



THE SOCIETY OF THORACIC SURGEONS

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Heart Disease and Lung Cancer Won't Wait, But Patients May Have to Wait for Life-Saving Care

WASHINGTON, JUNE 18, 2007----Americans with heart disease and lung cancer may soon face a giant hurdle in accessing life-saving critical care. Cardiothoracic surgeons, the doctors who treat these top two causes of death, are dwindling in number while demand is set to skyrocket with an aging population, making life-threatening postponements of surgeries a very real possibility. The Society of Thoracic Surgeons (STS) is seeking collaborative efforts with the government to make changes to attract more applicants to the specialty's training programs.

"This crisis impacts the most vulnerable," said Stephen Lahey, MD, Chief of Cardiothoracic Surgery at Maimonides Medical Center in Brooklyn, NY. "My hospital treats some of New York City's sickest and poorest patients, and I am having difficulty attracting residents to my program."

The number of applicants to cardiothoracic (CT) surgery residency positions has been decreasing, the last four years have total applicant numbers below the total number of training positions. Compounding this problem is research indicating that the average age of the approximately 3,700 practicing cardiothoracic surgeons is 55 and more than 50% plan to retire within the next 10 to 13 years.

On June 13, the National Residency Match Program (NRMP) announced that only 87 of the 130 CT surgery training positions were filled, leaving 33% of the training positions vacant and 36 of the 92 training programs unfilled. This is the third straight year that NRMP, a private, not-for-profit corporation which provides a uniform date of appointment to positions in graduate medical education (GME) in the United States, has announced a 33% shortfall in filling CT surgery training positions.

Today, leading cardiothoracic surgeons, a resident and a patient united with Congressman Charles Boustany, Jr., MD (R-LA) for a special briefing on Capitol Hill to confront this disturbing national trend.

"These [surgeon] retirements, coupled with the decrease in newly-trained residents, will dramatically reduce the supply of cardiothoracic surgeons to care for patients," said Douglas J. Mathisen, MD, Professor of Thoracic Surgery at Harvard Medical School and Chief of Thoracic Surgery at Massachusetts General Hospital.

Coronary vascular disease affects 70 million Americans, and lung cancer kills more Americans annually than breast cancer, prostate cancer, colon cancer, liver cancer and kidney cancer combined. While the supply of highly skilled surgeons decreases, the demand for cardiothoracic

services is ever-growing due to an increased demand from Baby Boomers – a majority of these 78 million Americans will be 65 by 2011. It takes 12 years to train a cardiothoracic surgeon (medical school and residency), efforts to attract the best and brightest to the field must begin today.

“The skill and quick thinking by Dr. Lahey saved my life and gave me more time with my grandchildren,” said Joseph Zurla of Brooklyn, NY, who survived an aneurysm while undergoing coronary artery bypass and aortic valve replacement surgery. “We cannot afford to lose such skilled surgeons who save lives every day.”

STS is calling upon Congress to help ensure the availability of cardiothoracic surgical care for future patients by overhauling the price-controlled Medicare physician reimbursement system and allowing market-based adjustments in the economics of the health care delivery system.

“The government has reduced reimbursement rates for coronary artery bypass surgery by nearly 50% since 1987,” explained Dr. Mathisen. “These steep cuts targeting cardiothoracic surgery have demoralized the specialty and are a significant part of the reason that many medical students choose to pursue other specialties.”

In addition, STS argues, Congress should pass legislation, such as loan forgiveness and a longer loan deferment period for repayment, to reduce the economic barriers for medical students opting for specialties with long training periods. “I am finishing my residency this year and have \$240,000 in debt,” said Nathan Bates, MD. “We need to address the escalating cost of medical education and ensure that the best and the brightest in this country view medicine as a viable career.”

STS has endorsed S. 1066, the Medical Education Affordability Act of 2007, which was introduced by Senator Christopher Dodd (D-CT). In addition, STS ardently supported the federal loan forgiveness package co-sponsored by Representatives Boustany and Rob Andrews (D-NJ) last year and will seek its passage in this Congress. Such collaborative and creative solutions will resolve this crisis and ensure that patients with heart disease and lung cancer are not forced to wait to receive the critical care necessary to save their lives.

Local cardiothoracic surgeons and their patients are available to talk with reporters about this potential crisis. Additional information, including graphics, bios and background information, can be found at www.sts.org or by contacting Nancy Puckett at 312-202-5800 or Sharon Porta at (312) 202-5829.

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The Society of Thoracic Surgeons is a not-for-profit organization representing more than 5,400 surgeons, researchers, and allied health professionals worldwide who are dedicated to ensuring the best possible heart, lung, esophageal and other surgical procedures for the chest. Founded in 1964, the mission of STS is to enhance the ability of cardiothoracic surgeons to provide the highest quality patient care through education, research and advocacy.