

AWARD NUMBER: W81XWH-21-1-0087

TITLE: Improving Outcomes in Lethal Prostate Cancer Through Guideline-Concordant Use of Bone-Modifying Agents

PRINCIPAL INVESTIGATOR: Aaron Mitchell

CONTRACTING ORGANIZATION: Sloan Kettering Institute for Cancer Research

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13. SUPPLEMENTARY NOTES					
14. ABSTRACT We used SEER-Medicare data to identify BMA underuse and overuse among prostate cancer patients, and then evaluated key patient, provider, and practice characteristics for association with underuse (~68% receive BMAs appropriately) and overuse (~1/3 non-candidate patients received BMAs inappropriately) [Aim 1]. We conducted in-depth interviews with prostate cancer clinicians to further understand barriers and facilitators to appropriate BMA use [Aim 2A]. We applied findings from Aim 1 and Aim 2A to refine a multi-pronged interventional strategy intended to reduce BMA underuse and overuse. Starting with a set of evidence-based healthcare interventions, we used our findings to incorporate additional components tailored to correcting the barriers we identified [Aim 2B]. We have collected baseline data on guideline-concordant BMA usage within the MSK Alliance, a hybrid academic-community network of oncology providers in the Eastern US, and we will pilot our intervention strategy within the MSK Alliance [Aim 3].					
15. SUBJECT TERMS Prostate cancer; bone modifying agent; guideline-concordant care; care quality; supportive care; metastatic cancer; medical overuse;					
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1. INTRODUCTION:

We will use SEER-Medicare data to identify BMA underuse and overuse among prostate cancer patients. We will then evaluate key patient (income, race, rural residence), provider (specialty, patient volume), and practice (location, academic affiliation) characteristics which we hypothesize may be associated with underuse and overuse (**Aim 1**). We will conduct in-depth interviews with prostate cancer clinicians to further understand barriers and facilitators to appropriate BMA use (**Aim 2A**). We will apply findings from Aim 1 and Aim 2A to refine a multi-pronged interventional strategy intended to reduce BMA underuse and overuse. Starting with a set of evidence-based healthcare interventions, we will use our findings to incorporate additional components tailored to correcting the identified barriers (**Aim 2B**). We will pilot this intervention strategy within the MSK Alliance, a hybrid academic-community network of oncology providers in the Eastern US, to assess feasibility and efficacy (**Aim 3**).

2. KEYWORDS:

Prostate cancer; bone modifying agent; guideline-concordant care; care quality; supportive care; metastatic cancer; medical overuse;

3. ACCOMPLISHMENTS:

What were the major goals of the project?

Aim 1, Major Task 1: Identify and describe BMA underuse

Target completion date: June 2022

Actual completion date: July 2022

Aim 1, Major Task 2: Identify and describe BMA overuse

Target completion date: September 2022

Actual completion date: October 2021

Aim 2, Major Task 1: Conduct physician interviews to better understand determinants of BMA use

Target completion date: March 2023

Actual completion date: December 2022

Aim 2, Major Task 2: Apply SEER-Medicare and interview findings to refine intervention strategy

Target completion date: July 2023

Actual completion date: May 2023

Aim 3, Major Task 1: Pilot of Intervention Strategy

Target completion date: September 2024

Aim 3, Major Task 2: Assessment of Pilot Results

Target completion date: September 2025

What was accomplished under these goals?

Aim 2, Major Task 1: Conduct physician interviews to better understand determinants of BMA use

During the previous reporting period, we concluded interviews with 15 oncologists who treat prostate cancer, in both academic and community settings. The key finding regarding BMA UNDERuse (lack of BMA use among patients with CRPC) was that pre-treatment dental evaluation and limited clinic time were identified as the most common barriers, and EMR-based guidance and dental navigation were identified as the most useful potential interventions. Regarding BMA OVERuse (use for patients with CSPC), we identified a knowledge gap among some clinicians that this practice actually is overuse according to guidelines. EMR-based guidance and peer-to-peer physician education were identified as the most useful potential interventions to address overuse.

During the current reporting period, these results were presented in abstract form at the American Society of Clinical Oncology Genitourinary Symposium, to be held in February 2023. We conducted further analysis of the results, including qualitative conceptual mapping of key concepts from the interviews. A manuscript reporting the full results of this study have been accepted for publication at The Prostate and are currently in press.

