

“Cancer in Childhood: A Catastrophe in the Family and in the Community”
By

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Of all the lectures in this archive, this is the most personal, the most pediatric, and the most clinical with no reference to health policy. Rather, it is as close to a heart-to-heart talk as an older physician can have with a group of younger ones in reference to the art of managing the child, the family, and the community when a child is dying or has died of cancer.

This lecture was given twenty years before this introduction was written; some things have changed in that period of time. For example, there have been tremendous advances made, not just in the management, but in the cure of leukemia in childhood and the management of some solid tumors in children. Survival of Wilms' tumor, has moved from 47 percent before chemotherapy to 97 percent after the advent of chemotherapy as an adjunct to cancer treatment.

I am old enough to have practiced in the time when radio stations would not let you use the word cancer on the air, but instead that you refer to it as “that dread disease”. When I first began treating cancer patients, I was a surgeon who played all the roles of what later became known as the oncology team, and I would never let myself be relegated to the role that some surgeons experience in being considered by that oncology team as nothing more than a technical adjunct.

The Children's Hospital of Philadelphia had an excellent oncology team before I left it, but I also practiced before the word oncology was in common usage. That team developed around my surgical service, because there was a time when I had the largest collection of solid tumors being seen currently by any surgeon practicing my specialty. Therefore, I never really relinquished my role as primary care physician feeling that obligation heavily. in spite of the fact that others saw it as their role, rather than mine.

No index appears here, because this is really a heart-to-heart clinical lecture; the advice of an elder physician to younger physicians about the responsibilities toward patient and family surrounding the death of a child from cancer.