

## Northern Flank by Göran Haglund

### Elderly patients victims of cost cuts

*Cancer patients over 70 years old in Sweden won't receive radiation treatment, for lack of hospital investments.*

**H**undreds, maybe thousands, of elderly cancer patients in Stockholm will no longer receive radiation treatment, according to a decision on March 7 at the cancer clinic of the Royal Caroline Hospital, Sweden's largest clinic of its kind.

The decision, which in reality was forced by a state board subordinate to the ministry of finance, means that radiation treatment will no longer be given to women over 70 who have undergone surgery for mammary cancer, to men over 75 who have cancer of the prostate, and to any patients over 75 who suffer from tumors of the throat and neck, as well as several other groups.

The immediate cause of the drastic decision to introduce age discrimination at the Caroline Hospital's cancer clinic is the acute shortage of qualified personnel, after six oncology nurses, specially trained to administer radiation treatment, quit their jobs this spring. Due to failure to train sufficient numbers of such nurses, and establish wages and working conditions such that those already trained remain on the job, the six nurses cannot be replaced.

"This is an enormously painful decision," the chief of the Caroline Hospital's cancer clinic, Prof. Jerzy Einhorn, commented. "The only alternative would be completely unacceptable long waiting periods for life-saving radiation treatment for all cancer patients in Stockholm. The waiting time is today two to three weeks, and it would be increased to six weeks."

According to Professor Einhorn, "several hundreds per year" will be

excluded from the radiation treatment in Stockholm. Chief Physician Pier-Luigi Esposti, responsible for the cancer clinic's radiation ward, estimates that the decision not to give radiation treatment to elderly patients will affect "10% of those treated in 1987, that is, over 10,000."

"If we suffer further personnel reductions, we have to cut more," Professor Einhorn warned. "I have been commissioned to think through other possible cut-downs in the future," Chief Physician Esposti said. "And I do not understand how it would be possible. *The only alternative would be to further reduce the age limits.*" (Emphasis added.)

Professor Einhorn has called for a three-point program to solve the crisis: to improve conditions for the remaining personnel; to recruit and train more oncology nurses; and to increase the equipment for radiation treatment. "Had we been given adequate resources, this situation would never have arisen."

While the situation in Stockholm may be more acute than elsewhere, a similar pattern has been observed nationwide. Of 454 trained oncology nurses in Sweden, only 326 are actually working in this profession.

The cause is purely political or, if you prefer, budgetary. Deliberate political decisions have been made to delay the procurement of additional radiation equipment, and not to train adequate numbers and pay adequate wages to specialized nurses. Due to the miserable pay and working conditions of oncology nurses, only 47 applied for the 64 available training

vacancies last fall. In Stockholm, the three existing radiation clinics are equipped and staffed for administering 80,000 treatments a year, but had to carry out 113,000 in 1987, straining equipment and personnel.

In 1981, the Stockholm county health administration had already allocated the funds for obtaining four more radiation units. But the Board for the Expansion of the Educational Hospitals (NUU), a state board directly subordinate to the ministry of finance, accepted only two additional radiation units. The NUU is supposed to finance 25% of the investments of Sweden's eight large educational hospitals, but in effect has thereby obtained veto rights regarding any significant procurement programs of those hospitals.

Indeed, the Linköping General Hospital, another educational hospital, suffers from too few nurses trained for cancer treatment, exactly like the Caroline Hospital in Stockholm, while the smaller hospital of Jönköping, a non-educational hospital, and therefore independent from any NUU endorsement of its investment plans, has been able to proceed in its expansion of radiation facilities.

Beyond the additional radiation units needed by the cancer clinics, the NUU is also responsible for delaying a new AIDS clinic at the Huddinge Hospital in Stockholm, and for attempting to prevent the most advanced technology from being procured for the treatment of kidney stones at the same hospital.

According to a Moderate Party member of the Stockholm county health administration, Stig Rindborg, the NUU has deliberately delayed the acquisition of new radiation equipment, and the state board's behavior in the negotiations has been characterized by Rindborg as "gangster methods."