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The Challenge Of Change

by Albert B. Einstein, Jr., M.D.

An apt description for 1993 is "the year of change." The world, the nation, the Association of Community Cancer Centers, and I personally are going through significant changes. Successful people accept change as a challenge and an opportunity.

Change is particularly important in the field of cancer treatment. For the sake of our patients and those in our personal lives touched by the disease, we can neither accept nor tolerate the status quo of today's cancer treatments.

When asked why I became an oncologist, I often explain that I wanted to be in a field of medicine that would be clinically challenging and continually evolving. I have not been disappointed. The past 20 years have shown marked improvement in the effectiveness of our therapies and in our abilities to deliver cancer care.

Noteworthy changes include the use of adjuvant chemotherapy for breast cancer; the alternative of lumpectomy and radiation therapy for primary treatment of breast cancer; chemotherapy cures for Hodgkins disease, non-Hodgkins lymphoma, and testicular cancer; high-dose chemotherapy and bone marrow transplantation for leukemia; and growth factors that reduce the toxicities and morbidities of high-dose chemotherapy, to name just a few. Moreover, we have seen the growth of comprehensive cancer centers; increased numbers and sophistication of community cancer centers; clinical research initiatives, such as the Community Clinical Oncology Program and national cooperative groups; and the emergence of cancer control activities and research for the prevention and early detection of cancer.

During the same 20 years, the Association of Community Cancer

Centers has emerged and matured into a truly national oncology society that has contributed greatly to helping its members develop multidisciplinary, high-quality cancer programs for their patients, as well as opportunities for clinical research in their communities.

Currently, we in the field of cancer care are at a crossroads. Scientifically, we are in the midst of a biological revolution that is enabling us to understand the molecular basis for the neoplastic transformation of cells. We are rapidly approaching the point where we will be able to perform genetic engineering and other biochemical manipulations that potentially could reverse the neoplastic process or specifically interfere with this process. Gone will be the era of empiric chemotherapy, radiation therapy, and mutilating surgery.

However, as we look forward to the promise of the future spearheaded by this exciting biologic revolution, we are challenged by the dramatic change in the health care delivery systems with which we are confronted. I fear that health care reform, while possessing many positive features, will threaten our ability to deliver and the ability of our patients to access the high-quality cancer services that we have worked so hard to provide.

Moreover, the level of support for both basic and clinical cancer research is not clear under the new health care reform measures being proposed. Balancing the need for cost containment, universal access, research, and the delivery of high-quality cancer care for our patients is our challenge.

As I look forward to this next year as your president, I personally envision two overriding goals for ACCC.

First, we will continue to provide leadership on behalf of our membership to ensure as much as possible that the high-quality cancer care we have worked

so hard to develop will continue to be available to our patients as we go through health care reform. We may, however, need to learn how to do business differently. To this end, we will be working with other national and state cancer organizations to sponsor, support, and influence legislation and regulations that help us provide cancer care for our patients. We will also be actively providing programs and other information resources for our membership to help keep you abreast of rapid changes in health care reform.

Second, within the organization of the ACCC we will continue to promote activities and programs for all the constituencies within our membership. This past year we have emphasized in our annual strategic planning objectives the need for continuing to promote interdisciplinary interchange among our special interest groups. In addition, we have proposed additional administrative and budgetary support for the several special interest groups and committees to strengthen and enhance their activities and their communication with the Board of Directors and the Nominating Committee.

The changes that we anticipate in 1993 will clearly be a challenge to us all, individually and organizationally. We will need to strive to find new ways of doing business and rise to the challenge.

Finally, as ACCC changes presidencies, I would like to acknowledge and thank Bob Clarke for the excellent leadership he has provided our organization while president and during the years in which he was a member of the Board and the Executive Committee. Bob has successfully applied his administrative skills to enable ACCC to operate in a more efficient and businesslike manner. Thank you, Bob. ■