



LIVING BEYOND
BREAST CANCER®

Thriving Together

2025 CONFERENCE ON METASTATIC BREAST
CANCER

Integrative Oncology

Presented by:



Guest Speaker: Dr. Ana Maria Lopez, MD, MPH

Ana Maria Lopez, MD, MPH

- Professor, Medical Oncology and Integrative Medicine, Thomas Jefferson University
- Director, Integrative Oncology– Sidney Kimmel Comprehensive Cancer Center



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Director of Mentorship,
Legal Clinics



Melinda Feola-Mahar, PhD
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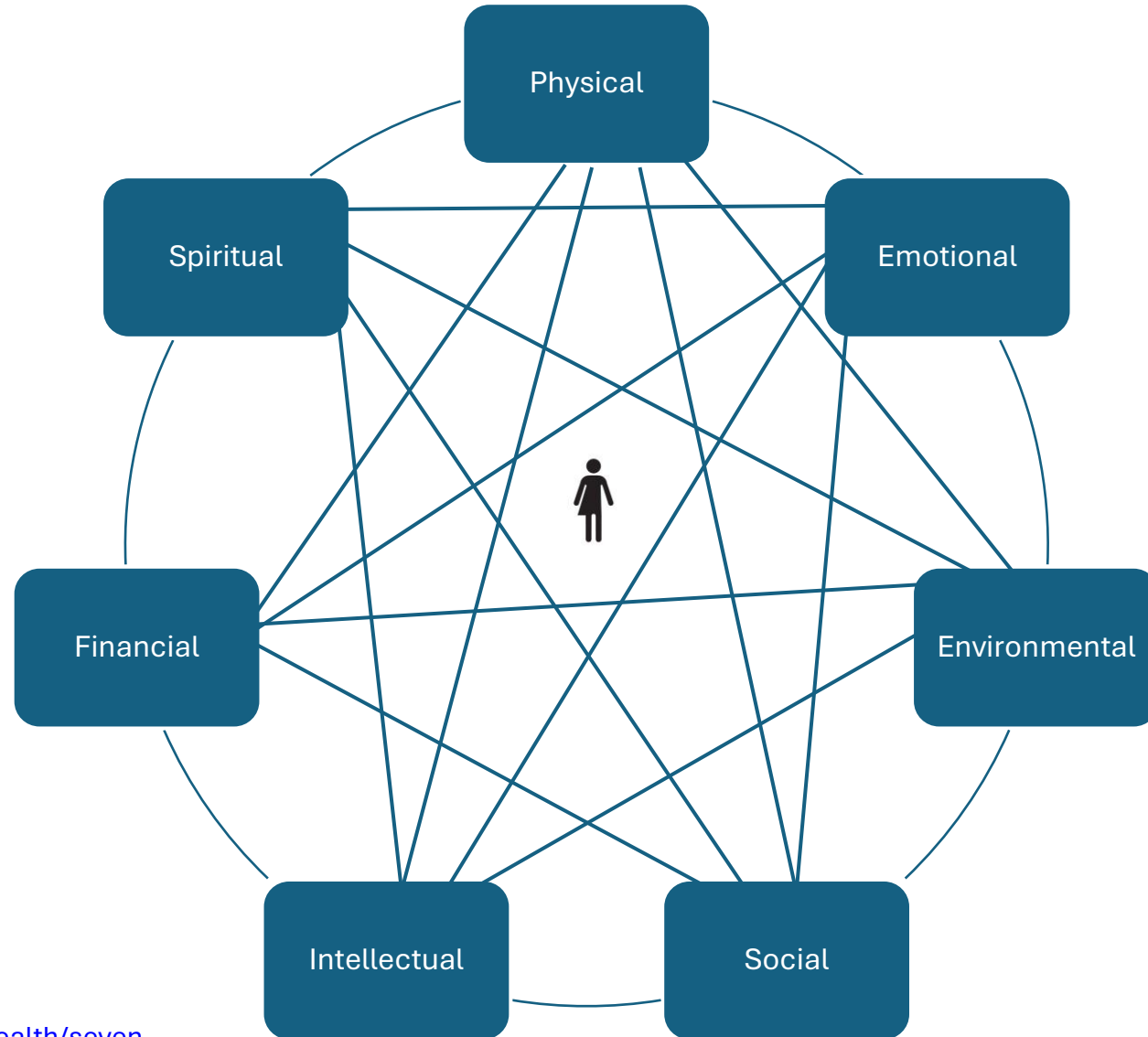


Amy Parliman, MHA
Communications/Social Media

What is integrative oncology?

