

Preventing Skin Side Effects From Lung Cancer Treatment Transcript

Dr. Olivia Fankuchen (00:00):

Being a good patient is not about what you share or don't share or how you share it. Being a good patient is just being open and honest with your care team about everything that you're feeling because it is part of our complete comprehensive, comprehensive plan for you as a patient.

Stephanie Williams (VO) (00:15):

Living with lung cancer looks different for everyone, but no one should go through it without answers. This is Hope with Answers, where patients lead and experts help guide the way.

Jeanne Szurek (00:26):

Welcome to Hope with Answers. I'm Jeanne Szurek, a lung cancer patient advocate. And today we're talking about something many patients don't hear enough about, how proactively managing side effects can make a significant difference and help you stay on the treatment that's working for you. Joining me is Dr. Olivia Fankuchen, who will explain why preparing for side effects before they occur can really help you stay on your treatment track. Doctor, thank you for joining us. Before we jump into today's topic, could you tell us a little about yourself and the work you do for people living with lung cancer?

Dr. Olivia Fankuchen (01:07):

Sure, I'd be happy to. And thank you so much for the invitation to be here and share a lot of the important lessons that we're learning about how to care for patients through their care journey beyond just the direct treatment of the cancer itself. So I am a thoracic medical oncologist, a lung cancer specialist, and also a cancer researcher at Weill Cornell Medicine in New York. I'm very passionate also about not only providing the most effective treatments for my patients, but helping them stay as comfortable as possible throughout their treatment journey.

Jeanne Szurek (01:36):

Thank you. Today we're talking about something called proactive therapy management or PTM. I personally know a little something about it, but how do you describe PTM?

Dr. Olivia Fankuchen (01:49):

So I think of this as my toolkit of ways to, as I start the treatment for the cancer, start proactively giving my patients additional care to prevent problems like skin irritation or other side effects that we know can sometimes happen with some of the treatments we prescribe for the cancers themselves. So from my perspective, it is a very critical part of cancer care.

Jeanne Szurek (02:13):

I remember thinking that if a rash developed, I'd just deal with it. But my care team told me that managing side effects early might actually help me stay on my treatment, and it's actually worked for me. Will toxicity become such an important topic in lung cancer treatment?

Dr. Olivia Fankuchen (02:32):

Yeah. So first of all, I'm really glad that you were able to bring that problem to the attention of your care team and get the right help for it so that you could get the treatment both for the skin and for the cancer that was most likely to help you. So one of the most amazing things in lung cancer care is that our field is moving very quickly. We're getting better therapies, more diverse therapies, and many of them are targeted to specific problems with lung cancers that drive them. We've also learned that a lot of times these new treatments, while they have a good direct effect on the cancer itself, they can sometimes have what we call off-tumor toxicity, or they can have side effects that are really tough on some patients. But we've also learned quite a lot about how to prevent those things.

(03:15):

So when I'm discussing treatment options with my patient for their cancer, I know which medications may have certain kinds of skin problems or may cause certain kinds of irritation, and I can discuss a plan that not only includes the treatment for the cancer, but the prevention to help keep their skin happy and healthy. But one of the really key things which you brought up is sometimes it's easy for us to physically see when we examine our patients when there is a rash or a skin problem, but sometimes I can't see it or I don't know it's there. And that's why I'm so happy when my patients are proactive themselves and sharing when something is different with me. I wanna know so that I can help give you a plan to prevent those problems from happening and solve them as they do so that you can continue on your journey and feel as well as you possibly can.

Jeanne Szurek (04:01):

I also think people hear the word rash and they picture a minor inconvenience. But when you're already dealing with a cancer diagnosis, something that's uncomfortable or visible every day can really affect your confidence, your sleep, and even whether you want to leave the house. How can something like a skin reaction actually affect cancer treatment itself?

Dr. Olivia Fankuchen (04:26):

Yeah, it's... These are such important points. I mean, when, when people have a cancer diagnosis, there is the cancer itself, the change in your sense of self, the change in how your body feels and functions on a day-to-day basis. So we're cognizant of all of those things, and that is part of how I evaluate the care of every patient in front of me. But it is a really important question of whether these problems like rashes or other side effects related to the treatment itself rather than the cancer might be a consideration for which treatments for the cancer we recommend or if we have to hold doses or modify doses or change therapies. So as I was mentioning, we do know that there are many highly effective cancer drugs, especially for lung cancers that may cause significant rashes, which in addition to being uncomfortable physically and sometimes emotionally for many patients, actually can become severe enough that we may have to consider changing treatment.

