Favet L. In response to: "Caring for the Professional Caregivers in Cancer Medicine: An Overlooked Necessity" by Marcus Vetter. *healthbook TIMES Onco Hema.* 2025;24(2). doi:10.36000/HBT.OH.2025.24.179

COMMENTARY

In response to: "Caring for the Professional Caregivers in Cancer Medicine: An Overlooked Necessity" by Marcus Vetter

Laurence Favet[1]

[1] Medical Oncology FMH, 21 Rue Chantepoulet 1201 Geneva, Switzerland

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Letter to the Editor

In response to: "Caring for the Professional Caregivers in Cancer Medicine: An Overlooked Necessity" by Marcus Vetter

Vetter M. Caring for the Professional Caregivers in Cancer Medicine: An Overlooked Necessity. healthbook TIMES Onco Hema. 2024;19(1):16-17. doi:10.36000/HBT.OH.2024.19.134
https://onco-hema.healthbooktimes.org/article/121109

Dear Colleague,

Thank you so much for your Editorial about '*caring for the professional caregivers.*' It is so important to talk about it.

There is actually a burden that I personally feel very strongly, and that you did not mention: this is the feeling that we are – '*as clinical oncologist prescribing so costly drugs*' – also deeply responsible for the health costs. This is – in a way – not true, of course: as practitioners, we have no possibility to decide the official prices of those drugs that are so expensive that I often feel ashamed to prescribe them.

We truly and sincerely want the best for our patients. They are in front of us, trusting us to propose the best treatment for them. However, I find it very hard to hold the responsibility to co-bear the financial burden linked with the prescription of CAR T cells for an 80-year-old patient with excellent performance status, or long-term new-generation androgen inhibitors for an elderly patient with prostate cancer...This feeling is reinforced by the fact that WE have to spend time justifying our decisions every day (that would not be the case if the treatment were less expensive...) in front of medical insurance and politics. I do not feel that the administrative burden itself is so hard. What is really heavy is that politics and medical insurance, as well as society make us feel as if we had to justify and almost excuse ourselves to practice such an expensive medicine. This is responsible for a powerless feeling that I often feel and which is not at all linked with the fact that we deal with death, nor with disease we often cannot cure.

And this feeling is strongly linked with the thoughts that I might give up medical oncology, even though I love this specialty that I have been practicing for 20 years.

High-quality oncology and costless medicine are not compatible. Dealing with 'injonctions paradoxales'/'doubles contraintes' every day is exhausting.

Best regards and again, thank you so much for your article.

Dr Laurence Favet
Medical Oncology FMH
21 Rue Chantepoulet
1201 Geneva, Switzerland

Author's response

Dear Colleague,

Thank you for your deeply honest and courageous message. Your words touch on the crucial and often unspoken reality that many of us in clinical oncology experience, yet rarely articulate so clearly.

You are absolutely right — while discussions around caregiver burnout often focus on emotional exhaustion from dealing with suffering and death, there is another, subtler but equally heavy burden: the ethical and psychological weight of prescribing high-cost treatments in a system in which the financial implications are increasingly pushed onto the shoulders of clinicians.

The tension between our unwavering commitment to providing the best care to our patients and the pressure to justify the cost of that care is not just administrative — it is moral. Feeling conflicted, even ashamed, when prescribing a potentially life-changing but expensive therapy is not only painful; it is unjust. We did not set the prices. And yet, as you eloquently expressed, we often find ourselves in the uncomfortable position of having to "apologize" for offering what is, in our best judgment, the most appropriate care.

Your mention of "injonctions paradoxales" — double binds or conflicting imperatives — captures this perfectly. We are asked to be excellent, evidence-based, compassionate caregivers, while simultaneously acting as gatekeepers for financial sustainability. These demands are not just contradictory; they are unsustainable. And over time, they wear down even the most dedicated ones among us.

It is heartbreaking to hear that these pressures have made you question your place in a field you have served for 20 years — a field you still love. Please know that you are not alone in this. Your voice matters, and bringing these tensions into the open is a powerful first step toward change.

Thank you again for sharing your thoughts with such clarity and depth. I hope that we can continue this dialogue and work toward a more honest, supportive and fair environment for all of us who have dedicated our lives to caring for others.

With warmest regards and deep respect,

PD Dr Marcus Vetter
Chief Physician
Head of Center Oncology & Hematology
Cantonal Hospital Baselland (KSBL)
Liestal, Switzerland
marcus.vetter@ksbl.ch

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