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The Physician Patient Relationship
From the Trenches

Scottsdale, Arizona
Rochester, Minnesota
Jacksonville, Florida
Disclosures

• Consulting: AMGEN, BMS, Celgene, Takeda, Bayer, Jansen, Novartis, Pharmacyclics, Merck, Sanofi, Kite, Juno and AbbVie

• Visiting Healthcare Fellow, Goldwater Institute

• Speakers Bureaus: None

• SAB: Adaptive Biotechnologies

• Patent for FISH in MM - ~$2000/year

• Believe in stem cell transplant

• Dislike wasting your time with this slide
HOPE
Medical Innovation Freeing the World from Disease

Life expectancy 48

Life expectancy 78

Number of Deaths per 100,000

1900

Pneumonia or influenza 202.2
Tuberculosis 194.4
Gastrointestinal Infections 142.7
Cerebrovascular Disease 106.9
Heart Disease 137.4
Nephropathies 88.6
Cancer 64.0
Senility 50.2
Diphtheria 40.3

2010

Cancer 185.9
Heart Disease 192.92
COPD 44.6
Cerebrovascular Disease 41.8
Nephropathies 16.3
Diabetes 22.3
Alzheimer’s Disease 27.0
Pneumonia or Influenza 16.2

Mayo Clinic Cancer Center
Tuberculosis

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Multiple Myeloma

- Thalidomide
- Lenalidomide
- Pomalidomide
- Bortezomib
- Carfilzomib
- Ixazomib
- Panobinostat
- Daratumumab
- Elotuzumab
- Liposomal doxorubicin
- Denosumab

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Improving Survival in MM

Control cohort*

MM cohort*

Censored Logrank p<0.0001

Survival Probability

Survival Years

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Ants crossing river
Challenges
Fiduciary Duty

• A fiduciary duty is the highest standard of care.

The physician

Society

The patient

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Vectors of Tension

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Asymmetry of information

- Individual
  - American

- Self-determination

- Choice

- Private

- Group
  - European

- Paternalistic

- Direction

- Public

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It shouldn't be that hard?
Evidence Based Medicine!

- Pioneers
- Most of medical interventions
- Empirical
- Retrospective
- ROMAN

- Cartographers
- Small sliver of information
- Tested
- Hypothesis
- GREEK

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Bring innovation to the bedside
Are we hearing patients?

- “Off label” drug use
- Financial toxicity
  - Bankruptcy
  - Co-pays
- “Right to try”
- DTC advertising and genetic testing
- QALY
- Hopes when being treated?

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QALY

Used to deny care
Discrimination

Value of life?
What to use instead?
Bring innovation to the bedside

Payer considerations

• Fee for service versus value based
• Access to clinical trials
• “Step therapy”
• Pathways and incentives
• PBM and gag rules
• Approval bodies – NICE, IPAB
• “Closed” health systems

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Value Based Payments

ICER

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Moving forward

- The needs of the patient come first
- Today’s best is not good enough
- Transparency and honesty
- Intellectual depth and honesty
- We live in the real world!
- Optimism!

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Enlightenment

• Reason
• Science
• Humanism
• Progress
Thank you!

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