

# Cancer Rehabilitation Program

## Quality of Life and Social Aspects

As a result of constant advances in medicine, the number of cancer survivors is steadily increasing. Cooperation between Government, Parliament and volunteer-based cancer organisations in Italy has put the country in the forefront in the field of protection and recognition of rights for cancer survivors.

Francesco De Lorenzo, Elisabetta Iannelli and Paola Varese

**Cancer survival rates are increasing in Europe<sup>1,2</sup> and in the USA,<sup>3</sup> and prevalent cases represent a growing proportion of the total population.** According to estimates based on cancer registry data, there are more than 14 million cancer survivors in the European Union<sup>4,5</sup> and 10.5 million in the US.<sup>3</sup> In Italy they number more than 2 million. According to the country's social security institute, the Istituto Nazionale Previdenza Sociale (INPS), cancer is now the leading cause of disability and invalidity (54% and 30%, respectively).

For this reason FAVO\*, the federation of voluntary-based cancer organisations, has made cancer rehabilitation a priority for their advocacy programmes. In 2003, the first national survey on cancer rehabilitation centres showed that the right to rehabilitation was not recognised for numerous cancer survivors, especially in southern Italy. A project was therefore designed to

gain insight into cancer survivors' needs and access to rehabilitation services nationwide, and also to show that a multidisciplinary approach to providing these services would be of great benefit.

The project was sponsored by Italy's Ministry of Health, and carried out in partnership with scientific societies, cancer institutes and experts from leading regional cancer networks. The first *White Book on Cancer Rehabilitation* was subsequently produced to promote a better quality of life for cancer survivors.

Cancer rehabilitation is about more than functional recovery, it has to be available from the time of diagnosis through palliative care. This involves also psychological support and cancer-specific multidisciplinary programmes – special post-surgery rehabilitation strategies have been developed,

for example, for patients with rectal and prostate cancer. It also involves social issues, and much lobbying was done to ensure early recognition of even temporary disability status, for instance following chemotherapy. The most striking achievement has been new regulations that facilitate and speed up social security invalidity



# mes in Italy



benefit claims.<sup>6</sup>

In 2008, the first national observatory of disparities in cancer treatments was established jointly by FAVO, the INPS, the Italian Association of Medical Oncology (AIOM), the Italian Association of Oncologic Radiotherapy (AIRO) and CENSIS (Study Centre of Social Investments). The

Cancer rehabilitation is about more than functional recovery for people with cancer... it also involves psychological support and cancer-specific multidisciplinary programmes.

observatory publishes an annual report in which disparities and inequalities in therapeutic treatment and care are documented. As a result, it is now possible to study the economic burden of cancer – both the costs of acute and chronic treatments and the indirect social costs, which include days lost from work and delays in treating symptoms, which can result from failing to perform a specific cancer rehabilitation programme.

FAVO representatives have contributed to the shaping of the National Cancer Plan. Thanks to their success in showing that cancer rehabilitation is an economic gain rather than a loss, Italy is now among the few European countries to take a comprehensive approach to cancer rehabilitation.

A more comprehensive cancer rehabilitation programme is being evaluated within a study on the new needs of cancer survivors at five years after diagnosis.

The study will identify long-term cancer-related and treatment-related effects and try to identify ways to prevent them; it will also define specific cancer rehabilitation programs to be used if needed. As cancer rehabilitation is now part of the approved National Cancer Plan, the healthcare system will have to design and pay for cancer

rehabilitation programmes.

Welfare and job protection benefits are essential elements within cancer rehabilitation programmes since they improve survivors' quality of life, and help them return to a 'normal' life after cancer treatment ends.

Concerted lobbying forced the Government to take on board the requests coming from cancer organisations and enact the necessary legislation. A major achievement in the field of job protection for cancer survivors and their families was reached when a new regulation, passed in 2003, gave cancer patients working in the private sector the opportunity to switch from full-time to part-time positions while under treatment, and to revert to full-time arrangements according to their needs and capabilities.

The same right has now been extended to public employees while people with cancer patients in their family are given priority over part-time applications where such positions are available.

\*FAVO, the Italian Federation of Volunteer-based Cancer Organisations, was established in 2003 as an umbrella organisation to represent the views of over 400 Italian volunteer-based, non-profit associations dedicated to providing support and helping improve the quality of life of cancer patients and their families/carers. FAVO's mission is to network cancer patient organisations at any level (national, regional and local) and to increase the influence of cancer patients on health policy-making by making their voice heard so that their needs are met and their rights protected.

Details of the references cited in this article can be accessed at [http://www.cancernurse.eu/communication/eons\\_magazine.html](http://www.cancernurse.eu/communication/eons_magazine.html)