

**Denise Dunn**

---

**From:** George Tilley  
**Sent:** Thursday, May 24, 2007 3:47 PM  
**To:** Susan Bonnell; Oscar Howell; Kara Laing; Nebojsa Denic(HCCSJ)  
**Cc:** Stephen Dodge; Pat Pilgrim; George Tilley; Joyce Penney  
**Subject:** Globe and Mail Letter May 2007

**Attachments:** Globe and Mail Letter May 2007.doc



Globe and Mail  
Letter May 2007...

I Folks,

Thanks so very much for sticking together to work through this issue. Seems like an up hill battle but in the end I still think we did the right thing. Clearly the story in the Globe and Mail has to be responded to as quickly as possible. I have attached my edits to Susan's original draft for your review and feedback prior to releasing.

Thanks  
George

Dear Editor:

I read with dismay Andre Picard's "Patients suffer when labs get it wrong" and feel compelled to correct a number of key points in this column.

Mr. Picard jumps to numerous erroneous conclusions, including assigning an error rate for estrogen-receptor testing for an eight year period, but the most concerning point to me is his assertion that we told breast cancer patients and the public nothing. In reality this is quite to the contrary.

A core team of health care providers were brought together at the time to make personal contact with every single patient whose original tissue we were sending to Mount Sinai for estrogen receptor retesting. We also did numerous media interviews. And, posted information on our website and placed advertisements in the local newspapers. Furthermore, as the test results were returning to us, we made sure that every individual had their personal information, whether there was a change, from their original test result or not.

All patients who saw a change from the original test result were reviewed by an expert panel including oncologists, surgeons and pathologists. From their review 117 of the patients whose results had changed were recommended for a treatment change. In December 2006 when we released this information publicly we spoke to this figure. There was never any deliberate attempt to hide the results of the review. We chose to focus on what we believed to be the most critical piece of information.

When legal action was initiated, it was not unexpected by me or any of the professionals closely involved in this process. Clearly we have to be accountable for our efforts. Patients/families have every right to take such action. We respect the judicial system and we have acted in keeping with that, allowing the legal matters to be tried fairly in a court of law and not in media.

I would agree with Mr. Picard when he says that the general public places great faith in laboratory testing. Although I am not a pathologist, one thing I have learned in last two years is that the science of this test – immunohistochemistry – is an evolving field with new advancements and understanding every year. Our decision to purchase a newer, more automated testing system for this purpose in 2004 was based on our desire to be on the leading edge and, moreover, to ensure that our testing was as consistent as possible for the benefit of our patients.

A lot has changed in both laboratory medicine and oncology in the last ten years, and we do not yet know what role these changing standards and practices may have had in our changing test results.

Eastern Health believes in and practices full patient disclosure practices. And we are committed to the cause of patient safety. In 2005 when we first became aware of a potential problem with ER-PR, we immediately began a review of the situation, we

Deleted: Care providers in our organization called

Deleted: as soon as the review had been initiated (October 2005).

Deleted:

Deleted: We

Deleted: And

Deleted: ed

Deleted: from Mt. Sinai

Deleted: in

Deleted: After the tests were reviewed,

Deleted: patients

Deleted: required a change in treatment

Deleted: to the

Deleted: t

Deleted:

Deleted: w

Deleted: just

Deleted: it

Deleted: Why hide what we know will come out in court?

Deleted: a surprise to

Deleted: to

Deleted: individual

Deleted: s

Deleted: I can say categorically that it did not ever influence our decision-making process and it never does in any case. The individuals

Deleted: involved in the lawsuit

Deleted: whatever action they deem necessary

Deleted: tried to

Deleted: myself

Deleted: burgeoning

Deleted: , new technology

Deleted: new

Deleted: not informed by suspicion of problems but rather

Deleted: by

suspended our own service, we sought an external laboratory service on an interim basis and we made what I consider to be a very bold decision, namely repeat these tests for patients going back as far as 1997 and finally advised the patients of what we were doing.

**Deleted:** evaluation process that ultimately led us to the

**Deleted:** decision to go back to 1997 and retest all patients.

The reason why we undertook such an extensive review was that we believed that if even one patient could benefit from such a decision, we wanted to ensure that every patient had that opportunity.

**Deleted:** a review

**Deleted:** had an obligation to ensure

And the very fact that we have done this retrospective, despite the anticipated reaction that would follow – something that, to my knowledge no other organization in the country has done – speaks to how far we are prepared to go is supporting our commitment to providing the best care possible to our patients.

**Deleted:** consequences

George Tilley  
President and CEO  
Eastern Health