Aim 2, Major Task 2: Apply SEER-Medicare and interview findings to refine intervention strategy

Findings from Aim 1, Tasks 1&2 have informed the development of the intervention strategy and rollout plans. The most significant, unexpected finding in this regard was that BMA overuse is driven almost entirely (among the SEER-Medicare population) by medical oncologists; we had anticipated finding that urologists contributed substantially to overuse. This will inform the targeting of the intervention to provider groups.

Findings from Aim 2, Task 1 also directly impacted the intervention strategy. We also identified a knowledge gap that likely contributes to overuse, to physician peer education is now a central component of the intervention to reduce overuse. We applied principles of Implementation Science – both independently and as part of course work completed as part of the training plan – by conducting a CFIR-to-ERIC mapping process to assist in developing a multi-level implementation strategy to address all barriers that can be feasibly accomplished.

The physician interviews supported EMR-based “nudges,” peer education, audit & feedback, and dental navigation as acceptable interventions that were felt likely to be efficacious. We ultimately were not able to include a dental navigation process due to resource constraints (this would require additional FTE), but the other components were all incorporated into our intervention strategy.

Aim 3, Major Tasks 1 & 2: Pilot of Intervention Strategy, Assessment of Pilot Results

The intervention pilot is set for rollout on November 6, 2023. This will start with a series of educational presentations to prostate cancer clinicians at the participating sites, reminding them of clinical guidelines on BMA use, and presenting the supporting clinical trial data. In the following 1-2 weeks, clinicians will receive an audit&feedback “report card” with their personal adherence to BMA guidelines (with a comparison to both institutional and national averages), and a list of their

patients who appear to be receiving guideline non-concordant care, with a suggestion that a therapeutic change be considered. EMR-based reminders are under construction with the IT departments at both participating sites, and we anticipate these to be active by early 2024 as well. Clinicians will continue to receive audit & feedback updates and patient lists intermittently for the duration of the study.

The assessment of results is already underway as well, as we have been collecting data (via chart review) in order to determine the baseline/pre-intervention levels of adherence to BMA guidelines. These chart reviews also serve as the basis for the audit&feedback and patient-specific notifications as mentioned above.

What opportunities for training and professional development has the project provided?

Training Goal 1: Foundation in prostate cancer clinical research

Continuous:

Seminar: MSK prostate cancer research meeting

Seminar: MSK genitourinary grand rounds

Conference: ASCO Genitourinary Oncology Symposium

Completed:

Online course: American Society of Clinical Oncology (ASCO), *Fundamentals of Clinical Trials*

In-person course: *Clinical Research Methodology Curriculum* (Weill Cornell Medical Center)

Online course: *Introduction to the Principles and Practice of Clinical Research* (NIH)

Training Goal 2: Training in implementation science

Continuous:

Seminar: MSK Implementation Science Affinity Group

Conference: Academy Health Annual Conference on the Science of Dissemination and Implementation

Completed:

Online seminar: *NCI Webinars in Advanced Implementation Science*

Online course: NCI *Training Institute for Dissemination and Implementation Research in Cancer* (TIDIRC)

In-person course: NYU GPH-GU 2135 *Dissemination and Implementation Science in Health Care and Public Health*

Training Goal 3: Training in health disparities research

Completed:

Online conference: Massachusetts General Cancer Center Cancer Equity Colloquium

Online course: *Foundations of Health Equity Research* (Johns Hopkins Health Equity Hub)

Online course: *Application of Health Equity Research Methods for Practice and Policy* (Johns Hopkins Health Equity Hub)

Online course: Foundations of Social Epidemiology, Johns Hopkins Bloomberg School of Public Health

Continuous:

Health Disparities Research Training seminar convened by the Immigrant Health & Cancer Disparities Service (MSK, biweekly)

Not yet begun:

Online course: From Health Disparities to Health Equity, University of Pennsylvania

How were the results disseminated to communities of interest?

Nothing to report

What do you plan to do during the next reporting period to accomplish the goals?

- Rollout the finalized implementation strategy
- Compare pre-intervention BMA utilization patterns in community (MSK Alliance) vs. academic (MSK Cancer Center) settings
- Ongoing chart reviews of patients with prostate cancer within the MSK Alliance to assess effectiveness of the intervention

4. IMPACT:

What was the impact on the development of the principal discipline(s) of the project?

