



# Patient Power

## Access to Effective Hodgkin Lymphoma Treatment at the Community Level

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**Andrew Schorr:**

So, this is not a common condition. So, somebody may be in the hinterland, if you will, not where you are by Rutgers, not where you are in Manhattan, but somewhere out there, so how can they make sure that their community doctor is well-informed or consulting with you?

And, I know you have many in your medical group, Mt. Sinai, and may have outside clinics as well. So, can we rely on our community doctor giving you a call? Do we have to?

**Esther Schorr:**

Do we need to advocate?

**Dr. Evens:**

So, I would say yes to everything you just said, Andrew. It's all important, and most community doctors—if not all—are fantastic, and they're really smart, and they're really good, but they're also very busy, and like anything—we're lucky. One hundred percent, day and night, we're dedicated to lymphoma, so like anything, it's easier to keep up on the meetings and the cutting-edge stuff. It's hard if it might only be 2 to 5 percent of your practice or less. You might only see a couple patients a year. But, what I would say is there's—they have the resources. Now, they might not be as real-time as we'd like, like the NCCN guidelines, but at least that's something to look at.

And, I'm sure Dr. Brody is the same way—at least, for our health system or outside, open door, open email, open cell phone policy. If there's a question, please contact. I'm happy to see the patient, happy to talk about it. You need that collaboration, I think, and it can always be better between us, but I think it's in a good place. It can always be a little better.

**Dr. Brody:**

I think it's very reasonable—if you're gonna get treated in the community, you live four hours away from an academic center, you can meet those academic physicians once or twice, and they will say to you, "The approach that has been discussed with you by your community oncologist is absolutely reasonable, maybe it's identical to what we would have done here, so continue with them, and you can check in with us at some intervals—every few months, every few year. You don't have to be coming back and forth all that distance every time if the therapy would be the same otherwise."

**Esther Schorr:**

So, some of these new protocols can be done at a community level?

**Dr. Evens:**

If it's approved.

**Esther Schorr:**

A transplant might be a little more difficult.

**Dr. Evens:**

If it's FDA-approved. It gets a little trickier with a clinical trial. You'll sometimes have to be at that site. I forgot to mention—I think it's important to—I know you guys well know about how the foundations are a great resource.

So, whether Lymphoma Research Foundation, Leukemia & Lymphoma Society, American Cancer Society have great resources, and sometimes can act as a liaison to the academic specialist, but Esther, what you said of patients being their own advocates: Absolutely, especially for Hodgkin's.

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