

## **An aging patient population and too few cancer specialists**

by Richard T. Silver, MD

Over the past 20 years, as readers of this newsletter know, advances in cancer treatment have greatly increased survivors from cancer in the United States, although an enormous amount of work still must be done. That is why we need your support!

However, as the cancer community tries desperately to improve the overall cancer survivorship, it is important for all of us to recognize the many serious medical challenges that confront us.

The Census Bureau predicts that the population of Americans, age 65 years of age and older, will double between 2000 and 2030. Considering the increasing need for medical services related to this aging population, it is apparent that more cancer specialists will be required to care for this group of individuals.

The American Society of Clinical Oncology, our national cancer organization, recently organized a study group addressing this issue and found that a dramatic demand for cancer services is expected to rise between the years 2005 and 2020. Nevertheless, the overall supply of oncology services, as reported by Dr. Joseph Bailes, is only supposed to grow by 14%, which translates to a shortage of between 2500 and 4000 oncologists. This number is approximately one-fourth to one-third of the number of the U.S. oncologists practicing in the U.S. in 2005. In addition, there has been a distinct culture shift among younger physicians. Those Fellows completing their oncology training rated work-life balances extremely important in determining their post-training plans. According to the ASCO study, this cultural shift may eventually lead to younger oncologists working shorter hours and in turn lowering the number of patients they plan to see during their working hours. Of course, this dilemma is not only restricted to oncology, but to other specialties in medicine, including family practice, pediatrics and psychiatry. Dermatology and plastic surgery, as many of our readers know, are the few exceptions.

It is not only an issue of increasing the number of training slots as the ASCO task force suggested. It also relates to encouraging medical residents to go into the field of oncology. Additionally, ways must be found to motivate some of our best residents to enter the field. Of course, the Cancer Research and Treatment Fund has always stressed education and training as one of its meaningful goals. A recent example is The David L. Johns Family Fellowship. CR&T established this three year fellowship in medical oncology and hematology at Weill Cornell Medical College in July 2008.