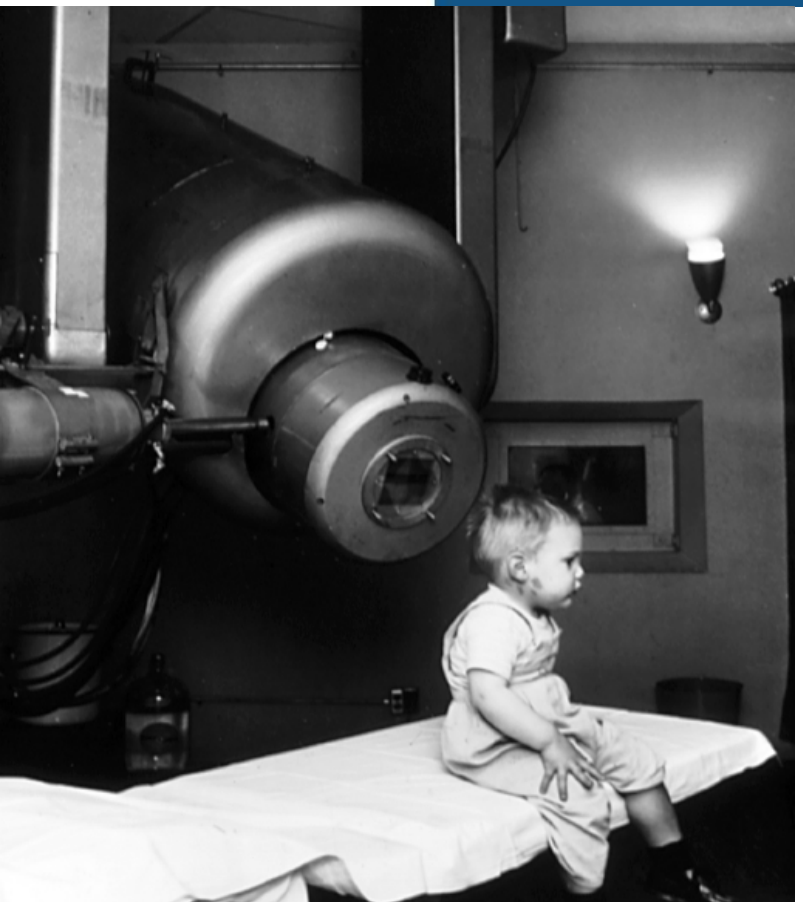
QUALITY & SAFETY IN HEALTHCARE
FIRST CONGRESS
PRELIMINARY PROGRAM
THEME: STANDARDIZATION OF PRACTICES



Quality of Cancer Care

From initial screening
to palliative care

Pierre Anhoury, MD, MPH, Clin. Oncology
Head of drug value department, Accenture

2020: 6 trends for cancer care

1. 

   Increasing development of ambulatory surgery

2. 

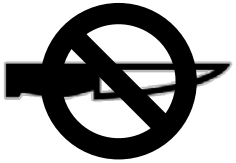
   Drop in the number of radiotherapy sessions

3. 

   Development of homecare chemotherapy

4. 

   Systematic cancer cell screening for better drug choice

5. 

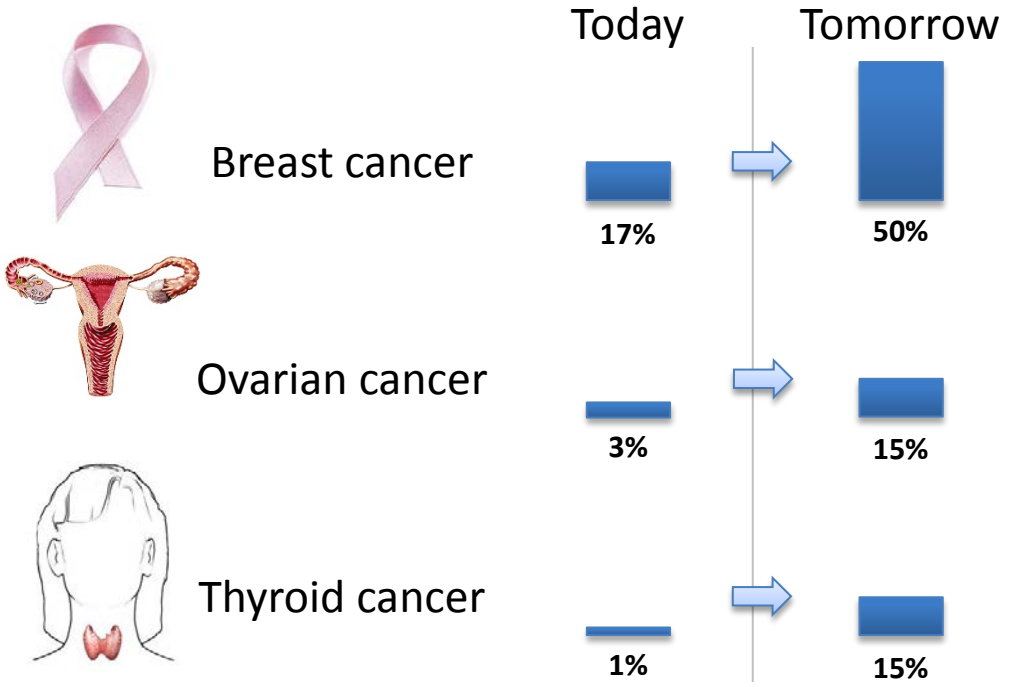
   Less invasive procedures through Interventional radiology

