

Treatment of Cancer Patients: Role of Family Physicians

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Abstract

There has been minimal research on the role of family physicians in cancer patients' follow-up, particularly during the primary therapy period. We conducted a prospective longitudinal study of lung cancer patients to assess their family physician's engagement in their follow-up at various stages of the disease.

Keywords: Cancer, Primary care, Family medicine, Cancer screening, Health care

Overview

The health-care system must have measures in place to increase cancer control. Prevention (change of behaviours that increase cancer risk) and early diagnosis in the asymptomatic stage of the disease, which allows for curative therapies, are the most effective ways of minimising cancer morbidity and mortality. Barriers that make preventive and early diagnostic measures more challenging for both patients and physicians have been identified in this article. Discontinuity of care is one of the challenges that both patients and clinicians face. From both sides, the barriers were discussed. There were suggestions for lowering these barriers such that incentives could encourage the provision of preventive and early diagnosis. The incentives are doable; but, large-scale changes will necessitate the participation of the general population, physicians, and the health-care system [1-3].

The management of the spectrum of cancer by family physicians involves eight functions of health care: identifying and monitoring risk factors, early disease screening, diagnosis, staging, treatment, shared

care (between referring physicians and cancer specialists), follow-up monitoring, and advanced disease management. Continuity of care, comprehensive care, human behaviour, preventative medicine, community medicine, and integration and management skills are all emphasised in family practise training programmes [2-4]. As a result, family physicians are in charge of entire patient care. Graduates of family practise residency training are prepared for responsibilities in the care of chronic diseases such as cancer at every stage of their natural course. The author outlines the roles that family physicians are willing to play in the treatment of cancer patients at each of the disease's eight stages: 1) keeping track of risk factors-determine cancer risks for each patient and conduct necessary periodic reviews; 2) Early disease screening-use the American Cancer Society's screening recommendations and build an office strategy to keep this effort going; 3) Diagnosis-Follow up on positive test results and look into the causes of the symptoms you're experiencing; 4) staging-use the outcomes of staging procedures to advise patients' treatment choices; 5) Treatment-while some family physicians prefer to give chemotherapy under the supervision of cancer specialists, they will all be involved in counselling patients and their families, providing family support, and coordinating the use of community services ; 6) shared care (comanagement)-share the monitoring of treatment progress and side effects; this comprises patient and family support throughout the disease's course; 7) advanced illness management - manage symptoms, pain, and quality of life when cure is no longer an option; and 8) follow-up monitoring - continued follow-up of patients once they are considered "cured" (e.g., monitor for recurrence or second primary disease) [5].

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