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# Kashyap Patel: An Oncologist a Million Times Over

Written by Carina Storrs, PhD

When Kashyap Patel, MD, was growing up in India, his father would drop him off at the Mahatma Gandhi Museum near their home in Gujarat state every other weekend so he could learn about the great activist. Dr. Patel, now age 60, recalls looking at all the pictures and writings, but one lesson from the museum became his life's guiding principle: "You walk with the people. You don't walk over them, you don't talk over them,"

Dr. Patel said. Dr. Patel committed to becoming a physician when he was a teenager, and from that moment on, he knew he wanted to help as many people as he could. After medical school and his initial training in India, he started a private community oncology and hematology practice in the city where he grew up, Ahmedabad. Although Dr. Patel's later training in the U.S. made him question at times whether he would instead prefer to work in an academic medical setting, his heart always led him back to community medicine, and eventually to Carolina Blood and Cancer Care Associates (CBCCA), a pair of oncology practices in South Carolina. Dr. Patel is currently Chief Executive Officer of CBCCA and President of the Community Oncology Alliance (COA). Two years ago, Dr. Patel created an initiative called No One Left Alone

NOLA that may allow him to make his greatest contributions yet to help people. Through the NOLA Foundation, which is now a nonprofit organization, Dr. Patel is creating and testing programs to help disadvantaged patients at CBCCA receive cutting-edge cancer care, and through partnerships with local groups, providing food and shelter assistance. In their pilot phase, NOLA programs have connected all the patients identified as needing it – 48% of the practice population – with financial support to cover the cost of cancer medications. The initiative also has been associated with an increase in the proportion of patients who receive next-generation sequencing or other genomic testing, from 30% to 85%, which changed the treatment plan for 20 to 30 patients out of about 350 who received testing. The goal is for

NOLA programs to serve as a model for community oncology clinics far beyond CBCCA. “I am most proud of creating a pilot that is scalable, that is sustainable. All it requires is breaking the silos of philanthropic entities,” Dr. Patel said. “I still feel the U.S. has enough philanthropies, social workers, and other partners who are willing and able to go above themselves for the public cause. It just requires us to talk to each other and to make sure that we build an equal system.”

The thought of becoming a physician didn’t cross Dr. Patel’s mind for much of his childhood. He had no doctor role models in his middle-class family, although his dad, Bhogilal Mohalal Patel, was an accomplished civil engineer in India. Then, at age nine, Dr. Patel happened to see a Bollywood movie, called Anand, about a man dying of a rare cancer who still developed friendships and made the most of his remaining days. The young Dr. Patel was moved to tears and kept thinking about the film’s hero. His dad planted the seed that he could become a doctor and help people with that disease. By the time Dr. Patel was a teenager, he had started to think about becoming an engineer, but his father reminded him about Anand once again directed him toward the path of medicine. Dr. Patel thinks his father wanted him to become a doctor because at age nine he lost his own mother, Dr. Patel’s grandmother, to pneumonia. A doctor tried to drive from the city to the family’s village to bring her penicillin, but rains had washed away the mud roads. “My father felt the infrastructure needed to change, and that is why he became an engineer. But he felt that if there were a doctor locally, they could have helped his mom,” Dr. Patel said. When Dr. Patel graduated from medical school at Gujarat University in 1987, he set his sights not on oncology, but on neurology and cardiology like many of his classmates. But as luck would have it, he could not get a paid position in these specialties at Bombay Hospital & Medical Research Center, where he did his fellowship, and instead wound up in their hematology and oncology clinic. The work rekindled all the emotions Dr. Patel felt watching Anand, and he realized the work was truly his calling. “If I was born a million times, I would have become an oncologist,” Dr. Patel said. Soon after starting his own small clinic in his hometown, Dr. Patel felt that he needed more training, especially if he was going to try to attain, as he put it, a “sense of perfection.” He carried out a four-year hematology fellowship in the U.K., at the University of Manchester, and then an oncologist in the U.S. suggested he look at opportunities there. Dr. Patel got approved within five days for a special green card, for people of “extraordinary ability,” that did not require him to already be employed and made it easy for his wife and young son to accompany him. Dr. Patel recalled, “When I went to the immigration office, the officer literally stood up and said, ‘I welcome you to my country, Dr. Patel.’ I was moved. This is the country [where] I want to be.