6. 

   Global patient care based on the appropriate supportive care

1. *Increasing development of ambulatory surgery*

Ambulatory surgery will represent:



We expect:

-20%

traditional beds

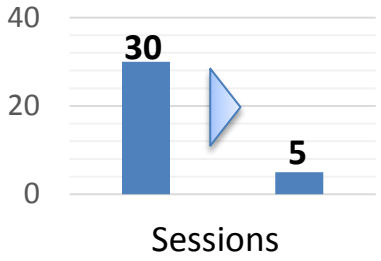
+40%

ambulatory places

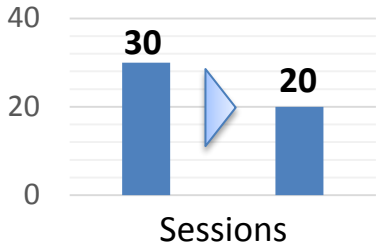
2. *Drop in the number of radiotherapy sessions…but with longer sessions*

We expect an important decrease in the number of radiotherapy sessions for the following cancers

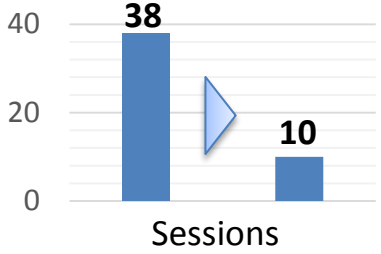
50% of Lung Cancers



45% of Breast Cancers



35% of Prostate Cancers

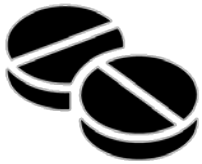


1 per-op radiotherapy session could replace **25 sessions for one patient**

To reach this target we need recent radiotherapy machines, new protocols (hypo-fraction radiotherapy), new pricing…

3. *Development of homecare chemotherapy*

Oral therapies will support the development of home care for cancer patients (breast +++)



50% of chemotherapies will become oral

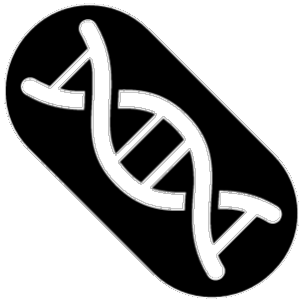
Home care will cover IV and Oral therapies for 15% of breast cancer at all stages (3% today)

Specific training is needed for general practitioners (GPs) and nurses

Agreements will be signed between hospitals and GPs, Pharmacists, nurses

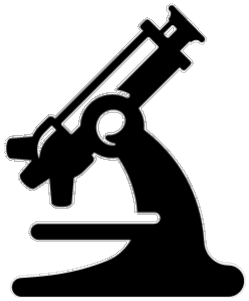
Empowered patients will manage their own treatments

4. *Systematic cancer cell screening for better drug choice*



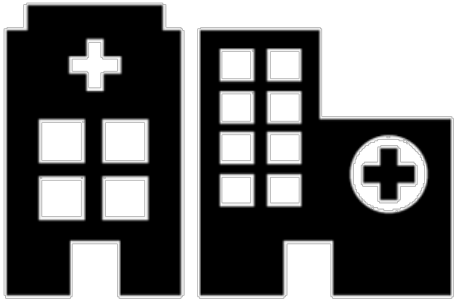
Bio-molecular cancer screening will become systematic.

