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578 - FOLLOW-UP AND SUPPORT OF PATIENTS LIVING WITH AND BEYOND CANCER IN MALLORCA: A QUALITATIVE STUDY

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Resumen

Background/Objectives: With increasing cancer survivorship, there is a need for care that addresses lifestyle factors influencing quality of life (QoL) and long term prognosis. We previously developed a novel diet and lifestyle screener for people living with a beyond cancer (PLWBC) and conducted a pilot randomized lifestyle intervention to improve QoL. The aim was to conduct a qualitative study to explore PLWBC needs, availability of resources in Mallorca, and perceived usefulness of the screener and the intervention.

Methods: Four focus groups were carried out at IdISBa (Mallorca): Group 1 (n = 5) included healthcare professionals from the University Hospital Son Espases; Group 2 (n = 10) and 3 (n = 7) included PLWBC which participated in the lifestyle intervention; and Group 4 (n = 5) included representatives from cancer patient associations. Sessions lasted 1-2h and were led by a qualitative researcher guided by a semi-structured script. Sessions were audio recorded, literally transcribed, coded using a deductive-inductive approach, and thematically analyzed with triangulation across participant profiles.

Results: The most relevant themes were: 1. Recurrence focused follow up care, with limited attention to lifestyle and emotional needs. 2. Unmet physical and psychosocial needs in patients, such as weight changes, fatigue, sleep disturbances, fear of recurrence, and emotional burden. 3. Barriers to lifestyle guidance in clinical practice.

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4. Reliance on resources outside the public healthcare system. 5. Need for a dedicated professional to guide PLWBC. 6. Perceived usefulness of the screener for identifying needs and prompt self-reflection. 7. Value of individualized counselling as a key driver of behavioral change.

Conclusions/Recommendations: All participants perceived a gap between PLWBC needs and resources available within the public healthcare system. The screener was considered a useful tool to identify these needs, and individual counselling was valued as most beneficial. Suggestions made during sessions included integrating systematic lifestyle focused screening into follow up, strengthening referral pathways, expanding collaboration with patient associations, and establishing survivorship specific support roles.

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