- "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."

7 Domains of Health



There are now ASCO-endorsed integrative guidelines for breast cancer patients, pain management, and depression & anxiety management

Breast Cancer-specific Integrative Oncology Guidelines

<https://ascopubs.org/doi/full/10.1200/JCO.2018.79.2721>

- Developed by SIO in 2017; endorsed by ASCO
- Based on review of randomized controlled trials that were published from 1990 through 2015
 - For **anxiety/stress reduction**: music therapy, meditation, stress management, and yoga are recommended
 - For **depression/mood disorders**: meditation, relaxation, yoga, massage, and music therapy are recommended
 - For **general QoL improvement**: meditation & yoga are recommended
 - To reduce **chemotherapy-induced nausea and vomiting**: acupressure and acupuncture are recommended
 - **Acetyl-L-carnitine is not recommended** to prevent chemotherapy-induced peripheral neuropathy because of a possibility of harm
 - No strong evidence supports use of **ingested dietary supplements** to manage breast cancer treatment-related adverse effects

Pain Management Integrative Guidelines (All Cancers)

<https://ascopubs.org/doi/full/10.1200/JCO.22.01357>

- Developed jointly by ASCO-SIO; published 2021
- 227 studies were reviewed (systematic reviews, meta-analyses, and randomized controlled trials published from 1990 through 2021)
 - For **aromatase inhibitor-related joint pain**: acupuncture should be recommended
 - For **general cancer pain or musculoskeletal pain**: acupuncture or reflexology or acupressure may be recommended
 - For **procedural pain**: hypnosis may be recommended to patients
 - For **patients experiencing pain during palliative or hospice care**: massage may be recommended

Anxiety & Depression Integrative Guidelines (All Cancers*)