Bio-pathologists and onco-genetics will be work together in the same platforms.



Cancer screening will be offered to families at risk.

50% of the diagnostic approach will rely on molecular biology



Like other countries, Lebanon needs strong bio-molecular platforms shared by several hospitals

5. *Less invasive procedures through Interventional radiology*

Technology will support this evolution: 3D imaging, robotic support, MRI mapping, new drug delivery systems…
Metastasis are the preferred target (bone, liver and lung)

We expect the following changes:

Interventional radiology procedures

x4

50% & **30%**

Bone metastasis

liver metastasis

Interventional radiology

MRI procedures

+36%

CT Scans

+16%

1/3

Delivered in an ambulatory environment

Hospitals need a new organization with an increased presence of the radiologists

6. *Global patient care based on the appropriate supportive care*

Supportive care is needed during the active treatment period and after. We expect an increase in the number of dedicated professionals

2 MDs for palliative care

2 MDs for pain management

3 diet specialists

For 10.000 patients per year the oncology department will need…

1 certified beautician

4 social workers

3 psychologists

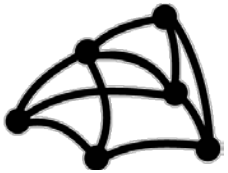
3 physiotherapists

How can we face the 6 challenges?

- A single hospital cannot manage the 6 expected changes

- These changes are much easier to support through a national cancer plan

- Bio-molecular screening needs shared platforms and public-private partnerships



- It's all about coordination and networking at each level

Any failure in communication, coordination and patient involvement will have a terrible impact on the quality of care and finally on the overall survival of the patient

Lessons learned from the French experience

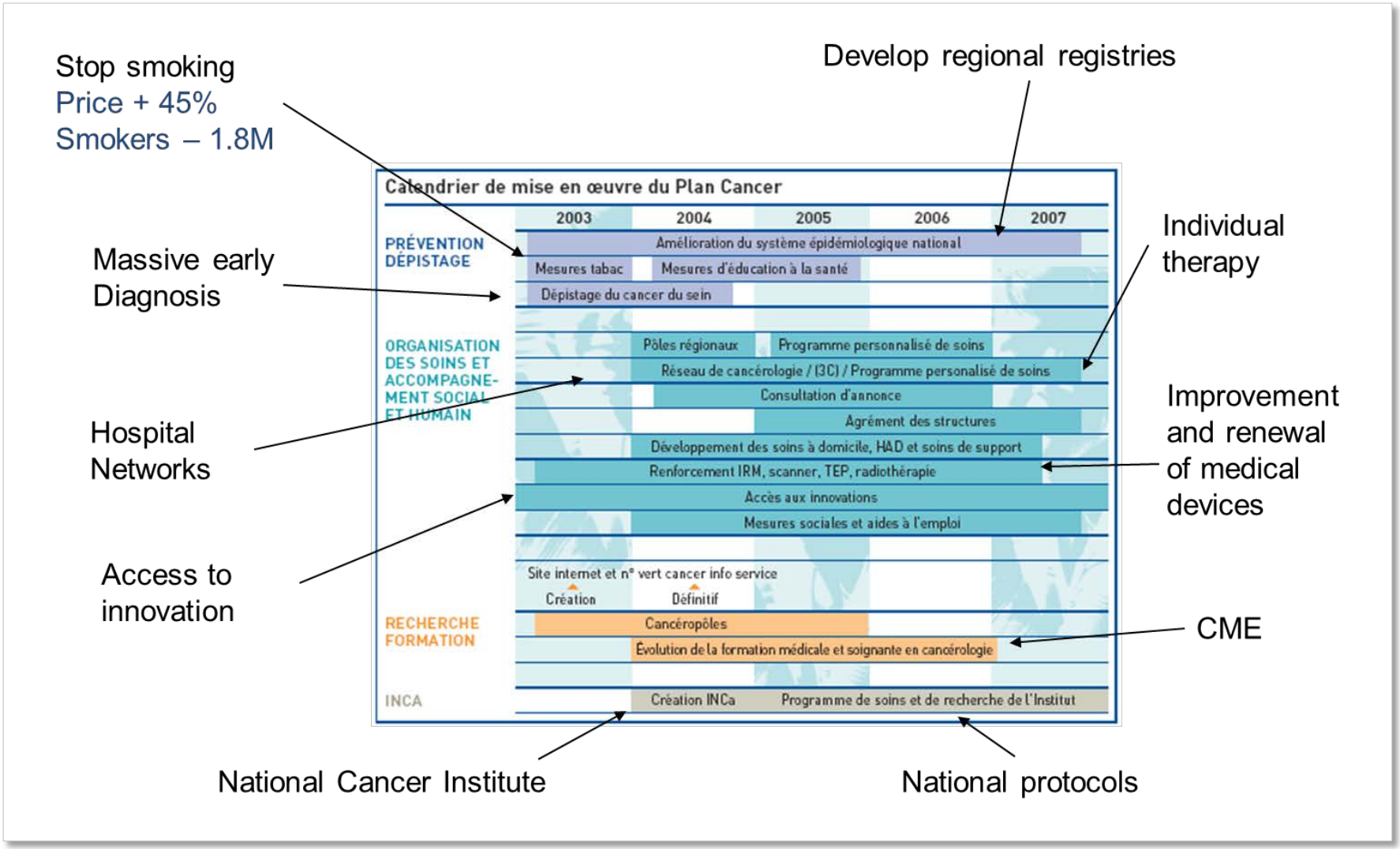
- France decided to launch it's first national cancer plan in 2003 (2003 – 2007). It has been fully implemented on time with the strong support of President Chirac

