



UTMB-led group wins additional 5-year funding from Cancer Prevention Research Institute of Texas

UTMB CERCIT - September 1, 2016



A multi-institutional group, led by James S. Goodwin, MD, has been awarded a second five years of funding for "Comparative Effectiveness Research on Cancer in Texas" (CERCIT). The \$6 million grant is from the Cancer Prevention Research Institute of Texas. The CERCIT renewal will build on our analyses of administrative data but expand our methods to better measure individual patient characteristics and include information on patient preferences and patient reported outcomes. Our goal is to generate evidence that will help patients and their physicians make individualized decisions about the best cancer care options for each patient. These choices include screening, treatment and end of life care in cancer.

Dr. Goodwin is optimistic about the knowledge this research will bring. "We have had a highly successful beginning, working with TCR to expand the data available to examine cancer care in Texas. We now wish to build on that by adding patient-reported outcomes. At the completion of this project, we will have generated novel, patient-centered evidence to assist patients in making decisions across the continuum of cancer care. We will have also developed the models and practical expertise needed to facilitate ongoing research seeking to personalize and improve cancer care in Texas."

The four projects of CERCIT are summarized below:

Project 1

(PI: James S. Goodwin, MD, UTMB) is on screening for cancer. Its major new emphasis is on lung cancer screening with low dose CT (LDCT), recently approved by CMS and insurance companies. Because of the potential harm from screening, CMS has mandated a counseling/ shared decision making (SDM) visit prior to receipt of LDCT. We will analyze Texas Medicare data from 2009-2019 to determine the patterns of counseling/ SDM and also receipt of LDCT lung cancer screening. We will also design and implement a survey of patients who have undergone counseling/ SDM with or without subsequent LDCT screening and also survey patients likely to qualify for LDCT screening who had not yet received it.

Project 2

(PI: Sharon Giordano, MD, MPH, MD Anderson) will evaluate outcomes among older patients with colorectal, breast, and lung cancer who are treated with chemotherapy. We will assess how

the toxicity varies by type of chemotherapy. We will also describe patient-reported outcomes among older cancer survivors in Texas with local and regional stage colorectal and breast cancer by surveying patients 24 months after diagnosis. We will assess how those outcomes vary by use and type of chemotherapy and by patient race/ethnicity.

Project 3

(PI: Benjamin Smith, MD, MD Anderson), we will recruit patients from diverse practice settings to participate in semi-structured interviews to identify relevant outcomes and inform survey instrument development. We will then partner with the Texas Cancer Registry to conduct large, population-based surveys of breast and oropharyngeal cancer survivors. We will use these findings to construct a tool that generates personalized outcome estimates. Demonstrating the viability of this model will promote a novel, patient-centered paradigm for promoting personalized, preference-sensitive decision making in cancer care.

Project 4

(PIs: Beverly A. Guadagnolo, MD, MPH, MD Anderson; and Linda S. Elting, DrPH, MD Anderson) We will administer a survey about patient preferences for aggressiveness of end-of-life (EOL) care to a cohort of newly diagnosed cancer patients. We will assess trust in medical professionals, health literacy, and decisional self-efficacy among Texans with cancer to determine if there are racial/ethnic or socio-economic differences in these domains and whether these domains are associated with preferences regarding EOL care. We will then perform a longitudinal cohort study of TCR decedents with advanced cancer who completed the surveys.

The initial CERCIT program was funded for \$8.1 million over five years. Its overall goal was to create a statewide resource for outcomes and comparative effectiveness research in cancer for Texas. The initial multidisciplinary consortium included investigators at the University of Texas Medical Branch (UTMB, lead, James S. Goodwin, PI), MD Anderson Cancer Center, the University of Texas School of Public Health, Rice University, Baylor College of Medicine and the Texas Cancer Registry.

Successes of the first CERCIT included:

- More than 115 publications in peer-reviewed journals, including Cancer (13 articles), Journal of Clinical Oncology (twelve), Health Services Research (three), JAMA Internal Medicine (three), JAMA (two), and Journal of the National Cancer Institute (two)
- Close partnership with the Texas Cancer Registry (TCR), also funded by CPRIT
- UTMB CERCIT Website that contains tables and figures on the status of cancer screening, diagnosis, treatment and post-treatment surveillance in different Texas communities. It also contained a query tool for specific data, along with video lectures, reports and publications from CERCIT.
- Three major reports: "Cancer in Texas" (2012), "Cancer in Hispanics" (2014) and "The Geography of Cancer Care in Texas" (in press). These were 60-80 page monographs that were sent to all Texas legislators, relevant Texas government officials, interest groups and advocacy organizations, academic investigators, members of the media, and clinicians

- Dissemination of the results of our studies through press releases and op/ed pieces in local Texas newspapers
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James S. Goodwin, M.D. is currently the George and Cynthia Mitchell Distinguished Chair of Geriatric Medicine at the University of Texas Medical Branch in Galveston, Texas. He attended Amherst College and Harvard Medical School, spent much of his early career at the University of New Mexico School of Medicine, and since 1992 has been in Galveston. Throughout his career he has written more than 300 scientific articles that have been cited more than 18,000 times and has been continuously funded by the NIH for 30+ years.

The Cancer Prevention and Research Institute of Texas (CPRIT) was established in 2007 by the voters, who authorized the state to issue \$3 billion in bonds to fund groundbreaking cancer research and prevention programs and services in Texas. All CPRIT-funded research is conducted in state by Texas-based scientists and reflect CPRIT's mission to attract and expand the state's research capabilities and create high quality new jobs in Texas. ●