

Submission
No 2

INQUIRY INTO OFF-PROTOCOL PRESCRIBING OF CHEMOTHERAPY IN NSW

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**Parliamentary Inquiry Submission
Off-Protocol Prescribing Of
Chemotherapy in NSW**

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My name is David Morris and I am the Professor of Surgery at St George Public Hospital. I am a cancer surgeon and the head of the Peritonectomy Unit. I have authored near one-thousand peer-reviewed publications, almost exclusively on cancer, and have over 12,000 citations with h-index of 54.

I have known Dr Kiran Phadke since 1 January 1990 when I took up my post in this country and I have worked with him regularly since that time. We have shared in the management of a good number of patients. From my personal experience of him, I am able to say Kiran Phadke is a hard-working, intelligent, very experienced and committed medical oncologist who has not only looked after patients under his care very well and trained many students and junior doctors, but has also has substantially contributed to building the cancer services at St George Public Hospital and Sutherland Hospital.

Kiran Phadke is from an era where oncologists treated haematological malignancy (lymphoma/leukaemia) as well as 'solid cancers'. Whilst there has been increasing specialisation in cancer care, Kiran was trained and is very experienced in both.

Treating patients is a mixture of science and art, as well as respecting the patient's choices – it is always a balance. I believe Kiran has done that very well.

I would wish to have Kiran Phadke back on staff at St George Public Hospital, treating patients now. We simply can't afford to lose the contribution of such experienced senior doctors.

The way in which Kiran has been treated is very troubling to many of our clinicians and is something that I would dearly wish to have avoided. I do not resile from full accountability for doctors' treatment of patients but what Kiran has been through is simply not an appropriate way of dealing with it. We have multidisciplinary meetings, we have morbidity and mortality reviews – these need to work for the protection of patients but also for our doctors, and I believe strengthening such systems would be of value to both. We must do this better or we are going to haemorrhage staff from our public hospitals.

The immense complexity of this issue in my view makes it unsuitable for a parliamentary inquiry unless considerable resources are dedicated both to it and to dealing with the underlying issues. It would be simplistic to simply blame Dr Phadke. The patient and disease complexity, and the migration over many years from what is research, to an acceptable option, to a guideline policy is central to this issue. The intuitive judgement of a doctor in recommending and discussing treatment with a patient, particularly when the Department of Health does not provide guidelines, is complex and difficult.

I have no doubt that we could make our health system a great deal better by strengthening the linkage between multi-disciplinary team meetings and treatment guidelines from the world's best knowledge, for example The Cochrane. In surgical oncology, my specialty, NSW Health has failed to even try to regulate who does what, and where, despite an extremely strong evidence base around volume/outcome effect, which now exists in almost every surgical area. The excess mortality and loss of chance of survival associated with this would appear to me to considerably exceed small differences in survival with different chemotherapy regimens.

Yours sincerely,

David L. Morris

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