- The second plan was more focused and covered 2009 – 2013

- The third one covering 2014 – 2018 will focus more on prevention, training, personalized medicine and global patient care

- One of the most advanced initiatives is the implementation of 28 bio-molecular platforms for cancer screening. It offered full access to biomarkers to the population with a strong quality control

The example of the fully implemented French national cancer plan



The first two plans are very well documented

http://www.e-cancer.fr/

The third cancer plan (2014 – 2018) has just been announced by our president

- La **prévention**, avec la prévention primaire s'appuyant sur l'information et l'épidémiologie, et la prévention secondaire (dépistage). Le Président de la République a annoncé que le Plan comporterait des dispositions pour prévenir les risques professionnels et aurait également pour objectif de réduire les inégalités.

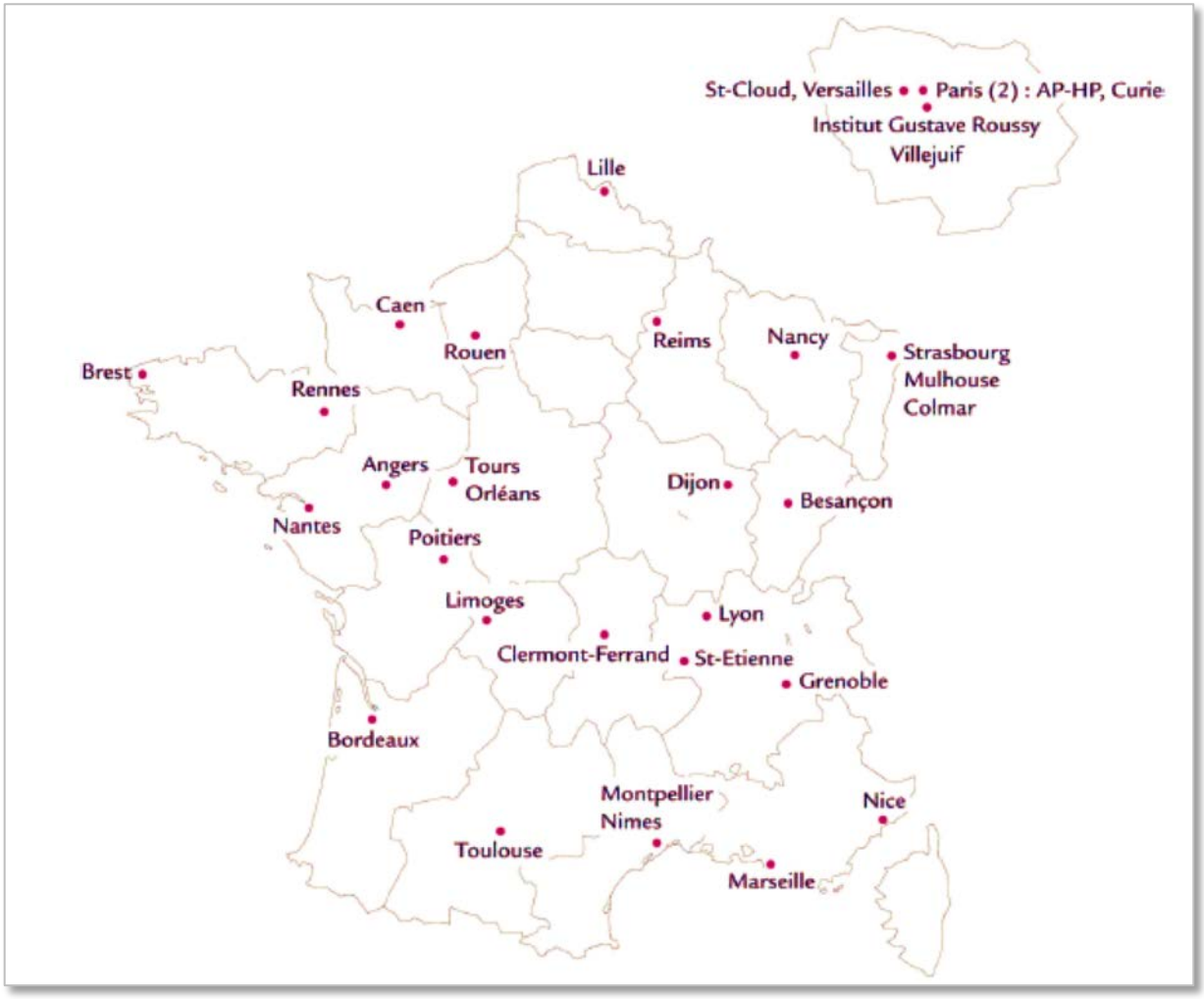
- La recherche au travers de deux objectifs : le développement de la **médecine personnalisée** et le **rapprochement des structures de recherche et de soins.**

