Zitationshinweis

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Better care through consistent networking

An add-on media symposium of a very different kind was organised by the pharmaceutical company Roche in Berlin's Ottenthal restaurant (the best veal escalopes ever ...) on the occasion of the 2023 Capital Congress. ‚Precision oncology: progress - for all, a few, or yet for no one?' was the title of the press dinner. Dr Benedikt Westphalen, Medical Director of the Precision Oncology Programme of the Medical Clinic and Polyclinic III and the CCC Munich LMU, spoke on the topic of ‚Rethinking care: How does precision oncology reach patients? Ralf Zerbes from Roche Pharma then spoke on the topic of ‚Precision oncology with a future: creating space for innovation - but how?'. This article deals with Westphalen's talk.

>> Westphalen began his speech, which was based on ten flipcharts drawn by an artist, with a positive statement: ‚Personalised precision oncology offers incredible opportunities for our patient:s.' But only if precision oncology is understood as a paradigm for change in our health care system in the sense of an integrated care solution. ‚With a limited number of patients, we can learn how to work better together and with each other and how to break down sector boundaries,' the experienced physician explained. By this he does not only mean the outpatient/inpatient sector, but also the classic borderline between academia and industry on the one hand and health insurance companies on the other.

Transsectoral networking is a great opportunity if all stakeholders work together at the points with the greatest overlap, so that - according to Westphalen - ‚innovation and medical progress will reach patients in Germany in the next few years'. He was referring self-critically to university centres, which had to ‚get out of their academic ivory towers' in order to advance medicine. If this succeeds, better health care made possible with the help of personalised prevention and therapy would ‚become reality and not remain utopia'.

But he also wants to see better cooperation between oncologists in private practice and specialised centres. Studies show that cancer patients treated in centres survive longer, but this is only part of the truth: 80% of all cancer patients in Germany are treated outside centres by doctors in private practice. This is such a large number of patients that they could not be admitted to university centres alone. Nevertheless, a referral management is necessary, flanked by corresponding incentive systems, so that it is worthwhile for general practitioners to refer patients who could benefit from this to special centres. On the other hand, in his opinion, centre expertise should be made more



widely available by treating patients in private practice with the help of virtual tumour boards. Vice versa, this would also create networks with which a patient could be treated close to home when he or she might not even need to be treated in a university setting because the flat rate per case is virtually used up with a blood sample. He would like the care system to function as a kind of continuum in which patients can move fluidly according to the status and stage of their respective patient journey in order to be treated where it is best for them.

However, this requires one important prerequisite: consistent screening. This would firstly enable tumour diseases to be detected earlier and then, secondly, the right diagnostics to be made available promptly. The EU Commission's prevention plan states that it is not enough just to offer screening programmes, but that the health system must also be able to diagnose patients who have tested positive and not, for example, make them wait months for a colonoscopy or - if necessary - for a surgical appointment. Westphalen: ‚If we diagnose early, we can possibly treat neoadjuvant and possibly transfer diseases from an advanced to a curable stage'. However, this can only be achieved through consistent networking of all players and truly integrated care, starting with the family doctor who carries out the screenings and ending with treatment by experts in centres.<<

by: MVF Editor-in-Chief Peter Stegmaier. <<

