WEBVTT Kind: captions Language: en

00:00:05.046 --> 00:00:07.716 - It's that point in growth where you are stuck.

00:00:07.716 --> 00:00:10.719 You're in between childhood and adulthood.

00:00:11.886 --> 00:00:14.514 You are trying to work your way through something, right?

00:00:14.514 --> 00:00:15.974 You're trying to work your way through,

00:00:15.974 --> 00:00:18.226 you know, the social structure of the world.

00:00:18.226 --> 00:00:19.769 Who are you?

00:00:19.769 --> 00:00:21.229 - And that's a normal teenager thing.

00:00:21.229 --> 00:00:22.230 You know and

00:00:22.230 --> 00:00:24.190 relationships end and friendships end

00:00:24.190 --> 00:00:26.443 and people go off to college and you lose touch

00:00:27.402 --> 00:00:29.446 and then you throw a cancer diagnosis on top of that

00:00:29.446 --> 00:00:31.489 and it's like everything else takes a backseat

00:00:35.076 --> 00:00:37.620 - About ten, 12, maybe even 15 years ago,

00:00:37.620 --> 00:00:39.205 some of the initial data started coming out

00:00:39.205 --> 00:00:42.042 showing that these patients weren't just doing as well

00:00:42.042 --> 00:00:44.669 as younger patients and older patients

00:00:44.669 --> 00:00:47.547 and so we started looking at that and saying, 'why?'

00:00:47.547 --> 00:00:49.382 'Why is this population not doing well?'

00:00:49.382 --> 00:00:52.385 There is good evidence that they're not being enrolled in clinical trials as much.

00:00:52.719 --> 00:00:54.721 The biology of their tumors may be different,

00:00:54.721 --> 00:00:57.640 but there's also a very strong psychosocial component

00:00:57.640 --> 00:01:00.769 to the reasons that they kind of flounder with their diagnosis.

00:01:02.562 --> 00:01:06.608 - The primary, you know, like mental health diagnoses that my patients have

00:01:06.608 --> 00:01:09.027 are anxiety, depression and adjustment disorder,

00:01:09.027 --> 00:01:11.946 which of course makes sense because you have a cancer diagnosis

00:01:11.946 --> 00:01:13.615 and you're forced to adjust

00:01:13.615 --> 00:01:18.703 and I often kind of tell them that those are the unexpected side effects, right?

00:01:18.703 --> 00:01:21.748 Like they're not directly related to the chemo where you might feel nauseous,

00:01:21.748 --> 00:01:25.752 but it comes with the territory of having a serious illness.

00:01:30.131 --> 00:01:33.134 I've had six cancer diagnosis throughout my life,

00:01:33.468 --> 00:01:36.179 and I've been treated at Yale every single time.

00:01:36.179 --> 00:01:39.599 I personal background in being a cancer patient has really

00:01:40.100 --> 00:01:41.434 helped me connect with the patients

00:01:41.434 --> 00:01:44.354 and really helped me fill that role in a way

00:01:44.354 --> 00:01:46.356 that I don't think many others could.

00:01:46.815 --> 00:01:48.775 Having been a young adult with cancer

00:01:48.775 --> 00:01:51.945 and having seen the gap that they kind of fall into,

00:01:51.945 --> 00:01:55.365 whether if you're an adolescent in a children's hospital, you're often

00:01:55.657 --> 00:01:57.492 you feel a little bit too old for the clinic

00:01:57.492 --> 00:02:01.621 and if you're, you know, a 20, 30-something in the adult world,

00:02:01.621 --> 00:02:03.581 you feel too young for everything.

00:02:03.581 --> 00:02:06.793 I think the hardest part for me as a teenager going through

00:02:07.335 --> 00:02:10.296 cancer treatment was the isolation I felt in

00:02:11.047 --> 00:02:15.885 both my treatment aspect and my personal social aspects.

00:02:17.679 --> 00:02:23.017 - And when someone's in a state of depression, loneliness, anxiety,

00:02:23.017 --> 00:02:26.437 that compliance, that ability to

00:02:26.437 --> 00:02:28.690 do what's prescribed diminishes.

00:02:29.858 --> 00:02:32.443 And so there are certain cancers that we treat where

00:02:32.443 --> 00:02:33.653 we really need these patients

00:02:33.653 --> 00:02:36.030 to be taking their oral medications when they're not there

00:02:36.030 --> 00:02:38.950 and if they're not taking those medications, the cancer will come back

00:02:38.950 --> 00:02:40.702 and so there's a direct play in there

00:02:40.702 --> 00:02:44.622 of an inability to treat the cancer due to the mental health issues.

