

DR NINA  
FULLER-SHAVEL

# Integrative Oncology – Supporting Living Well with Cancer

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Dr Nina Fuller-Shavel

Precision Health & Integrative Medicine  
Doctor, Scientist & Educator

Director of Synthesis Clinic, Co-Founder and  
Director of Oncio CIC, Co-Chair of BSIO  
(2021-2023)

A handwritten signature in white ink that reads "Dr Nina". The signature is fluid and cursive, positioned in the bottom right corner of the slide.

# Affiliations and Declaration of Interest

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## Main roles

- Director of **Synthesis Clinic** - an innovative private multidisciplinary practice in the UK, specialising in women's health and integrative cancer care
- Co-Founder and Director of **Oncio CIC** - an innovative non-profit aimed at providing high quality app-based resources for people with cancer and healthcare professionals and supporting best clinical practice and research in integrative oncology
- Co-Chair of **BSIO** (British Society for Integrative Oncology) 2021-2023, moving to co-chairing the Clinical Practice and Education Committee
- CPD education provider and guest lecturer for nutrition and medical professionals, including **Systems Approach to Cancer Programme** training for nutrition professionals and physicians (Dr Nina Fuller-Shavel)
- Research affiliations – University of Oxford (MSc Precision Cancer Medicine and PG Dip Health Research – ongoing)

## Declaration of interest

- Dr Nina Fuller-Shavel has a policy of not accepting any direct honoraria from commercial organisations. Following educational events led by Dr Fuller-Shavel for industry, free/discounted products or tests have been provided to Synthesis Clinic patients by the following companies – Datar Cancer Genetics, Genova Diagnostics and Helixor Heilmittel GmbH.



SYNTHESIS CLINIC

ONC:O

INTEGRATIVE ONCOLOGY IN ACTION



BRITISH SOCIETY FOR  
INTEGRATIVE ONCOLOGY

# Background

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- Precision Health and Integrative Medicine doctor with degrees in Medicine and Natural Sciences from the University of Cambridge
- Current MSc in Precision Cancer Medicine and PG Dip in Health Research at the University of Oxford
- Further qualifications in nutrition, health coaching (FMCA), Functional Medicine (IFMCP), herbal medicine (including CHM – FTCMP registered), integrative medicine (DipIM), yoga (RYT300) and mindfulness
- Ongoing studies – PG Dip TCM acupuncture and working towards C-IAYT (yoga therapy)
- Fellow of the College of Medicine, BANT (British Association for Nutrition and Lifestyle Medicine) and RSA (Royal Society of Arts)
- Director of The Synthesis Clinic and winner of UK BIA Innovation Leader of the Year 2022
- Co-Chair of the British Society for Integrative Oncology (BSIO) 2021-2023, input into international guideline development in integrative oncology via SIO, member of MASCC and UKASCC
- Presentations at multiple national and international conferences, member of the Editorial Board for the Nutritional Medicine Journal (NMJ)
- Expert integrative and supportive oncology abstract reviewer for international conferences, e.g. ECIM 2021, MASCC 2023

# Affiliations and memberships



[drninafullershavel.com](http://drninafullershavel.com)

[synthesisclinic.co.uk](http://synthesisclinic.co.uk)

[oncio.org](http://oncio.org)

[bsio.org.uk](http://bsio.org.uk)

# Learning outcomes

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In this session we will:

- Explore the definition of integrative oncology
- Discuss the broad range of needs that people with metastatic cancer may have and how the IO approach can support them in living well
- Review brief case studies from our clinical practice illustrating the importance and impact of the multidisciplinary team and integrative physician-led service



# What is integrative oncology?



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# Definitions of integrative oncology

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- BSIO - <https://www.bsio.org.uk/>
  - A rational person-centred integration of conventional cancer care with evidence-informed **nutrition, lifestyle, psycho-emotional wellbeing support and complementary medicine** to support better quality of life, improve resilience, minimise the side effects of treatment and improve outcomes
- SIO - <https://integrativeonc.org/>
  - “Integrative oncology is a patient-centered, evidence-informed field of cancer care that utilizes mind and body practices, natural products, and/or lifestyle modifications from different traditions alongside conventional cancer treatments. Integrative oncology aims to optimize health, quality of life, and clinical outcomes across the cancer care continuum and to empower people to prevent cancer and become active participants before, during, and beyond cancer treatment.”

