

Duke University Medical Center

Thursday, August 07, 2008

Carol G. Potter
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Medical Facilities Planning Section
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VIA FACSIMILE (919) 715-4413

DFS HEALTH PLANNING RECEIVED

AUG 07 2008

Ref: Petition from Cary Urology, P.A.

Medical Facilities
Planning Section

Dear Ms. Potter:

I am writing regarding the request of a CON by the Cary Urology Group to develop a "Prostate Cancer Center of Excellence" and to acquire a linear accelerator to be housed in this facility. Apparently this Center would have no professional or operational connection with the existing medical centers that provide multidisciplinary care for a variety of diseases, including cancer of the prostate.

I have reviewed the petition prepared by the Urology Group and submitted to your office for consideration. In this petition the proponents claim that prostate cancer patients are not being cared adequately in this area and that the facility that they propose would provide multidisciplinary care for prostate cancer patients. They also claim, rightly so, that cancer of the prostate has higher incidence among African American men with a disproportionate representation of individuals with lower socioeconomic status. These individuals experience more difficulty accessing our health care system. The Cary Urology Group makes many assertions to justify their petition including the claim that they would extend care to individuals that are not able to cover the expenses for their care either through insurance or their own resources.

I have been in practice in this area since 1971 when I joined the faculty of what was then North Carolina Memorial Hospital in Chapel Hill. In 1983 I came to work at Duke where I have been since. I have also been very involved with the practice of radiation oncology in the community hospitals which are affiliated with the academic centers where I have practiced. For many years I was in charge of the Radiation Oncology Department at the First Health-Moore Regional Hospital in Pinehurst, NC. In my years of practice I have had the opportunity to care for many patients with cancer of the prostate.

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While the assertion that the Urology Group makes regarding the incidence and disproportionate number of African American males with cancer of the prostate is true, I find no basis for most, if not all, the other assertions that they make to justify their petition.

Patients with cancer of the prostate in this area are well cared for and have access to multidisciplinary centers of their choosing. The institution that I know best, Duke University Medical Center, has a very capable and very well organized multidisciplinary team offering the full range of treatment, irrespective of the nature and extent of the condition a patient may have. This is also very true of the University of North Carolina Hospital in Chapel Hill. Moreover, both, Duke and UNC, have affiliated facilities (e.g. Raleigh Community Hospital, Rex Hospital, Durham Regional Hospital, etc) in the triangle that provide the full range of treatment to patients with cancer of the prostate. These institutions also offer multidisciplinary care that extends well beyond the immediate needs of their cancer of the prostate. It should be noted that many of these patients have associated medical problems for which they can receive care in these medical centers as well as continued care by their own primary care physicians and other specialists. Patlents with cancer of the prostate can also develop metastatic disease, spread of their tumor to other sites, during their life history and requiring other types of care. This is readily available in medical centers and facilities that offer comprehensive care.

I find it disheartening if not totally inappropriate to attempt to justify this development on the basis that better care will be provided to patients with cancer of the prostate. The complexity of the treatment with radiation therapy nowadays requires a large group of people with different types of background and expertise. I cannot see how this could be provided in the facility proposed. Were this to be accepted for cancer of the prostate there would be other groups that would make similar requests. Approval of this request would be the first step in the fragmentation of care of patients with cancer and this would have serious detrimental effects on all patients with cancer in our area.

I strongly urge you to examine the justification for this petition very carefully. I hope that you deny this request as it has no promise of improving the care of patients with cancer of the prostate as the petitioners claim.

Singerely Yours,

Gustavo S. Montana, MD. FACR, FASTRO

Professor, Department of Radiation Oncology

GM:bw