00:02:45.248 --> 00:02:48.251 - Adolescents don't want to come back to the hospital when they don't have to

00:02:48.376 --> 00:02:52.046 and they don't want to interact with each other while they're too sick.

00:02:52.797 --> 00:02:56.009 Dr. Marks and I had kind of these ideas of

00:02:56.342 --> 00:02:59.304 forming this virtual reality young adult support group.

00:02:59.304 --> 00:03:02.056 It provides a different level of immersion

00:03:02.056 --> 00:03:06.186 that maybe a Zoom support group wouldn't for this specific age group.

00:03:06.436 --> 00:03:11.024 They like to feel like they're with other people and that they're almost

00:03:11.024 --> 00:03:12.609 they could reach out and touch them if they wanted to.

00:03:18.489 --> 00:03:22.452 We worked with a company to help kind of build this software from the ground up

00:03:22.452 --> 00:03:24.787 where we kind of designed the space.

00:03:27.248 --> 00:03:29.292 It's, you know, very calming earth tones

00:03:29.292 --> 00:03:32.921 and there are four chairs and then my chair

00:03:33.254 --> 00:03:36.674 and it allows patients to connect with others from wherever they are

00:03:36.758 --> 00:03:40.303 while feeling still very immersed and like they were in the same room.

00:03:42.639 --> 00:03:45.934 The VR headsets are designed where every, you know,

00:03:45.934 --> 00:03:50.438 kind of ounce of light from the outside world is is cut off and it's 360.

00:03:50.438 --> 00:03:54.192 So you can look up and down and behind you in the room is all encompassing

00:03:54.192 --> 00:03:58.321 and you can see my avatar and you can see the other three avatars,

00:04:00.198 --> 00:04:03.076 the mouth moves when you talk, which is pretty cool.

00:04:04.035 --> 00:04:06.329 They have handsets so they can control kind of

00:04:06.329 --> 00:04:09.707 if they're talking with their hands, you can see that you get kind of

00:04:10.625 --> 00:04:12.585 some unique body language that comes across.

00:04:20.385 --> 00:04:22.470 - And so we started putting in place

00:04:22.470 --> 00:04:24.847 a formal institutional review board review,

00:04:25.139 --> 00:04:28.268 protocol review, really getting this going as a true clinical trial

00:04:28.268 --> 00:04:31.938 to give it some teeth and actually show that we were proving its efficacy.

00:04:32.939 --> 00:04:36.067 We started with some very objective measurements.

00:04:36.067 --> 00:04:40.071 We looked at depression, anxiety and resilience before and after groups.

00:04:40.822 --> 00:04:43.950 What we have seen a very objective response

00:04:43.950 --> 00:04:47.203 and a true improvement is in resilience, which is huge.

00:04:47.287 --> 00:04:50.957 So resilience really is a way to say

00:04:50.957 --> 00:04:53.668 how our patients kind of dealing on a day to day level,

00:04:53.668 --> 00:04:55.169 how are they getting through their illness.

00:04:55.169 --> 00:04:58.047 And we saw a difference before the intervention and after.

00:04:58.047 --> 00:04:59.799 After the intervention, they were

00:04:59.799 --> 00:05:02.802 they were measuring on resilience scales, being more resilient.

00:05:03.011 --> 00:05:04.220 And so that's huge for us.

00:05:04.220 --> 00:05:05.888 That shows real clinical progress.

00:05:07.640 --> 00:05:09.809 - It's a safe space where they feel like

00:05:09.809 --> 00:05:14.230 I can share anything and it's adolescent, young adult oriented.

00:05:14.230 --> 00:05:16.274 So it doesn't feel like a children's hospital.

00:05:16.274 --> 00:05:19.777 It doesn't feel like you're in the pediatric ward or anything.

00:05:19.777 --> 00:05:21.362 It's just it's age appropriate care.

00:05:21.362 --> 00:05:23.114 I think that is the best way I can describe it.

00:05:25.241 --> 00:05:28.036 - This is something that patients who may not have the means

00:05:28.036 --> 00:05:31.122 to come into the city, come in to support groups,

00:05:31.831 --> 00:05:35.835 come to the hospital on a weekly basis, are able to participate in.

00:05:35.835 --> 00:05:38.504 So we're able to reach those in different demographics,

00:05:38.504 --> 00:05:41.507 whether it be socioeconomic or geographic.

00:05:49.515 --> 00:05:52.393 I think what I'm most excited about is that

00:05:52.393 --> 00:05:55.313 we have the ability to continue to expand this,

00:05:55.313 --> 00:05:56.606 making it a standard of care,

00:05:56.606 --> 00:05:58.024 making it standard practice

00:05:58.024 --> 00:06:01.652 to use these groups in these populations to benefit patient care.