

# Health Benefits RESEARCH REVIEW

Current research findings of interest to health benefits plan professionals

## CANCER CARE SURVEILLANCE

*How frequently should cancer survivors be monitored for disease recurrence?  
Is more always better?*

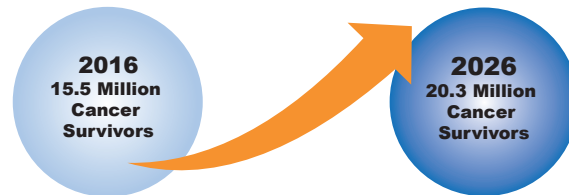
### EMPLOYER INSIGHTS

**Our discussions with the National Alliance Medical Director Advisory Council suggest the following in optimizing value in cancer surveillance:**

- ▶ While this research study addresses post-treatment surveillance for colon cancer recurrence, the principles discussed here apply broadly to surgical treatment of other types of cancers.
- ▶ Post-treatment surveillance for cancer recurrence is a critical process, and can be highly emotional for the cancer survivor – one that is often avoided by many patients. Educating and supporting patients can help them understand and navigate the benefits of post-treatment monitoring.
- ▶ The appropriate frequency of surveillance will depend on the severity and likelihood of cancer recurrence. This is an appropriate discussion for patients to have with their physicians in order to understand potential benefits and concerns and to reach a shared view on a path forward.
- ▶ The accuracy of the radiographic surveillance testing can be as important as the frequency of the tests for the patient. This can be affected by image quality (sophistication of the equipment), training of the radiologist reviewer, and commitment to an ongoing peer review process. Consider a potential center of excellence strategy for imaging.
- ▶ Support and encourage efforts by professional societies to continuously evaluate and update practice guidelines consistent with emerging comparative effectiveness research.

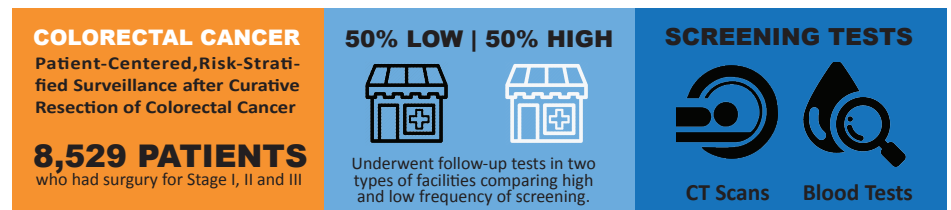
### What's the issue?

There are 15.5 million cancer survivors in the United States with numbers expected to hit 20.3 million in 2026. Only recently has attention been paid to their unique needs and the management of their post-cancer care. Both the cancer itself and its treatment can affect long-term health and quality of life. These growing survivor numbers clearly have a tangible impact on employers' healthcare costs, significance to post-cancer care policies, and workforce wellbeing.



### What did the PCORI-funded study do?

This publication focuses on recent findings from a study funded by the Patient-Centered Outcomes Research Institute (PCORI) about the frequency of testing/screening practices following surgery for colorectal cancer, addressing the question whether more frequent testing was better at spotting tumor recurrence than less frequent surveillance. [Link here to view the complete PCORI-funded study.](#)



### What were the results and their potential impact?

*"This PCORI-funded study found that healthcare facilities that do more frequent surveillance did not detect recurring cancers any earlier than facilities that do less frequent surveillance, suggesting more frequent testing provided no health benefit."*  
George J. Chang, MD, MS; The Alliance for Clinical Trials in Oncology Foundation



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In addition to these tangible financial benefits, the possible reduction in stress, related to fewer screenings, may also lead to improved mental health for patients.

# ASK THE EXPERTS

How does the featured PCORI-funded study compare?

Below are comparisons of the research findings with prevailing clinical guidelines and healthcare literature. This can provide an understanding of the broader context of the study and provide background in pursuing a dialogue with health plans and vendors regarding how the findings are being reflected in plan policies. This is our short list of how the featured PCORI research compares.