- La prise en charge avec les enjeux majeurs du **vieillissement** de la population et de la mutation des thérapeutiques.

- **La formation** que le Président de la République a souhaité mettre au cœur de ce nouveau Plan : « Ce futur Plan cancer sera également un plan de formation ».

- **La vie pendant et après le cancer**. François Hollande a notamment abordé la question de l'accessibilité aux prêts et aux assurances ainsi que celle des jeunes patients atteints de cancer. Il a insisté sur le fait que les patients devaient d'abord être regardés comme des citoyens actifs et valides.

The example of the French bio-molecular platforms



- Full country coverage
- 8 biomarkers related to 11 drugs
- 55.000 patients were tested in 2011 to allow a prescription (BCR-ABL, KRAS, EGFR, …)
- 76.300 patients were tested for drug under development (trials)
- A quality assurance program has been established by the French NCI

Trends since 2007

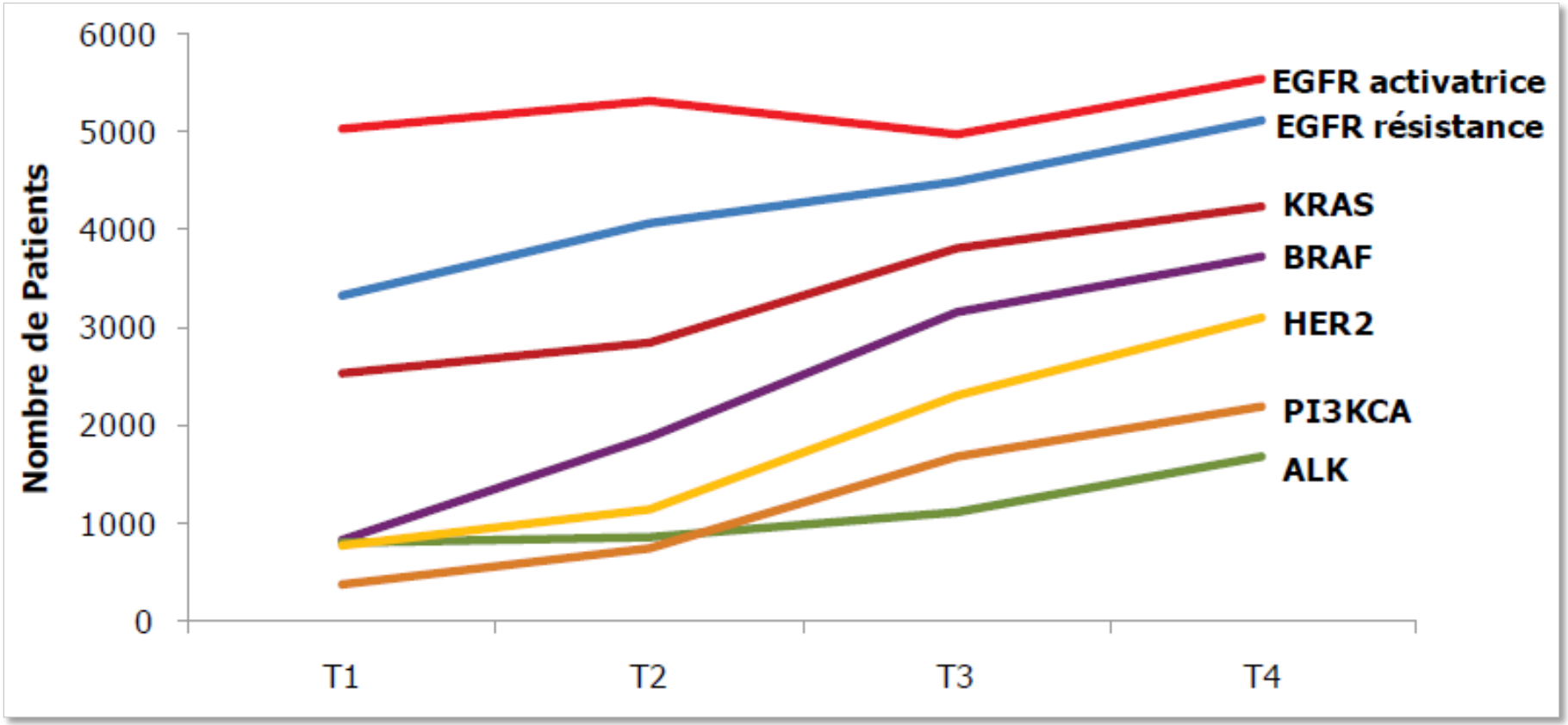
Pathologie	Biomarqueurs	Nombre de patients				
		2007	2008	2009	2010	2011
Leucémie myéloïde chronique/Leucémie aiguë lymphoïde	Détection *BCR-ABL* (hors caryotype standard)	*nd*	6 171	6 235	6 569	6 497
	Quantification *BCR-ABL*	6700 (19717*)	7410 (20751*)	8196 (22128*)	11014 (23849*)	13757 (23849*)
