

# Cancer Pain Fellowship

Program Director: Dr Jordi Perez

Program Administrator: Rebecca Binik [rebecca.binik@mcgill.ca](mailto:rebecca.binik@mcgill.ca)

- Number of positions available: 1-2
- Duration: 1 year
- Location: McGill University Health Centre
- Start dates: July / January

**Type of Fellowship:** This is primarily a clinical fellowship ( $\geq 80\%$ ) but the candidate is expected to complete at least one clinical research project during the year.

**Academic affiliations:** Division of Supportive and Palliative Care, Department of Oncology and Department of Anesthesia, McGill University

**Name of hospitals involved in training:**

- 1) Cedars Cancer Centre
- 2) Royal Victoria Hospital
- 3) Montreal General Hospital Site

% time spent by the fellow in each institution 1) MGH: 40%; 2) Glen site (1+2): 60%

## Background

The fellowship aims to train a physician in the field of cancer pain medicine including a thorough knowledge of the literature regarding the classification, epidemiology, pathophysiology, and treatment of cancer pain. Through practical experience, it will help develop his or her ability to apply this knowledge to patients who are having pain as a result of cancer or its treatments. The fellow will gain an appreciation of the specific challenges in the treatment of cancer pain including the importance of identifying anatomical as well as psychological causes of pain and to identify the appropriate treatment options including (but not limited to) pharmacotherapy, oncological interventions such as chemotherapy or radiation therapy, the role of psychological support and interventions. The fellow will obtain experience in designing and organizing a clinical research project in the field of cancer pain.

## Research activity

The MUHC's Cancer Pain Clinic has a consistent line of clinical research. The fellow is expected to complete a clinical research project during the year.

**Mission:** To provide clinical and research training towards comprehensive academic knowledge of the field of cancer pain management.

Fellows will participate in the teaching of residents from a didactic and practical point of view. This fellowship will increase the academic activities targeted to improve cancer pain assessment throughout oncology and the departments of pain medicine and supportive and palliative care.

**Funding:** For information about acceptable sources of funding please visit the following link: [http://www.medicine.mcgill.ca/postgrad/admission\\_fellowships.htm](http://www.medicine.mcgill.ca/postgrad/admission_fellowships.htm).

Those candidates without funding can apply, pending confirmation that program director can grant funding through the Louise and Alan Edwards Foundation

### **Summary of clinical practice**

The MUHC's Cancer Pain Clinic was launched in March 2011, a joint effort between the departments of Supportive and Palliative Care and Anesthesiology. It was created to meet the needs of those patients with a diagnosis of cancer whose pain has become a main symptom. The clinic offers a unique interdisciplinary therapy by combining different clinical approaches given at the same time. Every year, more than 200 new patients are seen and more than 700 follow up consultation are completed.

The Cancer Pain Clinic is presently located at MUHC's Glen site with clinicians trained in cancer pain management including anesthesiologists, palliativists, radiation oncologists, interventional radiology, and a clinical nurse. The outpatient cancer pain clinic offers new assessment and follow up consultations three mornings a week with a full-time nurse and full time secretary overseeing and coordinating patients' progress.

### **Major Strengths:**

The MUHC's unique interdisciplinary cancer pain approach has revealed major benefits in terms of symptom management, patients' and clinicians' satisfaction as well as a decreased utilization of health resources and increased cost-effectiveness.

The departments of Supportive and Palliative Care and Anesthesiology have a long and prestigious teaching tradition both for undergraduate and postgraduate students. The Palliative Medicine residency program and the Clinical Chronic Pain Fellowship are well established post-graduate teaching programs on which this fellowship is based.

Suggested rotation schedule (block = 4 weeks)

Cancer pain Clinic – 7

Alan Edwards Pain Management Unit – 1

Palliative Care In Patient / Consult - 1

Radiation oncology – 1

Medical oncology – 1

Elective / research- 1

Vacation - 1

### **Academic Facilities**

Library access, materials relevant to fellowship training and multimedia learning materials are available at Glen Library and also MGH's library. Fellow will join in presence or remotely all academic activities of the departments of Supportive and Palliative care and Pain Medicine at the Glen site and/or MGH.

### **Duties and Responsibilities**

No calls are required to cover any service however, if a patient of the clinic is admitted in our academic institution's hospital center, an off hours or weekend hospital consultation might be required if related to cancer pain.

The fellow will interact with residents during their rotation at the Cancer Pain Clinic but will not supervise them.

The two main institutions are 1) MUHC's Glen site and 2) Montreal General Hospital. Clinic responsibilities will include diagnosis, treatment and management of cancer pain syndromes along with health advocacy, clinical mentorship and participation as a member of the interdisciplinary team.

The fellow will take an active part and full responsibility in the Cancer Pain outpatient Clinic (0.6/week) including diagnosis, management and health advocacy. The rest of the time allocated to clinical activities (0.2/week) will correspond to hospital consultations. Other activities like interventional cancer pain procedures done in the procedure room can be offered depending on the fellow's background and interest.

