

Asking the value for money questions

SIMON CROMPTON

Delivering the best possible quality of cancer care to every patient requires getting value for money from scarce resources. BBC journalist Matthew Hill earned himself a Best Cancer Reporter Award for taking a critical look at the cancer spending priorities in England.

Good journalism springs from asking the difficult questions that others are reluctant to publicly address. Matthew Hill, winner of this year's ESO Best Cancer Reporter Award, tackled a topic that may be increasingly discussed behind closed doors, but rarely gets a wide airing: "Is cancer money well spent?"

According to Hill, a BBC health correspondent in the West of England for 20 years, journalists who want to provide an objective and well-informed perspective on cancer and cancer care have a big problem. Everyone they speak to seems to have a vested interest.

"Coverage of cancer can be dangerously skewed by the press releases journalists receive," says Hill, who has reported for national BBC television and radio programmes, including *Newsnight*, BBC News and *Panorama*. "You're not given the full facts, and as a journalist you're quite conscious of being manipulated by people with a vested interest – particularly in the field of drugs."

For example, Hill says he regularly receives press releases and emails from local consultants calling for certain drugs to be approved for reimbursement by the National Health Service. However, careful analysis of

the evidence reveals a complex picture, where cost is major, benefits marginal and side effects significant. This is rarely if ever presented to journalists. They need to do their own digging and assessing.

The problem was a motivating factor behind one of the two reports Hill submitted for this year's European School of Oncology Best Cancer Reporter Award, presented annually to recognise intelligent and critical cancer coverage.

"It struck me as important to stand back a bit and look at the rationale for the decisions made about cancer spending," he says. Hill made



Award winner.
Matthew Hill
conducting an
interview for BBC
television at the 2015
European Cancer
Congress, Vienna

PETER MCINTYRE

a 40-minute report for BBC Radio 4's Science Unit entitled "Is Cancer Money Well Spent?", broadcast on 12th April 2015.

Its starting point was a cancer patient in Somerset – Hill says patients are the source of many of his stories. Doctors believed she would benefit from a new type of stereotactic radiotherapy which was not available

in the UK – even though it is commonly used in other European countries. This led Hill to ask whether the £6 billion (just over €8 billion) spent on cancer in the UK every year was being used effectively to embrace the best in radiotherapy and surgery as well as drugs.

And given that one in two of us will receive a cancer diagnosis in our

lifetimes, was enough being spent on prevention and early diagnosis – for example through genetic testing?

His interest broadened after he attended a palliative care conference and was astonished to hear evidence that good-quality palliative care not only improved quality of life, but can also extend duration of life. "Should we be investing in

this relatively cheap area, instead of some cancer drugs costing tens of thousands of pounds?”

His investigation took him to interview cancer patients, doctors in France (where survival rates are higher than the UK), academics and consultants in Bristol. He also spoke to Richard Sullivan, Director of the Institute of Cancer Policy at King's College London, who pointed out that the £2 billion (€2.75 billion) spent on cancer medicines in the UK result in only a 2–4% improvement in population survival across all cancers. Sullivan highlighted the need to build international registries, documenting the actual long-term benefits of all cancer treatments.

At the end of his report, Hill concluded: “Evidence would suggest that, in terms of survival and cure, front-loading the system is most effective – better diagnosis, optimum surgery and radiotherapy. But realistically there will always be people who are diagnosed at the late stages of the disease, and we'll always need to be aware of new innovative treatments.

“The silver bullet for cancer remains elusive for scientists, doctors and patients alike, so we are left juggling. But if we were designing a cancer system we probably wouldn't start from where we are now.”

Hill's determination to get to the bottom of difficult questions hasn't been limited to cancer. As a BBC health correspondent he broke the story of alarming mortality rates among child heart patients in Bris-



Thanks BBC. Receiving his award from Fedro Peccatori, ESO's Deputy Scientific Director, Hill paid tribute to the BBC for giving journalists the time they need to investigate complex topics

tol in 1995, and has investigated how patients are swindled into paying for gastric banding and unproven stem cell therapies.

But he has always been interested in cancer, and this gained a personal impetus three years ago when his younger sister died of a brain tumour. “I wouldn't say it's changed what I did, but it's focused my mind, onto research in cancer primarily.”

Hill's second entry to the Best Cancer Reporter Award was a tel-

evision report for the BBC *Inside Out West* programme. Hill secured exclusive access to one of the first patients in the world to receive an experimental technique of feeding chemotherapy drugs directly to an inoperable brain tumour via surgically implanted catheters.

The experimental treatment was developed by neurosurgeon Steven Gill at Bristol Royal Hospital for Children. Hill accompanied 17-year-old James Willetts and

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his family through the journey of implantation and treatment. The judges for the Best Cancer Reporter Award liked the piece because of the way it reflected the personal experience of undergoing experimental treatments from both the patient and professional side.

Hill is all too aware, however, of the dangers of raising false hope by focusing on one innovative treatment. “Professor Gill’s work seemed such a radical development, and one that could lead to further breakthroughs, so it was worth following the patient. But I know what it’s like to have false hope raised. The genetic sequence in my sister’s glioblastoma meant that she was eligible to receive the drug Glivec on a compassionate basis. This was experimental, but it didn’t work for her.”

Journalists have a responsibility to use phrases such as “early stages” and “highly experimental” when describing trials, he says. “The headlines will always be there because we want people to pay attention, but you’ve got to get the details in to the report explaining the full situation, and hope that the public will take it in.”

What would improve standards of reporting on cancer internationally? Hill would like to see more efforts in Europe to look beyond the limited perspectives and vested interests of different cancer disciplines and professions. “There are very few bodies that stand back and provide commonality, and a consensus on different types of treatment,” he says.

In accepting his award, which

was presented to him at the 2015 European Cancer Congress in Vienna, Hill said he appreciated it as much for the recognition it gives to the BBC as to himself. At a time when the funding, organisation and remit of the BBC are themselves undergoing scrutiny, Hill is acutely aware of how few news outlets and organisations allow journalists the luxury of actually investigating topics – rather than relying on those press releases and partial opinions that can provide such a skewed version of reality.

“The BBC gives me the time to do this kind of research,” he says. “That comes with being a public service organisation. This award recognises that, and the fact that there aren’t many media outlets that allow that freedom.” ■

Sharing tips and experiences. Hill contributed to a session on reporting on service priorities and value for money, held as part of the Reporting on Cancer training course run by ESO for European health journalists at the 2015 European Cancer Congress



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