Dr. Patel’s first job in the U.S. was as an emergency medicine resident at Jamaica Hospital Medical Center in Queens. “It was the center of action in New York at a time that crime was skyrocketing,” he recalled. Even though Dr. Patel cared for patients with stab wounds there, it is the story of a seemingly less urgent patient that has stuck with him. A man would come to the emergency room at Jamaica Hospital every few weeks only for a shower, not for any treatment, and he would start playing his guitar in the middle of the night. Dr. Patel was moved by how nice the man was. “I still talk with my colleagues about him,” Dr. Patel said. “Those are the kinds of moments that made me feel that medicine is above and beyond just treating somebody’s wounds and giving them antibiotics.”

But his next position, as a hematology and oncology fellow at Thomas Jefferson University in Philadelphia, carried Dr. Patel away from patient care and into the world of academia. He delved into early clinical studies of immunotherapy to treat melanoma, building such an impressive publication record that his mentor at the university wanted to find a way for him to remain on the faculty there. This crossroad in his career reminded Dr. Patel of the critical moment that Gandhi, after returning to India from South Africa, decided against working with affluent lawyers to fight for independence from Britain and instead began living with sharecroppers to understand the harmful effects of colonization. Although Dr. Patel said that doing academic research would still help patients, “I realized that I would rather act at the local level. As Dr. Patel was pondering his path back to community oncology and considering job offers in the northeast U.S., he received an act of “divine intervention,” as he calls it. An old friend from medical school was living in Charlotte, North Carolina, and called Dr. Patel for the first time in about 10 years to invite him for

a visit. The friend introduced Dr. Patel to James Welsh, MD, who was a founding member of CBCCA, and the two had an immediate connection. “He was incredibly kind, genuine, and somewhat of a perfect human being to work with,” Dr. Patel said.

Although Dr. Welsh was not looking to hire another physician, he offered Dr. Patel a position that he accepted without hesitation. In 2003, about a year after Dr. Patel joined CBCCA, Dr. Welsh asked him to become a managing partner and start running the practice.

In addition to treating cancer patients, Dr. Patel sees patients with a range of conditions. He is board certified in oncology and hematology, internal medicine, and integrative medicine and treats patients in all those areas. Dr. Patel said he believes in treating “the whole patient ecosystem” – he is not there to simply treat cancer, but to treat people, and his relationships weave themselves through his work as a doctor.

One of Dr. Patel’s first projects at the helm of CBCCA was to transform one of its locations, about a 45-minute drive from Charlotte, from the bare-bones 1,000-square-foot clinic that Dr. Patel first visited into what he envisioned as an “uplifting environment.” It is now a 5,000-square-foot building featuring an indoor atrium with large plants and a fountain, and patients receive their chemotherapy in chairs overlooking the atrium. That atrium was home to a series of conversations with a patient who had advanced lung cancer that served as a basis for Dr. Patel’s book *BetweenLifeandDeath:FromDespair toHope*. Published in 2020, the book follows his relationships with patients who had terminal cancer and how he helped them prepare to die gracefully.

“It is a nice environment away from the standard clinic type of atmosphere,” said Vijay Verma, who met Dr. Patel about 20 years ago through mutual friends and has been a close friend ever since. Verma has chatted with Dr. Patel in this space about the results of his checkups and regular tests, which he has been getting at CBCCA. Even though he does not have cancer, Verma said that “I always ask his advice.” Verma, who is the retired vice chancellor for North Carolina A&T State University, remarked that Dr. Patel “is always forthcoming to help people.”

