

## Preface



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*Guest Editors*

Our nation is making progress in the war on cancer. Survival for virtually every type of cancer is increasing, and mortality rates are declining for those cancers amenable to prevention and early detection. But our progress has been frustratingly slow. Although we celebrate the fact that the number of cancer survivors is growing, each year we mourn the loss of more than 500,000 individuals in this country alone. Coping with a cancer diagnosis and cancer treatment constitutes, for most patients and their families, a life-altering event. Physical manifestations of a diagnosis are far-ranging and often persist for the remainder of one's life. Emotional reactions range from joy to despair. Caregivers ride this roller coaster right next to their loved ones. Being diagnosed with cancer can be an enriching experience, but it can also be a devastating one. A death from cancer often becomes a defining moment in the lives of loved ones and families.

Primary care clinicians, unlike virtually every other type of health professional, help to steer patients and their families through the entire spectrum of the cancer journey. They are often called upon to arrive at and communicate the diagnosis. Their role in the active treatment varies from patient to patient, but, eventually, the primary care clinician is drawn into a more central role, helping patients and caregivers cope with the illness, manage symptoms, and make the right decisions about care options, and, at times, to help ensure a positive death experience.

The second issue of this series addressing what every primary care clinician needs to know about cancer covers a wide range of topics that mirror the far-reaching role of the clinician. From diagnosing the symptomatic patient to addressing symptom management, including diagnosis and management of depression, and managing palliative care and end of life, primary care clinicians are responsible for a wide range of clinical issues. As the number of cancer survivors grows, primary care clinicians have an increasing obligation to understand and manage the long-term risks associated with a cancer diagnosis and its treatment, even when the treatment is curative. We harbor no misconceptions about how well we are handling these diverse tasks. We have a long way to go to bridge knowledge gaps and to develop systems of care that help guarantee that patients receive the right care at the right stage of

diagnosis. But we do believe that this issue provides a valuable exploration of these myriad issues and that it highlights the many areas that are changing.

Primary care clinicians provide medical homes for people of all ages. The opportunity to ease suffering and death from cancer depends, to a remarkable extent, on the ability of that home to provide optimal care to all patients, regardless of their clinical circumstance. Primary care clinicians are the front line in the war on cancer. Without a prepared, knowledgeable, and committed community of primary care clinicians, the cancer war cannot be won.

As editors, we are deeply grateful to the 49 authors who created this 2-part series on cancer. We reached out to the busiest people who already had too much on their plates, and they all said yes. Each of them shared our understanding of the importance of creating an effective cancer primary care workforce. We cannot adequately express our thanks to Barbara Cohen-Kligerman, our managing editor, and the staff at Elsevier who worked so patiently and diligently to help create an important series on cancer for the primary care clinician.

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