

Assessing Health-related Quality of Life in Cancer Survivors: Factors impacting on EORTC QLU-C10D-derived Utility Values

The EORTC QLQ-C30 is a widely used cancer-specific quality of life questionnaire which comprises 15 dimensions assessed by 30 items on a 0 to 100 scale. While clinically and patient relevant, measures on a 0 to 100 scale cannot be used for comparative assessments of treatment costs and effects, as would be required in a cost–utility analysis (CUA). For CUA purposes, utility values are required which express HRQoL on a 0 to 1 scale, allowing survival to be adjusted for those effects – thereby estimating quality-adjusted life years (QALYs).

Recently, the EORTC QLU-C10D, a disease-specific multi-attribute utility instrument (MAUI), was derived from the EORTC QLQ-C30. The introduction of the QLU-C10D facilitates the estimation of cancer-specific utility values for datasets where the EORTC QLQ-C30 is available, regardless of cancer type, and has been endorsed by the EORTC Quality of Life Group.

A recent study by van Gelder et al. investigated the factors influencing EORTC QLU-C10D utility values across five cancer types (non-Hodgkin lymphoma, multiple myeloma, colorectal, thyroid, and prostate cancer) and a general population sample.⁽¹⁾

This study used data from the Dutch population-based Patient-Reported Outcomes Following Initial treatment and Long-term Evaluation of Survivorship (PROFILES) registry collected between 2009 and 2012. The EORTC QLQ-C30 data were used to estimate utility values by applying the EORTC QLU-C10D instrument using Australian utility weights. Regression analyses were conducted, within and across cancer type, to examine the factors influencing utility values, including patient- and cancer-specific factors, as well as the EORTC QLQ-C30 scale/item scores.

The mean utility value for the total cancer

sample was 0.791 (SD 0.201), significantly lower than that from the general population (0.865, SD 0.165). Multiple myeloma patients had the lowest utility value of 0.663 (SD 0.244). Physical functioning, pain and nausea and vomiting were the domains with the greatest impact on utility values whilst cognitive functioning and dyspnoea had the lowest

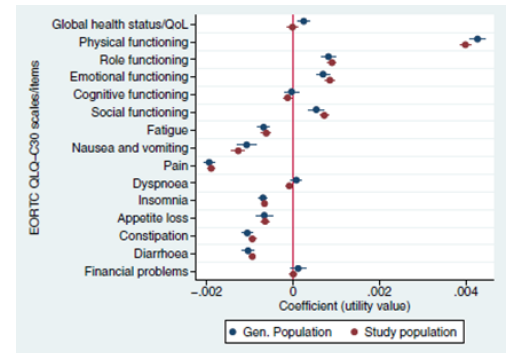


Figure 1: Plot of the regression coefficients

impact (see Figure 1). Of the demographic and clinical factors, unemployment for reasons other than retirement, age older than 75 years, number of comorbidities, and experience of symptoms all had a statistically significant negative impact on utility values.

This study is one of the first to apply the EORTC QLU-C10D algorithm to existing EORTC QLQ-C30 responses to calculate utility values for different cancer types. It enhances our understanding of how the EORTC QLU-C10D performs across cancer types, supporting its use in cost–utility analyses.

1. King et al. (2018). Australian Utility Weights for the EORTC QLU-C10D, a Multi-Attribute Utility Instrument Derived from the Cancer-Specific Quality of Life Questionnaire, EORTC QLQ-C30. *Pharmacoeconomics* 36(2): 225-238.

2. van Gelder T, Mulhern B, Schoormans D, Husson O, Lourenço RD. Assessing health-related quality of life in cancer survivors: factors impacting on EORTC QLU-C10D-derived utility values. *Quality of Life Research*. 2020 Jan 14:1-2.

Contributed by Terence Khoo

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ANZUP



Many of us recently attended the ASCO GU meeting in San Francisco, where we were immersed in the latest in GU oncology research and treatment.

