

NEWS BRIEFS

ASCO study: Use of off-label drugs in breast cancer quite common

Researchers from Houston's M.D. Anderson Cancer Center evaluated the prevalence and impact of off-label therapies in breast cancer and found that nearly 35% of women were treated with off-label chemotherapy at some point during their care.

Sharon Giordano, MD, and colleagues identified 2,082 women (ages 65 and up) diagnosed with metastatic breast cancer between 1991 and 2002 and logged into the SEER database. The DRUGDEX compendium was also referenced (ASCO abstract 1016).

They found that 34.9% of the women were treated with off-label chemotherapy, with the most common off-label chemotherapies noted being vinorelbine tartrate (Navelbine), which is approved for lung cancer, and gemcitabine (Gemzar), which is approved for pancreatic cancer.

Foundation launches financial aid for brain cancer patients

The HealthWell Foundation has launched a program to assist patients diagnosed with glioblastoma multiforme and anaplastic astrocytoma.

By applying to the program, patients can receive assistance with prescription drug copays, coinsurance, and deductibles, according to the foundation, a non-profit organization that provides financial assistance to underinsured patients with chronic or life-threatening diseases.

Information on applying for financial assistance can be found at www.healthwellfoundation.org.

\$90 million cancer care center slated for Arizona

Banner Health and M.D. Anderson Cancer Center will jointly build the M.D. Anderson Banner Cancer Center in Phoenix. The 120,000 square-foot outpatient center will be adjacent to the Banner Gateway Medical Center campus.

Services will include medical oncology, radiation oncology, surgical oncology, pathology, laboratory, and diagnostic imaging, as well as other supportive clinical services.

Groundbreaking is scheduled for later this year and the facility is set to open in late 2011. It will be modeled after M.D. Anderson's Houston outpatient clinics, which feature areas devoted to single disease states. The project will be funded by Banner Health.

Strategic planning in tough times calls for nimble thinking, viable plan of action

Healthcare consultant discusses why oncology executives must recognize opportunities for innovation and streamline ways to bring about change.

BY MARGOT FROMER

WASHINGTON, DC—Despite dismal economic times, there are significant opportunities for growth for cancer centers, according to a presenter at the **2009 Association of Community Cancer Centers** meeting.

Mark J. Dubow, MBA, MSPH, outlined some of the strategies that he recommends for weathering an economic maelstrom, including strategic initiatives, capital planning, innovation, and introduction of new products and services. All of these can mean the difference between a center's financial and clinical success and the erosion of its income-producing patient services, said Mr. Dubow, who is a senior vice president at healthcare consulting firm The Camden Group. He is based in the El Segundo, Calif., office.

Opportunity in uncertain times

Recession, financial market turbulence, and economic unpredictability are currently playing havoc with the way cancer centers operate and with their prospects for the future. Financial pressure stems from reduced reimbursement, increased cost structure (including unfunded mandates), growing unemployment, and reduced access to capital. To add insult to injury, Medicare is establishing new and ever-more restrictive regulations.

But turbulence can create opportunity, Mr. Dubow said. He compared the current crisis to white-water rafting. "These are class 4 or 5 rapids—dangerous but navigable. Companies that are consistent leaders see that uncertain times are the best ones for an organization to take calculated risks and pursue growth."

Strategy structure

Mr. Dubow explained that certain elements in strategy will always apply:

- Identify values.
- Shape an organization's vision.
- Set a course of action.
- Measure and monitor results.
- Assign responsibility.

These actions must be streamlined, according to Mr. Dubow: "If the process takes too long, the windows of opportunity close. Strategic planning must be accomplished in a month or less."

For executives who are used to the

luxury of time to mull over blue-sky ideas, a month is a tight deadline, Mr. Dubow acknowledged. He identified a series of trends that drive cancer center strategy including:

- Assess trends in imaging such as increased utilization of lung CT and breast MRI, molecular risk profiling, and the consolidation of imaging centers.
- Recruit subspecialists in oncology interventional radiology. A cancer center's growth and revenue can be boosted through the addition of interventional radiology suites.
- Recruit teams adept at robotic surgery, microsurgery, and stereotactic radiosurgery.
- Recruit medical, radiation, and surgical oncologists with tumor-specific expertise.

Tips for practice growth

While thinking outside the box has become a bit of a cliché, achieving success in unstable times does require innovation. Mr. Dubow urged his audience to challenge long-held industry biases, such as the belief that physician-owned practices are not profitable.

He offered a punch list of ideas to in-



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— MARK J. DUBOW, MBA, MSPH

crease patient volume and foster growth (see Sidebar). Ultimately, "there is no magic answer," he said. "The director of a community cancer center must focus on business development as well as clinical services. Growth is a mindset as well as a process, and the director needs to have the courage to create change and envision new perspectives—and to do it quickly." ■

Tips for growing a practice

- Concentrate on the big four cancers (breast, colon, lung, and prostate).
- Tap physicians with admitting privileges at more than one hospital for referrals, which could potentially double the number of referrals.
- Be an early adopter or pioneer of advanced diagnostics and therapeutic care when adoption is consistent with clinical trends, supports achieving a competitive distinction, and achieves targeted return on investment targets.
- Analyze local and regional demographics to determine untapped patient pools, such as senior centers and new housing developments.
- Highlight diagnostic technology, treatment services, and/or physician tumor-site expertise to

become a magnet destination that draws patient referrals.

- Look at other industries—computers, coffeehouse chains, travel companies—for ideas on improving consumer service.
- Proactively integrate medical, radiation, and surgical oncologists, as well as other specialists (primary care physicians, radiologists) into a multispecialty physician organization for greater referral.
- Identify potential strategic partnerships such as academic medical centers, NCI organizations, regional healthcare systems, medical product companies, and information technology companies.

You may contact Mr. Dubow at mdubow@thecamdengroup.com.