	Mutations *ABL*	*nd*	856	888	950	861
Cancer du sein	Amplification *HER2*	*nd*	5 416	6 748	7 798	8 545
Cancer de l'estomac	Amplification *HER2*	/	/	65	330	443
Cancer colorectal	Mutations *KRAS*	1 100	10 012	17 246	16 581	17 003
Cancer du poumon	Mutations *EGFR*	*nd*	1 269	2 667	16 834	20 750
	Translocation *ALK***	*nd*	*nd*	*nd*	*nd*	*4 543*
GIST	Mutations *KIT*	701	831	829	982	944
	Mutations *PDGFRA*	701	784	770	891	880
Mélanome	Mutation *BRAF V600****	*nd*	*nd*	*nd*	*nd*	*3 479*
TOTAL DES TESTS PRÉDICTIFS POUR L'ACCÈS À UNE THÉRAPIE CIBLÉE AVEC AMM		*nd*	19 139	27 930	50 044	55 043

Innovation is also supported by new tests added every year

What's new in 2012?

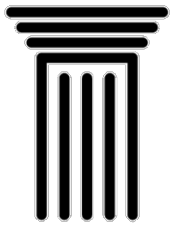
- NSCLC : ***ROS1*** **translocation/crizotinib; MET translocation/vandetanib**
- Squamous NSCLC : ***DDRE2*** **mutations/dasatinib**
- Melanoma : ***NRAS*** **mutations/** MEK inhibitor
- Breast cancer and other solid malignancies: ***FGFR1*** **amplification/**FGFR inhibitors
- Papillary thyroid cancer: ***BRAF*** **mutations/** vemurafenib
- RAI-refractory thyroid cancer : ***BRAF*** **mutations/** BRAF or MEK inihibitors for re-acquisition of RAI uptake

Focus on lung cancer tests in 2011



This approach has an immediate impact on the quality of care and on patient survival