# My personal perspective

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- **Integrative oncology and integrative medicine is/should be:**
  - a rational integration of the best in conventional, psychological, lifestyle and complementary medicine
  - whole-person oriented and addresses physical, emotional, mental and spiritual needs
  - supportive of targeted, personalised medication use where necessary without over-medicalising
  - about caring for people, not mindless protocols
  - evidence-based medicine - combining the best available research evidence, clinical expertise and patient values

Specialists in this area should ideally be aware of the overall context and emerging advances, e.g. precision oncology and new medications/approaches to treatment that require IO support.

# Living with cancer – survival vs living well

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# Metastatic cancer is now often a chronic disease

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- Going beyond fire-fighting to focus on the person, not just their cancer
  - Empowerment vs learned helplessness
- Living well with cancer for months and years is not a 'nice to have' or a 'pie in the sky' goal, it's a **fundamental aim**.
  - We should assume that a good quality of life and human thriving while living with cancer is possible.
- Thriving does not necessarily mean NED or a radical remission.
- An attempt at optimising QOL, physiological and nutritional parameters and relevant biomarkers should always be made instead of assumptions.

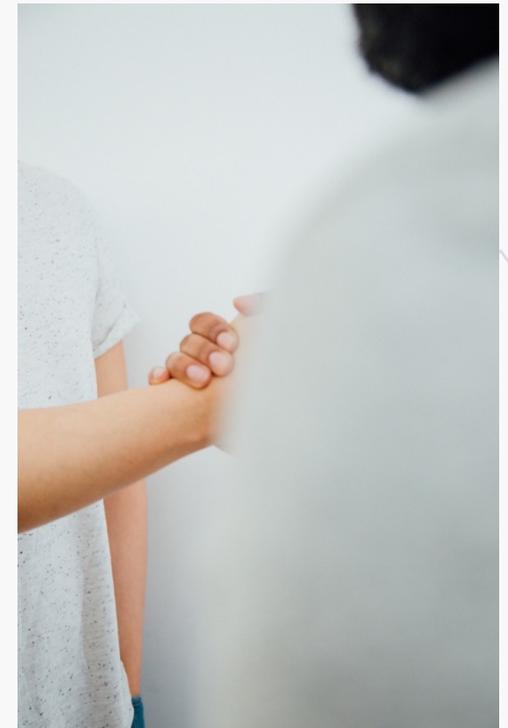


# Broad range of needs with variable support

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- A recent review found that people with advanced cancer reported the highest unmet needs in financial, health system and information, psychological, and physical and daily living domains (PMID: 35662585).
- **Physical – quality of life, not just survival**
  - Effects of cancer and its treatments – changing through the phases + accumulating structural impairment, e.g. surgery-related complications
    - Integration between oncology, supportive care, primary care and complementary and integrative medicine
  - Other comorbidities, side effects of adjunctive/supportive care medications and regular reviews
  - Physical resilience required to get through and recover from phases of treatment
    - Performance status/fitness for SACT is not there by magic – it requires support!
- **Mental and psycho-emotional**
  - Mental adjustment and finding resilience
  - Dealing with trauma – prior, cancer-related, healthcare-related
  - Grief and all its stages, supporting rapidly changing emotional needs beyond mood support with antidepressants
  - Dealing with other people's emotions



# Broad range of needs with variable support

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- **Social**
  - Managing social networks, friendships, families etc
  - Need for broader support – ‘people like me’
- **Spiritual**
  - Throughout – not just at the end of life!
  - Meaning and connection to the bigger picture matters
- **Practical**
  - OT, home equipment, social care, transport etc
  - Finances and legal (e.g. LPA, will)
  - Wishes at the end of life
    - Death doula or soul midwife support – when possible