I was proud to see ANZUP had five Trial in Progress posters at ASCO GU for DASL-HiCaP, PCR MIB, P3BEP, BCG MM and UNISoN.

Trial News

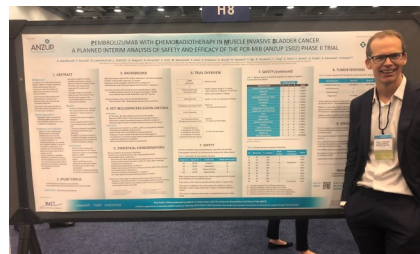
In February 2020, ANZUP's ENZAMET trial results were recognised as one of the most important clinical research findings of the past year in Clinical Cancer Advances 2020: ASCO's Annual Report on Progress Against Cancer. The US FDA in December 2019 approved enzalutamide as standard of care in the treatment of metastatic hormone-sensitive prostate cancer, and our ENZAMET trial data research supported this. All of this is testament to the fact that ANZUP through the ENZAMET trial has moved the field



Tamim Niazi, McGill University ahead for men with metastatic hormone-sensitive prostate cancer. Three of our trials reached their recruitment targets in 2019. The last patient was randomised to ANZUP's TheraP trial in September 2019, five

months earlier than expected; and the final patient was recruited to our UNISoN trial, nine months ahead of the planned recruitment timeline. And in November the Pain-Free TRUS B team recruited their final patient.

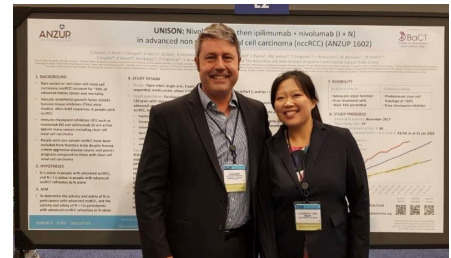
Earlier this year we held three Investigator Meetings for upcoming Prostate Cancer trials – DASL-HiCaP a Phase 3 trial, ENZA-p a Phase 2 trial, and #UpFrontPSMA, another Phase 2 trial



Andrew Weickhardt, Austin Hospital which ANZUP is co-badging. Other ANZUP sponsored and co-badged trials had a strong finish last year and continue to do well into 2020.

ICECaP and Health Economics

Work is continuing on how we can apply the work of the ICECaP (Intermediate Clinical Endpoints for Cancer of the Prostate) project for use in making decisions about funding new treatments for prostate cancer. This work, led by A.Prof R De Abreu Lourenco and conducted by Rafael de Feria Cardet, is critical in being able to use earlier data on treatment benefit from clinical trials to support funding decisions. Most recently, the team – including input from members of the ANZUP Executive and CAP - have piloted an online survey about what influences decisions to support funding prostate cancer care and has continued to develop an economic model that shows how the results from the ICECaP project can be used to estimate treatment cost-effectiveness.



Craig Geyde and Liz Liow at ASCO GU

Below The Belt Melbourne Pedalthon, ANZUP ASM & COVID-19

Amid intensified global concerns around the COVID-19 pandemic, ANZUP made the difficult decision to both postpone our Below The Belt Melbourne Pedalthon event and cancel this year's Annual Scientific Meeting, due to be held in Adelaide in 2020.

We are planning to hold the Melbourne Pedalthon later in 2020, dates to be confirmed.

Every cent raised through ANZUP's Pedalthon events is directed toward ANZUP's Below the Belt Research Fund, which provides seed funding for pilot studies which have the potential to develop into fully sponsored trials. Visit www.belowthebelt.org.au now to find out more.

We have some good news and have secured dates to hold the ASM in Adelaide from Sunday 18 to Tuesday 20 July 2021.

The ASM provides a platform to discuss and present the latest updates in GU cancer treatment, research and supportive care and to learn more about existing and planned ANZUP trials.