Conclusion



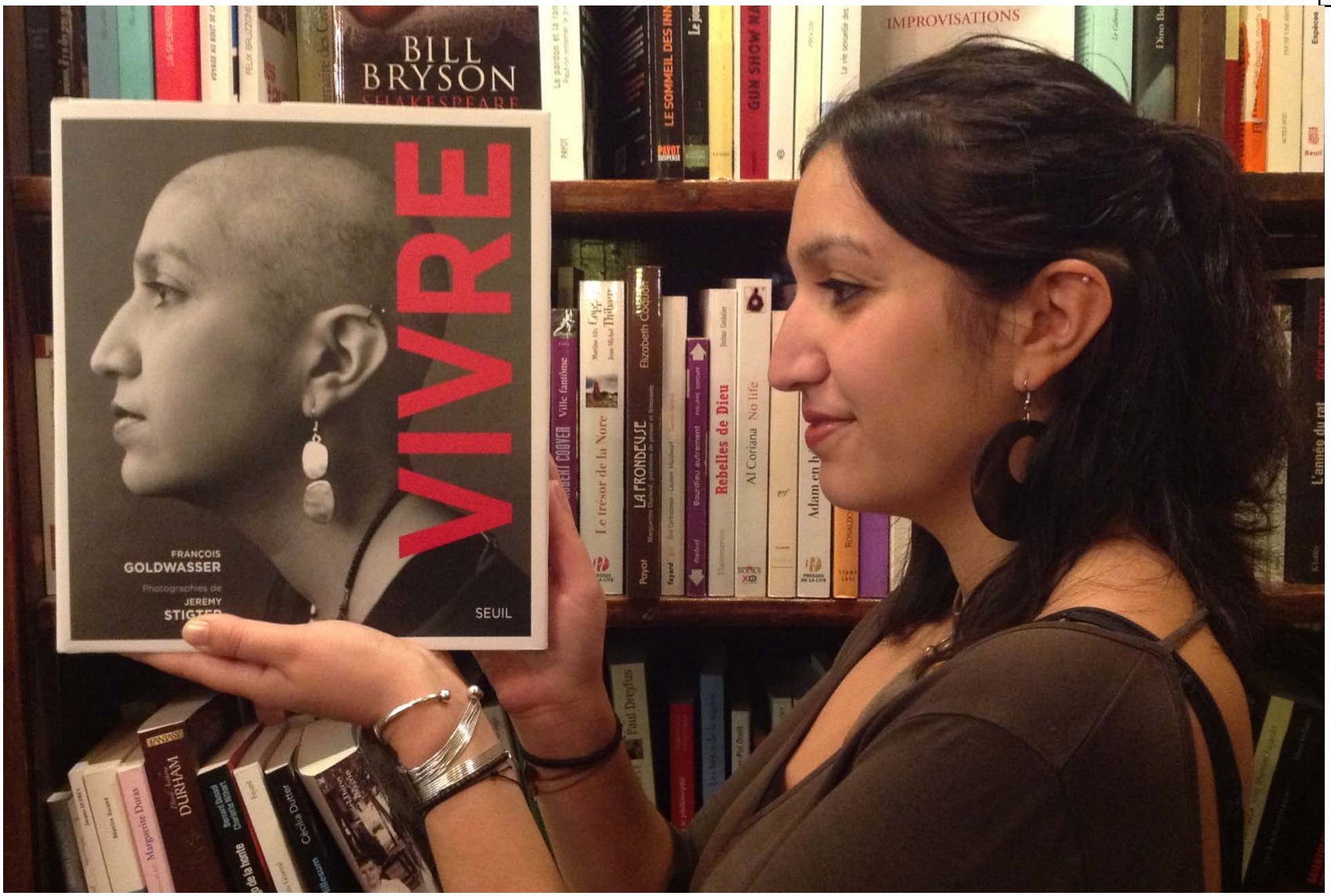
Lebanon needs to rely on two pillars

- The rich cancer care offering and services available in Beirut and around
- A new innovative national coordination to improve the current situation

In oncology, quality is directly related to

- Prevention
- Screening
- Early diagnostic
- Personalized protocols decided by teams not by individuals
- Access to the best onco-surgery and radiotherapy
- Access to innovative drugs
- Quality control and peer review discussions between healthcare professionals

Overall Survival:
The best quality indicator in oncology



Thank you

pierre.anhoury@accenture.com