

*The first of its kind*  
**NEW CLINIC IS LATEST ‘TACTIC’ FOR REACHING ADULT CANCER SURVIVORS**



Reaching out to an under-served population: Internal Medicine's Kutner.

A new clinic set to open this week aims to address the needs of a growing, previously under-served population: adult survivors of childhood cancer.

The Thriving After Cancer Treatment is Complete (TACTIC) clinic is a collaboration between the Department of Internal Medicine, The Children's Hospital and University of Colorado Cancer Center.

The first of its kind, the TACTIC clinic aims to help health care providers and patients alike better understand and address the clinical and psychological effects of childhood cancer, says Jean Kutner, MD, MSPH, associate professor and head of the

division of Internal Medicine at University of Colorado Denver.

“There is a growing effort nationally to raise public awareness of the need for adults to tell their physicians if they had cancer as kids,” she says.

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While there are more than 40 cancer survivorship clinics in the U.S., Kutner notes all of them are based in pediatric oncology settings. “There is nothing else like this in the country,” she states.

**Up 45%.** The idea for an adult cancer survivorship clinic, Kutner says, evolved from discussions she had with pediatric oncologist Brian Greffe, MD, and pediatric oncology fellow Kerry Moss, MD, both of The Children's Hospital.

“We were interested in looking at childhood illnesses, such as cystic fibrosis, congenital heart disease and congenital disorders and what they mean for the health of adult survivors,” Kutner notes. Their discussions eventually moved to adult cancer survivors.

According to the American Cancer Society, more than three-quarters of children treated for cancer live five years or longer, up 45 percent since the early 1960s. The number of adult survivors of childhood cancer in the U.S. exceeds a quarter million.

But survivors of childhood cancer, Kutner notes, face “late effects” of treatment, including heart failure related to chemotherapy. “Those who underwent radiation treatment are at higher risk for new cancers,” she adds, “and need medical surveillance.” Other concerns include neuro-cognitive deficits, anxiety, depression and infertility.

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Yet adult survivors often are not comfortable seeking medical care, and the health care system, Kutner says, is not well suited to meeting their needs.

**Not just primary care.** “The model of care for pediatrics is different,” she points out. “It’s a more comprehensive approach that makes sure children get care. As providers, we put more responsibility on adults, telling them, ‘It’s in your lap.’”

Many providers of adult care, she adds, are not well trained to address childhood illness. “We often simply don’t think to ask a patient, ‘Did you have leukemia when you were two?’”

The Children’s Hospital provides a survivorship clinic for kids with cancer. However, Kutner notes, “It’s not designed for adults.”

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That’s where the TACTIC clinic comes in, Kutner says. “We’re looking for a way to get [adults] hooked into the health care system. We’re not just providing primary care. We’re trying to help provide health maintenance for adult survivors.”

The TACTIC clinic will be open for a half day the first Thursday of each month starting July 3 in the University – Anschutz Clinic (AOP, 5th floor). Kutner says four patients have appointments for the opening.

**A portable ‘passport’** A TACTIC clinic visit will begin with an oncologist assessing the patient’s cancer, including treatment history. A general internist, Kutner says, will evaluate the patient’s overall health, making referrals, if necessary, to other providers. Finally, a Cancer Center counselor will perform a psychological evaluation and a nurse case manager will make any needed referrals for psycho-social follow-up.

Patients can also get telephone support for psycho-social needs via the Cancer Information Counseling Line (CICL), Kutner notes. Counselors focus on dealing with the uncertainties of survivorship – such as whether the disease caused infertility or physical challenges – and learning to live well after facing the disease.

Patients will receive a “passport,” Kutner adds, detailing they type of cancer they had, treatment and recommendations for follow-up, screenings and surveillance. “It will be something they can take from health care setting to health care setting that says to providers, ‘Here’s who I am.’”

The clinic will follow up by phone with patients after one and six months to see if they sought out necessary tests and counseling. “We’re trying to provide an efficient source of support for the wide spectrum of needs these patients have,” Kutner concludes.

Next month, the clinic plans to offer providers educational topics on treating survivors of childhood illness.

“It’s a good time for the clinic to start now that all of us [the two hospitals and the Cancer Center] are settled together on one campus,” Kutner says. “Our collaboration is what makes this campus so great.”