

How future trends in Oncology may impact hospital organisation

Prof. Eric F. Lartigau

General Director, Centre Oscar Lambret
Lille, France

UNICANCER: The Group of Cancer Centers in France

■ **18 Cancer Centers (20 hospitals): a national network:**

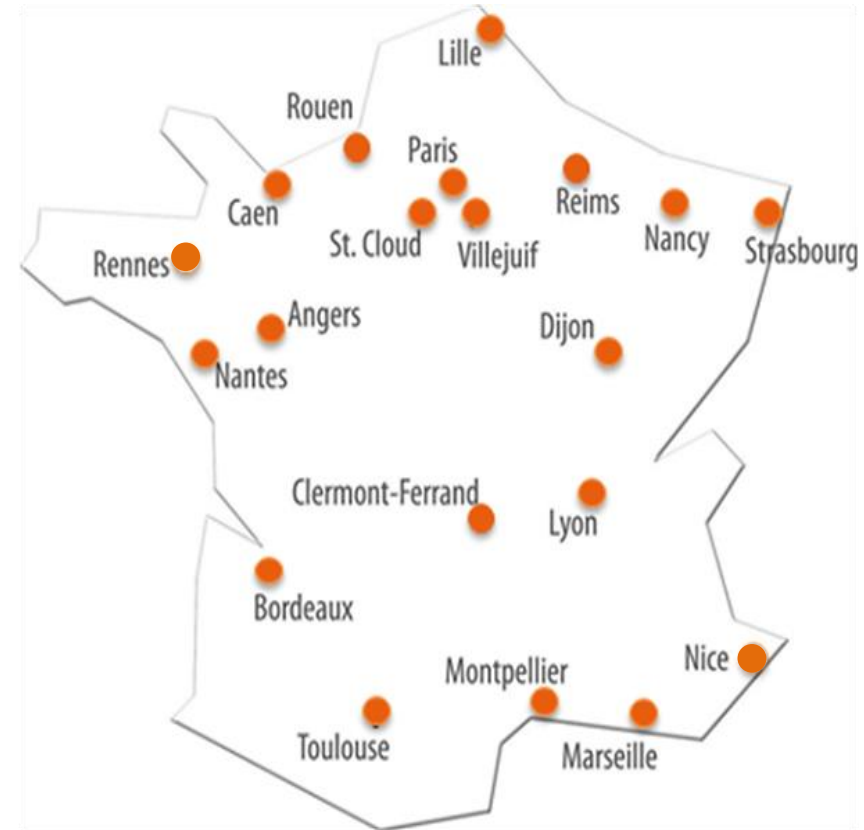
- Private nonprofit hospitals
- Mission: **care, research, education**

■ **All types of cancer:**

- Adults and children
- Rare cancers
- Complex / advanced situations
- 18 000 professionals, 1800 MD

■ **Activity :**

- **30%** of the women with breast cancer
- **20%** gynecological forms of cancer
- **19%** of the patients with Ear-Nose-Throat cancer
- **21%** of the patients with endocrine cancer



+ 120,000 cancer patients hospitalized every year

The UNICANCER model

Guaranteeing quality of care for everyone

At the heart of its strategy, UNICANCER defends the concepts of quality in management, individualized treatment and supporting care for the patient

- **Multidisciplinarity, from the first day (1945)**
- **Comprehensive care**
- **Research-care continuum**
 - >15% patients in clinical studies
 - 44% of PHRC-K in 2014 (20/45)
- **Performance and innovation : new technologies**
- **No private practice or added fees**

CHALLENGES in 2016 and after...

Europe/USA/Japan

- Aging population
- Human resources (surgeons...)
- Cost of drugs, but...

