

# A Multidisciplinary Approach to Survivorship

By Karen Berg, MS, RD, CDN

A cancer diagnosis can leave people feeling anxious, depressed, confused and alone. Research shows that support groups in this population help with many things including medical compliance and less feelings of depression (1). According to Katarina Miley, LMSW, oncology social worker at The Cancer Institute at St. Francis Hospital (The Cancer Institute) in East Hills, NY, "There are many research studies and publications that support the benefits of support groups in cancer patients." Lisa Petgrave-Nelson, LMSW, OSW-C, oncology social worker at The Cancer Institute, agrees. "Support groups are especially important for cancer patients to attend with emotional support being the number one benefit," she says. "Support groups give patients the opportunity to feel hopeful, exchange information, deal with the practical challenges of living with cancer and allow group members to share their experiences and emotions."

As registered dietitians (RDs), we know the importance of good nutrition throughout the continuum of care for a cancer patient. People often turn to RDs after a cancer diagnosis because they want to know what to eat to improve their health and achieve better outcomes. Research has shown the benefits of a plant-based diet for cancer prevention and to prevent recurrence (2). Therefore, RDs at The Cancer Institute usually encourage patients to follow a plant-based diet.

At The Cancer Institute, monthly interdisciplinary meetings are held to identify how best to serve the patient population. The Cancer Institute patients are surveyed annually to find out what they are most interested in learning about or what programs they would like to participate in; and food and nutrition is always high on that list. In late 2017, attendance in traditional support groups was faltering and people were less likely to sign-up or attend support groups even if they did RSVP. In order to boost attendance at support groups, the dietitians and social workers tried a non-intimidating approach and it started out with the simple hypothesis: "If you bring food, people will come."

RDs began to work with the St. Francis Foundation to apply for a grant for a collaborative series that included both nutrition education and social support. In 2018, with a generous donation by the Manhasset Women's Coalition Against Breast



Cancer (MWCABC), *Nourish. Care. Connect.* was created. The three-week series took place in the main conference room at The Cancer Institute. Each week oncology dietitians lead a 30-minute food demonstration and tasting which was followed by meaningful conversation and activities led by oncology social workers. With funds provided by the MWCABC, RDs were able to purchase all food and equipment needed as well as cookbooks and other things participants were able to take home each week. RDs came up with the themes and menus and provided recipe cards of all foods prepared for everyone to take home.

Flyers (diagram 1) for the program were placed around The Cancer Institute and distributed to patients. Local partners and doctors distributed the flyer as well, and social media was also utilized to promote the event. People were asked to sign up in advance and report any food allergies, restrictions or intolerances that should be taken into consideration. Substitutions were always provided if someone who attended could not eat the main foods that were prepared. RDs wanted to use the series to bring people together over food so they took an all-inclusive approach so that everyone felt comfortable and could partake in the things being prepared. Fifteen people RSVP'd for *Nourish. Care. Connect.* in 2018 and there was an average of 10 patients and caregivers at each session, as opposed to 4-6 people on average for traditional support groups.

The theme in 2018 was easy, quick bites. The first week patients got to sample a red lentil soup (made in less than 20 minutes), the second week were energy bites that didn't require any cooking (or food processors) and the third week was a secretly green smoothie and parfait bar. During one of the social worker-led discussions, participants were asked what kinds of things they do to make themselves happy. A long-time patient with metastatic breast cancer responded, "Programs like this... It's nice to get out of bed and know I have something fun on my

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### Vegetarian Chili

**Ingredients**

- 2 tbsp. olive oil
- 1 onion, chopped
- 1 clove garlic, chopped
- 2 carrots, peeled and chopped
- 1 green pepper, diced
- 1 (4.5 oz.) can mild diced green chiles
- 1 cup brown lentils
- 1 (15 oz.) can red kidney beans
- 1 cup water
- 3 cups low-sodium vegetable broth
- 1 (15 oz.) can diced tomatoes
- 1 low-sodium taco seasoning packet
- 1 cup butternut squash or sweet potato, cubed (optional)

**Directions**

1. Add all ingredients to your slow cooker in the order listed. Stir to combine. Cook on high for about 4-5 hours.
2. Serve and enjoy!


