

Growing Up in a House Filled With Science Leads to a Career in Breast Cancer and Health Outcomes Research

Debra Patt, MD, PhD, MBA

By Ronald Piana

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Debra Patt, MD, PhD, MBA, Executive Vice President of Policy and Strategic Initiatives for Texas Oncology, was reared in Plano, Texas, a city in the sprawling Dallas–Fort Worth metroplex. “My father was an electrical engineer with a PhD, and all throughout my childhood, I was exposed to the wonders of science as a way to explain how parts of the world worked. We had an oscilloscope and telescope in our home, and I remember my father waking me in the middle of the night to go look through the telescope at meteor storms and a lunar eclipse. And my early experience in science instilled in me a love for asking hard questions and using knowledge and investigation to solve complex problems. So, although there were no physicians in my immediate family, a love of science definitely helped steer my path toward medicine,” said Dr. Patt.

She continued: “My mother has an exuberant energy. She is an incredibly creative and fun person who was always involved with new and exciting adventures, something to make each day in our home a celebration of life. She is also a very compassionate person, and I owe a lot of my passion to help patients with cancer to her as a role model. There was always a sense of perseverance to get things done in my home, and my parents encouraged me to pursue my interests and education to help change the world.”

Debra Patt, MD, PhD, MBA

TITLE: Executive Vice President, Texas Oncology

A Budding Career as a Bench Researcher

Dr. Patt attended public high school in Plano, where she had the opportunity to take advanced courses in mathematics and science before college. In 1992, Dr. Patt entered The University of Texas (UT) Austin studying zoology in the honors program, setting her sights on a career as a research scientist.



**MEDICAL
DEGREE:** MD,
Baylor College of
Medicine; PhD,
The University of
Texas School of
Public Health

ON THE FUTURE OF U.S. HEALTH-CARE POLICY: “I see policy initiatives coming to fruition that will support all our patients, no matter what their socioeconomic status or location is. For example, in Texas, we see a lot of rural patients, many without broadband access. So, what can we do on the legislative and regulatory fronts to ensure these patients have the same access to quality cancer care as others do? The answer is better health-care policy.”

“During my first year at UT, I was awarded a Howard Hughes Fellowship and began to work in a molecular biology laboratory, focusing on an isoform of the estrogen receptor. It gave me an understanding of molecular medicine, but on a broader level, we were asking laboratory-based questions to facilitate scientific discovery, and the appeal of bench-to-bedside research became evident. I worked in the same research lab throughout my entire undergraduate career, and I really enjoyed it. The head of the lab, Dr. Jim Skipper, was my mentor and told me that if I wanted to do bench-to-bedside research, I should pursue an MD/PhD program in medical school,” said Dr. Patt.

After receiving her BS with honors at UT, Dr. Patt went through an exhaustive application process as she sought out a medical school that offered an MD/PhD program that would fit her career aspirations. “In 1995, I was accepted to Baylor College of Medicine in Houston, and that year, Baylor changed their curriculum to a new ‘shook-up curriculum.’ Unlike the traditional path involving 2 years of didactic coursework in the lecture hall followed by 2 years of clinical work, Baylor shortened the didactic work to 18 months, and put us in the clinic the first week of

medical school. This structure was a radical departure from tradition but is now common in medical schools and was important for me,” said Dr. Patt.

A Patient With Cancer Prompts a Career Change

Right out of the gate, Baylor’s “shook-up curriculum” had a career-changing effect on the young medical student who had been bent on a career in the research lab. “It was my first experience in a clinical setting, and one of the first patients I saw was a Mexican woman who was dying of metastatic cervical cancer. Women shouldn’t commonly die of metastatic cervical cancer, as it is highly preventable and very treatable. This patient didn’t have access to health care, and it resonated with me that you could have wonderful advances in science that wouldn’t translate into patient benefit without good health-care policy to bring treatments to patients.”

She continued: “That experience made me realize several things about access to care that have remained important to me in my career. First, it spurred my interest in the systems of health-care delivery and identifying and repairing system failures to improve patient care. Second, I learned health is a journey, not an event, with infrastructure investment required in different parts of that journey to improve our health-care system as a whole. I recall vividly meeting with the patient and then going home and telling my parents that I’d changed my mind about lab research and instead I was much more interested in how medical care was impacted by health policy. That experience was instrumental in my decision to leave laboratory research and pursue additional education in business, public health, and health economics,” said Dr. Patt, adding, “So, I rearranged my schedule to take extra courses at the school of public health,

which wasn't really done at the time. I had to get special permission from the Dean of the medical school, who was really supportive, actually. He said he didn't mind me asking for a scheduling accommodation, and that I should consider in life that if I wanted to take on something more difficult and challenging to help people, that I would find people would help me pave the path along the way."

