

Issue  
07

October,  
2015

# Newsletter



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**eSMART: Randomised controlled trial to evaluate electronic Symptom Management using the Advanced Symptom Management System (ASyMS) Remote Technology for patients with cancers**

A European trial aims to demonstrate benefits for cancer patients using a real-time, mobile phone based remote patient monitoring system, the Advanced Symptom Management System (ASyMS). It is anticipated to greatly improve patient outcomes and delivery of care both during and after chemotherapy treatment. [+Find out more](#)

## WELCOME

### Upcoming Events

• [BCS Tayside and Fife Branch and BCS Health Scotland Specialist Group](#)

Dundee, Scotland, 4<sup>th</sup> November 2015

Margaret Moore & Dr. Constantina Papadopoulos

"eSMART Implementing ASyMS Technology – Advances"



Dr Patricia Fox  
University College  
Dublin

### WELCOME from the UCD eSMART Research Team

We would like to welcome you to the October Edition of the eSMART Newsletter. Since the last issue of our newsletter there has been a lot of activity in each country. We are delighted to announce that the first patients recruited to the eSMART have been recruited in St James's Hospital, Dublin, Ireland and in Agioi Anargiroi Cancer Hospital, Athens, Greece. We anticipate that many of the other sites will start the feasibility study in the coming weeks. This issue of the newsletter includes an interview with the Lead Cancer Nurse in St James's Hospital, a perspective on starting a feasibility study by a Research Assistant, a Research Nurses' view on the job, and some Twitter news. Thank you for your continued support with Work Package 1 and best of luck in getting the study started in your clinical sites.



Dr Eileen Furlong  
University College  
Dublin

## eSMART NEWS

### The Newsletter Team



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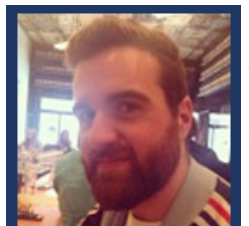
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### Preparation for Feasibility Testing

In the lead up to the eSMART feasibility testing period, there were several considerations at each clinical site to ensure its effective rollout. Electronic and physical site files were finalized for each site to ensure that all relevant study documentation was in place including contracts, delegation of duties, patient information and consent forms. Additional training was provided to clinical staff involved in the eSMART feasibility period. These training sessions focused on the alert handling process, patient randomization and enrolment. Clinical staff were provided with an opportunity to ask questions about the eSMART technology involved and various other aspects of the study such as inclusion/exclusion criteria.

From a technological perspective, the handsets (patient and clinicians) and PROMs tablets were updated with the latest revision of the eSMART software devised by Docobo. Furthermore, the eSMART team liaised with local IT departments to ensure that clinical staff could access the eSMART website, technical support site and randomization website. Local IT departments ensured that handsets had access to their local site Wi-Fi, should they be unable to connect to the relevant network. These aspects are essential for ensuring the effectiveness of the eSMART intervention during its feasibility study period, as well as, allowing the eSMART team and involved clinical staff to identify and address any potential issues for the RCT in Phase 2.



This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement number 602289

## INTERVIEW



Catherine O'Brien  
Lead Cancer Nurse  
St. James's Hospital,  
Dublin

**Please, describe your career in Cancer care so far.**

"I have worked for over 20 years in cancer care including bone marrow transplantation in University College Hospital, London, medical oncology including radiotherapy and oncology inpatient and day care in Ireland.

My experience has included both managerial and clinical roles. I spent over 10 years as a Clinical Nurse Specialist (CNS) in chemotherapy during which time I completed my Masters in Clinical Practice. My thesis involved the introduction of a Febrile Neutropenia Risk Assessment tool for patients with cancer receiving chemotherapy to determine if they should receive granulocyte-colony stimulating factor (G-CSF). The research resulted in the reduction of febrile neutropenia in St James's Hospital by over 50% following which the tool has been introduced as standard practice into clinical care. As the clinical nurse lead, my current responsibilities include staff development and education, practice development and nursing research. I am also very fortunate to maintain my clinical competencies while being responsible for the

nurse-led treatment and peripherally inserted central catheter (PICC) clinics."

