

Improving outcomes, driving efficiency in cancer care

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Event Coverage

Delivering better cancer care requires significant ‘culture change’, MEPs were recently told.



Delivering better cancer care requires significant ‘culture change’, MEPs were recently told | *Photo credit: Saara Akhtar*

The growing burden of various cancer types is such that all parties involved in fighting the condition need to act and think differently. This call for “culture change” in delivering cancer care came at a European Parliament roundtable event on 30 January, hosted by Lieve Wierinck, of the MEPs Against Cancer (MAC) group.

The two-hour debate was entitled ‘Improving outcomes, driving efficiency in cancer care: How do we learn from best practice?’. It was organised by four organisations: All.Can, set up to engage policymakers on the need to improve the efficiency of cancer care; the European CanCer Organisation (ECCO), the European Cancer Patient Coalition (ECPC) and the Association of European Cancer Leagues (ECL).

Opening the discussion Wierinck highlighted her personal battle against cancer. “I have been a cancer patient and now am a cancer survivor, so this event today is of particular interest to me.”

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She paid tribute to the work of All.Can which, she said, “aims to engage policymakers to focus resources on what matters most to patients; finding innovative solutions to improve efficiency across the entire care pathway - from small scale efforts to system-wide changes.”

She said it should “come as no surprise that our healthcare systems are facing many challenges. As MEPs, we can do more to advance the important work of the stakeholders here today, helping spread examples of good practices across Europe.”

She added, “The most important thing when I had cancer was to continue working. This is probably true for thousands of cancer patients, but are these personal goals incorporated into patients’ care plans? Do patients have enough information to help them consider returning to work? Including these personal goals would not only improve patient care, it would yield better results.”

ECL President Sakari Karjalainen praised the work of the MAC group. ECL supported MAC in aiming to cut both the growing incidence of cancer and mortality rates.

Suzanne Wait, of the All.Can secretariat, pointed to an “urgent need” to deal with both improving outcomes and driving efficiency.

The EU had a key role to play in “fostering better exchange and collaboration between member states,” which was necessary to address the “real evidence of waste” such as inefficient interventions. An estimated 20 per cent of healthcare spending is wasted on ineffective interventions, while poor treatment adherence costs €125bn a year in Europe.

In Germany, over €7.2bn could be saved annually by improving care coordination, reducing hospital admissions. “The challenges of sustainable cancer care cannot be resolved by any single stakeholder.”

All.Can is set to conduct a survey of cancer patients that will establish exactly where inefficiencies occur. “This will ask patients where they feel resources could be better used to improve their care experience and outcomes.” The survey (<http://patientsurvey> [5]. all-can.org) will run in ten countries, beginning in the United Kingdom.

ECPC Director Lydia Makaro gave examples of current best practice including their ‘patient guide on survivorship’, designed in collaboration with the European Society of Medical Oncology to ensure that people with cancer “get the best possible support.” She also highlighted a Dutch scheme, “Jobs After Cancer” that provides help and advice for cancer survivors returning to work.

Around 80 per cent of paediatric patients need sedation for MRI scans, as they may be frightened by the process; scans often need to be rescheduled. One manufacturer had come up with a potential solution, painting scanners with vibrant child-friendly images. The results are encouraging, with fewer children needing sedation, more patients being scanned and overall patient satisfaction scores up by 90 per cent. “Even the smallest of changes can make an important difference,” Makaro added.

ECCO’s Ian Banks advocated a “culture change” in the approach to cancer care. “When discussing improving outcomes and cancer care, most people still think of better medications and medical devices. These are obviously important, but we also need to think differently about how we do things.” One such ‘innovation’ would be greater involvement of cancer patients in decision-making.

He also pointed out the role played by carers needs more thought, “many of whom give up their jobs to look after cancer patients.”

In a roundtable discussion on the role for the EU and member states, Dirk Van den Steen, of the European Commission’s health directorate, pointed to the sometimes “huge disparities” in cancer care provision in Europe. He said that, along with these disparities, there are marked variations in cancer mortality rates. “Clearly, such differences should give pause to think”.

Herb Riband, of biotech company Amgen, pointed out that “improving outcomes for cancer patients is a complex task requiring an integrated approach across each step of the patient journey.”

He added that, “If it were easy, we would all have done it already. All stakeholders have a role to play: the rapidly growing burden of cancer requires an ‘all-hands-on-deck’ approach, including policymakers, industry, patients, healthcare providers and payers.”

Pascal Garel of the European Hospital and Healthcare Federation agreed, saying, “we all need to change our attitudes around the issues being discussed. I also hope that tackling these issues doesn’t come down to an ‘us and them’ clash between the European Commission and member states.”

Amadou Diarra, of Bristol-Myers Squibb, said it was “important to systematically measure outcomes, incorporating patients’ perspective across the cancer care continuum. Partnerships like All.Can as well as caring initiatives addressing needs in paediatric oncology help identify and scale-up best practices globally.”

Rosna Mortuza, of the International Consortium for Health Outcomes Measurement, agreed that the “voice of patients” was as important as that of clinicians and policymakers. She summed up the consensus, saying, “There’s no silver bullet to these challenges. However, with the right decisions, we can get to where we want to be.”

The key message from the event was clear: we all have a role in improving the efficiency of cancer care - and a tangible starting point would be that efficiency is included as a top priority in all national cancer control plans.

About the author

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