(05:21):

And that can be changes to how frequently we give it, what dose we give it at, or what agent we're actually recommending for you. And we also know that the skin, in addition to being one of the things most people notice the most about themselves, it's such a critical part of your body's way of protecting

itself. It's a critical part of the immune system. So keeping your skin healthy means keeping your body healthy, which means giving you the best opportunity to stay on treatment. So going back to the topic of prevention, if we can anticipate that there are certain treatments we recommend for lung cancers that are likely to cause some kind of skin irritation or rash or problem like that, we can be really proactive. Before we even start the cancer treatment, we can start antibiotics sometimes, special creams and rinses to protect the skin so that these treatments can continue as long as they work for you.

(06:12):

But it can be an issue, and there certainly are times when patients have really severe rashes, and because we're concerned those are cor - related directly to the treatment, we may need to hold the treatment or change to a different one. So this is a critical medical discussion, but it's also a critical human discussion.

Jeanne Szurek (06:30):

So what you're saying is that the philosophy behind PTM is really to prevent that skin issue from becoming a s- severe in the first place, right?

Dr. Olivia Fankuchen (06:40):

Exactly. We don't want it to become medically severe, but we also wanna make sure that our patients are physically comfortable and their skin is healed and as intact as it can be.

Jeanne Szurek (06:49):

When I first heard that there were four different things involved, my first reaction was really another list to remember? I imagine a lot of patients must feel that way at first. Talk about what PTM actually involves.

Dr. Olivia Fankuchen (07:06):

So from the outset, my number one rule with all of this is I don't know your body as well as you do a lot of the time. And so number one is I want you to be proactive in telling me if something feels different. The other key steps are the medications that we know can protect the skin. So this is things like ceramide washes or antibacterial washes. In many cases, we will also prescribe an antibiotic to prevent infections of the skin that can also help prevent irritation of the skin. So those are some of the key points. In addition to that, I want you to tell me if anything changes or if anything feels different. It's part of my goal and my entire care team's goal to evaluate you as a complete person every time we see you for your treatment, but I can't help things I, I'm not aware of.

(07:49):

And so if something doesn't feel right to you, doesn't feel right to someone you love who's undergoing cancer care, I wanna know about it.

Jeanne Szurek (07:57):

One thing that stood out to me was that the items to use aren't exotic or expensive or difficult to find. Is that intentional?

Dr. Olivia Fankuchen (08:07):

Yes. It's twofold. For one, we know that these are treatments and medications and creams that work for these things. We also need them to be accessible in things that people can use every day without it being too disruptive to their life to get the treatment or to keep continuing refilling these preventive treatments.

Jeanne Szurek (08:25):

The timing also seems really important. When should patients begin the routine?

Dr. Olivia Fankuchen (08:31):

So it depends sometimes on which specific cancer treatment I'm using. I like to advise that patients start doing it a week in advance to be very, very cautious and also to make sure that they understand the sequence of which things to use and when. So I like to help people kind of establish a routine of you take your antibiotic maybe twice a day, you use your cream three or four times a day, and you use your ceramide wash maybe twice a day at the beginning. And then as we start the treatment, we hope that those preventive measures are taking effect before the cancer treatment is on board. So in many cases, I have patients who are starting treatment for their cancer within days of that initial conversation. So the first time I see them, I'll try to prescribe these treatments if they require a prescription, like some of the antibiotics, and I like to hand them the creams and washes as they leave the clinic.

Jeanne Szurek (09:17):

Oh, that's very great. That's probably one of the biggest takeaways for me today. Most patients' instincts would be to wait until they noticed a problem. And you're saying the best time to start is actually before anything happens.

Dr. Olivia Fankuchen (09:33):

Exactly. And the thing I always wanna hear from patients is, "My skin is great. It feels normal. Do I need to do this?" I want it to be working so well that you never notice a problem.