Throughout his career, Dr. Patel has made time every evening when he gets home to meditate on his terrace. But even still, losing his father in early 2019 led Dr. Patel to take stock of his life and busy career. **He came to a realization: “I have not done anything for myself, for this physical body.”** Dr. Patel reduced his clinic hours and started making plans to spend more time outside the office. He and his wife enjoy visiting Verma and his wife in the North Carolina mountains, and the two couples travel to national parks and around the world together. Dr. Patel paid for 50 golf lessons at the course that he lives next to – though he admits they have, yet, gone unused. But in his extra time after reducing clinic hours, Dr. Patel started reading more about cancer health disparities. In 2020, he estimates that he spent about 1,500 hours reading more than 300 research papers on the subject. “I could wake up in the middle of the night and talk about the numbers,” Dr. Patel said. He learned that eliminating socioeconomic disparities would prevent 34% of all cancer deaths among U.S. adults age 25 to 74. “If a drug improves outcomes by 7%, it gets approved by the FDA, so why can’t we address these determinants of health [such as stress and lack of access to transportation] that actually can improve outcomes?” Dr. Patel said. Because it was 2020, Dr. Patel was also witnessing firsthand how the COVID-19 pandemic exacerbated the already profound health and social inequities among his cancer patients. And at the end of the year, Dr. Patel was nominated to become President of COA, after having served in other leadership roles including as Vice President. “I felt that, yes, I must stand up to the cause. I was given the microphone from COA as the leader. It was probably meant to be.”







In what Dr. Patel considers another case of divine intervention, he shared with Holly Pisarik, JD, who was receiving non-cancer treatment at his clinic and is the Senior Vice President of Advocacy and Policy Counsel for the South Carolina Medical Association, some of the health disparities information he'd learned and how he wanted to start an interventional population health study. The two started mapping out the priorities for the NOLA pilot program. In the first phase, which ran from January to December 2021, CBCCA hired three more staff members to understand patients' financial situation, including insurance coverage and access to transportation, and coordinate with foundations, pharmaceutical companies, and other stakeholders to reduce patients' medical costs. Among the nearly half of the practice population who received support through the program, this phase connected patients with resources that covered around \$250,000 in out-of-pocket costs for oral drugs and nearly \$1.8 million in costs related to parenteral drugs. In this first phase, the direct cost to CBCCA for the extra staff and program-related resources was \$150,000. In ongoing and upcoming phases, NOLA is partnering with the startup company Community Clinical Oncology Research Network, of which Dr. Patel is founder and chairman, to help patients access genomic testing, working to expand hereditary cancer testing, and collaborating with partners to increase patient access to clinical trials.

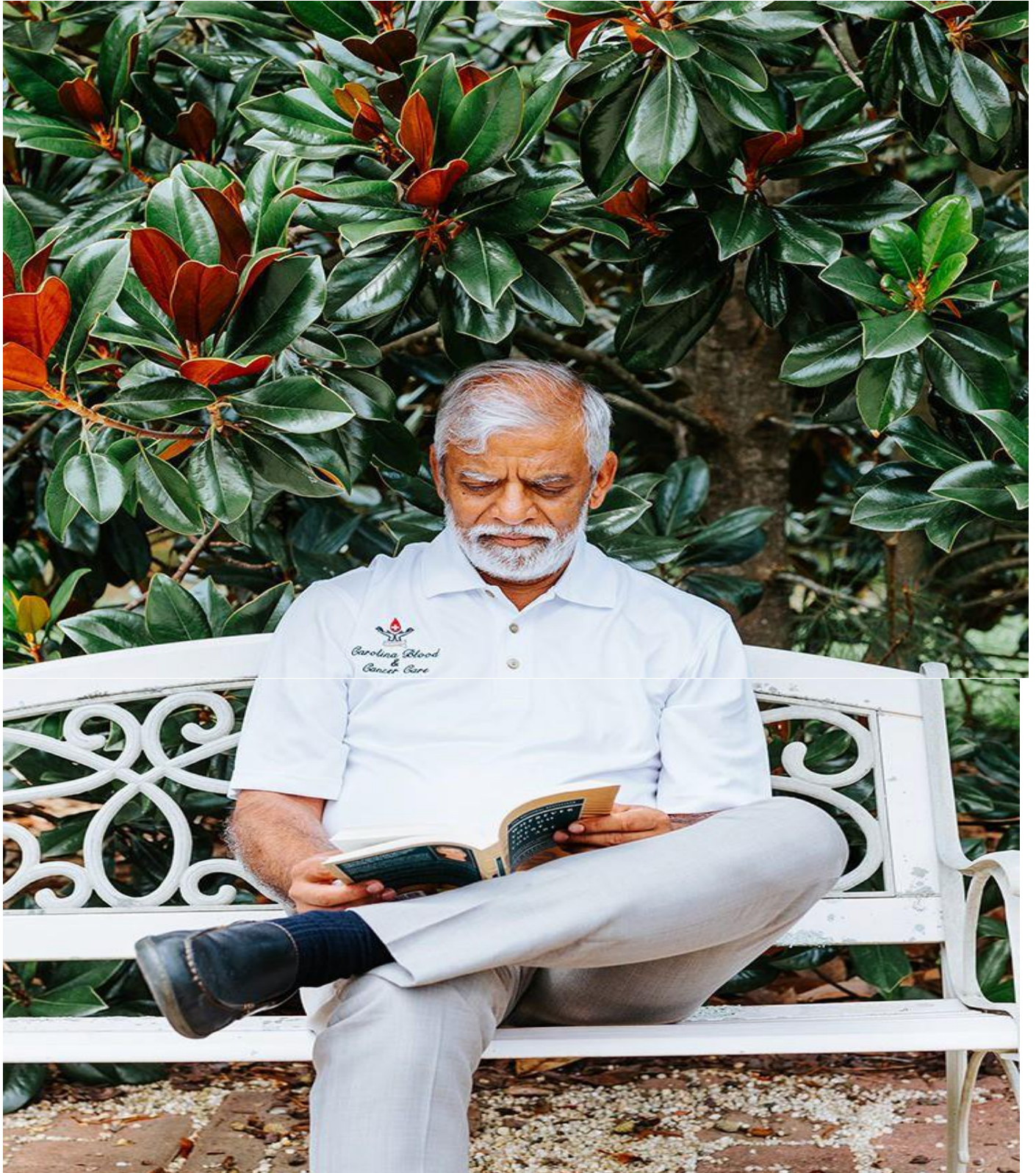
NOLA is also collecting data on social disparities and has found that about 1 in 4 patients who were coming to CBCCA for cancer treatment did not have enough money to pay for food or utilities or were at risk of becoming homeless, and three patients getting treatment were living in their car. NOLA started partnering with [Pathways Community Center](#) in Rock Hill, South Carolina, a nonprofit organization that, as Dr. Patel said, "has all the things that complete the ecosystem" for patients outside the clinic. The group is connecting patients in need with food banks, utility payment assistance agencies, and temporary shelter.

