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Michael Sherar PhD,  
President and CEO  
Executive Team  
Cancer Care Ontario  
620 University Avenue  
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RE: Call By CCO Official to Thunder Bay Health Sciences Threatening My Ability to work at the hospital.

My name is Dr. Dave Webster and I am a Nuclear Medicine physician and one of Canada's PET experts. In 2004 I was the President of the Ontario Association of Nuclear Medicine [OANM] when Cancer Care Ontario was formulating its plans to discredit, delay and block PET scanning for patients. The purpose was to ensure that the government would not have to pay for PET. This simply is a fact since the OANM hired Mr. Michael McCarthy as our lobbyist on PET. He was in attendance when CCO experts were given their mandate by the government.

You may not personally be aware of Cancer Care Ontario's involvement with assessing roles for PET/CT for Ontario patients. If not, you might speak with Dr. Robin McLeod who I recently wrote to. You also may not be aware that since at least 2005 Canadian and International PET and Medical Experts have openly named and condemned what Cancer Care Ontario 'medical experts' were doing to cancer patients to block them from access PET. PET/CT has, in the example of lung nodules and lung cancer, been the accepted world standard of imaging management of issues related to lung cancer for almost 20 years and even in places such as Chile. Yet the CCO 'seal of approval' indications for OHIP to pay for a PET/CT:

- **Are the exact opposite of the entire world expert body of opinion on PET.**
- **The implications for our patients are disastrous, and above all maximize the already high levels of stress cancer patients and their families are dealing with.**

For the past 15 years, my colleagues and I have made endless frustrating and fruitless attempts to get various CCO experts to address our concerns about how they have assessed PET. In most cases there was no response, but even when there was, not a single question of relevance was answered. You are likely aware that CCO experts are using Health Technology Assessment [HTA] to assess the 'quality of evidence regarding

PET/CT. You should know that based on my recent communications with the various CCO experts involved with PET:

- ***No one from CCO is even trying to pretend there is any scientific basis or validity whatsoever to justify using it to assess the quality of evidence of any diagnostic imaging device, PET, or otherwise.***

The assessment of PET by CCO is, to quote a world PET expert, Professor Rodney Hicks:

***“Ontario has the most egregious and politically motivated agenda against PET in the world.”***

What is finally compelling me to write this letter is that CCO medical experts are now ‘stonewalling’ questions from patients as well.

To make a long story short, Oncologists in Thunder Bay asked me to become involved with patients and advise them on imaging management issues regarding their patients. I began making applications to the CCO group, PET ACCESS, which can grant PET scans not covered routinely by OHIP. I began this in January of this year. One of the key points I made to the PET ACCESS Panel members was this:

Ontario physicians are being forced to practice not just substandard medicine, but medicine that would be considered incompetence or worse beyond our borders. Indeed in some cases, such as lymphoma, the Cancer Care Ontario indications, until very recently, would result in criminal charges in the US.

However patients in Ontario are entitled to full informed consent, and the right to ask questions about any proposed investigations, treatments, alternatives, risks and benefits. I have taken the position that:

- ***The time has come for those who have made the rules forcing us to practice bad and dangerous medicine on our patients are the ones who will now answer patients questions and do the informed consent.***

This clearly did not ‘sit well’ with PET ACCESS Panel Members. Although they have allowed the patients to have a PET/CT not covered by OHIP, ***they have refused to answer the questions that patients are clearly entitled to get from those who are responsible for making critical decisions affecting their lives.***

- Two weeks ago, someone from Cancer Care Ontario, called the Senior Administration at Thunder Bay Regional Hospital, and told them to shut down the physicians informing patients about the status of PET in Ontario compared to the rest of the world. Bottom line:
  - ***If I continue to approach physicians and patients with the facts, all backed by extensive documentation I WILL NO LONGER BE***

***ALLOWED TO WORK AT THE HOSPITAL.***

I am certain that the radiation oncologists I was consulted by have been put in their place as well.

I would hope that you are as shocked as the patients, colleagues and various 'interested parties' I have shared this with. It is clear that whoever called from CCO was aware of just how wrong what they were doing was. Normally when physicians are being reprimanded, as in fact I was in the fall over an issue related to PET, it is the Chief of the physician's Department who speaks to you. My Chief, Dr. David Kisselgoff, was completely unaware of the threats made against me. Instead, with the reprimand in the fall, and this most recent serious threat against me were delivered, not by those in Administration that took the call, but by my Nuclear Medicine Colleague, who I do locums for when he is out of town.

Everyone agrees the information I am giving to physicians and patients is 100% sound, and would be the best management for the patient. However, I am not allowed to say this, and now Cancer Care Ontario is prepared to force the hospital to threaten my ability to work in Thunder Bay if I continue to do so.

**CONCLUSION:**

I would ask that you or someone from the Executive Team provide me with the names of those who phoned the administration at Thunder Bay Health Sciences to demand they 'shut me down'. This has resulted in not just a profoundly serious threat against my livelihood as a physician but violates the most fundamental assumptions we make about the supposed 'open, transparent and accountable' democracy we are told we live in.

I would also appreciate your comments on the actions of these CCO 'representatives' of a supposed 'world-class' oncology center dedicated to advising our 'government' about the most current and appropriate investigations and treatments for not just cancer in this case, but all the various uses of PET/CT

Sincerely

Dr. Dave Webster