Our physician interview study, recently accepted for publication, will be the first qualitative study to understand the underlying reasons for BMA underuse and overuse. We anticipate that this new knowledge will inform additional efforts at other institutions to improve the guideline-concordant management of prostate cancer.

What was the impact on other disciplines?

Nothing to report

What was the impact on technology transfer?

Nothing to report

What was the impact on society beyond science and technology?

Nothing to report

5. CHANGES/PROBLEMS:

Changes in approach and reasons for change

Nothing to report

Actual or anticipated problems or delays and actions or plans to resolve them

No problems or delays have been encountered during the reporting period

Changes that had a significant impact on expenditures

No significant changes in expenditures during the reporting period

Significant changes in use or care of human subjects, vertebrate animals, biohazards, and/or select agents

Nothing to report

Significant changes in use or care of human subjects

Nothing to report

Significant changes in use or care of vertebrate animals

Nothing to report

Significant changes in use of biohazards and/or select agents

Nothing to report

6. PRODUCTS:

- **Publications, conference papers, and presentations**

Aaron Mitchell, Akriti Mishra, Katherine Panageas, Allison Lipitz-Snyderman, Peter Bach, Michael Morris. Real-World Use of Bone Modifying Agents in Metastatic Castration Sensitive Prostate Cancer. *J Natl Cancer Inst.* 2021 Oct 1:djab196.
Published
Federal support acknowledged

Aaron Mitchell, Akriti Mishra Meza, Katherine Panageas, Allison Lipitz-Snyderman, Azeez Farooki, Michael Morris. Real-World Use of Bone Modifying Agents in Metastatic, Castration-Resistant Prostate Cancer. *Prostate Cancer and Prostatic Diseases.*
Published
Federal support acknowledged

Aaron Mitchell, Sonia Persaud, Paul Palyca, Andrew Salner, Azeez Farooki, Jamie Ostroff, Michael Morris, Susan Chimonas. Physician Knowledge, Practice Patterns, and Barriers Encountered Regarding Guideline-Concordant Use of Bone Modifying Agents for Prostate Cancer. *The Prostate.*
Accepted, awaiting publication
Federal support acknowledged

Books or other non-periodical, one-time publications.

Nothing to report

Other publications, conference papers and presentations.

*Barriers to Guideline-Concordant Use of Bone Modifying Agents for Prostate Cancer.
Aaron Mitchell, Sonia Persaud, Susan Chimonas, Azeez Farooki, Jamie Ostroff, Paul Palyca, Andrew Salner, and Michael Morris.
Conference abstract, 2023 American Society of Clinical Oncology Genitourinary Symposium

- **Website(s) or other Internet site(s)**

Nothing to report

- **Technologies or techniques**

Nothing to report

- **Inventions, patent applications, and/or licenses**

Nothing to report

- **Other Products**

Nothing to report

7. PARTICIPANTS & OTHER COLLABORATING ORGANIZATIONS

What individuals have worked on the project?

Aaron, Susan, Akriti, Sonia

Name:	Aaron Mitchell
Project Role:	PI
Researcher Identifier (e.g. ORCID ID):	0000-0003-3639-3515
Nearest person month worked:	6
Contribution to Project:	Overseeing design, organization, and execution of all study goals
Funding Support:	Current award, NCI
Name:	Akriti Mishra
Project Role:	Biostatistician
Researcher Identifier (e.g. ORCID ID):	0000-0002-3477-5037
Nearest person month worked:	2
Contribution to Project:	SEER-Medicare data analysis
Funding Support:	Current award, NCI, Departmental funds

Name: Susan Chimonas
 Project Role: PI
 Researcher Identifier (e.g. ORCID ID): 0000-0002-7742-5950
 Nearest person month worked: 1
 Contribution to Project: Conducting physician interviews
 Funding Support: Current award, Departmental funds

Name: Sonia Persaud
 Project Role: Research Data Assistant
 Researcher Identifier (e.g. ORCID ID): N/A
 Nearest person month worked: 1
 Contribution to Project: Project management, analyzing chart review data
 Funding Support: Current award, Departmental funds

Name: Nirjhar Chakraborty
 Project Role: Research Data Assistant
 Researcher Identifier (e.g. ORCID ID): N/A
 Nearest person month worked: 1
 Contribution to Project: Project management, analyzing chart review data
 Funding Support: Current award, Departmental funds

Has there been a change in the active other support of the PD/PI(s) or senior/key personnel since the last reporting period?

