

Community oncology: Ensuring the best standards of care

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Receiving a cancer diagnosis is a devastating experience. Still under the shock of the bad news, patients must make many choices including who to turn to for advice and treatment, with the possibility to choose among a comprehensive cancer center, a university hospital or a community oncology hospital.

"When my oncologist informed me about my blood results, and told me the diagnosis (Plasmocytoma), I was disoriented. As a patient I was looking for detailed answers to my many questions and I wanted time," explains Inge from Germany. "My doctor at the community [oncology](#) center explained everything to me: type of [cancer](#), [life expectancy](#), different treatments available and so on. To make it short, he helped me to understand what was going on with me. I was given a phone number to call at any time. The constant support of the whole team was essential to my recovery."

The European Society for [Medical Oncology](#) (ESMO) recently created a new working group dedicated to Community Oncologists. The group aims to represent professionals working outside academic institutions or comprehensive cancer centers, who treat patients with a wide range of tumors and whose practice needs and access to resources are very specific.

Dr Robert Eckert from Internistische Gemeinschaftspraxis und Onkologische Schwerpunktpraxis in Wendlingen, Germany, who chairs the ESMO Community Oncology Working Group, explains that the first

step will be to conduct surveys in as many European countries as possible in order to identify the special needs of Community Oncologists. "This will be a challenging task because the situation varies greatly across Europe. So far, we have been able to show for a number of countries that Community Oncologists are interested in practice-oriented tools, primarily in guidelines and score calculators. They need to be able to access reliable, up-to-date information quickly at the point of care in their practice, which reflects their challenge of treating a wide spectrum of malignant diseases."

Once common needs are established, the Working Group will collaborate closely with the ESMO Leadership to develop educational activities and products, in order to meet Community Oncologists' needs.

Dr Michalis Karamouzis, from St Savvas, Anticancer Oncologic Hospital in Athens, Greece and also a member of the new working group, explains some of the challenges of a young community oncologist: "According to my experience in Greece, Community Oncologists are doing very challenging work as they see most of the patients, not only those involved in clinical trials, but patients with all sorts of tumors, frequently with difficult tumors, patients with bad performance status, all sorts of complicated cases, including those who need supportive or palliative care."

The way in which the treatment of cancer patients is organized --and patients' preferences-- also varies largely among European countries.

In Italy, Dr Sergio Crispino, Chair of the Italian Association of Hospital Oncology Chiefs (Collegio Italiano dei Primari Oncologi Medici Ospedalieri - CIPOMO) explains that "Many patients are treated in non-academic units. At present, in Italy, general hospitals contribute substantially to clinical research and have very advanced standards and treatments."

In Italy the patient's choice between a university hospital or a community setting would also depend on the region the patient lives in and the kind of cancer he has. "We cannot generalize. Patients are usually guided in their choice by family doctors," explains Dr Crispino. "In the future, my personal view is that community oncology will grow because we are standardizing treatments so the quality of care will be similar in all centers. The development of oral drugs and gentler treatments will also contribute to this growth."

The challenge today is to be able to provide quality care for patients from diagnosis until the end of treatment, be it in hospitals, hospices or at home. This can be done by adhering strictly to guidelines be they national, regional or international, ensuring efficiency and appropriateness of treatment.

"Also important for a community oncology center is to be able to work connected to a regional system and to participate in research, noted Dr Ulrich Stein from Hamburg, who has worked both in France and Germany.

"The important thing is that community oncologists should not work alone. They should be part of a network and participate in a common reflection and also work with others in clinical research. In France, community oncologists work closely with university hospitals or big cancer centers and are in contact with larger teams. National and international guidelines are followed and ensure that patients receive quality treatment."

"Nowadays patients have access to a lot of information about cancer and about the quality of hospitals and clinics, thanks to the Internet. They will find out where the best centers are for their type of cancer. In France, for example, a patient may go to a big university hospital for surgery by a professor who specializes on a specific kind of tumor, then

decide to go to a community oncology center for chemo and radiotherapy. Proximity may be an issue in some regions: some patients may want a community center closer to home, while others are willing to travel 80 km to be treated at a university center," explains Dr Stein.

Dr Stein believes that ESMO's new working group can help by making sure community oncologists are kept up to date with the latest treatments and by offering expert opinion on recent research. "By informing about what is going on in oncology, ESMO can help professionals learn from each other's experiences in Europe and beyond."

Dr Eckert also highlights the need for a real cross-border healthcare for Europe's increasingly mobile population. "I have had to follow patients coming from other countries. In some cases the cooperation with cancer centers abroad was very easy, but in other places it was extremely difficult to access patients' records."

Dr Eckert concludes: "Our challenge is to form an enthusiastic group of doctors. We need to establish what the situation is in our countries and then work to answer the specific needs of our professionals. At the end of the day, the objective of the ESMO Community Oncology Working Group is to strive to ensure the best standard of care for all cancer patients, everywhere in Europe, inside and outside dedicated cancer centers."

"It is essential that there's a link between university hospitals and community oncology settings, between research and practice," notes Rolf Stahel, Chair of the ESMO Educational Committee, 'forefather' of the Community Oncology working group. "This is the only way we can guarantee that the important results of research are brought as quickly as possible to cancer patients, which is the ultimate goal of all who work in the oncology community."

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