*\*Toppings that pair nicely with this dish include Mexican cheese blend, salsa, sour cream, and avocado!*

**Nutrition Facts (Makes 6 Servings):** 260 calories, 5g fat, 465mg sodium, 45g carbohydrate, 15g fiber, 12g protein




The Cancer Institute at  
St. Francis Hospital, The Heart Center  
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### Secretly Green Smoothie

**Makes 2 Servings**

**Ingredients**

- 1 cup plain greek yogurt
- 1 cup cold water
- 1 tablespoon honey
- 1 cup fresh spinach, washed & patted dry
- ½ cup frozen pineapple chunks
- 1 cup whole frozen mixed berries
- 1 ripened frozen banana
- 2 tablespoon ground flaxseed

**Instructions**

1. Add ingredients to blender in the order listed. Blend until smooth.

**Nutrition Facts (1 Serving):** 225 calories, 2g fat, 69mg sodium, 37g carbohydrate, 4g fiber, 14g protein





calendar and not just another doctor's appointment." Petgrave-Nelson was not surprised by this remark and affirms that "support groups contribute to the quality of life of the patients who attend." Post-class surveys were given at the last session and all the feedback was positive.

On the surveys and throughout the series, many participants mentioned that they were curious about new gadgets and appliances that are supposed to make life easier, like the Instant Pot, Air Fryer and slow-cooker.

When it was time to re-apply for 2019 grants, *Nourish. Care. Connect.* already had a following and a theme: "how to use new small appliances." With all the patient enthusiasm, it got funded by MWCABC for a second time. The series took place in September 2019 with 16 people RSVP'd and an average of 12 attendees each week. The first week oncology RDs demonstrated how to make a high protein macaroni and cheese in the Instant Pot, the second week was several vegetarian snacks in the Air Fryer like crispy Brussels Sprouts, zucchini fries and

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onion rings, and the last week was a vegan chili in the Instant Pot.

A cancer survivor, who has several young kids at home, emailed the RDs the following week to report that all the recipes were accepted by her kids. “My pickiest child said the onion rings were good,” she wrote. “Almost as good as Burger King.” Her kids also loved the high-protein macaroni and cheese, which she said will now be a new staple in her home.

The foods prepared both years were predominantly plant-based and highly nutritious. The goal is always to introduce people to foods or recipes they have never tried before and really teach people that good food doesn’t have to be hard to prepare or taste bad. Throughout the program RDs highlight the healthy attributes of each food provided.

For the 2019 series social workers focused on self-care. “Self-care is essential for all of us but even more so for cancer patients who battle the physical pain, anxiety, depression, stress and every day worries,” said Petgrave-Nelson. “Whatever makes a patient feel good in a healthy way is considered self-care.” For the last session participants were given rocks to paint. One person wrote the word “breathe” on their rock as a reminder to be grateful for each breath. When social workers asked what patients are most grateful for, one patient with metastatic breast cancer,

who came in holding two separate ice packs, responded, “Programs like this make me forget about all the pain I’m in.” Another patient who now has a recurrence of breast cancer that was originally diagnosed over ten years ago said: “This was my first ever cancer group event, I was encouraged to attend and I am very thankful that I did.”

Miley explains why this collaborative approach can be so successful. “Utilizing an interdisciplinary approach is important in working with any patient population, it is especially useful in working with patients who have cancer,” she says. “When a patient is diagnosed they are often working with many different individuals from a variety of disciplines, many of our patients wonder if all of these disciplines work together to provide the best care. Creating and being a part of interdisciplinary groups shows our patients that we are here and able to support them in many different ways.”

As an RD it is so important to teach people about good nutrition throughout the continuum of care, but in order for someone to even care about good nutrition they have to want to be involved in self-care. That’s where this kind of program is the perfect marriage. “I am so very grateful for these types of groups,” says another survivor. “They provide me with the support I need to get out of my house and not feel alone in dealing with my health issues.”

Food always brings people to the table, and good conversation is what keeps people sitting around long after the plates are cleared. If the program gets funded again in 2020 the hope is to do one-pot meals and sheet pan meals and to provide the attendees with recipes that are “easy”, “fool proof” and “have less clean-up.”

“Utilizing an interdisciplinary approach can help to increase patient trust in their team and see that their team has the ability to work together to bring them the best knowledge, content and experience possible,” says Miley. Food isn’t just for nutrition, according to Petgrave-Nelson. “Food is important for our physical and mental health. Whatever the recipe or dish, food helps to bring families together and promotes a sense of gratitude.” This social non-threatening environment provides a great platform to discuss nutrition and self-care, while increasing social interaction and building social support among cancer survivors.

## References

1. DiMatteo, M. R. (2004). Social Support and Patient Adherence to Medical Treatment: A Meta-Analysis. *Health Psychology, 23*(2), 207-218. <http://dx.doi.org/10.1037/0278-6133.23.2.207>
2. World Cancer Research Fund/American Institute for Cancer Research. Diet, Nutrition, Physical Activity and Cancer: A global Perspective. Continuous Update Project Expert Report 2018.