**What is your current role in eSMART project?**

- "1) To motivate and educate my nursing colleagues on the eSMART study including the benefits for both patients and nursing staff,
- 2) To co-ordinate all documentation in preparation for the study,
- 3) To recruit, consent, educate and randomise patients for the study,
- 4) To train the nursing staff on Alert Handling and
- 5) All aspects of the study including patient recruitment, alert handling, case note reviews."

**How do you believe that the study will benefit SJH patients?**

"The study will provide direct access for the patients to the nursing staff. The alert handler will contact the patient within a specified period of time. We have a dedicated Telephone Triage phone number but due to staff shortages, this is often on answer machine which is checked regularly but the patients do not trust they will receive a call back or just want to speak directly to a nurse. Often the patients are uncertain whether their 'complaint' is a normal consequence of the treatment or if they should report it. With the ASyMS questionnaire, they report their symptom and can be reassured a nurse will contact them back. The ASyMS questionnaire reminds the patients what the

side effects they should expect are. They get so much information in the beginning, it can be difficult to remember everything. This emphasises the main issues to be expected."

**Are there any other comments about the project?**

"My nursing colleagues are delighted to have the opportunity to be involved in such a fantastic study and are very enthusiastic about getting started. They acknowledge that they would routinely take phone calls from patients unwell or with queries following their treatment and this allows them the time to phone the patient when they have the time spare. They also feel that knowing the patient's complaints through the alerts prior to phoning them allows them the time to consider their advice and recommended treatment."



Jess Lower  
Research Nurse, UCD

**What is your background in cancer care?**

"Prior to starting as a Research Nurse in UCD, I was a Clinical Nurse Specialist for five years in Liver and Pancreas Cancer at the Queens Medical Centre in Nottingham, United Kingdom. Whilst working in this challenging speciality, my interest in research was sparked by numerous research projects being carried out by my peers. I was lucky enough to be awarded a Scholarship by the National Institute for Health Research, to do a Masters in Research Methods (Health). Having always been driven to hear patients' opinion and improve services on their behalf, my thesis was "Can increased pre-operative Hepatobiliary (HPB) Clinical Nurse Specialist (CNS) input decrease anxiety levels and improve satisfaction for patients undergoing curative

surgery for Colorectal Liver Metastases (CRLM)." After completing the Masters, I moved to Dublin (not just for eSMART!) and found the perfect project for me to pursue."

**What has driven you to eSMART project?**

"As already described, I have always been enthusiastic about increasing patient satisfaction, and improvement of patient experience, particularly during the challenging stages of cancer diagnosis, treatment and into survivorship. eSMART seemed such an intuitive and patient centred approach, which really motivated me to want to be a part of the team."

(continued)

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## INTERVIEW

### What challenges did you face so far in the project?

"Having never worked on an international project previous to eSMART, I was naively unaware of the challenges to be encountered along the way. Appreciating all of the background work that occurred before I joined the team, and experiencing first-hand the day to day challenges in getting the feasibility study up and running has opened my eyes to the wider world of clinical trials, and I am only grateful for these experiences."

### Moving forward, what are your thoughts?

"Having recently recruited patients on to the feasibility phase of the eSMART study in one of our four Irish sites, all of the hard work seems to be proving worthwhile, and will hopefully ease the transitions into the other clinical sites in Ireland. Immensely positive patient feedback is enough encouragement alone, and the hard work and dedication of all involved in the project to date will only mean a successful roll out to all international clinical sites soon enough. Very excited to be part of such an interesting project, and looking forward to moving on the RCT phase!!"

## eSMART at Twitter



Twitter: The easy way to keep up to date with all news and updates related to eSMART

Follow us [@esmart\\_eu](https://twitter.com/esmart_eu) for more associated information

October Twitter feed includes

### News about Clinical Trials:

- [Clinical Trials: What you need to know](#)
  - Published by the American Cancer Society, this plain language, easy to understand comprehensive guide to Clinical Trials is aimed at patients to aid the decision making process when considering taking part in a Clinical Trial.
  - Using an unbiased approach, takes readers through phases 0-IV and answers 'common questions' about aspects of clinical trials.
- [Cancer Trials are changing. That could mean faster access to better drugs](#)
  - An article highlighting the USA's National Cancer Institute's move towards testing cancer treatments on genetic mutations within tumours, as opposed to the tumour site itself. Using DNA sequencing, the process is described as "a profound shift taking place in the development of cancer drugs."
  - Includes an account of a gentleman who had reached the end of treatment options for bladder cancer. He started on a Clinical Trial using a drug traditionally administered for treating breast cancer, and 18 months later, his cancer shows no signs of progression.

