

REFERRAL INFORMATION FOR HEALTHCARE PROFESSIONALS

NHS

in Greater Manchester



HOW TO MAKE A REFERRAL

To send a referral and for more information visit:

www.gmactive.co.uk/prehab4cancer/

@prehab4cancer

What is the Prehab4Cancer and Recovery programme?

This free programme better prepares people physically and mentally for their cancer treatment. It supports them in their recovery from treatment and gives the opportunity for them to make life-long changes for overall improved health and wellbeing. It is available before and after cancer treatment.

- ✓ The programme incorporates exercise, nutrition and wellbeing for improved clinical outcomes and quality of life.
- ✓ It uses a personalised care approach to risk stratify participants and offer them a pathway that best meets their needs. For some this will be a self-managed exercise prescription, for others this will include supervised High Intensity Interval Training (HIIT) and strengthening sessions in small groups.
- ✓ It includes regular nutritional screening. Patients who are identified as medium to high risk will be highlighted back to their CNS or keyworker for dietetic assessment.
- ✓ In the prehab phase, prior or during treatment participants will receive an exercise 'dose' graded to their ability. In recovery they will be supported to exercise using a patient-centred approach, accessing activities they wish to in leisure facilities and the wider community.
- ✓ The GM Active fitness instructors are based across Greater Manchester, in leisure facilities local to where participants live. They are cancer rehabilitation qualified and experienced in working with people with health conditions.
- ✓ It is based on latest research and co-designed with relevant NHS healthcare professionals, exercise experts and user involvement.

Who should complete the referral and when?

Ideally the patient's CNS or keyworker will complete the referral, in consultation with the treating medical team. Any healthcare professional involved in the person's care can make this referral. The form requires a named referrer who will be the main point of contact for the GM Active Prehab4Cancer team to raise any concerns and for liaison after treatment. Referrals should be sent as early in the pathway as possible. The more time there is available for prehab prior to treatment, the fitter and stronger the patient will potentially be going into surgery. The GM Active team will contact the patient within a few working days of receipt of referral and should offer an appointment, local to them, within the same week.

Why is it important to refer your patient?

- ✓ Better response to treatment
- ✓ Quicker recovery
- ✓ Reduced risk of post-operative complications
- ✓ Reduced anxiety and improved mood
- ✓ Improved energy levels
- ✓ Patient take an active part in their cancer care
- ✓ Lower chance of cancer recurrence
- ✓ Improved general fitness and other health conditions
- ✓ Improves ability for patient to fulfil normal activities
- ✓ Greater sense of control and continuity of care

Who is the programme for?

Objective dynamic assessment of fitness is recommended (see pathways overleaf). The majority of patients assessed will experience benefits from this programme. Criteria includes:

- ✓ Cancer diagnosis (primary lung, upper gastrointestinal or colorectal)
- ✓ 18 years old and above
- ✓ Offered curative treatment and suitable for surgery
- ✓ Registered with a Greater Manchester GP
- ✓ Ability to access the programme either independently or with support from a carer/family member
- ✓ Has indicated informed consent to be referred

Please give people referred a patient and relative prehab4cancer information leaflet at the point of referral. For further copies contact the GM Active team.

Prehabilitation is an important component of the cancer pathway. The evidence-base shows you maintain and increase fitness, strength and muscle mass in less than 2 weeks. We recommend you help your patient prepare for their cancer treatment by referring them into the Prehab4Cancer and recovery programme.

For more information contact the team:

T: 0161 778 0557
E: prehab4cancer@nhs.net
W: www.gmactive.co.uk/prehab4cancer



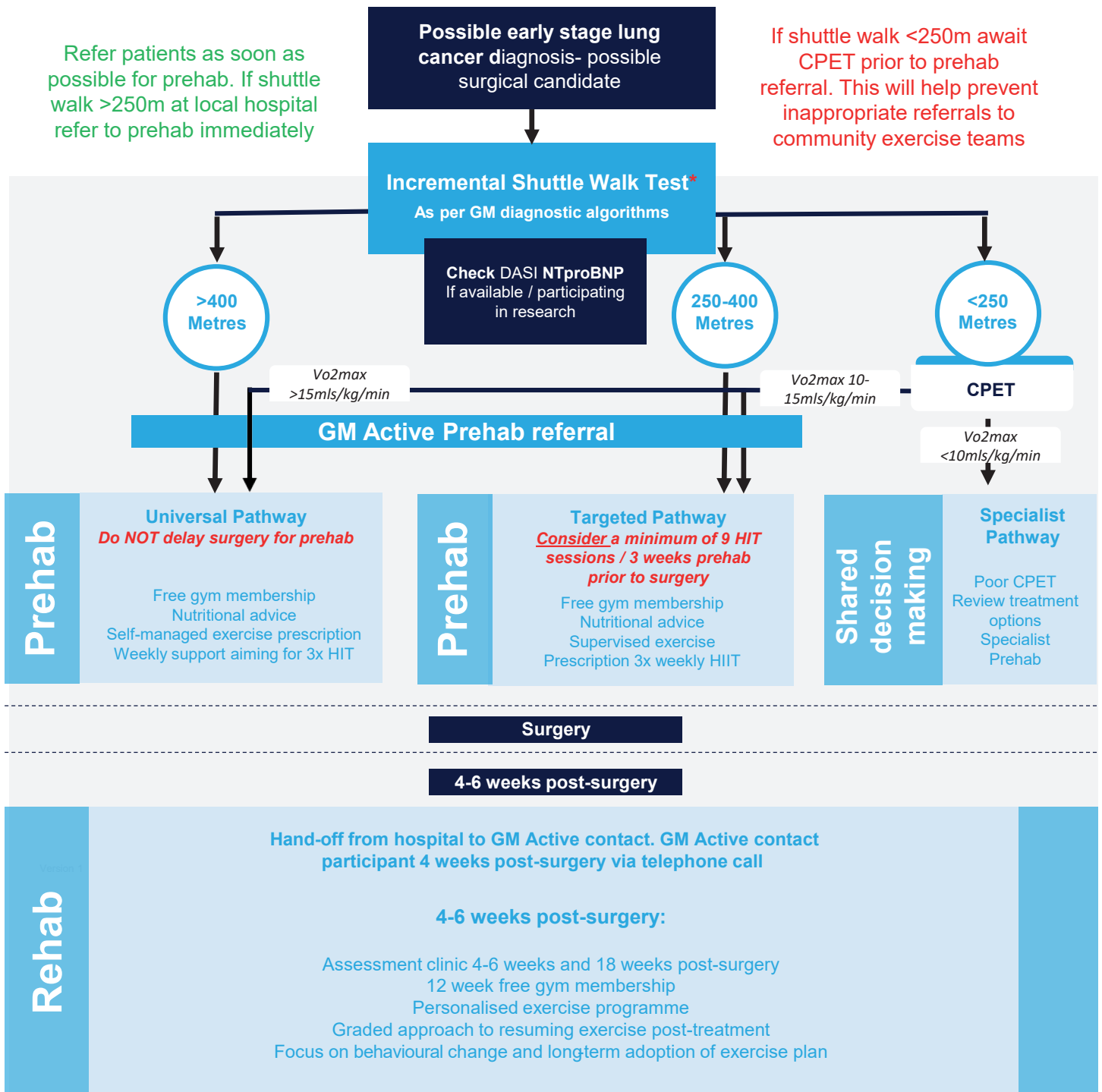
LUNG SURGICAL PATHWAY PATIENT JOURNEY

SURGERY PATHWAY

Refer patients as soon as possible for prehab. If shuttle walk >250m at local hospital refer to prehab immediately

Possible early stage lung cancer diagnosis- possible surgical candidate

If shuttle walk <250m await CPET prior to prehab referral. This will help prevent inappropriate referrals to community exercise teams