Changes to Other Support of the PI include:

Completed grants:

National Institute for Health Care Management GC260700 1/1/2021-12/31/2022
 Can Conflict of Interest with the Drug Industry Harm Patients?
 Role: Principal Investigator (**10% effort**)

R03, NCI PAR-20-052 4/1/2021-3/31/2023
 Understanding the Guideline-Discordant Use of Bone Modifying Agents in Prostate Cancer
 Role: Principal Investigator (**10% effort**)

Ongoing grants:

R01/R37, NCI PAR-18-869 8/1/2022-7/31/2027
 Understanding the Importance of Industry Relationships for Cancer Care Quality, Outcomes, and Costs
 Role: Principal Investigator (**30% effort**)

New grants:

Commonwealth Fund / Arnold Ventures; grant #23-23507 9/1/2023-8/31/2025
 Prescription Drug Prices, Financial Incentives, and Cancer Care Quality in Medicare Part B
 Role: Principal Investigator (**20% effort**)

*Other supports have been appended to highlight changes in active support for the PI and mentors.
 Dr. Autio has had no changes.

What other organizations were involved as partners?

Lehigh Valley Cancer Institute, Allentown, PA
Contribution: Collaboration

Hartford Hospital, Hartford, CT
Contribution: Collaboration

8. SPECIAL REPORTING REQUIREMENTS

None.

9. APPENDICES:

Updated Other support information for the PI and mentors is attached.

MITCHELL, AARON

PREVIOUS (completed since last report):

Grant Number (PI: Mitchell, A.) R03 CA259863

Project Dates: 4/1/2021 – 3/31/2023

Sponsor Name: National Cancer Institute

Total Award Amount:

Title: Understanding the Guideline-Discordant Use of Bone Modifying Agents in Prostate Cancer

Project Goals: Bone modifying agents (BMAs) can improve quality of life in metastatic prostate cancer. The BMAs zoledronic acid and denosumab prevent bone fractures among men with metastatic, castration resistant prostate cancer (mCRPC), resulting in reduced pain and improved function.

Specific Aims: SEER-Medicare data to identify patients with mCRPC and determine their receipt of BMAs to measure potential underuse (Goal 1A). To measure overuse (Goal 1B), we will identify patients newly diagnosed with mCSPC and determine their receipt of BMAs. Goal 2: Identify and describe patient and provider factors associated with underuse and overuse of bone-modifying agents.

We will use SEER-Medicare data to identify key patient socioeconomic factors and provider organizational factors associated with BMA underuse (Goal 2A) and overuse (Goal 2B). Goal 3: Evaluate changes in utilization of denosumab and associated costs. We will assess temporal trends in the utilization of denosumab compared with zoledronic acid in prostate cancer (Goal 3A). We will then use these findings to estimate resulting excess costs to patients and to Medicare (Goal 3B).

Effort: Not applicable

Role: Principal Investigator

Name of Contracting/Grants Officer: Michael Kluk

Grant Number (PI: Mitchell, A.)

Project Dates: 1/1/2021 – 12/31/2022

Sponsor Name: National Institute for Health Care

Total Award Amount:

Management Research and Educational Foundation

Title: Can Conflict of Interest with the Drug Industry Harm Patients?

Project Goals: Objective 1: Assess whether physicians are more likely to use cancer drugs marketed by companies with which they have fCOI, even when other drugs would be more beneficial. Objective 2: Assess whether physicians with fCOI are more likely to deliver low value cancer care. 2 Low value care will be defined to include interventions (1) where the net harm outweighs the net benefit for most patients, or (2) where a comparable benefit may be achieved at lower financial cost

Specific Aims: Objectives outlined above.

Effort: Not applicable

Role: Principal Investigator

Name of Contracting/Grants Officer: Dr. Julie Schoenman, jschoenman@nihcm.org

CURRENT:

Newly Added Current Support:

Grant Number (PI: Mitchell, A.) 23-09258 Project Dates: 9/30/2023 – 9/29/2025

Sponsor Name: Arnold Ventures/Commonwealth Fund Total Award Amount:

Title: Prescription Drug Prices, Financial Incentives, and Cancer Care Quality in Medicare Part B

Project Goals: The overall goal of this proposal is to evaluate whether, and to what extent, the “perverse incentives” of high prescription drug prices adversely affect cancer care quality and costs to beneficiaries and the Medicare program. Findings will inform federal reimbursement reform efforts for the Medicare program that aim to reduce drug spending and align provider incentive to encourage use of higher value treatments.