<https://ascopubs.org/doi/full/10.1200/JCO.23.00857>

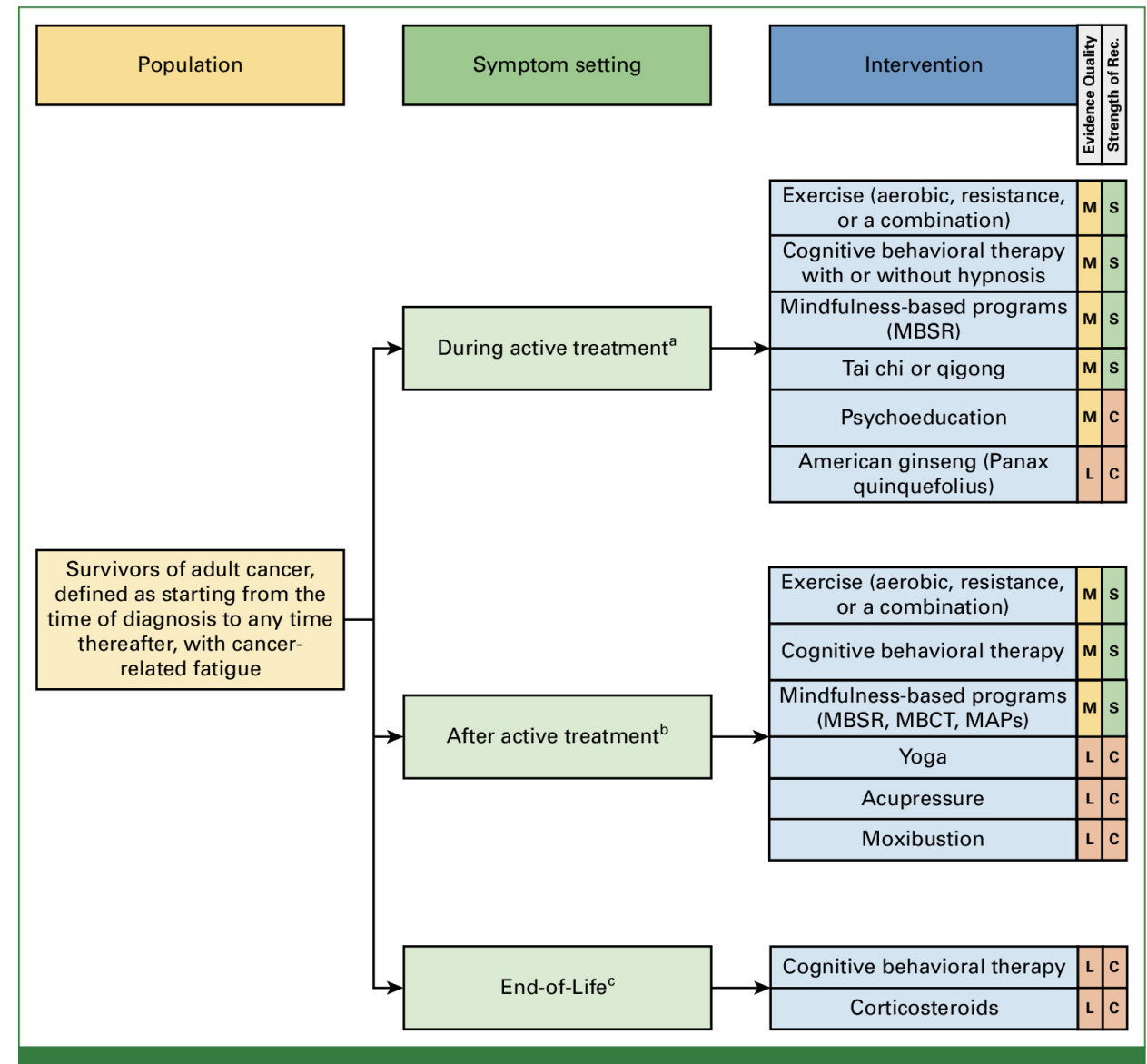
- Developed jointly by ASCO-SIO; published 2023
- 110 studies were reviewed (systematic reviews, meta-analyses, and randomized controlled trials published from 1990 through 2023)
 - **Anxiety strong evidence (should be offered)**: mindfulness-based interventions (MBIs), both during and after treatment
 - **Anxiety moderate-weak evidence (may be offered)**: yoga, hypnosis, relaxation therapy, music therapy, reflexology, and lavender oil during treatment; yoga, acupuncture, tai chi/qi gong and reflexology post-treatment
 - **Depression strong evidence (should be offered)**: mindfulness-based interventions (MBIs), both during and after treatment
 - **Depression moderate-weak evidence (may be offered)**: yoga, music therapy, relaxation therapy, and reflexology during treatment; yoga and tai chi/qi gong after treatment
 - **Depression do NOT offer**: expressive writing (either before or after treatment)

