

Research raises concerns about the health of the oncology profession

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Credit: Artem Podrez from Pexels

Workforce changes, work intensification and workload stress within the oncology profession are taking their toll on staff, with implications for patient care, UNSW research has found.

Work intensification, workload stress and an uncertain professional future are taking their toll on some oncologists and potentially affecting

the quality of the care they can offer, according to a new study.

University of New South Wales (UNSW) Sociology Professor Alex Broom, who led the study, said the research raised new and urgent concerns for the Australian Government and health services regarding support for the oncology profession in Australia.

The results of the study, "Medical oncologists' experiences of their profession", have been published in *PLOS ONE*.

Professor Broom said that every year in NSW more than 37,500 new cases of cancer were diagnosed. Of those, 66% of people were still alive within five years of diagnosis, meaning that quality ongoing cancer care from a supportive oncologist was vital to maintaining quality of life.

Professor Broom said the oncology workforce had changed dramatically over the past decade and many of the study participants said their careers looked very different now than when they entered the workforce.

"As shown in our study, there are often few or any jobs for young or junior oncologists in major cities or in the areas they want to live in. This reflects a trend of cancer services often being trimmed or not keeping up with demand. This raises the problem that despite long periods in training, oncology may not represent a stable and attractive career for its juniors. This has acute implications for the future of cancer care in Australia," Professor Broom said.

He said one of the most concerning outcomes of the study was that the intensification of oncological work, workload stress and uncertain professional futures was making the emotional work of oncology more difficult.

"Oncologists deal with difficult emotions every day. They may have to

tell numerous people in one clinic that they have cancer or a limited life expectancy. This is already an impossibly hard job, let alone when patient numbers rise, treatment volume intensifies, and the workforce becomes more fractionalised and insecure."

Burnout and emotional fatigue were the likely implications, which would have a severe impact on patients, families and clinicians, he said.

The study drew on in-depth qualitative interviews with 22 medical oncologists, including advanced trainees, early-career consultants and senior consultants, and focused on professional values and experiences, career prospects and pathways, and the nexus of the characteristics of the profession and delivery of care.

The study also highlighted the implications of private/public work in medicine and the fact that public funding for [cancer care](#) did not always keep up with the rates of cancer seen in communities.

"There is a tendency toward public hospitals advertising fractional appointments, which are part-time appointments focusing on high-intensity clinical work rather than other aspects of an oncologist's role such as research or professional development. These part-time appointments also mean that oncologists increasingly have no choice but to work privately and publically, making it difficult to balance interests across both sectors," Professor Broom said.

He said the study also illustrated how committed Australian oncologists are, and how much they emphasised high quality [patient care](#), including time spent with patients and families. Yet workforce changes over the past few years were threatening these values and thus the quality of care given to patients across Australia.

More information: Alex Broom et al. A Qualitative Study of Medical

Oncologists' Experiences of Their Profession and Workforce Sustainability, *PLOS ONE* (2016). [DOI: 10.1371/journal.pone.0166302](https://doi.org/10.1371/journal.pone.0166302)

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