Specific Aims: We will approach this question by assessing the relationship between the clinical benefit of treatments, drug reimbursement to the provider, and real-world medication use patterns among Medicare beneficiaries, to determine whether more-profitable treatments are used more often than would be predicted on the basis of clinical benefit alone. We will also evaluate whether Medicare Advantage (MA) beneficiaries are

more likely to receive higher-value (comparable clinical benefit and lower cost) cancer treatment than traditional Medicare (TM) beneficiaries. Finally, we will estimate the potential cost savings from alternative reimbursement models that would then increase price competition for clinically-similar products covered by Medicare Part B. Together, these findings will inform federal reimbursement reform efforts for the Medicare program that aim to reduce drug spending and align provider incentive to encourage use of higher value treatments.

Effort:

Year 1	2.4 cal months
Year 2	2.4 cal months

Role: Principal Investigator

Name of Contracting/Grants Officer: *Joint funded* – Arnold Ventures (Kristen Flack, Commonwealth Fund

Overlap: None

Previously Reported Current Support:

Grant Number (PI: Mitchell, A.) R37 CA264563

Project Dates: 8/1/2022 – 7/31/2027

Sponsor Name: National Cancer Institute

Total Award Amount:

Title: Understanding the Importance of Industry Relationships for Cancer Care Quality, Outcomes, and Costs

Project Goals: Personal payments from the pharmaceutical industry influence physician prescribing, but little is known about whether these payments affect patients. This study proposes to evaluate the association between industry payments to physicians and the quality, patient outcomes, and costs of cancer care.

Specific Aims: Aim 1: Assess the association between industry payments and cancer care quality. Aim 2: Assess the association between industry payments and patient outcomes and costs of care.

Effort:

Year 1	3.60 cal months
Year 2	3.60 cal months
Year 3	3.60 cal months
Year 4	3.60 cal months
Year 5	3.60 cal months

Role: Principal Investigator

Name of Contracting/Grants Officer: Jennifer Meininger

Overlap: None

Grant Number (PI: Mitchell, A.) W81XWH-21-1-0087

Project Dates: 9/30/2021 – 9/29/2025

Sponsor Name: CDMRP

Total Award Amount:

Title: Improving Outcomes in Lethal Prostate Cancer through Guideline-concordant use of Bone Modifying Agents

Project Goals: To identify patient, provider, and practice factors associated with BMA overuse and underuse among men with lethal prostate cancer. To refine an intervention strategy to reduce BMA overuse and underuse. To pilot an intervention strategy to reduce BMA overuse and underuse.

Specific Aims: Aim 1: Identify and describe patient, provider, and practice factors associated with BMA overuse and underuse among men with lethal prostate cancer. Aim 2: Refine an intervention strategy to reduce BMA overuse and underuse. Aim 3: Pilot an intervention strategy to reduce BMA overuse and underuse.

Effort:

Year 2	4.8 cal months
Year 3	4.8 cal months
Year 4	4.8 cal months

Role: Principal Investigator

Name of Contracting/Grants Officer: Jennifer Shankle, jennifer.e.shankle.civ@health.mil

Overlap: None

OSTROFF, JAMIE

NEWLY ACTIVE

*Title: Building Capacity and Patient Engagement within a Stigmatized Lung Cancer Community

*Major Goals: Our overarching goal is to build capacity within the community of people with lung cancer to represent and integrate their diverse perspectives and enable meaningful future PCOR/CER efforts addressing the needs of people affected by lung cancer. Specifically, we aim to: 1. Engage and convene a diverse coalition of community partners (i.e., survivors and caregivers) and clinician-scientists to serve as a Lung Cancer Advisory Board (LCAB). 2. Build a diverse coalition of survivors and caregivers affected by lung cancer to participate in a Lung Cancer Engagement Network (LCEN). 3. Use group concept mapping to elicit and prioritize research needs from the LCEN to improve equitable health outcomes for all people diagnosed with lung cancer. 4. Develop a lung cancer patient partner communication plan and training materials to promote capacity building, future PCOR/CER and develop promising practices for engaging and recruiting a diverse lung cancer community in future PCOR/CER.

