Profile of Action

by Al B. Benson III, MD, FACP

In these uncertain economic and political times, oncology leadership is needed at both the local and national level. We face difficult long- and short-term issues that

will require unity among stakeholders and concrete interventions on behalf of patients and providers alike. Developing strategies and solutions will require partnerships throughout the entire healthcare enterprise, engagement with our professional societies, and more interaction with our oncology state societies. Pressing concerns include:

The cost of cancer care. The most recent report projects medical expenditures for cancer to continue to increase 27 percent or more over the next decade, along with a 30 percent increase in the number of cancer survivors by 2020 to about 18 million. Ramifications of these increases may include adverse effects on innovation, access to care, and delivery of integral oncologic services.

The looming workforce shortages. Recent reports anticipate workforce shortages of radiation oncologists, medical oncologists, and nurses—among others. Unless these shortages are addressed, access to care and integration of essential oncology services will be increasingly limited.

The precarious position of the U.S. clinical trials enterprise. Particularly in the public sector, oncology clinical trials in the U.S. are under threat for a variety of reasons including a reliance on philanthropy and voluntary efforts that may not be sustainable in the current economic environment; a restricted workforce; increasing regulatory demands; stagnant patient participation; and the movement of clinical trials away from U.S. shores.

The need for a shift in trial design.
An added factor affecting the clinical trials crisis is the need to move

from empiric trial design to a research design that will most enhance our understanding of tumor biology and patient selection. This will require investment in IT infrastructure, in

innovative imaging technologies, and in acquisition of tissue, to best inform appropriate use of new drugs. Insurers, patients, government, academia, community practices, regulatory agencies, and the pharmaceutical industry must be brought together to ensure this research vision.

The fusion of evidence-based pathways/guidelines and the art/practice of medicine. Patients, the medical community, and insurers will all need to embrace this evidence-based medicine model, which should include clinical research as a routine component of oncologic care, if we hope to offer the highest quality care with judicious use of resources.

We also face an urgent "to do" list that will require the united efforts of the oncology community, including:

- Developing innovative practice models that include palliative care and survivorship resources
- Re-addressing the relationship between investigators, practitioners, and industry
- Învestigating recent "unprecendented" shortages of oncology drugs to understand causes and develop proactive strategies to prevent future shortages
- Taking an active role in the comparative effectiveness discussion
- Staying well-informed on evolving healthcare legislation and healthcare reform discussions
- Monitoring the changing practice environment closely.

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