

# Therapeutic Oncology and the Road Ahead

**Dr Tim Williams answers questions from *ICT* about future trends in therapeutic oncology, from remote data collection to advancements in cancer support delivery**

## ***ICT*: What trends are you seeing in therapeutic oncology?**

**Dr Tim Williams:** We are seeing significant interest in the application of remote, digital patient-reported outcomes measurement (PROMs) to enhance routine cancer care in the UK. There is growing awareness of the importance in quality of life as more people live with and beyond cancer, as well as a drive for new approaches to support cancer service delivery and better care for patients over the long term, focusing on acute treatment at a time when the workforce faces increased pressure.

## **Why has this drive and awareness come about now?**

There is now evidence of the benefits of these approaches. A key example is a randomised controlled trial that was executed at Memorial Sloan Kettering Hospital, US, and published in the *Journal of the American Medical Association* in 2017. This showed that adding digital PROMs to the care of patients with advanced cancer increased survival by an average of five months, enabling the care teams to respond more dynamically to patients' needs.

In the UK, not only is the general benefit and acceptance of using digital tools to support care gathering pace, but as cancer services get evermore effective, more patients are living with and beyond cancer. The quality of life these patients are living with is also gaining scrutiny.



**Dr Tim Williams** is the Co-Founder and CEO of My Clinical Outcomes (MCO), a clinical technology platform that automates the collection and analysis of PROMs in routine clinical practice. Tim previously worked as an NHS doctor and Strategy Consultant

and has a keen interest in how technology can help improve healthcare services. MCO is in use at over 70 UK public and private hospitals in a range of conditions and specialties and is now working on several innovative projects helping to support the care of cancer patients in the NHS.

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## **How are these approaches applied?**

NHS Scotland and the Scottish Funding Council issued a funding call for digital PROMs solutions to help transform cancer care in Scotland. As a result, MCO are working with NHS Ayrshire and Arran to support the care of cancer patients undergoing chemotherapy, remotely collecting symptom and side effect data that clinicians can use to tailor supporting therapies and improve patients' quality of life during treatment. This approach will soon be expanded to include breast cancer patients at The Beatson West of Scotland Cancer Centre.

In another example, work is underway with Macmillan Cancer Support and the Royal College of Radiologists to

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support the long-term follow-up of patients after radiotherapy. At three NHS Trusts, patients are being screened for potential late effects and then digitally signposted back into the cancer service to get the help they need.

#### **What is happening at a national level?**

A lot is happening in oncology in the NHS. Programmes such as Living With and Beyond Cancer are helping to promote and address the quality of life challenge in oncology. Best practice is being spread at all levels and in all specialties through Get It Right First Time (GIRFT), and the Secretary of State for Health, Matt Hancock, is a prominent public advocate for the digitalisation of the NHS – advocacy that features significantly in his long-term plan. Around the UK, there is a push towards supporting better value healthcare delivery in general, such as through realistic medicine in Scotland, UK, and the Prudent Healthcare initiatives in Wales. These are focusing attention on getting a greater understanding of the outcomes of treatment than ever before, justifying the cost of particular treatments and approaches. In oncology, there are new Cancer Alliances set up to tailor cancer pathways at a local and regional level and who have access to new budgets to do so.

#### **What are clinicians saying?**

Clinicians who employ these digital PROMs report that they are unearthing greater levels of toxicity than they realised patients were suffering with. As time is short and consultations are typically focused on disease progression and treatment planning, having this information available to

support face to face or telephone clinical consultations means that these issues now have time to be addressed and can be dealt with by adding or changing supporting treatments.

#### **What do patients think?**

Patients report that they appreciate having the opportunity and time to think about how they are being affected by their condition and treatment and to record that information in a way their clinicians can use to make better decisions. They also appreciate that the system saves clinicians' time and helps them provide better care.

#### **What does the future hold?**

The focus on quality of life and the importance of collecting real-world evidence of the benefits and side effects of treatment is set to continue in routine cancer care. A recent event held by The Economist in London, UK, was called 'War on Cancer' and was notable in the many sessions focusing on the importance of real-world evidence and the application of simple digital tools to advance the experience and outcomes of cancer patients. The pharma industry is now taking these advances seriously, not least as the real-world benefits, quality of life, and new, expensive cancer treatments come under scrutiny. We expect that, in the near future, all cancer services will be supported by systematic, remote patient-reported data collection and that treatment choices and drug selection will be made using robust real-world data, continuing to provide better care for patients and, as a result, an improved quality of life.