



MEDIA RELEASE

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UK expert calls on Australian specialists to change treatment for small tumours

Visiting UK expert, Professor Andreas Adam, will argue that many Australian cancer patients could benefit from a change in the way that small tumours are treated when he presents at the Clinical Oncology Society of Australia's Annual Scientific Meeting in Hobart this week.

Professor Adam, from King's College London, is an advocate for interventional oncology – which involves treating tumours using minimally invasive techniques guided by medical imaging, usually under local anaesthesia, avoiding the need for major surgery and longer hospital stays.

“Due to advances in technology, we now have new ways of knowing exactly where the cancer is and microwaving or freezing tumours without having to physically cut them out,” Professor Adam said.

According to Professor Adam, interventional oncology has particular implications for the treatment of smaller kidney cancers.

“Typically, smaller tumours in the kidney have been monitored by urologists rather than operated on. The risks of surgery for these patients have been considered not to be justified, because they rarely give rise to secondary tumours.

“However, there is increasing evidence from large studies that small kidney tumours give rise to secondaries more often than was previously thought. This means we need to be more proactive in assessing and treating this type of cancer.

“Interventional radiologists can destroy these tumours using techniques that have lower risks than surgery, thus justifying treatment at an earlier stage rather than waiting for them to grow.”

In addition to being safer than surgery, interventional radiological treatment of small kidney tumours is less expensive, because of the shorter hospital stay and the use of local rather than general anaesthesia.

According to Professor Adam, interventional oncology is well developed in Australia. However, as in many other countries, including the UK, the relative shortage of interventional radiologists results in gaps in service provision.

“There is scope for substantial expansion of this discipline, especially in the field of oncology.

“The impact on patients by using these new methods is significant – for a patient with a small kidney cancer it can mean the possibility of having their cancer treated under a local anaesthetic requiring just one day at hospital, as opposed to major surgery requiring a substantial part of their kidney to be removed.”

Clinical Oncology Society of Australia President, Professor Mei Krishnasamy, said Professor Adam's learnings could be applied in Australia.

“Interventional radiation oncology is an emerging field in Australia and the shortage of practitioners could be having a negative impact on our cancer patients,” Professor Krishnasamy said. “Sharing knowledge about the benefits of this innovative form of treatment is crucial to ensuring that interventional oncology and radiology gets the recognition it deserves.”

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Notes to editors:

Professor Adam will deliver a series of presentations on interventional oncology at the Clinical Oncology Society of Australia’s Annual Scientific Meeting, 17 – 19 November at the Hotel Grand Chancellor, Hobart.