

Struggling to match the demand for cancer treatment

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The changes to the NHS that have taken place over last 18 months have thrown up some real challenges. And when it comes to caring for our patients, things on the ground are starting to get quite tricky. So the findings of today's new report on Cancer Services entirely resonate with those of us on the front-line in the health service.

On the one hand, we're seeing ever-increasing patient numbers and more complex treatment pathways – we used to only have one type of hormone treatment for <u>prostate cancer</u>, for example, but now we can offer chemotherapy, and second- and third-line hormone treatments. So planning the best care is an ever more challenging task. The graph of patient numbers and treatment complexity is rising exponentially.

On the other hand, notwithstanding some extra money for the Cancer Drugs Fund, the other resources we have remain static and in, real terms, have even declined slightly. We're having to do more with less. And while it's often possible to find ways of working more efficiently, this has its limits – we're getting to a point where things are going to become very difficult indeed.

But it's not just that our resources are ever more stretched: we've lost many of the tools we had to help us organise <u>cancer</u> services, so that's making it even harder to keep on top of things.

Local Cancer Networks have disappeared and it's much more difficult to organise the care we offer our patients as the services become more



fragmented.

The loss of national leadership by the dissolution of the Cancer Action Team has also led to a loss of focus on cancer – an illness that will affect nearly a half of us and which is still the leading health concern among the public.

For example, we know that if we want to make the best use of many of the new treatments that are becoming available, we need a network of molecular testing laboratories to tell us what genetic changes are present in <u>patients</u>' cancers. But there seems to be no way to plan this nationally. So, despite knowing what we need to do, we have spent the last year wondering how to get it done in the reorganised NHS.

It all amounts to a situation where we're running ever harder just to stay still, in the face of an ever more complex reality.

We've lost the ability to think and plan ahead, and are really struggling to match resources to the demand.

So we really need things to change soon, or much of the progress we have recently made in treating <u>cancer patients</u> is going to be lost. And that really would be a tragedy.

More information: The full report is available online: www.cancerresearchuk.org/sites ... ervices sept2014.pdf

Provided by Cancer Research UK

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