Emerging countries

- Human resources
- Teaching, training
- Access to technology & drugs

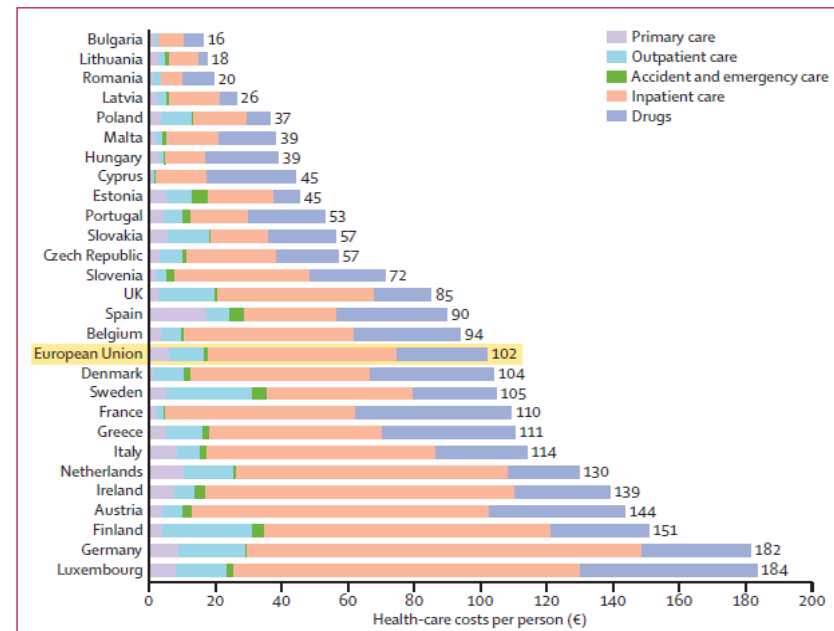


Figure 1: Health-care costs of cancer per person in European Union countries in 2009, by health-care service category
Data not adjusted for price differentials.

UNICANCER study « EVOLPEC »

Mapping changes in Cancer Care by 2025

- Identify, qualify and quantify the main developments /innovation trends in oncology in the next few years
- Share with all stakeholders (Government, National Cancer Institute...) prospective figures in order to adapt health system
 - **40 experts interviewed** from:
 - French Cancer Centers
 - University hospitals, private clinics
 - Pharmaceutical industry
 - Abroad (Netherlands, USA, UK)

EVOLPEC Methology

Phase 1: Identifying 6 main trends

- Ambulatory care
- Radiotherapy
- Chemotherapy
- Tumour characterisation
- Interventional radiology
- Supportive care



Phase 2: Qualifying and quantifying

- Taking into account IARC (International Agency for Research on Cancer) demography and epidemiological trends
- Assess financially each trend



Phase 3: Evaluate the impact on

- Bed numbers
- Equipment time
- Medical time

UNICANCER anticipates the cancerology of tomorrow

Major changes by 2025 are:

- **Trend n°1: An increase in out-patient surgery**
 - **Trend n°2: Radiotherapy will be more targeted and less invasive**
 - **Trend n°3: The development of oral targeted/Immuno treatments**
 - **Trend n°4: The characterization of tumors**, making it possible to better understand them in order to better treat them
 - **Trend n°5: The development of interventional radiology**
 - **Trend n°6: The development of supportive care**
- **Impacts on: bed capacities, human resources, finances**

The next [®] evolution: Participative Oncology

- Patient is central
- Who's better reporting outcome and morbidity: **the patient** of course !!!!

To be achieved:

**From quality/safety
productivity
to individual/collective outcome
and back...**



**No reporting without toxicity/economics/PRO's... :
multicriteria endpoints !!!**

Under referring hospital responsibility/coordination ?

and tomorrow....

- Key challenge : **reporting real life results !!!**
- Recording
- Evaluating
- Reporting
- New technologies and the patients/family

Patient is : critical but not sufficient in evaluation of outcomes !

Cochrane 2013 **patient-reported outcome measures (PROMs)** for
follow up after Gynaecological cancer treatment : a review

Objectives: evaluate PROMs as an alternative to routine follow up

Conclusion: **No studies and therefore no analysis**

To be developed ++++++

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Use of an electronic patient-reported outcome
measurement system to improve distress
management in oncology

SOPHIA K. SMITH, PH.D., M.S.W.,^{1,2} KRISTA ROWE, R.N., M.S.N., A.O.C.N.S.,³ AND
AMY P. ABERNETHY, M.D.^{1,2,4}