## Choosing Wisely® Initiative of ABIM Foundation Patient Advocacy

### Related Article

Evidence does not support measurement of CBC or liver function tests for surveillance following colorectal cancer treatment. [Learn more](#)

Society of Surgical Oncology (SSO)

Released July 12, 2016; updated June 20, 2019

### Updates and Partners

Updates its 550+ recommendations annually through partnerships with 80+ Medical Specialty Partners.

## National Comprehensive Cancer Network® (NCCN) Medical Guidelines

### Current Comparable Guideline

Recommends a higher-intensity screening rate than the high-frequency baseline utilized in the PCORI-funded study. [Learn more](#)

### Requirements for Guideline Updates

Updated at least annually, primarily based on published clinical evidence integrated with expert medical judgment of multidisciplinary panels from NCCN® Member Institutions. Real world evidence may be included based on assessment of its scientific merit and relevance.

## American Society of Clinical Oncology® (ASCO) Medical Guidelines and Research

### Current Comparable Guideline

Recommends a similar screening intensity rate to the high-frequency baseline utilized in the PCORI-funded study. [Learn More](#)

### Updates and Partners

Annually updates guidelines based on current evidence that meets specified criteria. PCORI-funded study would likely influence an updated guideline.

## American Gastroenterological Association (AGA) Research Database

### Review of the literature regarding the role of colonoscopy.

“...however, the frequency of colonoscopy had no significant effect on survival.”

Recommendations of the US Multi-Society Task Force on Colorectal Cancer. March 2016, Volume 150, Issue 3

[Learn More](#)

## JAMA® Network Research Comparison (Denmark 2018)

Example of randomized clinical trial with similar results to PCORI-funded Study. [Learn More](#)

# MORE FROM PCORI

Highlights from PCORI Portfolio “Recently Completed Projects”

## Intravenous versus Oral Antibiotic Therapy for Serious Infections in Children

**WHAT'S THE ISSUE?** Clinicians generally treat children who are hospitalized with complicated pneumonia and an acute bone infection called osteomyelitis with intravenous antibiotics. Although long thought to be necessary, PICC lines can be difficult to maintain and can lead to infection and other complications. It has been unclear whether oral antibiotics are as effective as those given through a PICC line.

**WHAT DID THE PCORI-FUNDED STUDIES FIND?** PCORI-funded studies show that after children left the hospital, there was no difference in effectiveness of oral and IV antibiotics for treating either infection.

[Link to Full Study](#)

### Estimated five-year impact of change to oral antibiotics


23,000 Work hours gained	\$6 Million Costs Saved	\$7.6 Million Costs saved
EMPLOYERS	PUBLIC PAYERS	PRIVATE PAYERS

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## Using a Decision Aid for Patients with Low-Risk Chest Pain in the Emergency Room

**WHAT'S THE ISSUE?** Chest pain is the second-most common reason people visit the emergency department (ED), accounting for more than 6.5 million visits annually in the United States.

**WHAT DID THE PCORI-FUNDED STUDY FIND?** A PCORI-funded study looked at ways to help people who come to the ED with chest pain, but who are at low risk of acute coronary syndrome, make better-informed decisions about follow-up care. Using a decision aid increased patients' knowledge about their risk, increased patient involvement in decision making, and decreased the rate of admission to an observation unit for cardiac testing. There was no difference in health outcomes within 30 days. [Link to Full Study](#)

 ESTIMATED BENEFITS OVER FIVE YEARS	9.4 MILLION AMERICANS could benefit from using the decision aid	
1.4 MILLION could opt not to stay in the hospital	800,000 fewer stress tests	\$4.8 BILLION in nationwide savings

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## About this Publication

This publication is part of a comprehensive dissemination campaign developed by the National Alliance through a PCORI Engagement Award to help close the gap between relevant healthcare research and the employer stakeholder. [Learn more.](#)