

Oncologists and general practitioners in oncology: allies in cancer care delivery

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The number of cancer cases in Canada is projected to be 79% higher in 2028–2032 than it was in 2003–2007. That rise will inevitably come with more substantial demands for cancer care services¹. Oncology specialists are unlikely to be able to meet the projected increase in oncology care needs on their own. Recent findings extracted from a global survey reveal that the current median new consultation load for Canadian medical oncologists is 175², which already reflects the target number outlined in the Ontario Health (Cancer Care Ontario) Systemic Therapy Task Force report³. The survey also reported high clinical volume to be one of the most common barriers to clinical care², further reflecting the urgency for cancer care infrastructure and workforce planning to prepare for the intensifying oncology demands.

General practitioners in oncology (GPOS), defined as family physicians with dedicated part-time or full-time practices in the field of oncology4, are key providers of cancer care in some provinces of Canada, contributing to the supervision of systemic regimens, management of acute and late treatment effects, and provision of survivorship follow-up⁵. Cancer care models that are GPO-led are increasingly gaining recognition alongside oncologists as an alternative means to support high-quality, seamless, and sustainable cancer care delivery. Among other organizations, CancerCare Manitoba serves as a leading example of GPO integration into the cancer care workforce, having established innovative GPO-led models to ensure timely access to oncology services closely proximal to patients across the province. The GPOs act as leading care providers in the Manitoba community oncology program, which serves as an exemplary and efficient community-based cancer care model, providing 28.5% of all intravenous chemotherapy treatments annually6.

Oncologists are valued and irreplaceable cancer experts. As preparations continue for the anticipated surge in oncology service needs, ensuring that their invaluable work is duly supported is imperative. Given that GPOs across Canada are already contributing in a meaningful manner to cancer care delivery, there is merit in expanding the integration of GPOs to help alleviate the growing oncology load.

Similarly, to maintain and further prepare for their increasing roles in the oncology workforce, GPOs also require optimal support, including access to evidence-based,

up-to-date continuing education in oncology care⁷. In that regard, the Canadian Association of General Practitioners in Oncology (CAGPO) is proud to offer its second educational series in partnership with *Current Oncology*. The new 6-article series, which will feature the generous contributions of well-recognized and accomplished oncology, radiation oncology, supportive care, and allied health experts, will cover these topics:

- Current management of metastatic non-small-cell lung cancer
- Overview of the best management of common radiotherapy side effects
- Alleviation of dyspnea in palliative care
- Bone health in cancer patients with bone metastases
- Treatment guidelines for cancer-related thrombosis
- Overview of cancer-related lymphedema and its management

For more than 15 years, CAGPO has been established as a community of practice for GPOs and allied health professionals. In addition to holding an annual conference, CAGPO strives to support and encourage educational training opportunities in the field of oncology through its annual scholarship awards program. For more information and to become a member of our growing community, please visit our Web site: http://cagpo.ca.

CONFLICT OF INTEREST DISCLOSURES

We have read and understood *Current Oncology*'s policy on disclosing conflicts of interest, and we declare that we have none.

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