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/multidisciplinary-coordination-in-nsclc-care/49136/

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The Importance of Multidisciplinary Coordination in NSCLC Care

Announcer:
This is *Project Oncology* on ReachMD, and on this episode, we'll learn about the importance of multidisciplinary coordination in non-small cell lung cancer care with Dr. Laura Alder. She's an Assistant Professor of Medicine at Duke University School of Medicine in Durham, North Carolina. Let's hear from Dr. Alder now.

Dr. Alder:
So multidisciplinary coordination is so important in non-small cell lung cancer because it is ever-growing and really complex decision-making. And this is true across staging, biomarker testing, multimodality treatments, surgery, radiation, and novel therapeutics like antibody-drug conjugates.

It's so important to have that whole team on board to make sure that we're making the best decision for the patient early on, we're not missing anything, everyone's on board, and we're giving the patient the best and highest-quality care that we possibly can. So that includes medical oncologists, radiation oncologists, thoracic surgeons, pulmonologists, interventional pulmonologists, radiologists, pathologists, palliative care, and our nursing staff. The whole medical team is so important.

Effective collaboration really translates into good communication. So that usually involves regular tumor board meetings where cases are discussed before treatment initiation where we can review all relevant imaging, pathology, and molecular testing to make sure that we arrive at the best treatment plan that we can for that patient. Especially in early-stage lung cancer, the surgeon input is so important because that surgical resectability really needs to be decided upfront, and that can help us make decisions in that early-stage setting to make sure that we're getting our patients the very best outcomes.

And so what I love about multidisciplinary care, and oftentimes even multidisciplinary clinics, is a plan can be made with the patient right in the center about what the next few days, weeks, and months will look like. And that really makes sure that we have the best available plan, and we don't miss any opportunities or treatment delays. We make sure that we get the medical oncologist's opinion about biomarkers, which we know is needed before we start any treatment. We make sure to know if they're resectable or not. We make sure that we have a consensus about the tissue diagnosis. And then also at the center there is knowing about the patient's personal goals as well as their performance status, their comorbidities, pulmonary function tests, etc.

And then lastly, I do really want to say just how important it is to integrate supportive services like palliative care that focus on symptom management, psychosocial support, and advanced care planning. It's so important because that really helps improve the patient's quality of life. It can improve outcomes, and that really needs to be integrated early on and kept into the discussion every step along the way.

Announcer:
That was Dr. Laura Alder talking about multidisciplinary coordination in non-small cell lung cancer care. To access this and other episodes in our series, visit *Project Oncology* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!