NOLA "is really a first" in terms of what a COA President has endeavored to do to reduce cancer health disparities, said Ted Okon, MBA, who has been COA's Executive Director for more than 12 years and is a close colleague of Dr. Patel. Okon remembers how Dr. Patel, after becoming President, spoke urgently about disparities with his characteristic passion. "He said, 'I must do something here. I have to not just do what I have been doing, but I have to do this more systematically, that we will be able to take [it] elsewhere as well.'" Dr. Patel was recognized in 2022 for his work in community practice in The ASCO Post Narratives in Oncology, an annual special issue commemorating oncology leader. He is among the first community oncologists to receive this distinction. Dr. Patel is now working with members of the South Carolina government to secure funding for NOLA in the state budget. He and his colleagues are sharing their findings from the NOLA pilot with other community practices in South Carolina and Georgia and looking for resources to support the work in those areas.

Dr. Patel has long felt the urge to spend several months in India every year, practicing medicine in the area where he discovered his passion. He hopes that NOLA will be in a stable place with secure funding in a couple years so that he can move forward with that plan. Over the years, he has regularly offered second opinions for patients in India and brought about 50 patients from his home country to receive care at CBCCA. He is also in talks with the hospital in Gujarat state to advise the creation of its new oncology department.

The break that Dr. Patel took in 2020, with reduced clinic hours, may end up being his only retirement for a while because, in addition to expanding his role as an oncology leader, he has plans to write another book. Dr. Patel's writing career, like much in his life, has roots in his relationship with his father, who himself considered becoming a writer as a young man. Dr. Patel's new book will add to the small library that he and his son have now produced, which in addition to *Between Life and Death*, features a photography book by Dr. Patel and a memoir that his son authored about the difficulties that Bhogilal Mohanlal Patel overcame in his life. Dr. Patel's new book will explore how happiness and mindfulness may be able to affect features of our genomes and repair damage to our cells.





If Dr. Patel could imagine any other life than being an oncologist, it would have been to study the mind-body connection and understand the potential of the mind to overcome materialistic desires and find true happiness.