*Status of Support: Pending (*Awarded but awaiting subaward agreement from direct sponsor*)

Project Number: FP00005376

Name of PD/PI: Fathi, J

Source of Support: GO2 Foundation for Lung Cancer/PCORI (prime)

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 6/1/2023 - 5/31/2025

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2024	0.60 calendar
2. 2025	0.60 calendar

*Title: Reducing the chasm in behavioral health care for older adults with cancer: Development of the Center for Implementation Research in Cancer in Later Life (CIRCL)

*Major Goals: The proposed Center for Implementation Research in Cancer in Later Life (CIRCL) will provide training and research support that will infuse dissemination and implementation research methods into new and existing projects across all stages of behavioral intervention development for older adults with cancer.

*Status of Support: Active

Project Number: 1R21CA277833-01A1

Name of PD/PI: McConnell, K

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 8/1/2023 - 7/31/2025

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2024	0.36 calendar
2. 2025	0.36 calendar

*Title: Tobacco Treatment Training for Cancer Care Providers

*Major Goals: Aim 1. Develop, disseminate and conduct participant evaluation of a Tobacco Treatment Training-Oncology (TTT-O) education program consisting of 2-day in-person Workshop and 6 web-based, collaborative learning activities (Collaboratory) for multidisciplinary cancer care providers from diverse cancer practice settings. Aim 2. Evaluate the impact of the TTT-O Workshop and Collaboratory on participants' Tobacco Use Assessment and Treatment (TUAT) knowledge, attitudes, self-efficacy and

skills. Aim 3. Evaluate the impact of the TTT-O Workshop and Collaboratory on participants' delivery and implementation of TUAT in participants' cancer care settings

*Status of Support: Active

Project Number: 2R25CA217693-06

Name of PD/PI: Ostroff, J

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 7/1/2023 - 6/30/2028

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
6. 2024	1.20 calendar
7. 2025	1.20 calendar
8. 2026	1.20 calendar
9. 2027	1.20 calendar
10. 2028	1.20 calendar

*Title: Optimizing Postoperative Cancer Care Through Personalized Remote Symptom Monitoring

*Major Goals: Aim 1. Personalize RT content and refine PROM items. Aim 2. Personalize RT interventions to patient-level of care. Aim 3. Evaluate the personalized RT using implementation science methods

*Status of Support: Active

Project Number: AWD00002453

Name of PD/PI: Cracchiolo, J

Source of Support: Pfizer, Inc.

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 3/1/2023 - 2/28/2025

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2024	0.60 calendar
2. 2025	0.60 calendar

*Title: Empathic communication skills training to reduce lung cancer stigma in Nigeria

*Major Goals: (1) To adapt for cultural and regional relevance a patient reported tool for measurement of lung cancer stigma and an empathic communication skills (N ECS) training for use with OCPs who treat patients with lung cancer by assessing the nature and frequency of stigma experiences by patients with lung cancer in Nigeria (2) To examine the feasibility and acceptability of the N ECS training among OCPs who treat patients with lung cancer in Nigeria.

*Status of Support: Active

Project Number: 3P30CA008748-55S2

Name of PD/PI: Vickers, S (Banerjee, S / Ostroff, J, Project Co-Leads)

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 9/1/2021 - 12/31/2023 NCE

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2023	0.60 calendar

*Title: Empathic Communication Skills Training to Reduce Lung Cancer Stigma: Key Stakeholder Conference

*Major Goals: To refine the Empathic Communication Skills (ECS) training module based on feedback from an external Advisory Group of scientific, clinical and patient advisors.

*Status of Support: Active

Project Number: 77065

Name of PD/PI: Ostroff, J

Source of Support: American Cancer Society

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 8/1/2021 - 12/31/2023 NCE

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2023	0.00 calendar (<i>no measurable effort required</i>)

*Title: Cancer Center Support Grant

*Major Goals: The goals of this P30 supplement are to address patient, provider and systems-level barriers to tobacco cessation treatment delivery in our large, multi-site geographically diverse comprehensive cancer care center, and to develop and share practical, scalable, sustainable solutions for optimizing implementation of tobacco treatment in cancer care settings.

*Status of Support: Active

Project Number: 3 P30 CA008748-53 S1

Name of PD/PI: Vickers, S (Ostroff J, Project Lead)

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 2/1/2019 - 12/31/2023 NCE

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
53. 2023	0.30 calendar

*Title: Sustainability of Tobacco Cessation Programs at NCI-Designated Cancer Centers

*Major Goals: The objectives of this proposal are to evaluate the sustainability of tobacco treatment programs in the initiative and their intended health benefits and to develop a toolkit of sustainment strategies.