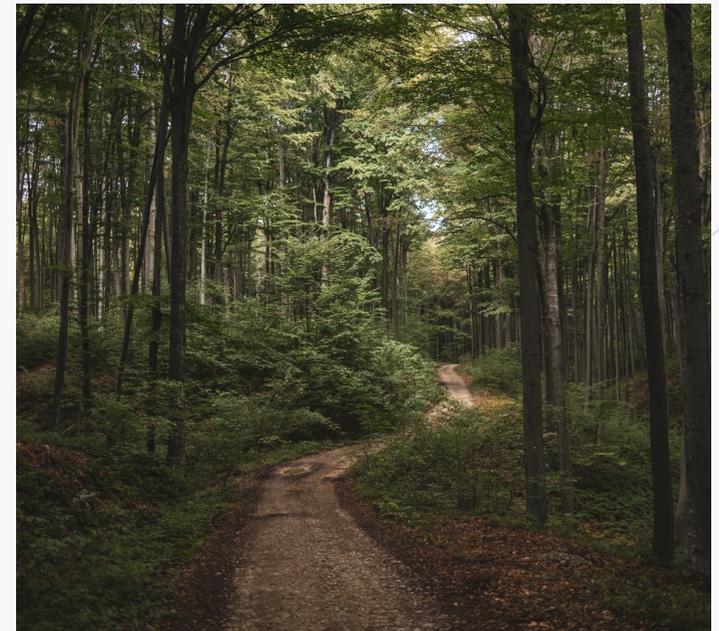


# Dynamic planning – not unyielding protocols

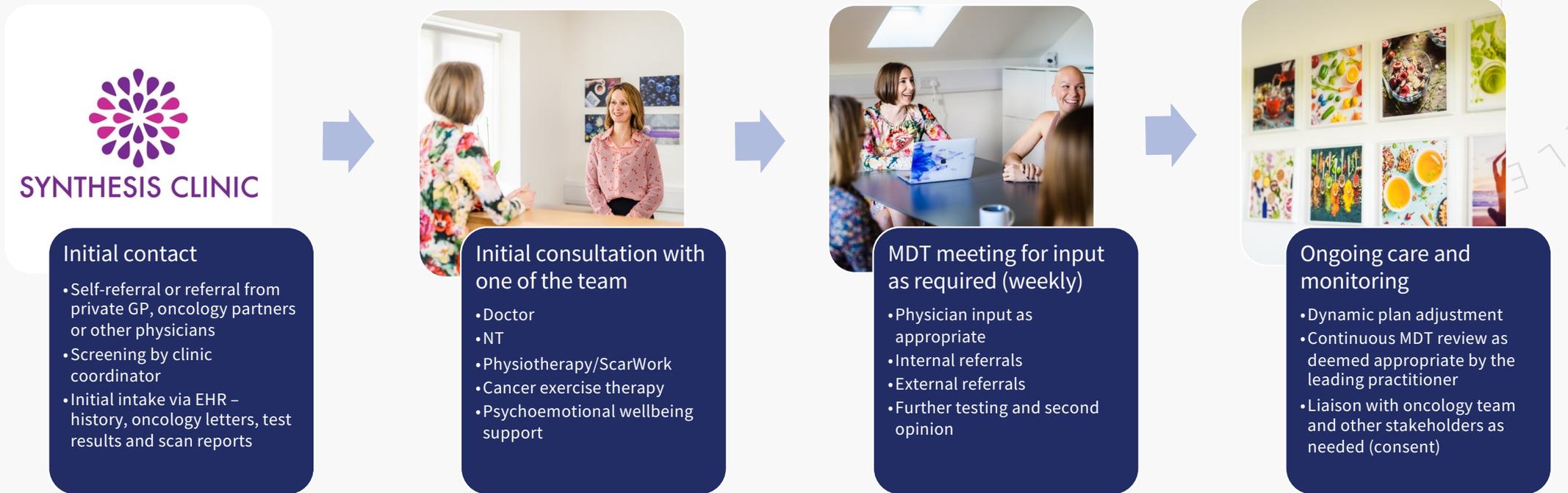
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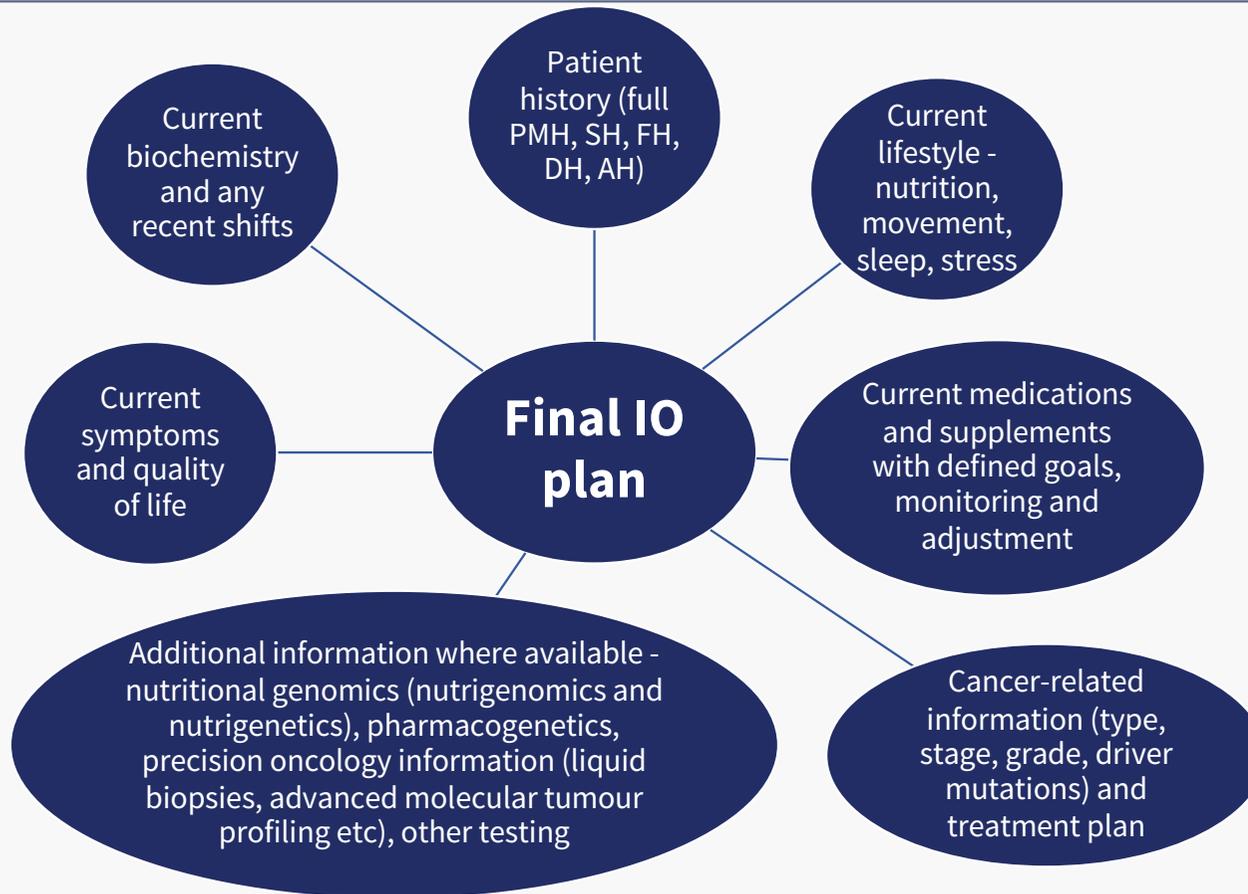
- **Patient needs and care plans constantly change and should be supported by the broad MDT**
  - Symptoms and quality of life, general physical function, psycho-emotional wellbeing, support needs, human ecosystem factors
  - Care transitions – prehabilitation, surgery, chemotherapy, radiotherapy, immunotherapy, targeted therapies, active treatment to palliative care
    - Proactive approach + personalised reactive changes as side effects/challenges emerge
- **Biomarker changes require personalised action**
- **Planning for the future – consider plan B or different routes, handling uncertainty**
  - Relapses and treatment options
  - Clinical trials
  - Known and anticipated complications of both cancer and its treatment