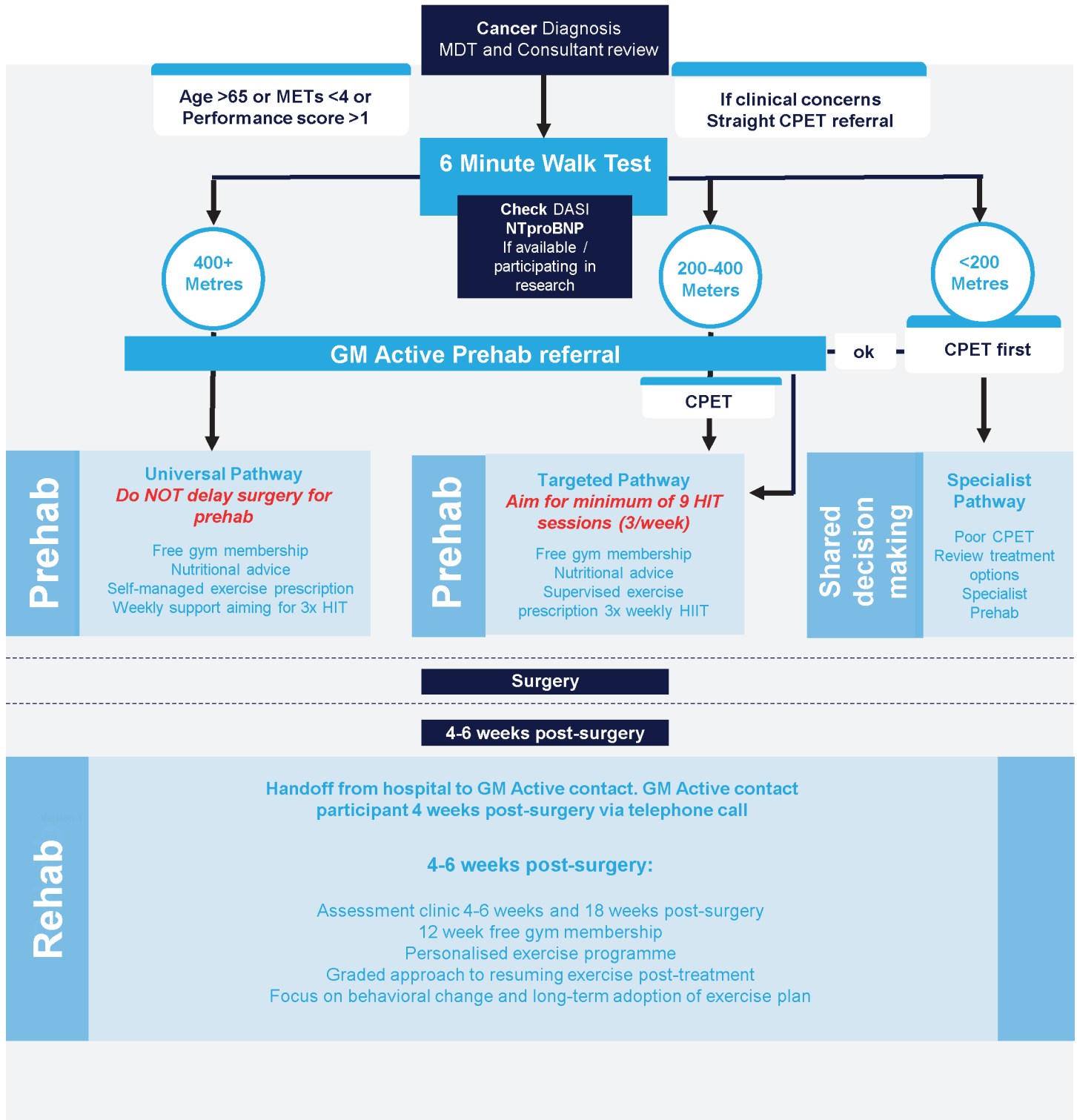


*The recommended functional test is the incremental shuttle walk test as the most reproducible and evidence based test in lung cancer surgery assessment. However, the 6 minute walk test may also be utilised if the ISWT is unavailable (using the same distance groups). A stair climb test with >22m, 12-22m & <12m groups used to define prehab needs may also be used in the absence of an alternative.



