

# Oncologist in the Hot Seat



An All in Cancer/Women in Cancer Series

Featuring:

**Dr. Joy McCarthy**



Dr. Joy McCarthy is a Medical Oncologist and Division Chief of Medical Oncology with the Cancer Care Program of Eastern Health in St. John's, NL. She is a Clinical Associate Professor within the Discipline of Oncology, Memorial University of Newfoundland. Dr. McCarthy completed her Medical Degree at Memorial University of Newfoundland in 1996 and her certifications in Internal Medicine in 2000 and Medical Oncology in 2001.

Dr. McCarthy is a member of the Beatrice Hunter Cancer Research Institute, CAMO, ASCO, ESMO, CCTG, Cancer Care Program's Leadership Team and Clinical Trials Committee. Her areas of interest include breast, genitourinary and head and neck cancer. She is a busy mom of three and an avid runner.

---

**I'm a fourth year undergraduate student who is planning to pursue medicine and would like to gain more insight into this career path and your perspective. What do you know now that you wished you had known before pursuing a career in medicine and oncology?**

I wouldn't have changed a thing! I loved biology in high school and I knew I wanted to pursue a science degree in university. I started working at the basic science research lab at the medical school. That's where I was introduced to medicine and other jobs in the medical field. That's also how I started to work at the Terry Fox Cancer Research Lab. I trusted my instincts and listened to my mentors **Dr. Laura Gillespie** and **Dr. Gary Paterno**. They encouraged me to seize opportunities and consider things I never would have considered. **Dr. Scott Berry** was also a mentor later on when I was in the medical oncology training program at UofT. He was one of my mentors who really understood the importance of maintaining a work-life balance. He encouraged me to go back home whenever I felt like I needed to, which I really appreciated. I was afraid they [UofT] would try to convince me to stay in Toronto for a fellowship and PhD, but he was always very positive and supportive.

My advice to you would be to explore every opportunity available! Working in a lab and with a researcher is great experience. I also recommend talking to your own family doctor about medicine. It's best to immerse yourself in the medical world and try different things. If you are interested in something in particular, keep working at it and sometimes the doors will open and you'll be able to pursue that interest. Be sure to listen to the people around you who are more experienced. You don't know which door will open or which career path you'll like until you try it out and talk to the people in that field.

***"Explore every opportunity available!"***

**Looking back, is there anything in your career path in medicine that you would do differently?**

The very first day of my interview in Toronto, **Maureen Trudeau** and **Frances Shepard** looked at me and asked “where do you see yourself in 10 years?” I said “I see myself in St. John’s Newfoundland as the Division Chief” And here I am! Before becoming the Division Chief, I was the Director of Clinical Trials 7-8 years. I had some research goals I was not able to accomplish, because of Newfoundland funding issues. But I knew that just because things couldn’t be the way I wanted them to be, doesn’t mean that I wouldn’t have the opportunity to change it later. Overall though, I wouldn’t change anything.

I had never considered myself to be an organized, people person, but that’s how my mentors saw me. It’s hard in high school or early university years to truly figure yourself out. I found it very helpful when someone gave me feedback of what they saw in me. This also helps to figure out a career plan. Make sure you have set goals and to follow them. Don’t just sit back and wait for things to happen.

**I’m a 2nd year resident considering medical oncology as a subspecialty. The oncologists I’ve met all seem very passionate about their career. What excited you most about oncology and motivated you to pursue this as a career? What are you most excited about for the future?**

What excited me most about medical oncology was the potential! Back in the late 1980s and early 1990s, there weren’t many drugs available. I knew there was so much more to be done, and that there would be big pharmacological advances in years to come. Indeed that has been the case! Take for example the breakthroughs in targeted therapy and immunotherapy. The specialty is ever changing.

The other aspect of this career that motivates me is the people. After I became more involved in medicine, I realized that people enjoyed talking to me, and I enjoyed talking to them. Patients appreciated when I listened to them. I remember having a family doctor who would just be tapping into a computer while I talked and would not look at me. I felt like I wasn’t listened to. For that reason, I go to clinic without any pens or paper or electronics. I sit in front of the patient and I am there with them fully. The connection we have with our patients is privileged and is incredibly rewarding.

**What do you like most about working on the East coast? Do you think there are challenges for oncologists in the Maritimes that are unique from the rest of Canada? If so, how do you overcome them?**

I did all my training off The Rock. I did my internal medicine in Halifax, and I did my medical oncology in Toronto. I met different kinds of people and learned different ways of doing things by doing my training outside of Newfoundland. But I could not wait to come back home. The people here are so appreciative. This place gave me my undergrad degree and my medical school training and I wanted to come home and give back. I felt the importance of paying it forward. The weather sucks, so people don’t come home for the weather. We come back for the people and a slightly slower way of life than downtown Toronto.

*“Just because things couldn’t be the way I wanted them to be, doesn’t mean that I wouldn’t have the opportunity to change it later”*

In 2001, we had only 4 medical oncologists in the entire province. We now have 10 MedOncs, 8 RadOncs, 6 GPOs and 2 gynecologic oncologists. When I first moved back home, approximately 23 oncologists had come and gone over a 10 year period. But ever since then, there have only been about approximately 4 oncologists who have left. I think the biggest draw to Newfoundland is the appreciation that colleagues have for each other and that the patients have for their physicians. I'm a provincial oncologist. When I'm on call, I'm responsible for all non- gynecologic, solid-tumour cancer patients from the entire province – including Labrador. I really enjoy the provincial focus, but it can be very difficult when my patient is 10 hours away. So we rely on the local family doctors.

We now have a PET scanner, but before we had been practicing without a PET-CT. In Newfoundland and Labrador, we don't use private infusion clinic in cancer care. Until now, we have gotten everything we have ever asked for. However, these days are coming to an end due to fiscal restraints. I think we're doing as well as we can right now. In my opinion, the biggest challenge we are facing is the threat of a two-tiered system. We also have very few trials available for our patients. For instance, right now I can't get immunotherapy for head and neck cancer. There are continued challenges related to funding and it is very difficult to predict how our practice and patients will be affected. But this isn't that unique to the rest of the country.

***“But I tell him that I don't need cheering up because today was a lot more good than bad”***

**I'm interested to know if you “turn off” the doctor role when you go home. Do you separate your work life from other aspects of your life? Is it more about finding a balance between the two?**

Absolutely! I walk through that door and I have 3 youngsters, a husband, and 2 dogs to be with. There isn't much time to think about work when I am home. I don't talk about my patients.

But don't get me wrong, my kids know what I do for a living and that it can be very challenging. My oldest son in particular has a habit of trying to cheer me up when I get home. He'll do this by telling a joke or joking about what I do all day. But I tell him that I don't need cheering up because today was a lot more good than bad. That's the extent of our conversation because I've got baseball, basketball, hockey, gymnastics, dogs that need walking, a mother that needs talking to, and someone's lunch to be made. Between 6:00 PM and when I go to bed, I'm too busy to be worrying about work. I try to shut out work, but I can't completely shut it down. We're all human after all!