Global Pandemic Advocacy: Evolving Patient Needs and Organizational Challenges

Amy C. Moore, Ph.D.
GO₂ Foundation for Lung Cancer
United States
I do not have any relevant financial relationships to disclose.
Timeline of global pandemic advocacy:

March 2020
“pre-pandemic”

Apr – May 2020
First wave

June 2020
Post SIP
Japan Lung Cancer Alliance

- Needs assessment early **March** (n = 354)
- Over half (55%) respondents anxious, especially about daily activities (going outside, transportation)
- Same percentage anxious about treatment
- Impacts on care not yet being felt
- Implications for treatment adherence
- Need to reassess impacts with follow-up survey
Global Lung Cancer Coalition

- Global survey of lung cancer orgs Apr – May
- 23 respondents
- Increased patient requests, organizational pivots/financial pressures, continuity/quality of services
- Follow-up surveys Winter 2020, Spring 2021
LUNGevity

- Post SIP patient needs assessment June (n=302)
- NSCLC, <65, 1/3 in COVID hotspot, 61% active Tx
- Nearly all (96%) concerned about impacts on care
- Top anxieties related to risk of having LC and COVID exposure during care
- Over half (55%) feel unprepared for LC care post SIP
- Surprisingly, those on active Tx feel better prepared
- Patient-specific parameters, geography important
Conclusions:
• Patient and organizational needs change over time
• Opportunity for follow-up surveys to understand how these findings differ now vs early in pandemic
• Need for coordination on multiple fronts: data sharing, information dissemination, maximizing impact with limited resources/staff, patient needs
• How will these needs change with arrival of vaccinations?