COLORECTAL SURGICAL PATHWAY PATIENT JOURNEY

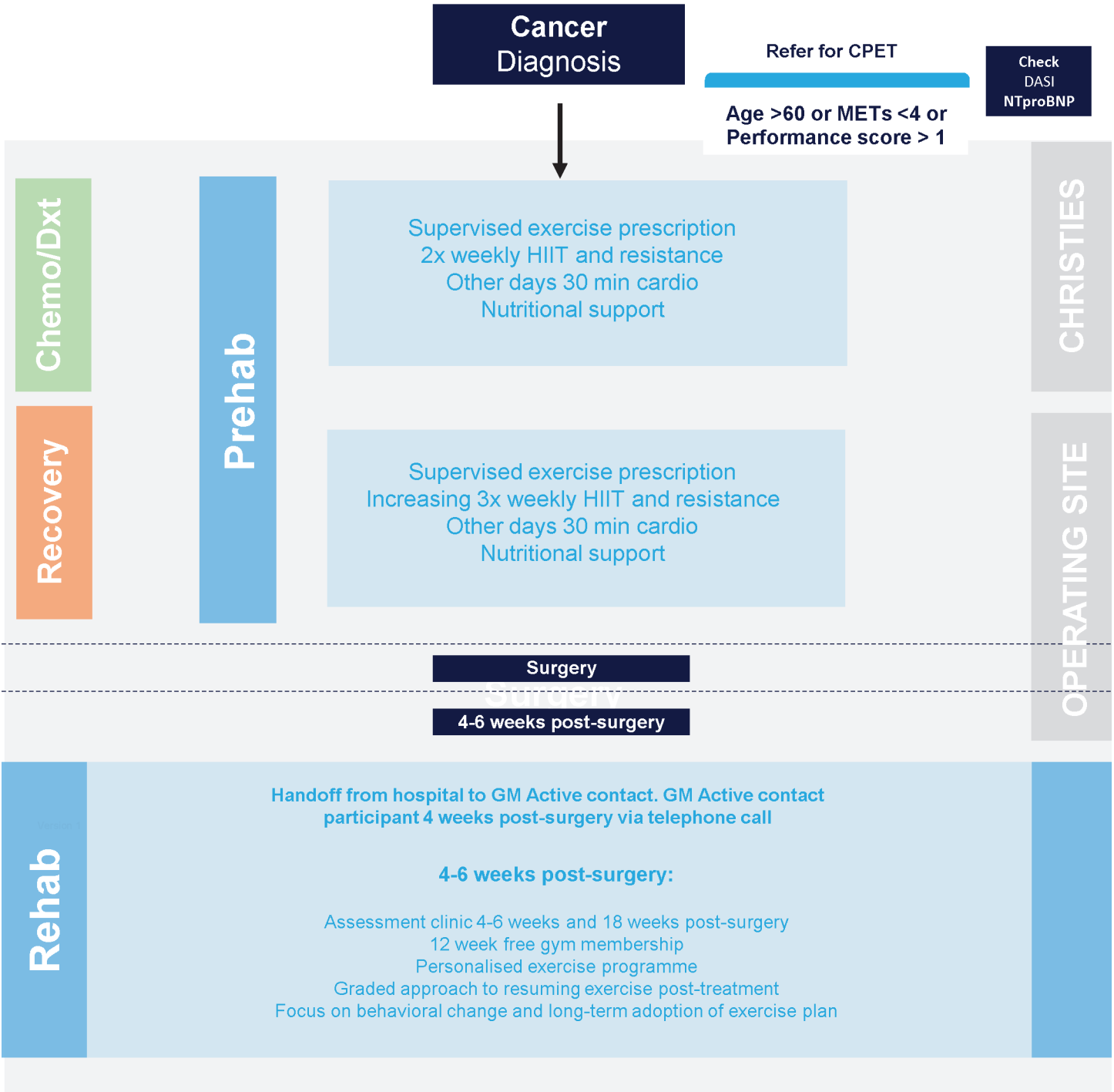
STRAIGHT TO SURGERY





COLORECTAL SURGICAL PATHWAY PATIENT JOURNEY

NEO-ADJUVANT CHEMO/DXT





UPPER GI SURGERY PATHWAY PATIENT JOURNEY

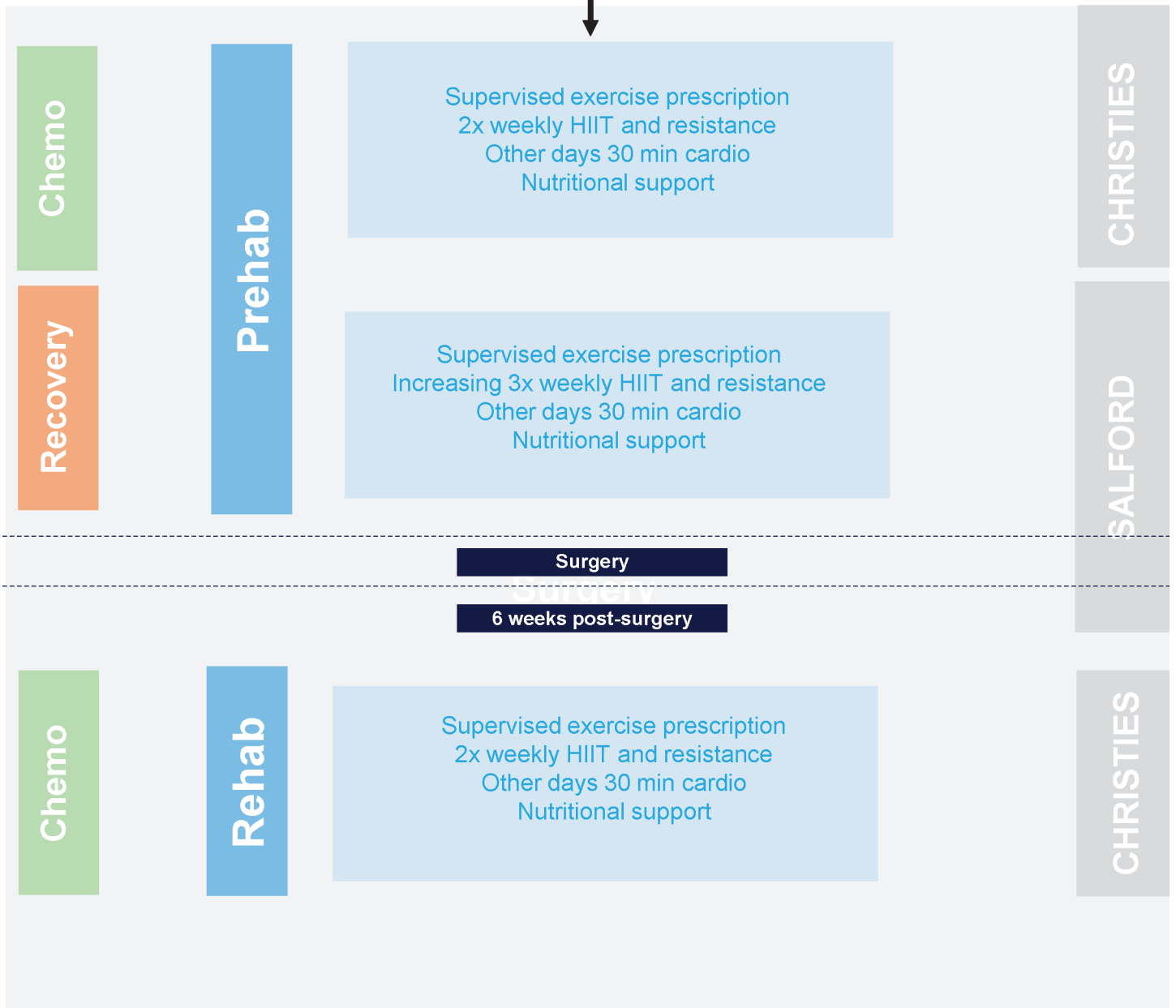
NEO-ADJUVANT CHEMO/DXT

**Cancer
Diagnosis**

Refer for CPET

Age >60 or METs <4 or
Performance score > 1

Check
DASI
NTproBNP





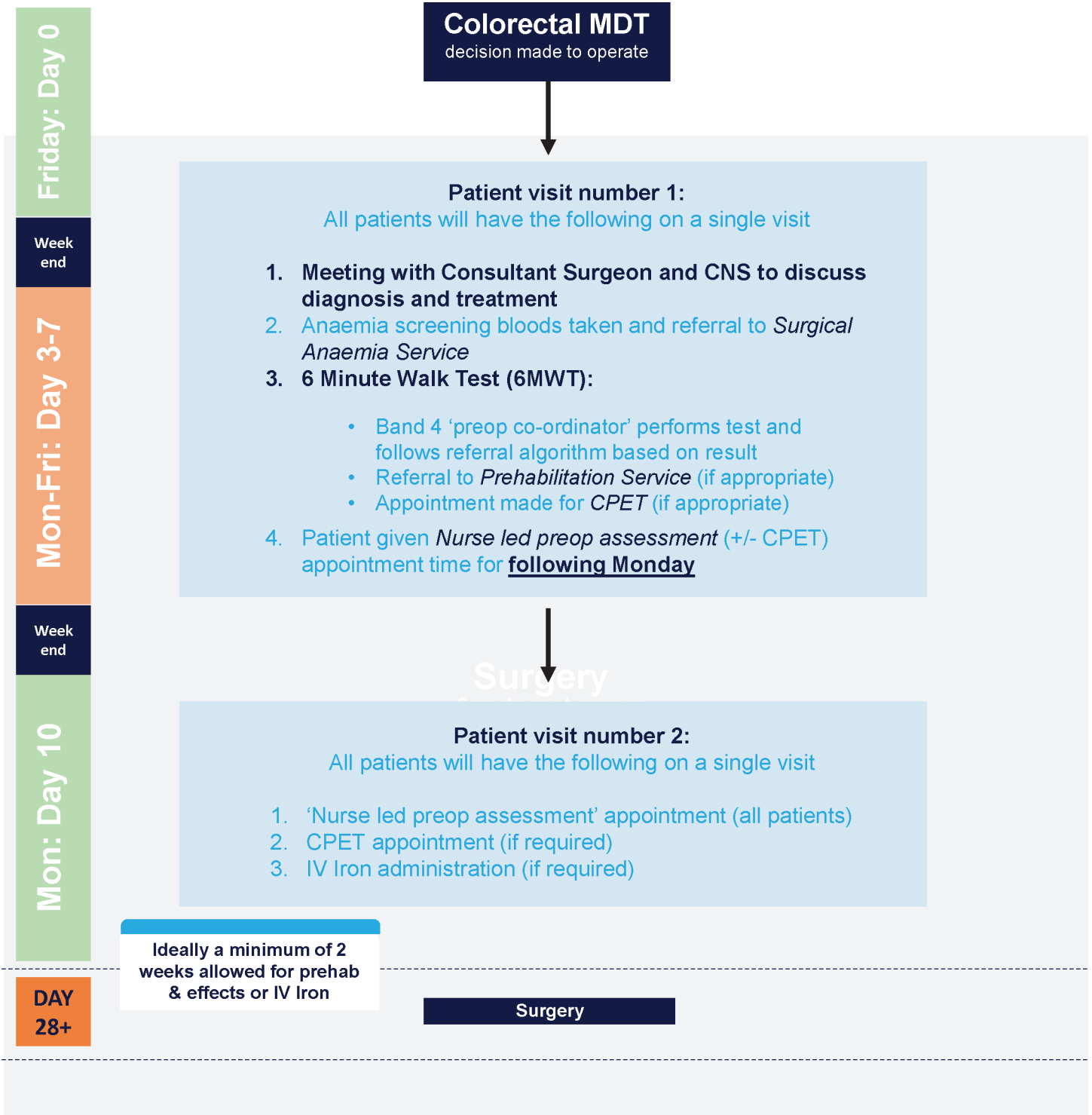
COLORECTAL PATHWAY PATIENT JOURNEY

Outcomes 30 day mortality 90 day mortality Clavien Dindo POMs day 7 and 15 30 day readmission 2 year survival	Patent EQ5D WHO-DAS 2.0 FACT FRAILITY PHYSIOLOGICAL
6MWT Exclusions: Unstable cardiac or resp disease (recent MI) Syncope attacks SaO <85% at rest PE < 2 weeks Patients unable to maintain a steady walking pace Lower limb claudication	Other potential contraindications: Severe hypertension Uncontrolled arrhythmia Symptomatic Severe aortic stenosis AAA > 8cms Advanced pregnancy Known HOCM
CPET Exclusions: Unstable cardiac or resp disease (recent MI) Syncope attacks PE < 2 weeks Patients unable to cycle	Other potential contraindications: Severe hypertension Uncontrolled arrhythmia Symptomatic Severe aortic stenosis AAA > 8cms Advanced pregnancy Known HOCM



PREOPERATIVE ASSESSMENT AND OPTIMISATION

COLORECTAL CANCER SURGERY





@prehab4cancer