

Patricia Goldsmith: This is the “Moonstab,” or, maybe, the “Moonshaft”

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Conversation with the Cancer Letter

Coupled with the repeal of the Affordable Care Act, the administration’s proposed cuts to the NIH budget would be devastating for cancer patients, said Patricia Goldsmith, CEO of CancerCare, an organization that provide counseling, support groups, education, and financial assistance.

“Congress can fight over this, but the bottom line is the leader of our country has communicated his priorities, and those priorities set us back decades,” Goldsmith said.

Goldsmith spoke with Matthew Ong, a reporter with The Cancer Letter.



Matthew Ong:

You’ve worked with patients and researchers through many administrations, have you seen anything like this?

Patricia Goldsmith:

Never. Never. This move is unprecedented. And the fact is, I read all of the articles today and watched the press, there is only one word that came to mind about what is being released under the Trump administration, and that word is: barbaric. It is absolutely barbaric.

MO:

Would Congress be amendable to the White House proposal?

PG:

I think we’re facing a brave new world right now, so I really don’t know what the actions of Congress will be. I don’t know what the reaction is. Just to review a couple of facts, as I understand them:

First, NIH, it is suggested, is going to get a 18.29 percent decrease in funding, which is the

biggest funding decrease in the history of the NIH, as I recall. In addition, what I understand is this is going to translate into a \$1 billion decrease for cancer research at the NCI.

Yes, that's what I understand has been suggested. If that's correct, that's the largest reduction in the history of the National Cancer Institute.

In addition, I applaud President Trump's nomination of Scott Gottlieb to head the FDA. I also understand that there's going to be a doubling of the user fees at the FDA. I'm not exactly sure what that's for. What do we get for the doubling of the fees at the FDA?

Yes, we all want to make sure that we get drugs to patients faster, that we go through a process that allows that to happen, but I don't see anything articulated in the proposal as to what that directly translates into, with respect to doubling of the user fees. And, doubling the user fees has to have a major impact on the manufacturers of these products.

So, well, I see the numbers of the doubling of the user fees—I don't understand how that translates into a better process, a more expeditious process, and at the end of the day, the bottom line: a better way to get medications to patients.

MO:

Assuming Congress approves these cuts, what do you think would happen in your work with cancer patients?

PG:

I would see a huge impact, because it's also coupled with the repeal of Obamacare.

We looked at what the Congressional Budget Office has put out and, also, what seems to be the statistics of showing many, many, many individuals, perhaps, 10 to 20 million losing their insurance coverage. We also are seeing that Medicare funding could be jeopardized.

If you put all of this together, of repealing a system—Obamacare is not perfect, and it has its flaws, and it has its warts. But on the other hand, it has provided some insurance for many millions of people.

I think that there will be a decrease in those individuals that are insured, there will a decrease in funding of Medicaid, decrease in funding of research.

I would say that it's a bleak future if all these things actually converge in a way that I understand it at this moment.

MO:

What other initiatives might be jeopardized?

PG:

There's been so much talk, so much discussion, and so much hype about the [Beau Biden Cancer] Moonshot, and the fact that this was something that was under the then Vice President Joe Biden—and now may be taken into the private sector, one would hope—but when I think about the promise of the moonshot, there's absolutely no antonym to the moonshot.

I think about the “moonstab,” perhaps, at least in terms of what we have heard today, because there's just no antonym. So it is the “moonstab” or, maybe, the “moonshaft.” Those are the only things I can think of.

The last thing I'd like to say: as you recall, in my last interview with The Cancer Letter, I invited President Trump, who was then President-Elect Trump, to come to our offices to meet with cancer patients, and hear exactly what they're struggling with and what their hopes are.

I would like to reiterate that invitation, because it would be very enlightening to a man that doesn't understand cancer and doesn't understand the ramifications of what he's doing for our progress.

The president has sent a message about what he believes and what his priorities are.

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[Back to top](#)