



The Princess Margaret
Hospital Foundation
University Health Network

A small price to pay to save lives

Viewpoints
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Thanks to a generous gift from a breast-cancer survivor and her husband, the Princess Margaret Hospital in Toronto has set a new standard in medical care for Canada.

Where patients across this country must wait nerve-wracking weeks for results after being tested for breast cancer, at the Princess Margaret the turnaround time is eight hours or less. Not only are patients and their loved ones spared weeks of anxious waiting, but treatment can start more promptly, too.

Bravo for that hospital. But why isn't the same standard of care available in Montreal, and across the country?

Is it the cost? Three years ago Emmanuelle Gattuso and her husband Allan Slaight, of Toronto, donated \$12.5 million for a pilot project at the downtown Toronto hospital, where oncology is a focus. The sum covers half the cost of the hospital's \$25-million Rapid Diagnostic Breast Cancer Centre. A key component of the gift is a \$300,000 rapid tissue processor, which can process up to 120 biopsy samples an hour.

In the pilot project's three years, nearly 500 patients benefitted from a rapid diagnosis of their cancer. In other, slower-paced clinics across the country, patients spend weeks worrying that delays in diagnosis and treatment might worsen their illness.

Available statistics are somewhat dated, but suggest that certain breast-cancer wait times are actually lower in Quebec than in Ontario: median breast biopsy wait time in Quebec (2004) was 3.9 weeks; in Ontario, (2006) it was 4.7 weeks.

How long must a diagnostic delay be before it can be called life-threatening? There's no easy answer to that, but if we've learned anything about cancers, all cancers, it is that the earlier the diagnosis and start of treatment, the better the prognosis. A \$25-million price tag for a facility that can speed up the process does not seem excessive.

Canada's breast-cancer death rate has fallen from 30 deaths per 100,000 women in 1979 to 24 per 100,000 in 2003. The Canadian Cancer Society says "more and

better screening as well as more effective treatments" get the credit. Breast cancer remains the most common female cancer, with one in nine Canadian women diagnosed with it during her lifetime. More than 22,000 new diagnoses of breast cancer are made in Canada every year.

So why won't the Quebec government, and other governments, put these \$300,000 machines all over, and teach staff to use them? And if governments are too busy spending on "stimulus," aren't there any wealthy patrons in Quebec and elsewhere?

Even if there aren't, the Cancer Society has identified some other, less expensive improvements that should be made.

Canada lags behind other countries in adopting electronic health records, the society says. And province-wide wait lists would also help get treatment to the most urgent cases. Currently, lists are maintained by individual doctors or hospitals.

But the real lesson from this week's happy news from Toronto is that if one hospital can institute same-day diagnosis, then other hospitals should be able to do the same. Quebec's hospitals, and the department of health, are going to have to explain why they can't exert the effort and find the money to speed up diagnosis here.

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