The Teleoncology Program, a research and development project led by Dr. Max House as principal investigator, was started in 2004 and jointly carried out by the Faculty of Medicine and the Cancer Program of the Eastern Health Authority in cooperation with the three other regional health authorities. It was designed to deliver cancer services throughout the province, reducing patient and doctor travel and providing services in a timely manner. It was hoped that this project would be sustainable within the health system and would be a model for other telehealth services.

The success of teleoncology is shown by the external evaluation and by the development of the Provincial Telehealth Program. Under this program, the clinical part of the teleoncology project is now part of a larger chronic disease management initiative being led by the Newfoundland and Labrador Centre for Health Information.

“Oncology patients in 24 rural communities are now availing of telehealth services and receiving care closer to home,” said Mike Barron, CEO of the Centre for Health Information. “The model used to engage and support health care providers and provide telehealth services to cancer patients will be used to bring telehealth services to patients dealing with other chronic diseases, including kidney disease, mental health, neurology and diabetes.”

Dr. Jonathan Greenland, who has been the most active teleoncology physician, uses telehealth on a regular basis together with Dr. Kara Laing, clinical chief of the oncology program for Eastern Health, and other colleagues.

Dr. Greenland said, “My involvement in teleoncology started on a small scale, but within a few short months evolved into the largest component of my practice. I am now able to easily assess patients who otherwise would have been too unwell to travel for assessment. At the same time, the need for me to attend our regional clinics has diminished, which results in better continuity of care for my patients in St John’s and at the regional clinical. Overall I’ve noticed the proportion of patients from rural areas in my practice has increased dramatically since my involvement with teleoncology started.”

The impact of the teleoncology project in one rural and remote area was summed up by Dr. Michael Jong, senior physician at Lake Melville Hospital, Happy Valley/Goose Bay. “Teleoncology is a godsend. Cancer patients with their caregivers and family doctors are now able to consult oncologists in St. John’s without having to travel at great cost, time lost and discomfort.”
At the Cancer Centre in Grand Falls-Windsor, nurse Pansy Beson said teleoncology consultations are used quite frequently and they would like to use it more for cancer care. “A high percentage of our patients are quite comfortable with the technology and during oncology clinics we are able to have a large number of patients consult with the oncologist via teleoncology in a short space of time.”

Susan Gillam, the CEO of Western Health, said the authority is “pleased to participate in the teleoncology project which benefits so many cancer patients across Newfoundland and Labrador. Teleoncology certainly helps to minimize the burden of travel and provides care to patients where they live. This is a significant improvement to cancer care in Newfoundland and Labrador.”

Louise Jones, interim president and CEO of Eastern Health, said, “This is a wonderfully innovative method of responding to the needs of patients wherever they are in the province. It offers people both quality care and timely access to our cancer specialists in regions that are challenged by limited access to oncologists. It is a unique and forward-thinking approach that also reduces both travel time and costs for patients.”

Dr. James Rourke, dean of medicine at Memorial University, said the Teleoncology Project is a good example of research that leads to a direct benefit for the people of Newfoundland and Labrador. “Our Faculty of Medicine is proud to be a world leader in this important technology, and we are pleased that the teleoncology model has led to the Provincial Telehealth Program, which will have wide benefits for delivering health services in this vast province.”

Dr. Gerard Farrell, director of the Faculty of Medicine’s eHealth Research Unit, said, “This project is an example of research that builds on the Faculty of Medicine’s internationally-recognized telemedicine history. The eHealth Research Unit fully supports and encourages such research.”

Dr. Maria Mathews, associate professor of health policy/health care delivery and lead author of the Health Research Unit’s evaluation of the Newfoundland Labrador Teleoncology Program, said this program is generally viewed as providing costs savings in terms of travel, time and expense. “It is convenient, satisfactory to both patients and health care providers and, in some cases, facilitates more timely care.”

Dr. House said that the teleoncology project was possible because of funding support from the Dr. H. Bliss Murphy Cancer Care Foundation, the Lawson Foundation of London, Ontario, the substantial and continuing support of the Department of Health and Community Services, the Newfoundland and Labrador Centre for Applied Health Research, and some support from Novartis Pharmaceuticals Canada Inc.
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