Patient Journey Congenital Melanocytic Naevus Syndrome

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Purpose

Methodology

care.

and Africa.



Patient Journeys represent the collective perspective on the burden of the disease and the needs of people with first-hand experience of living

with a rare disease. The Patient Journey for Congenital Melanocytic

Naevus syndrome was developed from the perspective of patients and

SKIN ePAG advocates completed a mapping exercise of the needs of

the CMN syndrome, across the different stages of the patient journey.

These stages progress from first symptoms, diagnosis, possible

Patient needs at each stage of the journey are referenced under three

levels: clinical presentation; patient needs; recommendations on ideal

A first version of the patient journey was presented at the Naevus

International conference (2019) with 15 patients and ERN-SKIN patient

advocates representing 10 countries in Europe, North & South America

parents, as a reference point for pathways and guidelines.

treatment (surgery), to follow-up care and palliative care.



About Congenital Melanocytic Naevus (CMN)

Congenital – present at birth

Melanocytic- caused by a pigment producing cell Nevus (plural, nevi) – birthmark

Occurrence:

Small CMN - 1 in 75 births

Largest CMN - 1 in 20,000 to 50,000 births

Congenital changes may appear in brain/spine, thus: syndrome.

Introduction

Naevus Global formalized in 2013 connects individuals and families around the world affected with rare forms of CMN. Together with Naevus International network, it provides mutual consultation between patients, scientists, clinicians, psychologists, and other stakeholders. Naevus Global stimulates cross-border collaboration in research, consensus guidelines and international registries to integrate efforts and map medical expertise, in collaboration with the ERN-SKIN.

ERN-SKIN is a virtual expert centers network with the aim to improve quality, safety and access to highly specialized healthcare for children and adults with rare skin diseases throughout Europe.

1. First symptoms Disease

nevi visible at birth

2. Diagnosis of CMN dermatologist or

multidisciplinary team







4. Follow-up care























evidence based information & consensus on treament





Challenge

Diagnosis possible neurological involvement. Establishing prognosis and care strategy. Care psychological impact of diagnosis.

Goal

Rapid referral to experienced care specialists International mapping of centers and individuals of expertise. support.

Challenae

Psychological impact on families during the diagnosis.

evidence based

information

Goal

Guidelines based on evidence based information. Receive professional counselling to learn how to cope with the social impact. Systematic referral to patient organizations for peer

Challenae

Finding an experienced plastic surgeon. Decision on whether to remove the nevus.

Goal

Further research to learn more about how to assess the risks of melanoma, possible treatments and their outcomes. Psychological support for parents and siblings as well as patients.

Challenge

Transition to adult care. Patients and family members experience psychosocial challenges.

Goal

Well organized transition to adult care. learn how to cope with the social impact of the disease on the patients and their families' life.

Challenge

Finding the proper expertise when there are morbid or deadly symptoms. Experiences with clinical trials are scattered. from professional Lack of statistics.

Goal

Access to highly specialized healthcare centers in Europe Professional counselling to and beyond. International consultation. Comparison of treatment efficacy with a standard and uniform outcome reporting. Psychological support.

International peer support.

Challenge

Deep grief of families in case of loss. Psychological support and guidance councilors.

Retention of family

Goal

expertise and experience. Referral to grief therapists. Patient organizations connect and collectively commemorate people who have passed away.

Conclusion

The patient journey is a tool that allows ERN-SKIN patient advocates to Clinical Practical Guidelines to address these needs and map gather the needs and the perspective of the wider patient community. This is a reference document to engage with clinicians to develop a common understanding of the disease and the burden of the disease it represents.

Clinicians can identify the gaps in care and treatment and develop

international expertise.

What's next? SKIN ePAG advocates who represent the CMN syndrome will organize a joint workshop with the clinicians to review this patient journey, identify the possible gaps and address patient needs.