### News about eHealth

- [eHealth must benefit both doctors and patients](#)

Opinion piece describing the challenges of an ever evolving European health care system, detailing increasing demands on all aspects of healthcare delivery and provision. An aging population, increase in numbers of patients managing chronic conditions, and reducing healthcare budgets all contribute to high demands on healthcare systems. eHealth is described as a range of tools that can aid and assist greatly in the reform of healthcare systems, being able to contribute to efficiency across many areas including enhancing prevention, diagnosis, treatment, monitoring and management concerning health and lifestyle. Outlining that caution needs to be taken to ensure the advantages of eHealth are beneficial to both patients and professionals alike, ensuring the valuable relationships between patients and health care professionals are not compromised. This is only achievable by collaborative working between health care providers to ensure a focus on patient safety at all times.

**Disclaimer:** Any information posted on our twitter account and website is for information purposes only. The purpose of the twitter account and website is to provide updates on eSMART and share useful links, topics and discussions on cancer research and support. It is not intended to be a substitute for professional medical advice, diagnosis or treatment. Always seek the advice of your doctor or other qualified health care provider with any questions you may have regarding a medical condition or treatment and before undertaking a new health care regime, and never disregard professional medical advice or delay in seeking it because of something you have read on this twitter account.

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We will endeavour to answer any comments, messages or posts on our Twitter account within 72 hours.



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## eSMART IN CONGRESS

eSMART at the [3<sup>rd</sup> Hellenic Oncology Nursing Symposium](#)

The Oncology Nursing Sector of the Hellenic National Nurses Association held its biennial Oncology Nursing Symposium at Thessaloniki, from 16<sup>th</sup> to 17<sup>th</sup> October 2015.

Cancer care clinicians, researchers and patients, from all over Greece and Cyprus, discussed the best practice in the field of oncology, providing examples and ways on how research and technology could support both patients and clinicians to reduce barriers in cancer care and to improve patients' experience and outcomes.

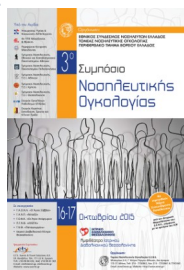
I, as an invited speaker, had the chance to present the eSMART



Dr Stylianos Katsaragakis  
University of Peloponnese

project to a wide audience, in particular focusing on how remote technology can improve the supportive care to cancer patients. My presentation provided an overview of the use of the mobile phone-based remote monitoring system of Advanced Symptom Management System (ASyMS) in cancer care, followed by a report of the study and its components. More specifically, the 30 minutes presentation highlighted the effective way to directly identify aspects of a patient's health status, enhance management of treatment-related toxicities, alleviate patient anxiety and promote self-care self-efficacy. Moreover, the challenges of conducting a trial across 14 European clinical sites with 1108 patients and the result in changes in clinical practice were discussed.

Oncology nurses warmly welcomed eSMART. They stressed the significance of transforming cancer care through the use of technology, in order to reduce the symptom burden experienced by patients receiving chemotherapy and to improve delivery of care for patients with cancer in a cost effective way.



## PREVIOUS ISSUES

The eSMART Newsletter is a monthly way to share the latest news and information about eSMART project.

Each edition provides updates regarding study's progress, meetings & publications and up-coming events. It also includes a focus on a specific clinical site, introducing key people and sharing patients' experiences and "clinical pearls".

Each issue reaches inboxes on the beginning of the month.

If you wish to receive the eSMART Newsletter automatically every month, please provide us your email address.

You can also find previous issues of eSMART Newsletter [here](#).

## YOUR FEEDBACK

We value your opinion and invite you to share your thoughts about the eSMART newsletter with us: [esmart@surrey.ac.uk](mailto:esmart@surrey.ac.uk)

## eSMART PARTNERS



## Location of eSMART Partners map



## Location of eSMART Clinical Sites



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