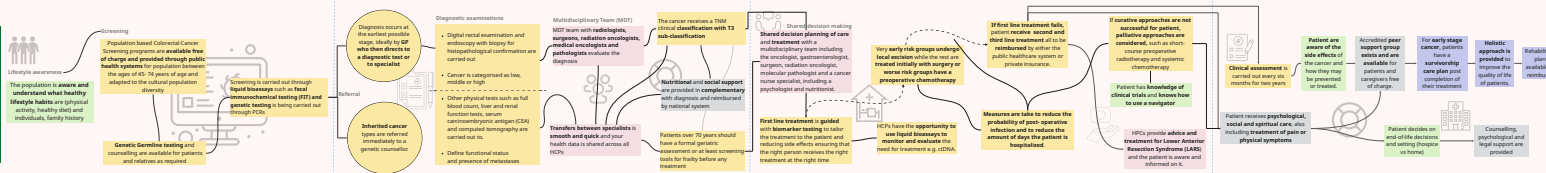


# Example of Colorectal Cancer Patient Pathway

## Patients

### Steps



## Patients

### Challenges

|   |  |   |  |
|---|--|---|--|
| <p>Healthy lifestyle are considered but usually not followed as not an appropriate format is in place to support behavioural</p> <p>Effects of microbiome are not sure how to be involved in cancer incidence together with mental health.</p> <p>Legal concerns and ethical considerations around genetic profile and potential implications in insurance or be culturally taboo.</p> <p>Low population participation in screening programs, together with lack of inheritance testing.</p> <p>Payers are not considering FIT testing.</p> | <p>Patients are diagnosed in a diverse variety of disease stages leading to different scenarios being faced by the patients. Often patients are only diagnosed late stage when treatment and outcomes are guarded.</p> <p>Next Generation Sequencing (NGS) technologies are not extensively available and have an associated cost and time expense. Inequitable access especially in the community non academic centers</p> <p>Patients suffer from lack of support and consequently experience isolation after a diagnosis.</p> | <p>Some treatment procedures require the bowel to be cleared using an aggressive bowel preparation. This procedure often contains strong antibiotics and this may have attributable short and long term effects</p> <p>Lack of biomarker testing that can better personalise treatment options particularly in all lines of treatment</p> <p>Patients need to change their dietary habits particularly in response to the different treatments they receive and are not sure how to carry it out or have a support of a nutritionist. Nutritionist support is not reimbursed by national health</p> <p>Lack of nutritionist support during and post treatment. Need for malnutrition assessment</p> <p>DPYD testing is carried out but other mutations are not being picked up. Sometimes DPYD testing not done and not all variants</p> <p>Lower Anorectal Resection Syndrome (LARS) has a big impact in quality of life and it is often not considered by HCPs.</p> | <p>Need for malnutrition assessment as Cachexia has a big impact on daily life but it not mentioned or given awareness</p> <p>Neuropathy, mouth ulcers affect eating activities or habits, diet</p> <p>Patients experience fatigue, and other side effects that are not well understood from their treatment causing a long-lasting impact on their quality of life</p> <p>Impact on self-confidence, not being able to better advocate for employment or other issues</p> <p>Fertility issues (early onset menopause or pregnancy issues), the impact it has on sexuality</p> |
|---|--|---|--|

# Example of Pulmonary Fibrosis Patient Pathway



## Prevention & Screening

## Diagnosis

## Treatment

## Supportive Care & QoL

Steps

Patients

Challenges