Follow the #ANZUP21 hashtag on Twitter for regular updates or register through our website at <https://anzup.org.au/content.aspx?page=asm-preview2020>

Contributed by Nicole Tankard

Australasian Leukaemia & Lymphoma Group (ALLG)



**Better treatments...
Better lives.**

ALLG Scientific Meeting Goes Virtual

In light of recent and unprecedented developments regarding COVID-19, the ALLG is revising the format of its Scientific Meeting in May to a virtual meeting. Typically held twice per year, the ALLG Scientific Meeting in its new format will continue to bring together ALLG members to deliver the latest findings from clinical trials and correlative research into haematological malignancies. Now, more than ever, is the time to collaborate and deliver new findings and treatments to improve the lives of those living with blood cancer.

Registration for the meeting is exclusive for ALLG member clinicians, scientists, registrars and trial staff. If you are a scientist and interested in becoming an ALLG member or collaborating with the ALLG, please contact the ALLG on info@allg.org.au.

Unlock your potential with the National Blood Cancer Registry (NBCR)

Scientists can engage with us through our National Blood Cancer Registry (NBCR) & Biobank. The NBCR is ANZ's largest collection of real-world acute myeloid leukaemia and blood cancer data, providing serial longitudinal data collection regarding outcomes and clinical pathways for several blood cancers. The ALLG holds an extensive collection of blood and tissue samples that are accessible to scientists for approved research purposes. Please contact the ALLG on info@allg.org.au if you are interested in conducting research through the NBCR.

Scholarships & Awards Program

The ALLG is pleased to announce its 2020 Scholarships & Awards Program. Two scholarships are available – the Anne Lenton Memorial Scholarship (\$5,000) and Janey Stone Perpetual Award (now \$4,000) – to support the professional development and skills of trial coordinators, research nurses, data managers and nurses caring for clinical trial patients. This program is exclusively for ALLG Associate Members and provides a great opportunity to study and pursue scientific research projects and encourage the improvement of clinical trial processes. Applications close April 17, 2020.

GCCTI Workshop for Cooperative Trial Groups

Dr Carolyn Grove, ALLG Member and Senior Lecturer and Clinical and Laboratory Haematologist from Sir Charles

Gairdner Hospital (SCGH) and PathWest, represented the ALLG with Steven Yau, ALLG Project Manager, at the Genomic Cancer Clinical Trials Initiative (GCCTI) Workshop in February. She presented a summary of her experiences in grant submissions to several cooperative trial group members in Sydney.

The GCCTI supports Australia's cancer cooperative trials groups in providing training for member researchers to develop concepts and grant applications for molecular-targeted clinical trials. This year's workshop focused on the priorities for and generating ideas to fulfill grant opportunities for 2020. The GCCTI have noted that the key priorities for grant submissions in 2020 and beyond include involvement of multiple cancer types and multiple cooperative groups.

Contributed by Cara Markovic



Dr Carolyn Grove recently attended the GCCTI Workshop in Sydney with the ALLG's Project Manager, Steven Yau.

Personalised Medicine in Paediatric Cancer Care: What Matters in Decision-Making?

Treatment decision-making in paediatric oncology has become increasingly complex due to recent advances in genomic sequencing and novel or 'personalised' therapies. The understanding of healthcare provider (HCP), parent and community attitudes towards this type of technology is currently limited.

One way of exploring preferences for treatment is via the use of a survey technique called discrete choice experiments (DCEs). DCEs are based on the theory that goods and services can be described by their attributes (characteristics), and individuals choose the combination of attributes which they most prefer.

A recent study by McCarthy et al. used DCE to examine factors that inform decision-making related to genomic sequencing and personalised therapy in the context of difficult-to-treat childhood cancer.(1)

The participants were presented eight

scenarios, varied based on nine attributes: potential survival benefit, prognosis, likelihood of finding a target drug, quality of life (QoL), parent/HCP preference, need for a biopsy, cost and funding source. The participants were asked to consider whether or not they would choose (parents and community) or recommend (HCP) a genomically guided approach to the child's/patient's care in each scenario. This was completed via an online survey. The data were analysed using a probability regression model (PROBIT) for the overall sample and differences between respondent groups were examined.