A Decision to Pursue Oncology

While Dr. Patt was starting at Baylor College of Medicine, she met her future husband in the gross anatomy lab. "We met across the table as we were preparing to dissect our cadaver in gross anatomy, a woman named Doris. My husband is a pediatric cardiologist, and we both earned our degrees in 1999. I stayed on at Baylor to do a residency in internal medicine and pediatrics. I remember being drawn to clinical settings in which patients had complicated disease presentations, and things that allowed me to really impact their outcomes. And at that time, the oncology sector was really beginning to make significant strides in innovation, and it also offered me the opportunity to deliver longitudinal care to patients with multiple clinical issues over decades of their life. In addition, there was a public health need, which satisfied my desire to make a difference in the policy and access arena," said Dr. Patt.

A Young Investigator

In 2003, Dr. Patt applied to The University of Texas MD Anderson Cancer Center and was accepted for a fellowship in hematology and medical oncology. "During my fellowship, I was very fortunate to work with Dr. Gabriel Hortobagyi, who mentored me in breast cancer. Along with clinical expertise, Dr. Hortobagyi stressed the need for research to foster an environment that is constantly pushing the envelope to achieve better outcomes. On the public health side, I was mentored by Dr. Sharon Giordano who is Head of MD Anderson's Department of Health Services Research. Sharon is just a few years older than me, but she really taught me how we use data systems to help us answer important questions in cancer care delivery. Using Medicare data on breast cancer survivors who had chemotherapy, we worked together looking to understand whether these women were at higher risk of leukemia. We also looked at patients who had radiation therapy to see whether they developed cardiac issues. This work was part of my ASCO's Young Investigator Award, which I feel is important because these investments in young investigators nurture the seeds of innovation that later bear the fruit of discovery," said Dr. Patt.

After completing her fellowship, Dr. Patt decided to join Texas Oncology, a US Oncology practice. "A major factor in my decision to join Texas Oncology is that all of the practices within US Oncology use the same database. This allows you to do health services research, which is usually difficult to do in most health-care systems, simply because they don't have the infrastructure to share data. Moreover, in 2006, there were not many people interested in looking at big integrated data sets, but I was. So, I joined Texas Oncology fresh from my fellowship and have been here ever since," Dr. Patt shared.

A Playground Filled With Data

"I like to say that in Texas Oncology I found my own playground, but there were some obstacles and hazards to confront along the way. In that I mean that a career path in community oncology in a large successful practice like Texas Oncology has been rich with opportunity for enhancing care delivery and scientific discovery, but also a nontraditional path that required a lot of mentorship and support from others. It has been a remarkable journey filled with different opportunities, such as leading the health and economics outcomes research group at US Oncology for many years, which was a rewarding



experience, to working to implement digital health-care solutions across our large practice. When I started my career at Texas Oncology, I was fortunate to have had two great mentors—Drs. Steve Paulson and Joseph Bailes—who pulled me aside shortly after I joined the group and asked me to direct public policy for the practice. So, championing public health and facilitating collaboration with other health-care stakeholders has been a driving force in my career ever since, and I am lucky to be part of an amazing practice in Texas Oncology with a thoughtful leadership team committed to enhancing the quality and value of cancer care,” said Dr. Patt.



Top: In 2018, Dr. Patt's family fostered a mother dog and her nine puppies. From left to right: Gabi Patt (16), Ellie Patt (19), Dr. Debra Patt, Jacob Patt (13), and Dr. Hanoch Patt. **Left:** Lobbying in Texas on behalf of patients with cancer. From left to right: Dr. Marcus Neubauer, Dr. Patt, Ben Jones, and Angela Storseth.

As an expert in health-care policy, Dr. Patt has testified before Congress to protect access to care for Medicare beneficiaries. She recently chaired the Council on Legislation for the Texas Medical Association and works to formulate responsible health-care policy that improves the health of Texans. She also serves as the Editor-in-Chief of *JCO Clinical Cancer Informatics*.

“I think my chief contribution to my practice and to cancer care more broadly is bridging between care delivery and informatics,

business, and policy to foster better collaboration in our complex health-care ecosystem. I wake up every morning thinking about how we can deliver great cancer care in every site of service in every one of our community practices. And I work with collaborators in every sector of the community to work toward that common goal,” said Dr. Patt.