Jeanne Szurek (09:47):

I wish I had known that. <laugh> Cancer is already a lot. There are appointments, scans, medications, insurance paperwork. You can feel like your entire life revolves around treatment. Adding anything new can sometimes feel overwhelming at first. How do you help patients see PTM as something that makes their lives easier rather than one more thing they have to manage?

Dr. Olivia Fankuchen (10:13):

Yeah, it's a tough conversation. There are some people who feel that the self-care routine that comes with this is part of what helps them feel like their strongest and best selves anyway. For other people, it's another piece of things to remember. Um, and that's where companions who come to appointments, family members can be really, really helpful. Those are people who can do the routine for the most part alongside the patient. When we're talking about some of these creams and washes, anybody can use those. So that's one thing. Another is that we try to keep it as part of the total care plan. Um, so for some of my patients, I've, I've heard that they find it easier to just lock it into the routine and do the things that are part of the care for their cancer. But for other people, it is really, really tough.

(10:57):

So when I see a patient, when any of the nurses I work with see a patient, we always discuss, "How is your skin feeling? How are you doing with using this routine? Is there anything that we can do to help it be easier for you? Can we administer some of the creams while you're here with us in the clinic?" Things like that. So, but it's a very good point. Um, the treatments themselves can be really hard, and it's so many things for people to remember. So I think that reminder diaries can really help. Reframing it for some people as a self-care routine that helps them feel nourished and healed can be very helpful. And in other cases, having companions and caregivers who help with those things can also be helpful in offloading the mental load of carrying all of these treatment related, um, planning steps.

Jeanne Szurek (11:45):

I understand communication with your care team is also a, very important. What should patients watch for and share with their care team?

Dr. Olivia Fankuchen (11:53):

Yeah. My number one rule, as I had mentioned, is tell me if anything feels different. I, you don't need to be able to describe it. You can just say, "Hey, something feels funny," or, "I noticed something looks different," and I will do my best to evaluate that and understand if it's something maybe related or not. Um, the specific changes that we ask patients to look out for with many of these lung cancer treatments are things like dryness or flaking of the skin, redness of the skin, irritation, itchiness of the skin. Some people will have problems around their nails, like dryness around their cuticles or cracking around their nails, and that we definitely wanna know about. Some people also have irritation around the mouth, um, pain in the mouth. Those are also things that can be common with some treatments and we'd like to know about because we have good preventive treatments for that and treatments for that to make it go away if those problems appear.

(12:44):

So my number one rule of thumb when I walk into a room is I ask, "Does anything feel different, better or worse?" And we go from there. But those are the things I would urge every patient and every caregiver to be on the lookout for. So redness, skin flaking, irritation or rash, breakdown of the skin around the nails of the feet or the hands, or just anything that feels different. And number one, if you get a fever, we definitely wanna hear about that.

Jeanne Szurek (13:09):

I think a lot of us hesitate to call the doctor's office because we don't wanna be that patient. We don't want to bother anyone. I've learned, though, that when I see a problem, I send my care team a message through the portal. When should someone contact their healthcare team?

Dr. Olivia Fankuchen (13:28):

Yeah, absolutely. So the number ones are, if you feel really sick, something doesn't feel right, call your care team. If you have a fever, call your care team. Um, and there's always a large safety net around every patient. We wanna know if something doesn't feel right. I've been the doctor there evaluating somebody during the daytime. I've been the night, the night doctor on call, receiving those patient calls

and those patient messages. I always wanna know about it. My favorite thing is if there's a question and it's easy for me to say, "That's, um, not something I'm medically concerned about. Let me send you something for that. Call us tomorrow and let us know how it goes." Those are great conversations to have. We would much rather be able to reassure you that you're in a safe place or you don't need an emergent medical evaluation.

(14:11):

But if you're concerned, it's even better for us to be able to help you emotionally and medically through that process and help you assess what's going on. So nobody should ever feel concerned about reaching out for help. There's a reason why our care teams are so big and so comprehensive. There's help for a reason. We wanna hear about it if you need help, and we wanna be able to do something before significant problems arise. It's actually better if you call us and we're still in that territory of something being a noticeable change, but not such a big deal medically. That's the sweet spot.

Jeanne Szurek (14:43):

One thing that I've learned as a patient advocate is that many patients don't like to complain. Sometimes they think they're being good patients by simply putting up with the side effects. What would you say to someone who feels that way?