The participants comprised of 130 Australian and New Zealand HCPs, 126 parents of childhood cancer survivors and 531 community members. Overall, the probability of recommending or agreeing to genomics increased significantly with improved prognosis, potential survival benefit, improvements in QoL, and where it was supported by

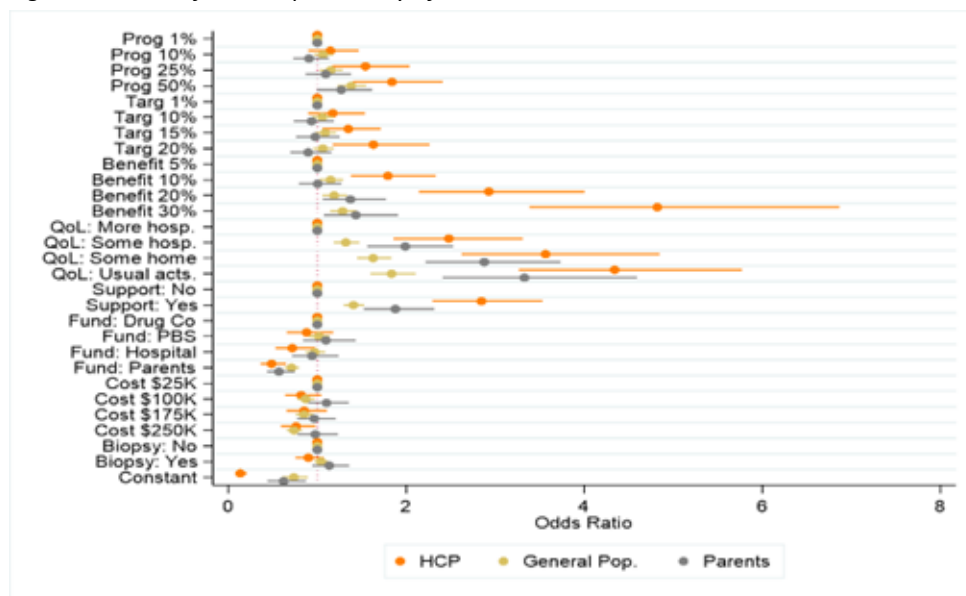
the decision-making partner (see Figure 1). It decreased based on increasing cost of care and if parents were the source of funds. Sample-based results showed that HCPs were more responsive to all factors, community members were least concerned regarding QoL or support for the decision, and parents were least concerned regarding costs or the likelihood of finding a target. None were influenced by whether or not a biopsy was required.

This study provides important insights into the factors that influence preferences for genomics and personalised medicine across three stakeholder groups. The results are highly relevant for the development of clinical genomics programs and guiding ethical decision-making.

1. McCarthy M, Lourenço R, Gillam L, McMillan L, Sullivan M, Downie P. Personalised Medicine in Paediatric Cancer Care: What Matters in Decision-Making?. *PEDIATRIC BLOOD & CANCER*. 2019;66

Contributed by Terence Khoo

Figure 1: What influenced probability of choice?



Abbreviations: Prog = prognosis; Targ = target; QoL = quality of life

Australasian Gastro-Intestinal Trials Group (AGITG)



AUSTRALASIAN GASTRO-INTESTINAL TRIALS GROUP

Progression in pancreatic and oesophageal cancer research

The first patient has joined the MASTERPLAN clinical trial investigating pancreatic cancer treatment. The trial is now open in four sites across Australia, using a new form of radiotherapy that delivers a highly concentrated dose directly to the tumour site.

When the results of the DOCTOR trial, led by Professor Andrew Barbour, were published in December 2019, they showed that for patients with potentially curable oesophageal and gastro-oesophageal junction cancer, measuring early metabolic response could be useful for directing therapy



Professor Andrew Barbour, Principal Investigator of the DOCTOR and GAP trials.

options. The results of the GAP trial, also led by Professor Barbour, have also been published, finding that for patients with pancreatic cancer, the combination treatment nab-paclitaxel/gemcitabine is tolerable when given before surgery.