# Our clinic's model



# Integrating multiple inputs



# Hearing from patients – why an IP-led MDT approach works for them

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- *“The care and attention provided by the team. They really take the **time to listen, understand and explain** what the problem is and how they plan to address the issues.”*
- *“Integrative approach to healthcare, case discussion between practitioners and referral system internally and externally”*
- *“The exceptional knowledge and **individualised compassionate approach** that is truly **empowering** to take care of your own health with support”*
- *“The individual approach to health and disease with an expert in Integrative and Functional Medicine. A truly holistic approach to myself where the **physical, emotional, mental, and social parts are addressed and discussed**. A revolutionary approach to health, where **my opinion is taken into account and considered part of the care plan.**”*
- *“My doctor has a complete understanding of both conventional and functional medicine and so is totally aware of any contraindications that may occur and mindful to avoid them. It is more than words can express to have found someone who understands both and integrates them completely. The patient is not left stabbing in the dark with regard to supplements and treatments, but rather the **approach is targeted to each individual, a rare find indeed in the world of cancer care.** I appreciate how my **doctor works so closely with my oncologist, sharing all blood and scan results.**”*

# Creating a team around the person outside an IM/IO clinic

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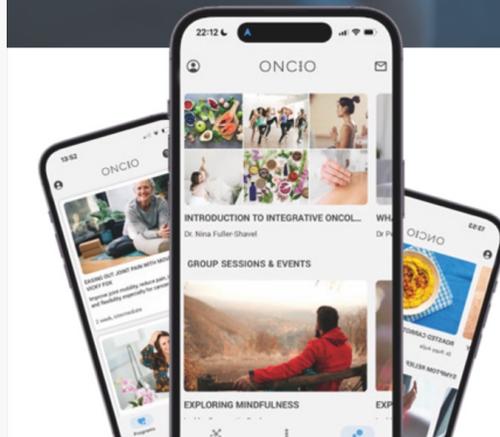
- **Oncology team** – available resources and referrals, e.g. psycho-oncology, physiotherapy
- **Consider common needs/presentations and resources you may need**
  - A few examples:
    - Nutrition
    - Cancer exercise therapy (Level 4)
    - Acupuncture
    - Yoga and yoga therapy
  - And much more – according to dynamic needs assessment and personalised care plan
- **Charity resource referrals**
  - Local centres, e.g. Maggie's and their offering
  - Yes To Life and Penny Brohn UK
  - Cancer-specific charities, e.g. Future Dreams House and other charities for breast cancer, Target Ovarian etc
  - Charities targeting specific groups, e.g. Victoria's Promise and Trekstock for younger people
  - Other free resources, e.g. Vicky Fox free classes for people affected by cancer, Sleepio (CBT-I) via Macmillan Cancer Support etc
- **Create a collaborative environment, respect scopes of practice and support timely bidirectional communication.**



# Digital resources, e.g. the Oncio app



Launch workshop Friday 30<sup>th</sup> June  
**Stand F61 (Thu/Fri)**



Oncio is the first free app available to anyone affected by cancer that empowers people to put practical integrative oncology tools and strategies into action.

## PROGRAMS

Our guided support programs with daily actions are aimed at supporting lifestyle changes and creating a broad toolkit for self-management, from nutrition and movement to psycho-emotional wellbeing and beyond.



## HOME

See your progress through the current chosen program, connect your health apps and devices to Oncio and complete self-evaluation scores to participate in app evaluation and development.



## EXPLORE

Engage with a diverse range of content - general information hub, symptom relief hub with information on non-pharmacological interventions, free charity group events and nutritious and delicious recipes.



# Information and guidelines

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- BSIO and SIO
  - <https://www.bsio.org.uk/>
  - <https://integrativeonc.org/>
- Available SIO guidelines (<https://integrativeonc.org/practice-guidelines/guidelines>)
  - 2022 Joint SIO-ASCO Clinical Practice Guidelines, Integrative Medicine for Pain Management in Oncology: Society for Integrative Oncology–ASCO Guideline.
  - 2017 SIO Guidelines, Clinical Practice Guidelines on the Evidence-based Use of Integrative Therapies During and After Breast Cancer Treatment.
  - 2014 SIO Guidelines, Clinical Practice Guidelines on the Use of Integrative Therapies as Supportive Care in Patients Treated for Breast Cancer
  - 2013 SIO Guidelines, Complementary Therapies and Integrative Medicine in Lung Cancer: Diagnosis and Management of Lung Cancer
    - Watch out for the upcoming JCO publication of ‘Integrative Oncology Care of Anxiety and Depressive Symptoms in Adult Patients with Cancer: SIO-ASCO Guideline’



# Summary

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- Integrative oncology (IO) is a rational person-centred integration of conventional cancer care with evidence-informed nutrition, lifestyle, psycho-emotional wellbeing support and complementary medicine to support better quality of life, improve resilience, minimise the side effects of treatment and improve outcomes.
- We should fundamentally always aim to support living well with cancer through addressing multiple and changing needs of a person with metastatic disease.
- IO care delivered by an integrative physician-led expert multidisciplinary team can make a significant impact on quality of life, treatment tolerance and clinical outcomes.
- Early initiation of IO care at diagnosis with dynamic care adjustment throughout the course of disease is likely to deliver the most impact.



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Thank you for  
your attention

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Over to Dr Deepak Ravindran

*Dr Nina*

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