*Select recommendations are for breast cancer patients only

ASCO-SIO Pain Guidelines

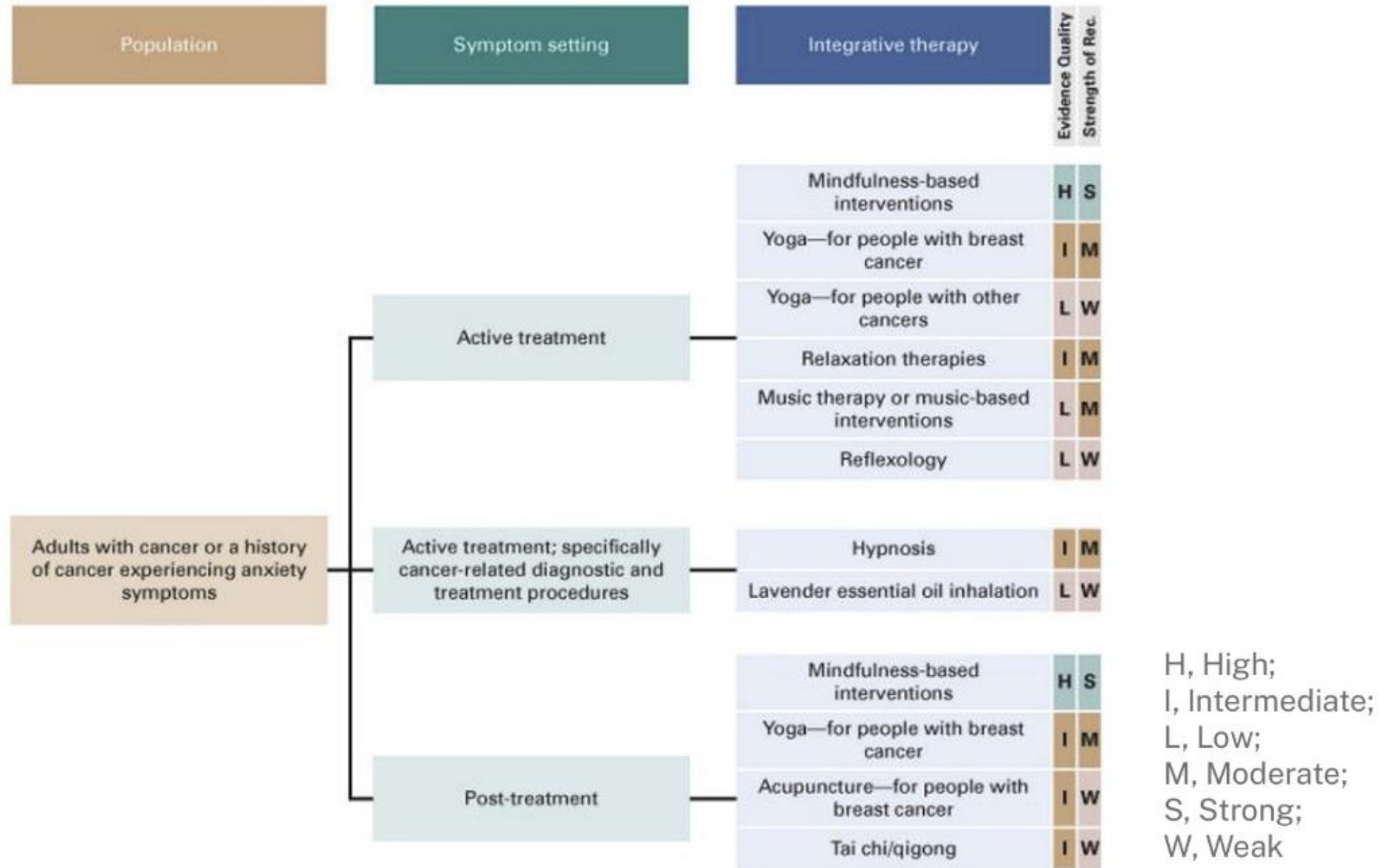
Recommendation	Type	Evidence quality	Strength
1.1. Acupuncture should be offered to patients experiencing aromatase inhibitor-related joint pain in breast cancer.	EB	I	M
1.3. Acupuncture may be offered to patients experiencing general pain or musculoskeletal pain from cancer.	EB	I	M
1.5. Massage may be offered to patients experiencing chronic pain following breast cancer treatment.	EB	L	M
1.13. Massage may be offered to patients experiencing pain during palliative and hospice care.	EB	I	M