Moving beyond traditional models

We will always be committed to doing whatever we can to help our patients, and this year we looked beyond AGITG-sponsored studies and implemented the AGITG Endorsed Study Model. In 2019, AGITG endorsed PALEO and NEO-CREATE - both are recruiting oesophageal cancer trials. AGITG encourages clinicians to consider this model to seek AGITG endorsement of their research concepts.

Providing access to research specimens

We invite researchers to submit an application to access stored biological specimens under the Translational Research Model. Providing access to these specimens means that even closed studies can add value to the research community, and foster the development of new study ideas.

Unravelling the myriad challenges of GI cancer

The 2020 Annual Scientific Meeting, convened by Dr Lorraine Chantrill, will be focused on 'unravelling the myriad challenges of GI cancer'. The program includes dedicated Trainee and Study Coordinator workshops, as well as presentations from an expert group of

Invited Faculty. Find out more at asm.gicancer.org.au.

Collaboration between experts in early stage oesophageal cancer

Following the success of the inaugural Idea Generation Workshop in 2019, this year's Workshop will take a targeted approach. We are calling for submissions of embryonic research ideas focusing on early stage oesophageal cancer to be discussed throughout the day, to determine the direction for future research. All that you need to apply is a one paragraph description of your idea – find out more at <https://gicancer.org.au/the-agitg-idea-generation-workshop/>.



Professor Tim Price, AGITG Chair

No Gutsy, No Glory

Two Gutsy Challenge adventures are planned this year, to raise awareness and funds for AGITG research. Experience some of Australia's most breathtaking landscape on a seven-day trek through Kakadu, or explore regional New South Wales with your family as part of the Treasure Road car rally. Find out more at gicancer.org.au/Gutsy.

Contributed by Jennifer Worgan

Breast Cancer Trials



Cancelled - Breast Cancer Trials Annual Scientific Meeting

The Breast Cancer Trials (BCT) Board of Directors has taken the decision to cancel BCT's 42nd Annual Scientific Meeting, in view of the current situation concerning the spread of the coronavirus (COVID-19) and the unknown future impact this may have.

BCT has a duty of care to its' members, sponsors, staff, delegates and the wider community, to minimise the risk of further spread of the COVID-19. Collectively the Board felt it was also in the best interests of our members and guests to arrive at this decision now to prevent the potential loss of investment people may make in order to attend the meeting.

The BCT ASM Secretariat will directly contact anyone who has already registered, as well as sponsors and exhibitors, about this decision. The confer-

ence was scheduled to be held from 22-24 July 2020 in Auckland, New Zealand. For any questions, please contact the BCT ASM Secretariat at asm@bctrials.org.au.

The BRCA-P Clinical Trial

BCT is proud to announce the first patient in Australia has been enrolled onto the BRCA-P clinical trial.

This trial is testing the effectiveness of a drug called denosumab to decrease or prevent the risk of developing breast cancer in women who carry the BRCA1 gene mutation. These women carry a 70% risk of developing breast cancer and a 40% risk of developing ovarian cancer, over the course of their lifetime.

The first woman enrolled in the trial is a patient at Lake Macquarie Private hospital, NSW and is also the first patient



Professor Geoffrey Lindemann, Study Chair of the BRCA-P Clinical Trial

enrolled outside the clinical trial host country of Austria.

The BCT Study Chair of the BRCA-P clinical trial is Professor Geoffrey Lindeman. To find out more about the BRCA-P clinical trial, visit www.breastcancertrials.org.au/brca-p.

Breast Cancer Trials researchers honoured in Australia Day Honours

BCT congratulates founding members Professor John Collins and Professor John Simes for their recognition in the 2020 Australia Day Honours.