Dr. Olivia Fankuchen (14:59):

Um, I wish nobody did, but I understand it and I see it all the time. I probably would do the same if it were me. Being a good patient is not about what you share or don't share or how you share it. Being a good patient is just being open and honest with your care team about everything that you're feeling because it is part of our complete comprehensive plan for you as a patient. We need to know how you're physically feeling just as much as we need to know how well the treatment is or isn't working, and we need to know emotionally how these things affect you because cancer is a complete and total human diagnosis. It's not just a medical one. So I understand all that. I, I would wanna reassure any patient that you're not being a bad patient if you're telling us how you feel.

(15:41):

It's actually very, very helpful in what we want. So our goal when we walk into a room with you at any given time is to ask you about everything we can think of to ask you, but you know yourself best and we want you to share how you're feeling any way it is.

Jeanne Szurek (15:55):

That's such an important message. Patients sometimes think that mentioning the side effects means they'll automatically lose access to their treatment. Instead, the goal is actually to help them stay on that treatment, right?

Dr. Olivia Fankuchen (16:10):

Absolutely. And in fact, it's a common misconception that some patients have for exactly the reason that you were mentioning. They are nervous to share side effects because they think that that would make me say, "Oh, you can't get your treatment anymore." In fact, what's more likely to happen in some of those scenarios is if the side effects are getting worse and we don't know about it and we can't help

make them better before they become severe, we only become very aware when they're so severe that we then do have to consider taking a break from treatment or changing treatment. And in many, many, many cases, that is a preventable situation. And that is the goal of this preventive plan that we were discussing, is helping everything stay calm long before severe side effects come about that are preventable and might get in the way of treatment.

(16:55):

We actually have a much harder time keeping you on treatment if we don't know you're having some side effects before they become severe.

Jeanne Szurek (17:02):

Let's talk about clinical trials for a moment. If I'm on a clinical trial and I have a side effect such as a bad rash, will that mean I ha - can't continue on that trial?

Dr. Olivia Fankuchen (17:15):

I'm so glad you asked this because this comes up very often with our patients, but not as often as I would like actually. I know clinical trials are a really important part of helping the cancer care field move forward and make treatments better for our patients. And a very important part of clinical trials is understanding what side effects people have while they're on them. That informs which patients are safest to get the treatment in the future, who it might be most effective for, and is actually a very critical part of the information gathering that happens as part of a clinical trial of a new therapy. So I actually think it's much more helpful on a human and medical level if you share that you're having a side effect you're concerned about, or if you even ask if something that feels different might be a potential side effect.

(18:01):

The likelihood actually is if we're aware of it, that we can much more safely keep you on the clinical trial, monitor you closely, and just account for what that side effect is. When did it happen? How bad was it? Where did you get that rash? Or what felt different? That's actually really, really critical for our patients who are on the trial and anybody who might be a good candidate to get that treatment in the future.

Jeanne Szurek (18:24):

Sometimes we're the last people to notice changes in ourselves. A spouse or a family member or a close friend may notice your skin changing before you do. How important are caregivers in this process?

Dr. Olivia Fankuchen (18:37):

So important. So important. And I, anytime I have patients who come in and they have their own care team with them, their loved ones, their family members, their friends, very grateful for that. We always try to understand who our patient support systems are because it's so critical. Um, you are all our eyes and ears outside of the clinic or outside of the hospital and how things are going, and it's really important. So I try to make sure I understand who is important in my patient's life, who is living with them, who's gonna notice if maybe their appetite is changing or they're getting a rash in a place they can't see. So all of that I have to say is so, so important. I always encourage people to bring anybody they feel is a source of support to them to the visit so that those people can hear these discussions as well.



(19:20):

And I also like to make myself as a doctor available to those people if they're at home and need to call me as well.

Jeanne Szurek (19:29):

Thank you. Before we wrap up, if listeners remember only one thing from today's conversation, what would you want it to be?

Dr. Olivia Fankuchen (19:37):

Communicate, communicate, communicate. Tell us how you're feeling.

Jeanne Szurek (19:43):

Thank you, Dr. Fankuchen, for helping us better understand proactive therapy management. Thank you for joining us on Hope With Answers. As always, to learn more about lung cancer, visit lcfamerica.org.

Dr. Olivia Fankuchen (20:00):

Thank you so much for having me.

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