

CORRESPONDENCE

Response to letter entitled: letter comments on: Pathologist-initiated reflex testing for biomarkers in non-small-cell lung cancer: expert consensus on the rationale and considerations for implementation



We thank Drs Tavora and Cordeiro¹ for their interest in our paper² and their support for the argument we make for reflex testing. Their case for a ‘tissue navigator’ to monitor the specimen journey is well-made.

It goes without saying that all those involved in the management of patients with lung cancer should be aware of precisely where in the pathway any specimen involved in the diagnostic and analytical process lies. A particular frustration for those at the front line of management is an inability to answer questions from and allay the anxieties of patients and their loved ones about this complicated multi-stage process. Lack of information about where the specimen rests along this pathway and of the reasons for any delays makes managing expectation difficult, if not impossible. As well-described in their letter, the integration of a tissue navigator into the lung cancer team can be of enormous value in this regard.

Unfortunately, however, these valuable individuals can be difficult to find and fund. The role of tissue navigator requires not only a clear understanding of what each stage in the pathway involves, of where problems are likely to arise and the pinch-points are, but also the ability to interact positively with a range of medical and scientific personnel. Identifying individuals with these skills is difficult and they do not come cheap. Most are employed on ‘soft’ money and often on time-limited contracts. Ideally, of course, they would be an integral part of the lung cancer unit and embedded in its activities.

Notwithstanding the undoubted value of tissue navigators, the very fact that there is such a need reflects the unnecessary complexity and inefficiency of many of the existing pathways. In an ideal world, the entirety of the diagnostic and analytical processes would take place in a single location in the setting of an integrated and properly resourced pathology and genomics laboratory, which would ultimately remove the need for such a role.

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REFERENCES

1. Tavora F, Cordeiro J. Letter of comment: Tissue navigator, an important position in the pathology laboratory in the precision medicine era. *ESMO Open*. 2023.
2. Gosney JR, Paz-Ares L, Jänne P, et al. Pathologist-initiated reflex testing for biomarkers in non-small-cell lung cancer: expert consensus on the rationale and considerations for implementation. *ESMO Open*. 2023;8(4):101587.