Professor John Simes was recognised with an Order of Australia for distinguished service to education, and to medicine, in the field of cancer research and clinical trials. Professor John Collins was recognised as a Member of the Order of Australia (AM) for significant service to medicine, particularly to breast cancer treatment.

Professor Simes and Professor Collins have made a significant contribution to clinical trials research in Australia and New Zealand, and we thank them for their service to the field and to the BCT research program.

Contributed by Anna Fitzgerald

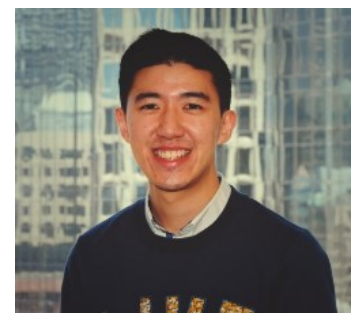
New staff at CREST

We would like to introduce you to Terence Khoo, who has recently joined CHERE and has come on board as part of CREST.

Terence joined CHERE as a Research Fellow in March 2020 and is a member of the economic evaluation team. He completed his Bachelor of Pharmacy (Honours) and Graduate Certificate in Pharmacy Practice at Monash University, and Master of Management at Melbourne Business School, University of

Melbourne. He is currently completing his Master of Health Economics at Deakin University. Prior to joining CHERE, Terence worked at Celgene, a global biopharmaceutical company, as a member of the Health Economics and Market Access team. He was previously with Commercial Eyes as a consultant in Market Access and Medical Information. Terence has worked on a range of different projects including feasibility assessments and preparation of reimbursement submissions to the PBAC,

MSAC and PHARMAC with a focus in Oncology.



Terence Khoo

Australia and New Zealand Sarcoma Association (ANZSA)

The beginning of 2020 was all about planning and strategising for the Australia and New Zealand Sarcoma Association (ANZSA) team. We are working collaboratively with our stakeholders for some exciting initiatives planned throughout the year. We cannot wait to share them with you.

Save the date! The **2020 ANZSA Annual Scientific Meeting (ASM)** will be held on **10-11 October 2020 in Melbourne, Victoria**. We are delighted to announce our two international guest speakers –

Dr Kristy Weber (Chief of Orthopaedic Oncology at Penn Medicine and the Director of the Sarcoma Program at the Abramson Cancer Center. She is the first female president of the American Academy of Orthopaedic Surgeons).

Dr Angelo Paolo Dei Tos (Director of the Department of Oncology and Director of Pathology at the General Hospital in Treviso, Italy).

More details about the ASM will be made available soon. We hope you can make it this year.

Since its inception in 2008, ANZSA has been involved in more than 30 sarcoma-related studies and clinical trials, both locally and internationally. We are pleased to share some updates on our ongoing projects:

SARC032 – A Phase II randomised controlled trial of neoadjuvant pembrolizumab with radiotherapy and adjuvant pembrolizumab in patients with high-risk, localised soft tissue sarcoma of the extremity. This is a collaboration with the Sarcoma Alliance for Research through Collaboration (SARC) and is now open for patient recruitment in three sites in Australia – Peter

MacCallum Cancer Centre (VIC), Chris O'Brien Lifehouse (NSW) and Princess Alexandra Hospital (QLD).

NORTH – A Phase II study of panobinostat in paediatric adolescent and young adult patients with solid tumours including osteosarcoma, malignant rhabdoid tumour and neuroblastoma. This clinical trial is funded by the NH&MRC and jointly run with ANZCHOG. It is now open for patient recruitment in 14 sites – Peter MacCallum Cancer Centre (VIC), Chris O'Brien Lifehouse (NSW), Royal Adelaide Hospital (SA), Princess Alexandra Hospital (QLD), Monash Children's Hospital (VIC), Starship Children's Hospital (NZ), Sydney Children's Hospital (NSW), Queensland Children's Hospital (QLD), Christchurch Hospital (NZ), Royal Children's Hospital (VIC), Perth Children's Hospital (WA), Children's Hospital Westmead (NSW) and Royal Hobart Hospital (TAS), Women's and Children's Hospital (SA).