*Status of Support: Awarded/Subaward in process

Project Number: 1R01CA279890-01

Name of PD/PI: Salloum, R

Source of Support: University of Florida/NCI (prime)

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 7/1/2023 - 6/30/2028

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
1. 2024	0.96 calendar
2. 2025	1.20 calendar
3. 2026	1.20 calendar
4. 2027	1.20 calendar
5. 2028	1.20 calendar

ACTIVE

*Title: Leveraging Social Media to Increase Lung Cancer Screening Awareness, Knowledge and Uptake in High-Risk Populations

*Major Goals: To leverage a social media platform to increase awareness among individuals eligible for lung cancer screening so as to reach vulnerable, high-risk individuals. **Aim 1.** Examine the use of a social media platform (i.e., Facebook) to reach high-risk individuals eligible for lung screening. **Aim 2.** Compare the effectiveness of a computer-tailored health communication and decision support tool (*LungTalk*) to a non-tailored ACS Lung Screening Informational Video on lung screening: 1) knowledge; 2) health beliefs (perceived risk, perceived benefits, perceived barriers, self-efficacy); and 3) uptake and completion. **Aim 3.** Explore the sustainability of a social media-based approach among key stakeholders to increase lung screening awareness, knowledge, adoption and uptake among screening-eligible individuals.

*Status of Support: Active

Project Number: R01CA263662

Name of PD/PI: Carter-Bawa, L

Source of Support: HMH Hospitals/National Cancer Institute (prime)

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 10/1/2022 - 8/31/2027

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
2. 2024	0.60 calendar
3. 2025	0.60 calendar
4. 2026	0.60 calendar
5. 2027	0.60 calendar

*Title: Quit2Heal: Rigorous Randomized Trial of a Smartphone Application to Help Cancer Patients Stop Smoking

*Major Goals: To determine the effectiveness of a smartphone app designed to help cancer patients quit smoking. If successful, this intervention would provide an effective and highly accessible public health intervention for cancer patients.

*Status of Support: Active

Project Number: R01CA253975

Name of PD/PI: Bricker, J

Source of Support: Fred Hutchinson Cancer Center/National Cancer Institute (prime)

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 4/1/2022 - 5/31/2025

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
4. 2024	0.90 calendar
5. 2025	0.90 calendar

*Title: Improving Outcomes in Lethal Prostate Cancer through Guideline-concordant use of Bone Modifying Agents

*Major Goals: To identify patient, provider, and practice factors associated with BMA overuse and underuse among men with lethal prostate cancer. To refine an intervention strategy to reduce BMA overuse and underuse. To pilot an intervention strategy to reduce BMA overuse and underuse.

*Status of Support: Active

Project Number: W81XWH-21-1-0087

Name of PD/PI: Mitchell, A

Source of Support: Congressionally Directed Medical Research Programs
Primary Place of Performance: Sloan Kettering Institute For Cancer Research
Project/Proposal Start and End Date (MM/YYYY): 9/30/2021 - 9/29/2025

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
2. 2023	0.45 calendar
3. 2024	0.60 calendar
4. 2025	0.60 calendar

*Title: Empathic Communication Skills Training to Reduce Lung Cancer Stigma

*Major Goals: To test the implementation and effectiveness of clinician-level empathic skills communication training on reducing lung cancer stigma.

*Status of Support: Active

Project Number: R01CA255522

Name of PD/PI: Banerjee, S / Ostroff, J

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 9/1/2021 - 8/31/2026

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
3. 2024	1.80 calendar
4. 2025	1.80 calendar
5. 2026	1.80 calendar

*Title: Cancer Center Support Grant (Population Science Research)

*Major Goals: Memorial Sloan Kettering Cancer Center (MSK) is a free-standing institution dedicated to the control of cancer through inpatient and outpatient care, clinical and research training programs, and a broad spectrum of research activities. Through these activities, MSK seeks to reduce the burden of cancer throughout our catchment area and the nation.

