

Mini Review

# From Cure to Care: Integrating Survivorship Clinics into Routine Oncology Practice

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## Abstract

Abstract Improvements in cancer screening, systemic treatments, precision medicine, and supportive care have changed cancer into a chronic disease that many patients can survive. As a result, the number of cancer survivors is increasing quickly, leading to new challenges that go beyond simply achieving remission. Many survivors face ongoing physical, psychological, social, reproductive, and financial issues tied to cancer and its treatment, which often get overlooked in standard oncology practices. Even with significant advances in survival rates, survivorship care still gets relatively little focus after active treatment ends. This opinion piece suggests that modern oncology should shift from a disease-centered approach focused mainly on curing cancer to a patient-centered approach that includes comprehensive survivorship clinics as a regular part of oncology care. These clinics could help with long-term monitoring, managing late treatment effects, promoting health, providing psychological support, and coordinating care across different specialties, ultimately improving quality of life and lessening the burden on healthcare.

## Introduction

The success of modern oncology should not just be measured by improvements in overall survival rates. More clinicians are now caring for individuals who finish treatment but still have ongoing health challenges due to cancer and its therapies. As survival rates improve for many cancers, healthcare systems must acknowledge that finishing treatment does not mean cancer care is done. Cancer survivors often deal with chronic fatigue, cognitive issues, heart disease, hormonal problems, infertility, weakened bones, nerve damage, sexual dysfunction, emotional distress, anxiety about recurrence, and secondary cancers. Many also face difficulties with work, financial strain, social reintegration, and sticking to medication regimens. These challenges often arise months or years post-treatment and may not be addressed adequately during regular oncology follow-ups, which often focus mainly on monitoring for cancer recurrence. This shifting landscape requires a broader view of cancer care that treats survivorship as a vital part of overall oncology services rather than just an extra step after treatment [1].

## Discussion

### Why survivorship clinics matter

Traditional oncology clinics mainly aim to diagnose cancer, provide treatment, gauge responses, and check for recurrence. While these goals are important, they do not fully meet the complex needs of long-term survivors. Dedicated survivorship clinics allow for a shift in focus from just managing disease to caring for the whole person. These clinics go beyond simply monitoring for recurrence. They aim to identify and manage late effects, encourage healthy living, support psychosocial recovery, maintain independence, and coordinate care with primary doctors and other specialists [2]. The NCCN survivorship framework recommends screening, assessing, and treating physical and emotional health problems, along with promoting a healthy lifestyle, delivering vaccines, addressing fertility, managing sexual health, and ensuring care coordination [2].

### A structured survivorship clinic

It can develop personalized care plans that outline past treatments, highlight potential long-term risks, suggest follow-up strategies, and offer advice on lifestyle changes, vaccines, fertility, nutrition, exercise, and mental health. Such individualized care enables survivors to take an active role in their long-term health. Moving from cure to care Cancer treatment should not end with the last chemotherapy session or postoperative appointment. Rather, completing active therapy should mark the beginning of another important stage of care. This transition calls for a cultural shift in oncology [3]. Historically, success has been measured by tumor response and survival rates. However, patients often see success in different ways. For them, meaningful achievements include going back to work, maintaining cognitive function, preserving fertility, managing tiredness, improving emotional health, and fully participating in family and community life. Regularly including survivorship clinics embodies a broader mindset that cancer care should go beyond eliminating cancer cells to restoring physical, emotional, and social health. This patient-centered approach aligns with the goals of precision medicine, which aims to customize treatment and long-term survivorship care for individual needs. The role of multidisciplinary survivorship care Oncologists alone cannot provide effective survivorship care [3]. The MASCC-ASCO standards highlight person-centered, coordinated, evidence-based, accessible, and data-driven survivorship care for those affected by advanced or metastatic cancer.

This coordinated approach reduces repetitive tests, improves communication among healthcare providers, and ensures continuous care during survivorship.

Challenges in low- and middle-income countries the need for survivorship services is particularly vital in low- and middle-income countries, where resources are mostly focused on diagnosis and active treatment [4]. Cancer survivors often need help from cardiologists, endocrinologists, rehabilitation specialists, psychologists, psychiatrists, nutritionists, physiotherapists, pain management experts, reproductive specialists, pharmacists, and primary care doctors. Survivorship clinics create a collaborative environment where multidisciplinary teams work together to tackle late effects in a comprehensive way instead of sending patients through a series of referrals. Risk-based follow-up protocols can identify survivors who need closer monitoring due to previous exposure to specific treatments or genetic factors [5]. Survivorship care often gets neglected due to shortages in workforce, limited infrastructure, financial challenges, and competing healthcare priorities. However, setting up survivorship clinics does not have to be costly. Simple solutions like standard survivorship care plans, symptom assessment tools, nurse-led follow-ups, patient education programs, telemedicine sessions, and structured referral paths can greatly enhance long-term outcomes [6]. NCCN survivorship guidelines offer a practical framework that can be adjusted based on available local resources while still tackling essential long-term needs. For countries with limited resources, incorporating survivorship principles into existing oncology clinics may be a practical first step toward more thorough cancer care.

### The future of survivorship

New digital technologies are changing survivorship care by allowing continuous, patient-centered monitoring beyond standard clinic visits. Tools like artificial intelligence (AI), telemedicine, Electronic Patient-Reported Outcomes (ePROs), wearables, and predictive analytics could help identify treatment-related side effects early, personalize follow-up schedules, improve symptom management, and lower unnecessary healthcare use. AI-driven risk prediction models may also help doctors pinpoint survivors at higher risk for recurrence or long-term problems, supporting more tailored survivorship care. The feasibility of survivorship-based models has already been shown in practice [7]. A primary care clinic led by a medical oncologist that focuses on survivorship had high demand and effectively managed long-term and

late effects, including cardiovascular risks, mental health, bone health, sexual health, fertility, secondary cancer screenings, and ongoing monitoring. These results support the idea that survivorship clinics can be both practical and clinically valuable.

## Role of Telemedicine

Expanding Access to Survivorship Care Telemedicine has become an essential part of survivorship care by improving access to multi-disciplinary services, especially for those living in rural or resource-limited areas. Virtual appointments allow for prompt assessment of treatment-related side effects, emotional support, medication counseling, rehabilitation, nutritional advice, and long-term monitoring while reducing travel needs and costs. Linking telemedicine with electronic health records and remote patient monitoring can further improve continuity of care and patient involvement. As healthcare systems adopt more digital platforms, telemedicine should be considered an essential part of survivorship clinics rather than just an alternative to in-person visits [8].

## Conclusion

Modern oncology has entered a new era where living after cancer is as important as surviving it. The significant progress in diagnosis and treatment has led to an increasing population of survivors whose long-term needs go well beyond disease monitoring. Integrating specialized survivorship clinics into standard oncology practices is a vital step in moving from cure-focused treatment to ongoing, comprehensive patient care. Healthcare systems should view survivorship not as the end of cancer treatment but as an essential phase that requires structured follow-up, teamwork across specialties, preventative care, and personalized rehabilitation. The future of oncology should not only be defined by how many lives are saved but also by how well those lives are lived [9-10].

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