AIM: To develop and implement a comprehensive supportive care program for prostate cancer patients and their partners in Vancouver, BC.

THE NEED FOR SUPPORTIVE CARE:
- The average life expectancy has increased by ~30 years since prostate cancer was first described, and men now often live decades after diagnosis and treatment. Curative treatments are possible, but side-effects impacting bowel, bladder and penile function are common with all treatments.
  - 31% of prostate cancer patients report problems with continence\(^1\)
  - 88% of prostate cancer patients report problems with sexual function\(^1\)
- Studies going back to 1994 show that the psychological distress on the partners of prostate cancer patients is often greater than that on the patients themselves\(^2-3\).
- There are many treatment options available for prostate cancer, all with substantive adverse effects. This makes choosing a treatment particularly stressful.
- Thus supportive care must begin at diagnosis.

THE PROSTATE CANCER SUPPORTIVE CARE PROGRAM

The Vancouver Prostate Centre’s Prostate Cancer Supportive Care (PCSC) Program, is a comprehensive program for both prostate cancer patients and their partners. The program was designed with input from MDs & PhDs in urology, radiation oncology, psychology, exercise physiology, nutrition, sex therapy, and stress management. The philosophy of the PCSC program is to provide supportive care from initial diagnosis past end-of-life care (i.e. bereavement). Using clinical, educational and evidence-based strategies, the PCSC program aims to address the physical and psychological needs of the prostate cancer population across the entire disease trajectory. Using a centralized database, the services provided in the program will be assessed with established research tools.

PROGRAM GROWTH TO DATE

As of January 31\(^{st}\), 2014 148 patients and 70 partners have enrolled in at least one module of the PCSC Program. We are continuing to grow each month.
- Feedback from each of the sessions has been overwhelmingly positive.

CHALLENGES & LONG-TERM GOALS

- Scheduling clinicians to participate in the program
- Implementation of research assessment of the modules
- Obtaining continued funding
- Documenting impact on health care costs
- Developing additional modules

REFERENCES:

FUNDING FOR THIS INITIATIVE WAS PROVIDED BY:
The Specialist Services Committee (SSC), a joint collaborative committee of the British Columbia Medical Association and the BC Ministry of Health.