

Opinion/Editorial for the Wabash Plain Dealer

For the past 24 years, our organization, Indiana Community Cancer Care, has been providing cancer care and programming in many rural communities across Indiana, and we're proud to be partnering with Wabash County Hospital. Working alongside your local hospital, physicians and oncology nurses, patients are able to get the latest cancer and symptom management treatments available as well as access to clinical research trials. All of our cases are followed from diagnosis through death via tumor registry, which compares our data to those from national databases. Our treatment outcome data compare favorably with those outcomes from tertiary hospitals and academic institutions. The best part about our program is that patients can stay right here with their families and get treatment without having to drive great distances.

Very recently, the Centers for Medicare & Medicaid Services (CMS) implemented a change that puts cancer symptom management care in your community at risk. CMS adopted a policy limiting the availability for use of two widely administered drugs called Procrit and Aranesp. Both of these drugs are given to cancer patients who suffer from anemia due to low red blood cell counts as a result of chemotherapy. Anemia is one of cancer treatment's most common side effects and is routinely treated with these drugs. These drugs are important for two reasons. First, they can keep patients from potentially undergoing a blood transfusion. Blood transfusions occasionally have serious side effects and are very costly. Additionally, curtailing these drugs puts an additional strain on an already critically low national blood supply and may cause a ripple effect in other areas of healthcare. Second, these drugs can also significantly improve quality-of-life by reducing the fatigue which often accompanies the anemia of chemotherapy. The use of these drugs has allowed many cancer patients to carry out normal daily activities that would not otherwise have been possible.

CMS is now limiting the use of these drugs by denying reimbursement with new rules that lack scientific credibility. The result? This will limit Medicare and Medicaid cancer patient access to Procrit and Aranesp. At this time the ruling does not affect commercial insurance patients, thereby setting up a two-tiered system. This means Medicare/Medicaid patients may receive a sub-standard level of care. As a cancer and blood disorder specialist, I see two major problems with this. First, CMS' newly published rules are contrary to those the U.S. Food and Drug Administration (FDA) approved several years ago for these drugs. They are also contrary to the clinical practice guidelines for both the American Society of Clinical Oncology and the American Society of Hematology. These two professional organizations help set the standards for patient care in the fields of oncology and hematology. Second, CMS is now dictating to physicians like me how to practice medicine and administer treatment. Obviously, this is a bad precedent.

These drugs have been a successful standard of care in cancer patients for many years. Early in 2007 new scientific evidence caused the FDA to modify the rules for the use of these two drugs. The new FDA rules have been widely published and are already in use in all our treatment centers. These new guidelines were based on information derived from published peer reviewed scientific articles. The recent CMS rules lack this scientific basis. So, why is CMS making this change? In my opinion they are practicing bureaucratic arrogance and playing in the FDA's sandbox when they weren't invited – and not welcomed for that matter. I believe this is just another way for CMS to blindly cut costs in an attempt to band-aid the billion dollar healthcare crisis in the U.S. As a medical oncologist/hematologist I don't write Medicare policy. My suggestion to CMS is that non-physicians shouldn't try to practice medicine.

It's critical that cancer patients and their families write to their senators and congressional representatives to make them aware of the potential impact this could have on cancer care. We are providing Wabash County Hospital's cancer center with the names and contact information for these representatives.

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