Creating a More Equitable System and Better Health-Care Solutions

And what does the future hold? “I see policy initiatives coming to fruition that will support all our patients, no matter what their socioeconomic status or location is. For example, in Texas, we see a lot of rural patients, many without broadband access. So, what can we do on the legislative and regulatory fronts to ensure these patients have the same access to quality cancer care as others do? The answer is better health-care policy. And that’s what I spend a lot of energy on. I hope we’re on the path to creating a far better and more equitable system.”

“In addition to health-care policy, I spend a lot of time on clinical informatics and the business of cancer care. I want health care to operate with the ease of the maps on your smartphone, and think engagement with clinical informatics solutions will get us there faster. Having the privilege to work with leaders in a large community practice, I also spend a great deal of time working with organizational leaders to improve care across different practices within sustainable business solutions.”

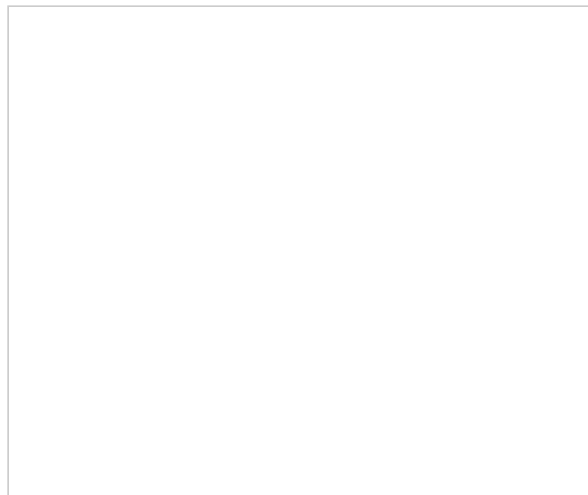
Dr. Patt noted that over the arc of her career, she’s seen the paradigm shift from acute to chronic care in cancer. “It is the dream of modern cancer care that patients not only live with their disease controlled, but they live their own lives. They pick up their kids from soccer; they eat at their own dinner table. And I see my future as helping people from a wide variety of circumstances to have the opportunity to live their lives on their terms, too,” said Dr. Patt.

What does a super busy oncology leader do to decompress? “I work a lot, and I love what I do. My husband and I have three teenaged children and three Labradors. We enjoy spending family time together hiking, swimming, and putting in time at the lake, which certainly helps me decompress. In a family with two parents who are very dedicated to solving complex health-care problems, my children have an appreciation for purposeful work and really enjoying just being around each other. We like to work as a family on projects.”

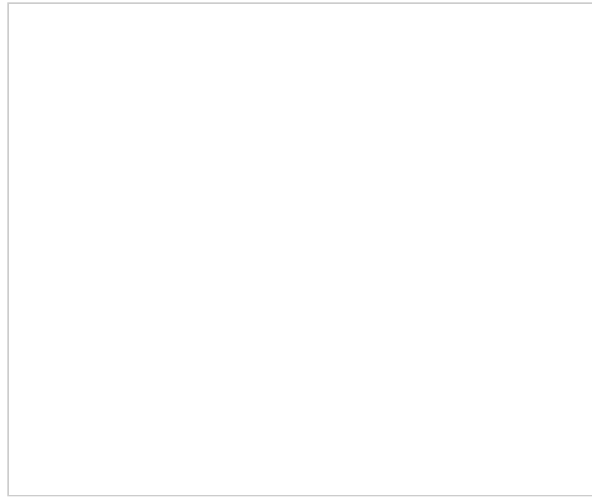
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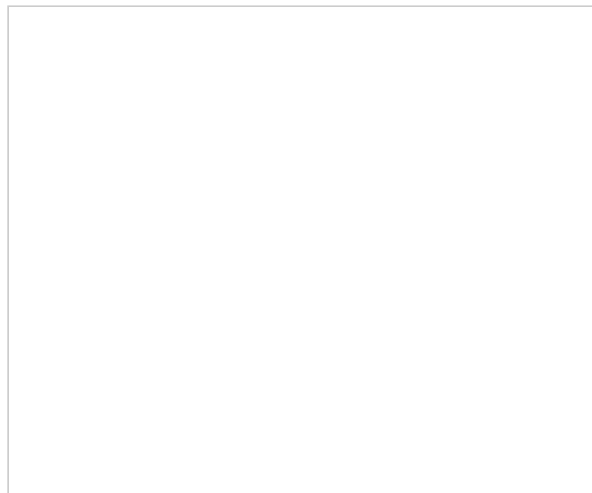
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