rEECur – International randomised controlled trial of chemotherapy for the treatment of recurrent and primary refractory Ewing sarcoma. This clinical trial is funded by a grant from CanTeen and is now open for patient recruitment in both adult and paediatric sarcoma centres across ANZ. The participating sites are Peter MacCallum Cancer Centre (VIC), Monash Children's Hospital (VIC), Prince of Wales Hospital (NSW), Sydney Children's Hospital (NSW), Starship Children's Hospital (Auckland, NZ), Perth Children's Hospital (WA), Queensland Children's Hospital (QLD), Christchurch Hospital (NZ), Princess Alexandra Hospital (QLD), Chris O'Brien Lifehouse (NSW),

John Hunter Children's Hospital (NSW).

For more details about the projects or want to be involved in the patient recruitment process, write to us contact@sarcoma.org.au.

ANZSA is always prepared to help sarcoma researchers in their endeavour to access sarcoma data. We have recently published a simplified guide of how to access sarcoma data as collected on ACCORD. If you are interested in utilising the data for your work, please do not hesitate to contact us.

Lastly, become an ANZSA member! We encourage you to join us as we provide members with a wide range of benefits, especially for those who are looking to embark on sarcoma related research. Apply through <https://sarcoma.org.au/pages/membership>.

We look forward to another fruitful year ahead, and we hope that you will partner with us in this journey to improving sarcoma diagnosis and treatment.

Contributed by Denise Caruso, CEO of ANZSA

Australia New Zealand Gynaecological Oncology Group (ANZGOG)

20 YEARS OF RESEARCH

2020 marks our 20th anniversary. We now have over 1,000 members, have conducted 45 clinical trials, with almost 4,000 women participating.



ANZGOG ANNUAL SCIENTIFIC MEETING CANCELLED

The ANZGOG Annual Scientific Meeting, scheduled for 25-28 March 2020, has been cancelled because of concerns regarding coronavirus (COVID-19).

The full ASM program has been re-scheduled to be held next year, again in Melbourne at the Crown Promenade, in early 2021. New dates will be advised soon so they can be noted in diaries.

All enquiries regarding the ASM 2020 cancellation, not covered here, should be directed to ANZGOG conference organisers at ANZGOG@yrd.com.au.

TRIAL UPDATES

STICs and STONeS – ANZGOG's first-ever preventative study – has also opened this year, at three sites to date. STICs and STONeS is led internationally by the Canadian Cancer Trials Group (CCTG) and by ANZGOG in Australia, where a total of seven sites are planned to open. "The study will provide a better understanding of how ovarian and fallopian tube cancers start and whether aspirin might be a useful prevention agent" Prof Kelly-Anne Philips, Principal Investigator of STICs and STONeS.

IGNITE, a Phase II signal-seeking trial of adavosertib targeting recurrent high grade serous ovarian cancer, opened to recruitment in January 2020. The trial is open at Peter MacCallum Cancer Centre and is planned to open at another nine sites.

MOCCA is another one of ANZGOG's international collaboration studies, which has recently fully recruited its patient quota, recruiting nine clear cell ovarian cancer patients in just five months.

For more information on ANZGOG's trials, please [visit our website](#).

FUND FOR NEW RESEARCH GRANTS

There were 14 applications received for the 2019 Fund for New Research Grants. Each application was reviewed by two assessors and discussed at the ANZGOG Research Advisory Committee (RAC). The ANZGOG Board reviewed and ratified the recommended priority projects on Thursday 21 November 2019. Grants were awarded to:

1. **Clinical concept – \$50,000: PI Haranya Dhillon, Pilot Qualitative study – Conquer Fear from Ovarian Cancer.**
2. **Pre-clinical concept – \$50,000: PI Prahlaad Raninga, Targeting MYC-**

dependent high-grade serous ovarian cancer via FACT complex inhibition.

