation since 2010
- Center for quality of life: translational survivorship clinic
- Two rehab programs: General cancer rehabilitation and Head and Neck cancer (HNC) rehabilitation
MULTIDISCIPLINARY REHABILITATION NCI

Rehabilitation medicine  Nurse (Case manager)  HNC rehabilitation:
Social worker  Psychologist  Speech and language pathologist
Art therapist (expressive)  Dietician  Consulting psychiatric nurse
Physiotherapist  
Occupational Therapist  HN surgeon  Radiotherapist
MODULAR CHARACTER OF NCI REHABILITATION
OT MODULES

- Fatigue (Psycho education)
- Sitting
- Energy conservation (Group therapy or individual)
- Return-to-work
- Ergonomics
- Hand function
- Sleep (Psycho education)
NICE THEORY, BUT LITTLE AVAILABLE EVIDENCE
AIM

1. To assess the most prevalent problems in activities of daily life;

2. To evaluate the results of OT interventions on perceived performance of and satisfaction with those activities
METHODS

• Observational prospective study

• Routinely collected data of patients who received OT between 2010-2016 as part of rehabilitation program

• Outcome: Canadian Occupational Performance Measurement (COPM)
RESULTS

- \( N = 181 \);  
  Mean age (SD) 52 (12);  
  Median time since diagnosis 11 months
## 1. MOST COMMONLY REPORTED PROBLEMS

<table>
<thead>
<tr>
<th>ICF code</th>
<th>Description</th>
<th>n</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Domain D (Disability)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recreation and leisure (d920)</td>
<td>n= 169</td>
<td>21.2%</td>
<td></td>
</tr>
<tr>
<td>Carrying out daily routine (d230)</td>
<td>n= 79</td>
<td>9.9%</td>
<td></td>
</tr>
<tr>
<td>Acquiring, keeping and terminating a job (d845)</td>
<td>n= 64</td>
<td>8.0%</td>
<td></td>
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<tr>
<td>Driving (d475)</td>
<td>n= 59</td>
<td>7.4%</td>
<td></td>
</tr>
<tr>
<td>Walking (d450)</td>
<td>n= 50</td>
<td>6.3%</td>
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<tr>
<td><strong>Domain B (Body function)</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Sleep functions (b134)</td>
<td>n= 36</td>
<td>4.5%</td>
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</tbody>
</table>

ICF – International Classification of Functioning and Disability
• Recreation and leisure

• Carrying out daily routine

• Acquiring, keeping and terminating a job
## 2. OUTCOME

<table>
<thead>
<tr>
<th></th>
<th>score</th>
<th>95%CI</th>
<th>p-value</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Δ performance</td>
<td>+ 3.0</td>
<td>2.8 - 3.2</td>
<td>&lt;.0001</td>
<td></td>
</tr>
<tr>
<td>Mean Δ satisfaction</td>
<td>+ 3.4</td>
<td>3.2 - 3.7</td>
<td>&lt;.0001</td>
<td></td>
</tr>
<tr>
<td>CID &gt;2.5 points</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performance</td>
<td></td>
<td></td>
<td></td>
<td>121   (66%)</td>
</tr>
<tr>
<td>Satisfaction</td>
<td></td>
<td></td>
<td></td>
<td>132   (72%)</td>
</tr>
</tbody>
</table>
CONCLUSION

1. OT treatment needs within rehabilitation: Recreation and leisure, carrying out daily routine, work, walking, driving and sleep problems

2. Within rehabilitation significant and clinically relevant improvement on both performance and satisfaction of daily life activities, also quality of life were observed after OT

3. Clinical implications: for cancer patients experiencing problems with activities of daily life, occupational therapy could provide a relevant contribution to rehabilitation
FUTURE MODULES

• Cognitive problems
• Chronic pain
• Kinesiophobia
• Return-to-work
THANK YOU FOR YOUR ATTENTION

QUESTIONS?