*Status of Support: Active

Project Number: 5 P30 CA008748-57

Name of PD/PI: Vickers, S (Co-Program Leads: Bernstein, J, Offit K, Ostroff J)

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 1/1/2019 - 12/31/2023

*Total Award Amount (including Indirect Costs): *(program total)*

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
5. 2023	1.80 calendar

*Title: Effectiveness trial of a head and neck cancer survivorship tool

*Major Goals: We will test the implementation and effectiveness of the Head and Neck Survivorship Tool: Assessment and Recommendations (HN-STAR) to address health care challenges for head and neck cancer survivors. We hypothesize that survivors who use HN-STAR will have better patient-centered outcomes and greater adherence to guideline-concordant care than survivors in the control arm.

*Status of Support: Active

Project Number: RSG-18-016-01- CPHPS

Name of PD/PI: Salz, T

Source of Support: American Cancer Society

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 7/1/2018 - 12/31/2023 NCE

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
4. 2023	0.30 calendar

*Title: Optimizing Tobacco Treatment for Smokers Seeking Lung Cancer Screening

*Major Goals: The proposed project will develop and refine an optimized tobacco treatment intervention, tailored specifically for implementation within the context of lung cancer screening. The multi-level (patient- and site-) mixed methods, evaluation plan and partnership with a heterogeneous mix of lung cancer screening sites will also provide critical data about scalable implementation parameters.

*Status of Support: Active

Project Number: 5 R01 CA207442-06

Name of PD/PI: Ostroff, J / Shelley, D

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 8/9/2016 - 11/30/2023 NCE

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
6. 2023	0.36 calendar

*Title: Psychosocial Palliative and Community Research in Cancer

*Major Goals: This program continues to serve as a national resource for training outstanding, new investigators in Psycho-Oncology.

*Status of Support: Active

Project Number: 5 T32 CA009461-40

Name of PD/PI: Hay, J (lead)/Ostroff, J

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Project/Proposal Start and End Date (MM/YYYY): 9/1/2019 - 8/31/2024

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
40. 2024	0.60 calendar

*Title: CCNY-MSKCC Partnership for Cancer Research, Education and Community Outreach

*Major Goals: To support and extend the City College of New York - Memorial Sloan Kettering Cancer Center Partnership for Cancer Research, Education and Community Outreach.

*Status of Support: Active

Project Number: NCI U54 CA137788-12

Name of PD/PI: Ahles

Source of Support: National Cancer Institute

Primary Place of Performance: Sloan Kettering Institute For Cancer Research

Contracting/Grants Officer: Nelson Aquila, DVM

Project/Proposal Start and End Date (MM/YYYY): 9/20/2019 - 8/31/2024

*Total Award Amount (including Indirect Costs):

Person Months (Calendar/Academic/Summer) per budget period.

Year (YYYY)	Person Months (##.##)
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5. 2024 0.22 calendar
Role: Advisory Committee

RECENTLY INACTIVE

PI: Ostroff

Title: Understanding Tobacco Treatment Refusal Among African-Americans in the Context of Lung Cancer Screening

Time Commitments: 0.0 calendar

Supporting Agency: 3 R01 CA207442-03S1

Address: National Cancer Institute

Contracting/Grants Officer: Gordon B Willis, PhD

Performance Period: 8/9/2019 – 11/30/2022

Level of funding:

Project Goals: The goal of this diversity supplement is to provide mentored research training focused on advancing understanding of recruitment and retention of African American smokers in a tobacco treatment trial.

Specific Aims: Aim 1: To gain a better understanding of participant refusal in a tobacco treatment trial among African- American smokers using a rigorous qualitative approach. Aim 2: To develop and evaluate a recruitment strategy designed to recruit African-American smokers in a tobacco treatment trial.

Role: Principal Investigator

PI: Gillespie

Title: Improving Radiation Contour Quality at the Point of Care by Integrating 3D Image-based Contouring Guidelines, Radiographic Anatomy, and Feedback into the Clinical Workflow

Time Commitments: 0.10 calendar

Supporting Agency: Radiologic Society of North America EI1902

Performance Period: 7/1/2019 - 6/30/2023 NCE

Level of funding:

Project Goals: This study provides radiation oncologists with a novel comprehensive point-of-care educational image-based decision support tool that facilitates the delivery of highly conformal radiation treatments that are safe, effective, and evidence-based. Specific Aims: The specific aims are 1: Expand eContour content as a clinical decision support resource and 2: Develop and test eContour as a point-of-care educational and feedback tool for residents.

Role: Co-Investigator