Rochelle Fisher Grant – \$30,000: PI Genevieve Dall, Generating pre-clinical models for uterine leiomyosarcoma to help direct treatment.

1. Judith Meschke Bequest – \$50,000: PI John Hooper, Targeting metabolism to improve efficacy of ovarian clear cell carcinoma therapeutic agents.

WA Ladybird Foundation – \$30,000: PI Paul Cohen, Getting the MOST out of ovarian cancer follow up.

ASIA-PACIFIC RESEARCH COLLABORATIONS

ANZGOG research leader Prof Michael Friedlander AM and CEO Alison Evans were in Singapore in November, discussing an Asia Pacific collaboration for clinical trials with clinical leaders from Japan, Singapore and Korea. APGOT will focus on Phase II Clinical Trials and studies that can be co-developed with industry funders. Strong links are to be forged with ENGOT in Europe. Members can expect early access to new treatments for some of the more difficult to treat cancer subtypes through these clinical trials.

Contributed by Assoc Prof Philip Beale, ANZGOG Chair



November 2019 APGOT meeting in Singapore.

Primary Care Collaborative Cancer Clinical Trials Group (PC4)

Podcasts

Cheers with Peers Season 2 concentrates on all things mid-career researcher. [Dr Jennifer McIntosh](#) talks to senior researchers about how they navigated being a mid-career researcher. Dr McIntosh and her very select guests, discuss the challenges faced by mid-career researchers and share experiences that helped shape their ca-

reers. Highlights of the season include a deep dive with Professor Meredith-Temple Smith into being a great supervisor and a discussion with Professor Lyndal Trevena about managing clinical practice and a research career.

Become a Member

Are you interested in joining PC4?

PC4 membership is free and open to all

researchers, health professionals as well as members of the public with an interest in cancer research in primary care. Our members access exclusive resources online to guide and support their research.

Visit pc4tg.com.au/join-us for more information.

Contributed by Kristi Milley

CREST Capacity Building in the Age of COVID-19

CREST has a long-standing commitment to providing capacity building opportunities for the CTGs and its memberships.

Whether its our face-to-face workshops on incorporating health economics into cancer research, consumer focused workshops or online written materials, we strive to provide opportunities to build capacity for health economics research.

Despite the current uncertainties with the coronavirus, 2020 will be no different. What may be different is how we offer our program of 'live' teaching. Links will soon become available that will allow CTG members to access modules on health economics and preference research from last years' workshops. Watch out for an email to let

you know when these become available on the CREST website.

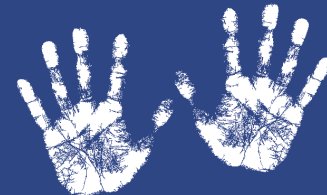
In the meantime, you can continue to access our full suite of CREST resources on the website. CREST staff continue to be available to provide advice and support regarding the inclusion of health economics in cancer clinical trials. If you would like to get in touch please reach out to:

⇒ Nancy.kim@chere.uts.edu.au

⇒ [@chere.uts.edu.au](https://twitter.com/Richard.deabreulourenco)

Contributed by Richard De Abreu Lourenco

Have you washed your hands?



Clean your hands thoroughly for at least 20 seconds with soap and water, or an alcohol-based hand rub to protect yourself from viruses.



Find the facts
health.nsw.gov.au/coronavirus

What has CREST been up to?

Trial Group Collaborations:

Presentation at the CST HDR Workshop in January 2020.

Attendance and presentation at the CST Research Forum held, February 2020.

Attendance and presentation at the ALTG CDW/SAC held in Melbourne, February 2020.

Presented at the AGITG Lunch and Learn session, February 2020.

Attendance at the AGITG Working Party TCs, February and March 2020.

Other Activities:

Membership of scientific advisory /steering committees.

Ongoing correspondence with Clinical Trial Groups.

Providing ongoing health economic technical support to the Clinical Trial Groups.