Disrupting the paradigm of oncology care in Canada: the triumphs, challenges and future implications of telemedicine

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Medicine has long been one of the lingering aspects of society yet to be fully disrupted by technological advances. Unlike media, banking and commerce which have adapted to the growing demand for convenience and accessibility from the public, the practice of medicine in many ways remains much unchanged from decades prior. The 2019 novel coronavirus (COVID-19) demanded an immediate shift in the way Canadian healthcare was delivered to reduce the risk of viral transmission from in person patient encounters. Cancer poses a large and ever-increasing impact on the Canadian population and healthcare resources. Brenner et al. (2020) estimated nearly half of the Canadian population will develop cancer in their lifetime in addition to the recent increasing yearly number of new diagnoses and deaths as the population grows and ages.¹ Cancer patients were initially an ideal population for telemedicine encounters during the pandemic. These patients often have additional comorbidities association with COVID-19 mortality and a diagnosis of cancer may further increase this risk.² As healthcare enters a second year within the new paradigm of virtual medicine, it is important to consider the impact and future of telemedicine on Canada’s ever-growing oncology patients.

Telemedicine is not a novel concept and has been in use for many years. Telemedicine may take many forms and could include voice consultation, video consultation or tele-synergy/multimedia conferencing.³ Its role has been well established for communication with rural, under served or remote areas where travel to specialized centers would be prohibitive. Telemedicine in US oncology patients has been shown to improve diagnostic accuracy with easy access to multiple opinions, a reduction in costs and enhanced...
The wide-spread use of telemedicine in Canada is still in its infancy but has been provided a proverbial ‘sink or swim’ opportunity. The future of oncologic care in Canada is ripe for an effective uptake of virtual care to enrich the current standard. With increasing systemic treatment options, movements towards multidisciplinary care and limited oncologic centers of excellence across a vast geography, the practice of oncology in Canada has the potential to be positively impacted. Patients may have improved access to second opinions, supportive allied healthcare and clinical trial exposure. The National Comprehensive Cancer Network strongly recommends clinical trial involvement where possible for all cancer patients and telemedicine offers the opportunity for improved patient access and multicenter collaboration. Furthermore, a robust telemedicine system may reduce overhead costs in a universal healthcare system.

It is unknown if this forced experience with virtual care will result in a positive change for Canadian oncologic healthcare delivery or simply a quick regression back to old, familiar ways. In the end, the barriers will not be healthcare consumers – patients – as they will likely adapt and embrace the benefits, improved access and convenience of virtual care. It will be up to practitioners and policy makers to take advantage of this opportunity, embrace the disruption with initial growing pains and move forward into a new era of oncologic healthcare delivery.

REFERENCES