

18 Months of „Mobile Oncologic Service“ in Lower Bavaria – a New Path of Ambulant Care for Tumor Patients

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Introduction

The „mobile oncologic service – MOD“ was established as a model of care for multimorbid, oncologic patients in the rural area. Highly specialized and trained assistants „Qualified person for oral and subcutaneous antitumor-therapy“ take care of the supply of oral and subcutaneous antitumor-agents at patients' homes. Main issues of the project contain transmitting of delegable, medical tasks and improvement of patients' compliance. Quality of life, safety of therapies and patient satisfaction were considered as indicators.

Methods

The sample period of this descriptive study ranged from 08/2013-02/2015. Inclusion criteria were: malignant disease, considerably restricted mobility, high danger of infection and missing options for transport. The number of patients, the frequency of visits, the travel distance for the MOD-assistants and the length of visit per patient were recorded by standardized case report forms. The influence of MOD on quality of life, safety of the therapy and patient satisfaction were registered by standardized questionnaire and rating scales, ranging from 1-6.

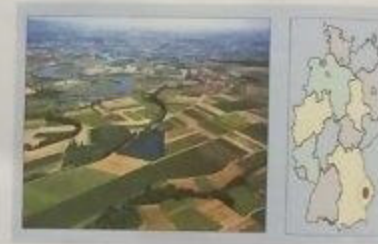
Results

Within 18 months, 97 patients were looked after in 791 ambulant visits. Per Quarter an average number of 32 patients were taken care of by 2-3 MOD assistants at an average of 4-5 visits at home. The mean distance per visit was 20 km, the mean duration of the visit was 63 minutes (24 minutes of travel, 29 minutes visiting time and 5 minutes of conferring a doctor and documentation, respectively). Overall, 65 patients were interviewed for evaluation. 92% of patients rated with „very good“ for the reduced efforts for visiting a doctor's practice, 58% for the reduction of distress for their relatives and 78,5% for an improvement of their quality of life. 92% of patients assessed the care by MOD as „very important“ and 95% were very satisfied with MOD's work.

Onkologisches Zentrum

Zentrum für die Versorgung der Patienten im Tumorzentrum (TUMZ) des Universitätsklinikums Göttingen und Leibniz-Klinik

UNIVERSITÄTSMEDIZIN GÖTTINGEN : UMG



	Average per quarter					TOTAL (all quarters)	Not known
	1/13	2/13	3/13	4/13	5/13		
Visited patients per quarter	22	44	29	36	29	32	
Total visits per quarter	110	134	139	127	142	130	
Visits per patient	5,00	3,05	4,79	3,53	4,9	4,3	
Total driven distance (all patients) in km	2.009,3	2.459,2	2.440,5	3.198,1	3.004,3	2622 km	
Total driving time (all patients) in min	2.489	3.103	2.881	3.845	3.704	3204 min	
Average driven distance per patient in km	91,33	55,89	84,16	88,84	103,60	86 km	
Average driving time per patient in min	113,14	70,52	99,35	106,8	127,72	105 Min	
Total visiting time (all patients) in min	2.940	4.010	4.215	3.815	4.305	3787 min	
Average time per visit in min						129,75	
Driving time						24	
Visiting time						26	

	TOTAL (all quarters)						Not known
	1 (very good)	2	3	4	5	6 (very poor)	
Reduced efforts for visiting a doctor's practice	60	5	0	0	0	0	0
Reduction of distress for the relatives	38	27	0	0	0	0	0
Improvement of therapy safety by the MOD	49	16	0	0	0	0	0
Improvement of quality of life	51	14	0	0	0	0	0
Importance of care by the MOD	66	5	0	0	0	0	0
Satisfaction with the MOD (Table 2 Patient-Survey of MOD)	62	3	0	0	0	0	0

Conclusions

The additional, ambulant care at home of selected hematologic/oncologic patients by specialized and trained assistants supports a high patient satisfaction. In special, long distances and frequent visits at a doctor's practice can be avoided for multimorbid patients, substantially improving their quality of life. Compliance and therapy safety can substantially be improved. Two-weekly visits at home – with justifiable effort – seem to be lasting.

Declarations: no conflicts of interest.

GTP

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Background
 The small GTPase function in several but little is known in cells or bone marrow. MSCs represent an increasingly used immunoregulatory modulate immune

Rap1 is a major re molecule to modulate of Rap1 in adhesion and recombination in

Methods
 MSCs deficient in knockdown or derived with regards to MSC

Results
 1) siRNA mediated - led to decrease induced firm adhesion - knockdown of inflammatory an
 2) siRNA mediated Exchange Fac - PDZ-GEF1 is re Vascular Cell Ad - treatment of MSC predominantly th
 3) Rap1 deficient M - homozygous MSC - Rap1^{+/+} MSCs a CD11a, CD11b, o - heterozygous Rap observed in huma
 4) The EPAC stimu activation and i - Homing experime homing pattern of away from lung, kidney and lymph

References
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