

Multidisciplinary Tumor Boards - Right way forward in Cancer Management

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In this modern era of easy connectivity no one can claim to be able to treat cancer patients sitting in isolation. Cancer management is a complex process going through a number of specialties including diagnostic and therapeutic.¹ Not only timely diagnosis and treatment of cancer patient is important but also counseling, rehabilitation and nutritional care plays key role in complete standard management of cancer patient.²

It's not only difficult for poor cancer patients to manage to go to different specialists sitting in different hospitals but it's quite cumbersome for the affording ones as well. Most of the well reputed consultants are very busy and it's really difficult for the patients to get early appointment due to which their treatment is delayed. Also, most of the patients cannot pay private consultation fees.

Multidisciplinary tumor boards/ meetings are the solution to above mentioned problems. Multidisciplinary tumor board is a platform where doctors of different specialties discuss and review a patient in detail and decide the best possible individualized treatment plan after having gone through the diagnostic and staging workup.^{3,4} For Pakistani cancer patients these meetings can be even more helpful as most of the patients belong to poor socioeconomic stratum and are coming from far flung areas of the country and are unable to roam around for their treatment.

Considering the importance of multidisciplinary tumor boards Oncology department of Atomic Energy Cancer Hospital NORI started these meetings with Head and Neck Surgical Department of Pakistan Institute of Medical Sciences Islamabad in 1988. Since then these

meetings are being held weekly on regular basis and lacs of patients have benefited.

Due to persistent rise in cancer burden and the success of Onco-Head & Neck meetings a strong need was felt to start tumor boards with other specialties as well. About 12 years ago Oncology department NORI started having site specific multidisciplinary meetings with the departments of General Surgery, Breast Surgery, Gynecology, Pulmonology, Neurosurgery, Thyroid Surgery and Oral maxillofacial Surgery. Besides respective specialists these meetings are also attended by Radiologists, Histopathologists, Nuclear Physicians and Nutritionists along with postgraduate trainees. Almost all the teaching hospitals of Rawalpindi and Islamabad participate in these meetings. In addition to the host institute AECH NORI, the participating hospitals include Pakistan Institute of Medical Sciences Islamabad, Federal Government Services Hospital Islamabad, Holy Family Hospital Rawalpindi, Benazir Bhutto Hospital Rawalpindi, Rawal Institute of Health Sciences Islamabad, Shifa International Hospital Islamabad, Pakistan Atomic Energy Commission Hospital Islamabad, Islamic International Medical College Hospital, Margalla College of Dentistry, Surgical Centre and Ali Medical Centre.

At the same time NORI became pioneer in Tele Oncology conference by starting multidisciplinary meetings through video link with the surgical department of Holy Family Hospital Rawalpindi. For the last 12 years these video link meetings are being arranged weekly and now in addition to Holy Family Hospital Rawalpindi, we are joined by Atomic Energy Medical Centre (AEMC) Karachi, Karachi Institute of

Radiotherapy and Nuclear Medicine (KIRAN) Karachi, Institute of Nuclear Medicine, Oncology and Radiotherapy (INOR) Abbottabad, Centre of Nuclear Medicine, and Radiotherapy (CENAR) Quetta and Dera Ismail Khan Institute of Nuclear Medicine and Radiotherapy (DINAR) Dera Ismail Khan. Also Benazir Bhutto Hospital Rawalpindi participates through Skype.

Multidisciplinary tumor boards have been really helpful to the patients as not only they don't have to roam around seeking consultation of different specialists but also, they are attended by all the participant departments on priority basis and they are treated with the best possible individualized treatment plan.⁵ Delay in the start of treatment is prevented. The discussion starts with presentation of case summary of patient by postgraduate trainee or junior consultant followed by input from respective specialists and final plan is made after having discussed Radiology and Histopathology in detail.

These boards also help doctors to update their knowledge and to learn from each other.⁶ It's not only the students who learn from seniors of different specialties but also seniors learn a lot and also we are in a better position to understand others' limitations and expertise.

Prior to multidisciplinary tumor boards preferred treatment modality was decided according to specialty of treating physician. With these meetings the scenario has changed. Now oncologists and other specialists reach a consensus after mutual discussion and individualized treatment algorithm is made according to stage and site of the disease and age and performance status of the patient. Multidisciplinary tumor meetings have now become part and parcel of cancer treatment not only at Atomic Energy Cancer Hospital NORI but in most of the hospitals dealing with cancer treatment all over the country.

Considering the importance of multidisciplinary tumor boards, it should be mandatory for all the physicians treating cancer to discuss the patient in multidisciplinary tumor meetings before putting the patient on any treatment modality.

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