



August 21, 2015

American Society of Clinical Oncology
2318 Mill Road, Suite 800,
Alexandria, VA 22314

Comments to the American Society of Clinical Oncology (ASCO) by the American College of Physicians (ACP) regarding “A Conceptual Framework to Assess the Value of Cancer Treatment Options

The American College of Physicians (ACP) commends the American Society of Clinical Oncology (ASCO) on the above referenced conceptual framework to evaluate the value of cancer treatment option recently published in the Journal of Clinical Oncology.¹ The framework provides an approach to assess the relative value of different cancer therapies that combines clinical benefit, toxicity and cost into a standard measure of relative treatment value that can be useful at the clinical level to assist clinicians in evaluating different treatment options, at the patient level as an element to consider within a shared decision making process, and at the societal level to ensure that the treatments developed and paid for reflect good value and appropriate use of limited healthcare resources.

The foundation of the proposed framework is broadly aligned with a number of ACP policies including:

- The importance of healthcare transparency
- The value of cost information in comparing treatment options --- but with the recognition that cost alone should never be used as the sole criterion in selecting a treatment option.
- The importance of the physician serving the role as the trusted advocate of the patient, who provides the necessary information to allow the patient to be effectively informed and involved within the treatment decision-making process.
- The responsibility of the physician to be a good steward of healthcare resources.

The framework article adequately recognizes some of the limitations of the approach, including the current limited available of high-quality evidence comparing different approaches to the same oncological condition (“head to head comparisons”), the “arbitrary” consensus rating of the various effectiveness and toxicity categories, and the lack of a universally agreed upon means of determining the components of cost. The “face” complexity of the approach may also serve as a barrier to its wide acceptance. Many of these limitations will likely be addressed as new prospective randomized trials are

¹ Schnipper L, Davidson N, Wollins D. et. al. American Society of Clinical Oncology: a conceptual framework to assess the value of cancer treatment options. Journal of Clinical Oncology (On Line) June 22, 2015. Available at <http://jco.ascopubs.org/cgi/doi/10.1200/JCO.2015.61.6706>



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published in the literature, and the oncological community has an opportunity to use and refine this methodological framework

The College offers the following suggestions for consideration

- Research should include assessing various way of presenting the net-health benefit (NHB) of a treatment option to maximize its usefulness to physicians, patients and payers, and also reflect its limitations.
- The current approach, due to methodological and limited data considerations, leaves out such components as quality of life and patient-reported outcomes from the value framework. Obviously, these and similar considerations are important to the decision making process from a patient prospective. Thus, the College believes that efforts to expand the use of this framework must make clear that it is NOT a replacement for a serious dialogue between the trusted physician and their patient that includes the best available information, realizing its limitations, regarding these important patient-centered aspects of the various treatment options.

Please contact Neil Kirschner Ph.D. at nkirschner@acponline.org or 202 261-4535 if you have any questions regarding the above comments.

Respectfully,

A rectangular box containing a handwritten signature in black ink. The signature is cursive and appears to read "Robert McLean MD, FACP".

Robert McLean MD, FACP
Chair, Medical Practice and Quality Committee