Susan G.
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OREGON AND
SW WASHINGTON

June 5, 2015

The Joint Ways and Means Subcommittee on Human Services
C/O Representative Nancy Nathanson, Co-Chair
Senator Alan Bates, Co-Chair
Oregon State Legislature
Salem, Oregon 97301

RE: SB 608 – Relating to Palliative Care

Dear Co-Chair Bates, Co-Chair Nathanson and Members of the Committee:

Thank you for hearing SB 608 and inviting testimony from Susan G. Komen Oregon and SW Washington. Susan G. Komen is a non-profit, nonpartisan organization and the largest private funder of breast cancer research and support in the United States. The Mission of Susan G. Komen is to save lives and end breast cancer forever through empowering individuals, ensuring quality of care for all, and energizing science to find the cures. As a member of the coalition in support of SB608, Susan G. Komen supports the proposed legislation that improves quality and delivery of care services through creation of a Palliative Care and Quality of Life Interdisciplinary Advisory Council within the Oregon Health Authority.

Breast cancer is the most common cancer among women, accounting for nearly one of every four cancers diagnosed in U.S. women. Oregon and Washington have some of the highest breast cancer rates in the country. This week in our state, 70 women and men will hear the words “you have breast cancer” and another 10 women and men will die. Many, if not most of those who die have been diagnosed with metastatic breast cancer, an advanced stage of breast cancer where the local tumor has spread to other parts of the body, While new treatments are being considered every day, primary to the care of these individuals is symptom management, improving and sustaining quality of life, and prolonging their survival – all three elements, the corner stone of palliative care.

I know from personal experience the influence palliative care has in the coordination and delivery of health care. In 2008, my only sister was diagnosed with Stage III Ovarian Cancer. She lived only five weeks and while she received good care, it was at times fragmented and I found myself, as the person who helped to coordinate her care including the goals of care decision conference as she was dying. Contrast this experience three years later in 2011, when my third brother was diagnosed with Stage IV Lung Cancer. He only lived six weeks from his diagnosis. However, from the moment of his first visit when he learned he had aggressive cancer, palliative care walked along side our family in the delivery of care. While we would not have wanted the outcome, the care we received was coordinated and throughout the journey we felt completed supported.

Creating the proposed interdisciplinary council will help to ensure that palliative care is delivered in an integrated approach that supports patients and families in receiving the best care possible. I want to encourage your support of this bill that will make a difference in the lives of Oregonians.

Once again, thank you for hearing our testimony today.

Best regards,

Margaret Riggs Klein, RN, MS, MSN, JD, Director of Programs and Operations