

Guest editorial

THE SIR ANTHONY MAMO ONCOLOGY CENTRE

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In 2009, the development of a medical brief, effectively detailing the specifications for a purpose-built oncology hospital and including the medical equipment and human resources required, was commenced. Robust engagement by the relevant stakeholders, many of which hailed from the extant Sir Paul Boffa Hospital, ensured a very relevant proposal. The project (ERDF 196), led by the Foundation for Medical Sciences, was subsequently approved for partial funding through European Regional Development Funds. The new Sir Anthony Mamo Oncology Centre, as it came to be named, first opened its doors for service in December 2014 when the Out-patients Department received the first oncology patients. In April 2015, this was extended to include haematology and paediatric oncology patients. Full migration of services, including in-patient care, took place in September 2015.

The distribution of services within the new Centre includes five clinical areas for in-patients made up of two oncology wards, one radioisotope unit, one haematology ward and one palliative care ward, with a total of 88 beds, an out-patient unit with 12 clinic rooms, a day area for day-treatment with a total of 21 couches and eight beds, a clinical support services unit and a radiotherapy department.

The staff complement, a significant number of which are Health Sciences graduates, is very diverse. Specific training related to the care of cancer patients is currently ongoing and opportunities for continued professional development for all staff are being prioritised.

Special mention must be made of the dual-qualified radiographers who graduated through a course run jointly between the University of Malta and the University of Cardiff who were deployed within the Centre's radiotherapy unit, and the medical physicists in radiotherapy, whose training, partially funded through ESF 4.175, occurred under the joint auspices of the University of Malta and Leeds Teaching Hospitals NHS Trust.

The very scope behind this large project is to ensure that the level of cancer patient management in Malta continues to improve, if possible on a par with that of countries with similar health systems. Recently published research has shown Malta to be somewhat middle-ranked on overall survivorship, demonstrating an age and case-mix standardised five-year relative survival of 51.3% for all cancers, only just below the average quoted for Europe (52.5%) (Baili et al., 2015).

To this effect, a number of developments are planned within the radiotherapy unit that will result in a decrease in patient treatment complications, and will allow for the treatment of individuals who hitherto were sent abroad, thus providing for a better patient experience. Within the next three years, plans are in place to develop Intensity-Modulated Radiation Therapy (IMRT) and Volumetric Modulated Arc Therapy (VMAT), optimising treatment of relevant cancer sites through the provision of high dose conformance to the tumour, thereby reducing risk to critical structures. A reduction in treatment time, which potentially decreases the likelihood of patient movement during the therapy, will increase accuracy which, together with on-board on-line imaging, will significantly enhance treatment precision.

Though in the past, a few Maltese patients were enrolled in clinical trials, plans for a significant drive to put this process on a more formal

and universal footing through the set-up of a clinical trials unit within the Centre, are being addressed. The aim is to significantly improve access for Maltese patients to drugs-in-development and to allow for more significant participation in leading edge clinical trials. In conjunction with this, a well-resourced framework needs to be set up to facilitate the timely adoption of new pharmaceuticals, including the use of immunological therapies, especially in the context of personalised cancer management.

The local performance of autologous bone marrow transplants in the long term is also being given due consideration. However, this depends heavily on further staff training, recruitment of additional expertise, and on other infrastructural projects, mainly the Innovation Centre for Excellence – Blood, Tissues and Cells (ICE-BTC), approval of which is currently pending a specific ERDF call for applications.

In order to truly ascertain that the patient is at the very core of this enterprise, the Sir Anthony Mamo Oncology Centre should attempt to achieve accreditation. Similar hospitals in Europe have undergone this laborious yet very constructive quality measure and have been certified by institutions such as Joint Commission International. This will undoubtedly have a profound impact on the operational performance of the hospital, ensuring that all processes within the hospital are optimally geared towards the patient.

Of course, the Sir Anthony Mamo Oncology Centre will not be operating in a vacuum. Significant co-operative ventures are ongoing, whereby expertise is being transferred and co-operation is being sought. A bilateral arrangement with Leeds Teaching Hospitals NHS Trust has contributed significantly to the developments in radiotherapy, both in terms of equipment validation and of planned evolution in treatment methodology. Malta is also actively participating in the European Reference Networks project, an EU Commission initiative whereby highly specialised healthcare providers are designated as centres of expertise or reference. This in turn enables the concentration of expertise and patient numbers in one place to optimally manage rare or complex diseases including many cancers. On a more local level, the existing synergies with Mater Dei Hospital should be strengthened and new ones built with the University of Malta and possibly the Life Sciences Centre, exploiting the adjacency of these institutions. There should also be additional focus on strengthening the existing relationships with non-governmental organisations since these all bring a particular ethos of their own that touches patients in different ways.

All this should be complemented by a continued transfer of care from an in-patient/hospital environment to a community-based one that will allow patients to enjoy the comforts of their personal surroundings and families for a larger part of their treatment. Stronger co-operation with community-based care providers is extremely important, as is the investment in robust information systems that would effectively underlie all the highlighted developments.

The Sir Anthony Mamo Oncology Centre will therefore, in the coming years, effectively serve as the backdrop for significant advancements which will hopefully alter for the better the outcome of the battle against cancer.

Reference

Baili, P., Di Salvo, F., Marcos-Gragera, S., Sieslin, S., Mallone, S., Santaquilani, M., Micheli, A., Lillini, R., Francisci, S. & the EUROCARE-5 Working Group (2015) *European Journal of Cancer*, 51(15), pp. 2120 – 2129.