ASCO-SIO Fatigue Guidelines



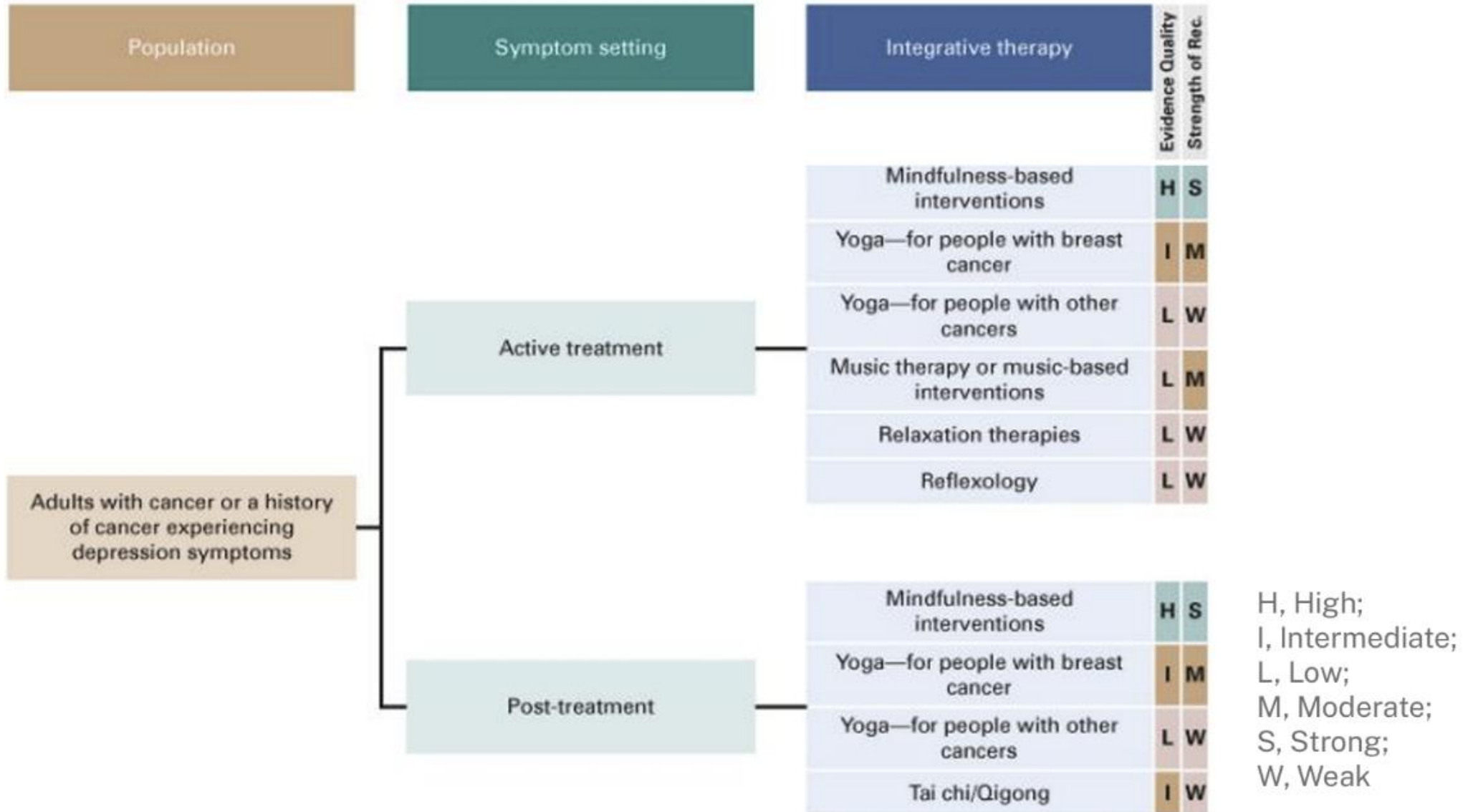
Visual for treatment of Anxiety in cancer patients: ASCO-SIO guidelines

Integrative Therapies Algorithm for Anxiety Symptoms



Visual for treatment of Depression in cancer patients: ASCO-SIO guide

Integrative Therapy Algorithm for Depression Symptoms



Integrative Care Motivators and Barriers

General wellbeing and mental health are key drivers to integrative oncology.
The biggest barrier continues to be awareness.



Reasons for Using Integrative Care Services/Therapies

General wellbeing	62%
Coping with emotional, mental impact of cancer	44%
Giving me a sense of control over my illness	37%
Providing hope	33%
Managing symptoms, side effects of treatment	31%
Managing symptoms, side effects of cancer	30%
Preventing cancer recurrence	25%
Suggested by people I trust	20%
Treating my cancer	18%



Reasons for NOT Using Integrative Care Services/Therapies

Was not aware these therapies existed	31%
Not covered by my health insurance	12%
Concerned @ lack of evidence on safety, efficacy	9%
Not supported by my healthcare team	7%
Too expensive	7%
Concerned about potential side effects	2%
Concerned @ interactions w. cancer treatment	2%
My healthcare team recommended against using	1%
Not sure	26%

Five Dimensions of Wellness

Emotional

Financial

Physical

Social

Spiritual





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Project Life Offerings

Healing Circles. Legal Clinics
Financial Classes. Cooking Classes
Yoga/Meditation. Spinning Science
Therapeutic Art Sunday Glow
Resources Book Club
Peer to Peer Mentors

Special Events/Workshops
Bingo Nights
The Good Grim
Report Backs from Conferences





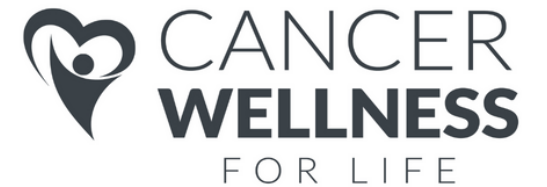
Become a Project Life Member



Resources



healing
circles



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• THANK YOU FOR JOINING US.