

Interview: Wilson Pedreira Jr. Executive Director, Oncology and Hematology Center, Albert Einstein Philanthropic Society, Brazil



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Dr. Wilson Pedreira, executive director of the Oncology and Hematology Center of the Albert Einstein Philanthropic Society in Brazil provides insights into the innovative healthcare model implemented in this cutting edge cancer center, which proudly stood as the first of its kind outside the US to integrate the prestigious MD Anderson Cancer Network in 2014.

Given that you previously held high-level positions among leading diagnostic focused companies, such as Grupo Fleury and Grupo Delfin, which rationales counted towards your decision to come back to the medical and clinical setting and take over the helm the Oncology and Hematology Center of the Albert Einstein Philanthropic Society?

As a professional, I am continuously looking for new learning experiences which would allow me to leverage and develop the skills I have honed throughout my career. Being the executive director of the health business at Group Fleury and the vice-president of the Group Delfin provided my with a particularly valuable experience in the diagnostic field, which led me to closely work with both public and private hospitals. However, I never had the opportunity to run such a comprehensive healthcare organization as a hospital; hence I was highly motivated by the opportunity to set up and steer the development of an Oncology and Hematology Center affiliated to the Hospital Israelita Albert Einstein (HIAE), which is widely regarded as one of the best healthcare structures in Latin America.

On the other hand, cancer already stands as the second most common cause of death in Brazil after cardiac and cerebrovascular diseases, and I expect its prevalence to further gain in importance within our country's rapidly aging population. In this regard, Brazil clearly falls within the same trend as most developed countries around the world, emphasizing the need to offer dedicated, cutting-edge oncology clinics to Brazilian patients.

Furthermore, in Brazil as in many other countries of the world, a fee-for-service model still prevails across our health sector, which unfortunately generates inefficiencies and waste and nurtures incompetence. In 2016, Brazil's overall inflation rate reached 19.8 percent, but the quality of services accessible to our patients is far from increasing at the same pace as their cost. In a context of scarcity of resources, we moreover see that budget increasing is almost exclusively allocated to the purchasing of new drugs and medical devices while staff, emergency rooms, intensive care units, and inpatient care rooms are somehow neglected. In this regard, building a new multidisciplinary cancer center, whose services include medical, radiation and surgical oncology, as well as pathology, laboratory, diagnostic imaging and other supportive clinical services for both children and adults, emerged as a perfect opportunity to implement a more holistic, outcome-oriented and patient-centric healthcare approach, to an extent that was unprecedented in Brazil.

What were the main challenges you faced in the fulfillment of this objective?

Building the center's healthcare pathway in a manner that would allow all specialists and departments to work in a truly integrated, patient-centric manner was no bed of roses. Although the HIAE already held all the expertise and human resources needed to operate the center, we then had to design new processes and – above all – foster a complete mindset shift among physicians and healthcare professionals.

In this regard, becoming in 2014 the first cancer center outside the US to join the MD Anderson Cancer Network, a select group of hospitals and health systems with access to best practices, education, research and treatment protocols developed at Texas-based MD Anderson, tremendously helped us to reach our objectives across the entire cancer care continuum while mirroring MD Anderson's multidisciplinary, research-driven and patient-centered care.

Three years only after its establishment, I am proud to say that we have managed to develop and offer a holistic cancer care approach that is completely new in Brazil. In the grand scheme of things, our objective is now to operate as an agent of change across the Brazilian health ecosystem and contribute to move our health system from an outdated *fee-for-service* to a more efficient *fee-for-value* paradigm.

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Only 25 percent of the Brazilian population has access to the private health system. While developing this top-notch cancer center and implementing innovative healthcare pathway in Brazil, how do you ensure your efforts also benefit to the country's public health system?

Given its specific legal status, the Albert Einstein Philanthropic Society allocates a significant share of our benefits to public and social initiatives. As part of the Institute's social programs, we also run a public hospital given to us by the city of São Paulo, which we have fully equipped and where all the staff of the Oncology center work for a certain number of hours a week. Naturally, some protocols and processes vary from this public hospital to our Oncology center, but our fundamental objective is to raise care standards by strictly implementing National Comprehensive Cancer Network (NCCN) guidelines and the most important evidence-based protocols, in surgery and clinical oncology, in the public sector.

Looking at Brazil's public health system in general, I deeply believe that we urgently need to more broadly implement public-private partnerships and the great results fostered by this abovementioned project proves that public-private model can bring very interesting results to the Brazilian population. Furthermore, a more efficient management of public resources would definitely allow to offer higher outcomes without further increasing healthcare expenses although it makes no doubt that public spending to healthcare could also be significantly increased *[public health expenditure amounted to around 3.8 percent of the Brazilian GDP in 2014, but a 20-year spending freeze for all social expenses was approved by the Brazilian government in December 2016, e.d.]*.

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How would you describe the partnership vision followed by the Oncology and Hematology Center?

We strive to reach out to all parts of the entire healthcare value chain. Looking at pharmaceutical companies, we are rapidly advancing eye-catching partnerships with leading international companies including the likes of BMS or MSD for cutting-edge clinical trials and comprehensive education-oriented programs. In this regard, we truly want to see our relationships with pharmaceutical evolving from a purely transactional approach to win-win partnerships and we are glad that some of the most innovative pharmaceutical companies have already accepted to join forces and build sustainable projects in the long term.

In the meantime, we are well aware that we need to partner with payers, namely private health insurers. Within a rather short period of time, we have already agreed on innovative risk-sharing schemes which will ensure that we can further develop our value-based approach. Naturally, developing these innovative schemes and partnerships is no easy task, as we bring together parts of the healthcare pathway which are not yet used to closely collaborate.

In this regard, I believe more time is needed to foster mutual trust among all stakeholders. On the other hand, Brazilian stakeholders have no choice but to embrace new collaborative models: 70 percent of all private healthcare expenses in Brazil are financed by private companies, but the latter are reluctant to increase their these expenses in a context marked by poor economic performance and rampant inflation. In the meantime, 75 percent of the Brazilian population exclusively relies on the public health system and does not have access to the private healthcare system. Given the increasing cost of oncology treatments and the groundbreaking technologies that are set to soon reach the market, we need to design innovative access models that would allow an increasing share of the population to benefit from high quality healthcare services.

What is your final message for our international readers?

Brazil is the sixth largest pharmaceutical market in the world and it definitely holds eye-catching growth and development opportunities; nevertheless, the current architecture of our health system is not sustainable in the long term. In the current Brazilian ecosystem and for the years to come, the only way forward is to better integrate all parts of the value chain and jointly design innovative approaches that would allow us to overcome the challenges generated by the aging population.

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