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June 4 2017

Kathleen Wynne, Premier Legislative Building Queen's Park Toronto ON M7A 1A1

RE: CANCER PATIENT'S NIGHTMARE IS A CANCER CARE ONTARIO 'SUCCESS' STORY'.

Dear Ms. Wynne

In July 2016 I wrote you regarding 'the travesty of PET scanning in Ontario'. You directed the letter to your Minister of Health, Dr. Hoskins who in his response to my letter of May 2015, made clear how proud you two are of Cancer Care Ontario's [CCO] efforts regarding PET.

I will once again try and impress upon you why Canadian and International PET experts have condemned what CCO has done to patients to block them from the long accepted world standard of imaging management of cancer and other serious diseases. I would like to share with you just one of the 'horror' stories that is a direct result from CCO's 'best evidence-based, practice guidelines '.

This patient is a nurse who was diagnosed with cervical cancer. She was incorrectly staged by her compulsory CT and also an MR, which happens in 30% of patients on average. She was offered the 'false hope' of a potential cure and consented to 'radical radiation therapy' to her pelvis. She suffered terribly from the anticipated 'severe radiation damage' to her rectum and bladder. She was only allowed her PET/CT AFTER her therapy.

The PET/CT correctly showed:

Even if a cure had been possible it was doomed to failure. The PET demonstrated cancer in lymph nodes reported as 'normal' on her CT and MR and thus they were not included in the 'radiation therapy fields' with no second chance for more radiation. More importantly it showed that she already had untreatable 'Stage IV' cancer and that the radiation therapy she suffered through was 'contraindicated' and never should have happened.

Now besides having to deal with going from 'possible cure to terminal' she must also endure the severe and unnecessary complications of her mutilating 'therapy'. In spite of her physician's efforts to lobby CCO for proper investigation of her cancer, they were forced to practice 'incompetent medicine' with CCO's 'compulsory guidelines'

When she asked CCO medical experts to answer her questions and concerns, they simply ignored her.

How does she try to 'get her head around' the fact that this was done to her intentionally by CCO medical experts, but worse, that you and Dr. Hoskins are "proud" of their efforts?

When the most senior member of the CCO PET Steering Committee, Dr. Al Driedger, resigned in disgust he stated: "What those who are blocking PET are doing, borders on immoral." This doesn't begin to capture what has been done to this woman.

If she'd had the PET/CT before planning treatment, she would have died of her cervical cancer anyway. However she would have had the opportunity to do so with as much dignity and comfort as possible.

And what about the physicians who tried to investigate and treat this woman 'competently' and act as her advocate?

They have been threatened with the loss of their ability to work at a hospital by Senior Cancer Care Ontario Executives if they continue to talk to physicians and patients about PET.

Ontario's cancer patients are being subjected to:

- Gross overexposure to CT radiation
- Unnecessary high risk biopsy procedures
- Suffer through prolonged delays in diagnosis and treatment with the associated stress and often with fatal results
- Exposure to mutilating contraindicated therapies (this patient's nightmare)
- Even missing out on therapies that could have been successful.

The decision to block PET because of cost concerns was made by Premier McGuinty who directed CCO in partnership with McMaster Medical School Faculty to discredit, delay and block PET.

Ontario patients have the most restricted indications for PET in the world with up to 90% of the indications the opposite of the entire world expert body of opinion.

PET experts declared the CCO 'PET Trials on cancer patients' "unethical", and demanded an independent 'Ethical Review'. CCO and the Liberal Government dismissed these profoundly disturbing statements. CCO accomplishes their 'mandate to "determine the quality of PET evidence" using a 'tool' called 'health technology assessment [HTA]/evidence based medicine'.

CCO 'medical experts' admit there is no valid scientific evidence to justify using HTA to assess "the quality of evidence regarding PET". In 2016 a leading Australian PET expert, Dr. Rodney Hicks, stated to me: "Ontario has the most egregious and politically motivated agenda against PET (ie our patients) in the world."

This woman's experience makes clear both why PET became the accepted world standard of imaging management of cancer and why PET experts have condemned Cancer Care Ontario.

SUMMARY:

This woman's misery and suffering is viewed by Cancer Care Ontario as just another <u>SUCCESS STORY</u> in their ongoing efforts to block some of our sickest and most distressed patients from the accepted world standard of imaging management of their cancers.

 Her unbearable emotional and physical suffering is the price <u>'SHE MUST PAY'</u> so Cancer Care Ontario can continue the LIE of:

'EVIDENCE-BASED-MEDICINE HEALTH CARE'.

Ms. Wynne, there still is an opportunity to have a "PATIENTS FIRST HEALTH CARE" system that is more effective, safer, more humane and ultimately cheaper.

What should I tell this woman on your behalf?

Regards

Dr. Dave Webster