INQUIRY INTO OFF-PROTOCOL PRESCRIBING OF CHEMOTHERAPY IN NSW

Name: Mr Arthur Harris

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Submission to the Legislative Council Select Committee on off- protocol prescribing of Chemotherapy in NSW

TERMS of REFERNCE

(a) The efficacy of electronic prescribing systems, and their capacity to stop or limit off-protocol prescribing of Chemotherapy.

Re the care of Dr Kiran Phadke, MB, CHB, FRACP, FRCPA Consultant Physician & Haematologist / Oncologist.

I am a retired Pharmacist who was in business in the Sutherland Shire for thirty-five years and my wife is a Registered Nurse of many years who has worked in multiple hospital systems in the Sutherland Shire, including in senior management positions, for more than forty years. She continues to work as an RN so remains up to date in her field. Therefore our choice of Dr Kiran Phadke as my Oncologist was made with extensive medical insight, awareness of his high professional standing and indeed reputation, and a pharmaceutical knowledge of the drugs that were prescribed and used – the decision was not that of a lay person.

On 25/5/2012, I was diagnosed with Mantle Cell Lymphoma, a rare B-Cell Non Hodgkins Lymphoma (NHL) by Dr A Donaghy.

I then was referred to and consulted with Dr Kiran Phadke immediately. The informed us that the Mantle Cell Lymphoma was CD20 positive, a most aggressive form of NHL. It is our understanding that the aggressive involvement of two body cavities (in my case abdominal and thoracic) resulted in a limited prognosis.

Dr Phadke's first line of treatment, commenced within three days, included Blood transfusions, Bone Marrow Biopsies, and multiple investigations followed by the commencement of R-CHOP 21 – six doses. (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone and Rituximab) At this stage of my treatment I had a Haemoglobin (Hb) of 59 (normal 128-175) and my weight was below 60 kgs. I was in a very weakened and debilitated state.

5/10/2012 PET Scan – Positive result with response to treatment.

22/10/2013 (after 12 months remission and response to treatment) nodes were enlarged again and symptoms had returned, so a further three doses of R-Chop were prescribed and administered. Nine doses are the maximum treatment of this Chemotherapy and that was prescribed.

In July – August 2014 I required further treatment and on consultation Dr Phadke prescribed RICE (Rituximab-Mabthera, Isosfamide, Carboplatin and Etoposide) Chemotherapy.

From September to December 2014 I was prescribed a series of GDP (Gemcitabine, Dexamethasone and Cisplatin) as ongoing treatment was considered necessary.

In October 2014, PET scan showed response to the ongoing treatment.

However on the 25/3/2015, I was again showing severe symptoms of the NHL. As before Dr Phadke did much research overseas and consulted with his peers. It was decided that the appropriate treatment required was Mabthera and Bendamustine. Bendamustine, which required TGA approval to be acquired, as although proven overseas it didn't at this time have TGA approval in Australia. This was obtained with the

professional assistance and expertise of Dr Phadke.

This chemotherapy was administered with TGA approval has had amazing results and now I am **STILL** in remission fourteen months later.

Dr Phadke has been accused of using lower doses than recommended by protocols. My experience, as outlined above is precisely the opposite. He went to great lengths to treat me with the best possible chemotherapeutic agents, even those not readily available in this country.

He is a highly competent practitioner with many years of experience. Every patient's treatment requires assessment for the individual patient's health status, medical condition, prognosis, and disease levels. This is a matter for qualified professionals with a proven case record and high level of success.

It would seem that those making the allegations do not take such considerations into account but wish to put a "one remedy fixes all "mentality into the highly difficult diagnoses and treatment of each individual patient and their condition/case.

If I had not had Dr Phadke's expertise in my treatment and dosage levels there is little doubt that I would NOT be here over four years since my original diagnosis. A set protocol for my and any Cancer condition does NOT have a standard dosage for each individual patient. This is an area that requires high expertise and knowledge which Dr Phadke has clearly demonstrated in his management of my condition.

The diagnosis of such a cancer can be a devastating burden for a patient and the family, but Dr Phadke, by his manner and constant and ready availability has lessened that burden immeasurably. There is much more to being a doctor than just knowing the treatment protocols, particularly in the field of cancer. I regard myself as fortunate indeed to have been treated by such a fine doctor and a compassionate human being.

Arthur Harris

19/10/16