



## Advances and Retreats

Robert L. (Larry) White

To cite this article: Robert L. (Larry) White (1998) Advances and Retreats, *Oncology Issues*, 13:3, 8-8, DOI: [10.1080/10463356.1998.11904746](https://doi.org/10.1080/10463356.1998.11904746)

To link to this article: <https://doi.org/10.1080/10463356.1998.11904746>



Published online: 18 Oct 2017.



Submit your article to this journal [↗](#)



Article views: 1



View related articles [↗](#)



## Advances and Retreats

**O**ver the past twenty-four years I have been fortunate to be practicing oncology in a time when some of the most exciting advances in early detection and treatment have taken place in the field of oncology.

When I began practicing as an oncologist in 1972, we were curing only one of every five to six patients. Today, with the tremendous advances in surgery, radiation, and medical oncology, we are curing one of every two patients. Just some of the impressive gains we have made in the war on cancer include:

- reduced levels of toxicity and severity of combined modality treatment.
- surgery that is less invasive, requiring shorter inpatient stays, and even appropriate outpatient care.
- improved radiographic and diagnostic testing leading to earlier diagnosis, better definition of malignant processes, and safer techniques for procedures such as biopsy.
- new chemotherapeutic agents and supportive drugs that improve quality of life for our patients.

Access to cancer care has also evolved. Twenty-four years ago, only major university centers could afford the equipment and expertise to provide quality cancer care, diagnosis, and treatment. Today nearly every community of even moderate size has been able to develop and promote multidisciplinary state-of-the-art cancer care. We have a lot to be proud of.

All this has happened during a period of time when reimbursement for the most up-to-date techniques had been adequate. Unfortunately that era has ended. We have entered a new era of cost containment through managed care. With decreasing reimbursement, and more and more financial constraints, there is growing concern among the medical, nursing, and administrative leaders in cancer management that this high level of quality cancer care will no longer be affordable. Shrinking reimbursement is affecting all aspects of cancer programs, from screening and detection, to clinical research, to care delivery itself. Since the United States leads the rest of the world in innovative cancer care, limiting the financial aspects of cancer management would surely compromise the accessibility and

adequacy of treatment on an international scale.

Unfortunately we seem headed in that direction. Despite our best efforts in developing patient management guidelines, we are finding that we must still justify adequate patient evaluation and appropriate treatment options to payers. Payers need to be educated that adequate levels of reimbursement are required to allow continuation of the high level of patient care we have always provided. In addition, they must know that the oncology nurses, nutritionists, social workers, and the other personnel helping patients through a very difficult time in their lives are vital to cancer management in all settings and must be adequately supported.

We are all aware of the recent problems we have faced in medical oncology with regard to reimbursement for chemotherapy drugs. Perhaps our reimbursement system must be rethought. However, until that day comes, we have no choice but to try to protect the system of reimbursement as it exists now. We need the entire oncology community, with the support of our patients, to demand from the political system that cancer care be reimbursed at an adequate level.

In order to continue to improve on the great advances in care that we have been able to accomplish over the last thirty years, we must be able to generate reimbursement levels that allow us to operate. The business of oncology, as with any other business, is by the laws of economics a competitive one. No doubt, hiring the most qualified staff and securing the most current technologies are a costly investment. The value gained, however, is certainly measured in lives saved and improved quality of life. These are simple principles.

Robert L. (Larry) White