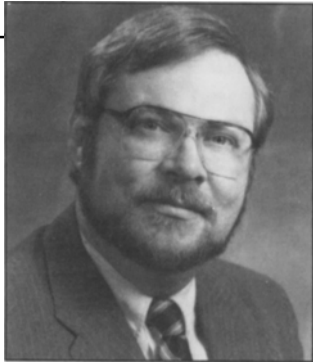


# From the Editor . . .



Last year when we polled the membership, there was considerable interest in the potential of a publication that focused on the "management" aspects of cancer care. The increasing complexity of the challenges facing the cancer care team reflects the remarkable changes in today's health care marketplace. Physicians, administrators, indeed, the whole health care team now need to know about the changes in health care reimbursement, the new alternative delivery systems, changes in cancer program marketing, problems with severity of illness, along with other new components of the cancer care continuum.

The fact that there is little information available on these and many related topics is not too surprising. When the National Cancer Institute recently did a study of the total number of citations that could be classified as "cancer control," the paucity of publications was conspicuous.

For the past three years, the **Advances In Cancer Control** series that we edit has provided an outlet for many community and university publications on cancer care financing, geographic cancer control, and other key topics. With this new publication, we hope to expand upon the topics and timeliness of this valuable material, continuing ACCC's tradition of being ahead of the trends. This requires a great deal of persistence, some courage, and a willingness to take calculated chances.

**The Journal of Cancer Program Management** will focus on the essential issues that confront the entire cancer care team topic-by-topic. In each issue, we will target a major topic area and present new research, data from the Association and other authors, issue papers, membership polls, in addition to Association news. We will solicit some manuscripts and also take contributions from submitting authors. If the information or research fits within the general framework of the topics that are critical to cancer program team members, we will review the submission. Our object is to provide relevant information when it is useful to decision making and policy formulation that will impact cancer programs in hospitals, in freestanding cancer centers, in home health cancer programs, in physician offices and group practices, in HMOs, in PPOs, and at the state and Federal levels. This is an ambitious set of goals, but we believe that you will see many of these goals achieved in the first few issues.

The content of this premiere issue is indicative of some of the types of information that you will see in subsequent issues. Dr. John Yarbro and former President Richard Nixon discuss the accomplishments of the National Cancer Program. Cooperative Group Chairmen Coltman and Moertel, and NSABP's Peter Deckers discuss the involvement of the community in clinical research. NCI Director Vincent T. DeVita, Jr., M.D., gives us a glimpse of his view of cancer care 15 years from now, a special article he did at our request. In the same issue, ACCC's President, Paul Anderson, targets some of the major crosscurrents that are confusing analysis of the future of cancer research and treatment. And, we have news articles on our upcoming meetings on **Oncology Economics and Alternative Delivery Systems** and the Department of Health and Human Services agreement to alter the leukemia DRGs (based upon data from ACCC and a recommendation from the Prospective Payment Assessment Commission). Quite a variety... but just the tip of the iceberg.

ACCC is use to being ahead and use to taking chances. A story that I often like to tell is one that went around Washington several years ago. It was attributed to the head of a state department of health. This Commissioner was said to have given some key advice to the Administration on changing the health care system. What he said was, "Change the system every three years. It doesn't matter how. It will confuse the poor creatures. The health care system is just like a brontosaurus. When you attack from a new direction, the top ten percent of the smart administrators will quickly adjust, just like the head of the brontosaurus swiveling around to see where the menace is coming from. But the other 90% of the system is damn slow responding to any change and like the brontosaurus won't move much. Changing the attack every three years will give you a chance to hack off another section of the monster's tail."

We hope this new mechanism for communication will provide you with the information that you will need to stay ahead of your cancer program development...and get moving before the axe can get you.

Lee E. Mortenson, M.S., M.P.A.  
Senior Editor  
ACCC Executive Director

## The Journal of Cancer Program Management

The Journal of the Association of Community  
Cancer Centers

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