The fellow will become an expert in the field of cancer pain assessment and management and as such will be responsible of teaching rounds to undergraduate and postgraduate students as well as chairing journal clubs and medical rounds.

The fellow will also participate in academic activities involving the residents, including: seminars, outcome assessment, morbidity and mortality rounds, etc.

The fellow) is expected to be involved in all teaching activities within the departments of Supportive and Palliative Care and Pain Medicine. Those include 1) MUHC's grand rounds, 2) hemato-oncology rounds (when appropriate), 3) palliative medicine core teaching rounds and 4) weekly pain rounds

The fellowship benefits from the support of two departments, Supportive and Palliative Care and the Alan Edwards Pain Management Unit. Dr. Perez, the program director, will coordinate and schedule the fellow's clinical and teaching activities including discussion on the progress of the trainee with the different clinicians involved in the program during all rotations. The Cancer Pain Clinic and Palliative Care hospital consultation services have full time clinical nurses who will be in close contact with the trainee to provide feedback and ensure continuity of care to our patients. For secretarial support, the staff of the two parent departments will be made available for the needs that may arise during the fellowship.

### **Proposed meetings to be attended by the fellow**

The fellow will be encouraged to attend all educational meetings organized by the parent departments (Palliative Care and Pain Medicine). Special effort will be made to provide

financial support for Research activities (including publications) expected of the Fellow. The fellow will have 20% of his/her time secured, in order to design and conduct a clinical trial in the field of cancer pain. A presentation at a national or international conference as well as a publication in a peer-review journal will be sought.

### **Curriculum**

Intended case load:

The fellow will attend the Cancer Pain outpatient Clinic that has an average of 2 new assessments and 5 follow up consultations per day. This clinic is held three times a week. The fellow is encouraged to observe and participate (if applicable) in the interventional pain procedures indicated for those patients. The fellow will attend, under appropriate supervision, an estimate of 200 new patients and 700 follow up consultations.

Intended Percentage of varieties of cases:

The Cancer Pain Clinic receives consultation mainly from the departments of Haemato-Oncology and Radio-Oncology. Of all cancer pain patients seen, an estimate 80% suffer from direct consequences of the tumour involved and the rest are cancer treatment-related pain. The clinic receives consultations from a large variety of oncology subspecialties including lung, breast, haematology and colorectal oncology.

Regular reading materials provided (if any):

The applicant will participate in regular journal clubs as presenter or attendee. Reading material to prepare those and other academic activities will be provided by the program directors.

Conference weekly schedules:

The fellow will have at least one academic activity scheduled that corresponds to the weekly Alan Edwards Pain Management Rounds. Other activities organized by the Palliative Care department will be integrated in the fellow's weekly schedule.

The Goals and Objectives of the program are based on CanMEDS roles. Upon completion of the program, fellows will be able to:

### **Medical Expert:**

- Elicit a cancer pain history, perform a physical exam, and initiate a biopsychosocial assessment
- Recognize common cancer pain syndromes and assess co-morbidities
- Envision a therapeutic plan for common cancer pain conditions including pharmacologic, non-pharmacologic and interventional modalities
- Understand indications for interventional cancer pain management, techniques involved, expected outcomes and potential complications

- Perform basic image-guided interventional cancer pain management procedures (advanced procedures are restricted to trainees with previous training in anatomy and interventional medicine)
- Demonstrate cancer pain pharmacological knowledge and management
- Initiate and maintain opioid therapy for cancer pain management
- Document findings and differential diagnoses
- Integrate non-medical approaches into therapeutic strategies for cancer pain management
- Provide continuity of care through follow up appointments
- Recognize one's limits and seek consultation from other health professionals when necessary
- Function as a consultant to provide patient-centered care for ambulatory and in-hospital patients with cancer pain

#### **Communicator**

- Discuss treatment plans and develop therapeutic relationships with patients and their families and carers
- Consult effectively with other physicians and health care professionals

#### **Collaborator**

- Demonstrate ability to function as part of a multidisciplinary team
- Develop treatment plans with patients and other health professionals
- Coordinate access to resources outside the multidisciplinary team

#### **Leader**

- Appropriately allocate resources

#### **Health Advocate**

- Identify healthy lifestyle determinants for cancer pain patients
- Identify vulnerable patients and families

#### **Scholar**

- Critically evaluate medical and scientific information
- Teach and facilitate learning for patients, families, trainees, health professionals and the public
- Contribute to the development, dissemination, and translation of new knowledge and practices
- Present a translational and/or clinical cancer pain research project
- Actively participate in cancer pain continuing medical education activities

### **Professional**

- Be a model for ethical and compassionate care
- Exhibit interpersonal professional behaviours
- Practice sustainably by maintaining a commitment to physician self-health

Evaluation: Fellows will be assessed formally at a minimum of every three periods. Fellows are encouraged to self-evaluate and evaluate the program bi-yearly.