

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/project-oncology/combating-the-complexities-of-cancer-care-during-pregnancy/15460/>

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Combating the Complexities of Cancer Care During Pregnancy

Announcer Introduction:

You're listening to *Project Oncology* on ReachMD. On this episode, we'll hear from Dr. Alison Loren, who is the Chief of the Division of Hematology and Oncology at the University of Pennsylvania. Dr. Loren will be discussing her presentation from the 2023 ASCO Annual Meeting on the complexities of cancer care during pregnancy. Let's hear from her now.

Dr. Loren:

So I'm very glad to be talking to you today about this topic of cancer during pregnancy. It is an issue that comes up, thankfully, very infrequently, but when it does, it's a significantly complex issue that requires substantial contributions from a multidisciplinary team. It's becoming more frequent as our women decide on pregnancy later in life. And as cancers are becoming diagnosed earlier in life, and so this progression of people choosing later ages to become pregnant, along with the earlier ages of cancer diagnosis, we are seeing more cancers being diagnosed during pregnancy, and that trend is expected to continue. And so this is something that every medical oncologist and probably every practicing obstetrician should expect to be encountered with at least a few times during their career.

Being pregnant in and of itself causes many symptoms that can be confusing and may lead to a delay in the diagnosis of a cancer. For instance, people expect to be tired or have difficulty breathing, or to have enlargement of their breasts or pain in certain places. And so sometimes it can be difficult to understand whether a symptom is a normal symptom of pregnancy, or whether it's something that could be an indication of a cancer.

People who are pregnant can receive certain diagnostic procedures like biopsies, but surgical procedures need to be carefully planned and one of the most important determinants of any procedure or diagnostic or therapeutic is where in the pregnancy, the patient is. And then, of course, the very challenging consideration of chemotherapy and other therapeutics during pregnancy is quite challenging as well. Many chemotherapy agents are teratogenic. And so there's a high risk of fetal malformation if they're given early in the pregnancy during that period of embryogenesis, up to the 12th or 14th week. Whereas chemotherapy can be given relatively safely after that point, although there are of course, still potential risks to both the pregnant patient and the fetus.

One of the important take home points that we wanted to emphasize was that a multidisciplinary team is key. So not just the usual players of a medical oncologist, a radiation oncologist, a surgeon, nursing social work, but also OB GYN and maternal fetal medicine. psychosocial support, including social workers, therapists, and other team members are really essential to making sure that the whole patient and the family are being cared for. As you can imagine, this is an incredibly distressing situation, taking two of the world's most stressful medical situations and putting them together can be overwhelming. A second take home point is that it can be safer than one might think, to optimally treat patients during pregnancy who have cancer. And that the first principle always should be to think about what the optimal care for the mother or the pregnant patient is, and then work from there. Another important take home point is the point about trying to maintain the pregnancy for as long as possible, ideally as close to term as is determined safe. Because the harms to the fetus from being delivered early do seem to be substantial.

I also want to mention that the care of these complex patients is probably best left if possible to a tertiary care center that has some experience in this realm. But if a transfer to a higher level of care is not possible, there's an excellent online resource which is called the advisory board on cancer, infertility and pregnancy. The website is a b dash c i p.org. And part of that resource includes obtaining advice from an international multidisciplinary board of experts in this space. So this is a place where you can go and request online consultation to get some guidance about how to manage these complex situations.

Announcer Close:

That was Dr. Alison Loren discussing the complexities of cancer care during pregnancy. To access this and other episodes in our series, visit [reachmd dot com slash Project Oncology](https://reachmd.com/ProjectOncology), where you can Be Part of the Knowledge. Thanks for listening!