

Cancer Preparedness in Asia-Pacific: progress towards universal cancer control



The cancer burden in Asia-Pacific is significant with an estimated 8.8M new cases in 2018. With changing demographics associated with ageing populations and changing lifestyles, this burden is only set to grow. Countries in the vast Asia-Pacific region show great diversity in their healthcare needs, and responses to cancer can be highly influenced by a country's stage of economic development.

A recent study by The Economist Intelligence Unit (2020), sponsored by Roche, examined the complexities of the cancer challenge facing ten countries in the Asia-Pacific region: 1) High-income group: Australia, Japan, South Korea; 2) Upper-middle-income group: China, Malaysia, Thailand; 3) Lower-middle-income group: India, Indonesia, Philippines, Vietnam. (1)

The study focused on the findings from The Economist Intelligence Unit's Asia-Pacific Index for Cancer Preparedness (ICP). The ICP measures how ready healthcare systems are for the challenge of cancer through three broad domains: policy and planning; care delivery; and health system and governance. Results for the 2019 global ICP (which evaluated 28 countries based on 45 separate indicators) were reviewed to provide a comprehensive overview of how well the ten included countries were doing in the key areas of challenge. For example, how well prepared are the countries to achieve major reductions in premature deaths from cancer, increases in cancer survival rates, and improvements in quality of life of cancer patients and survivors. This review was supplemented with input from local experts and extensive desk research to gain additional insights on preparedness.

Overall, Australia ranked first (92.4) in cancer preparedness, topping each of the key domains (Figure 1). The study found a strong positive association between income levels and performance in overall cancer preparedness. While healthcare spending (as a percentage of GDP) was positively associated with performance in the index, there was a stronger association with political will, an indicator that included not only funding but also institutional aspects such as presence of health technology assessment (HTA) agencies and commitment to universal healthcare coverage.

In policy and planning, the study noted that Malaysia, Australia and South Korea, offered the best examples of cancer registries in the region. Further, Australia was shown to have comprehensive and effective policies on tobacco control. In care delivery, the study stated that high-income countries such as Australia were leading the implementation of screening programmes for common types of cancer. In health system and governance, Japan ranked first (10.9%) in total health expenditure as a proportion of GDP, followed by Australia (9.2%). South Korea and Australia were the only two countries with maximum scores for HTA programmes as it is a legislative requirement for HTA results to be used in decision making in these countries.

The cancer challenge across Asia-Pacific is growing across the board, significantly impacting communities, societies, and economies overall. The results of this study highlight important differences between countries within the region and can help countries compare their progress with, and possibly learn from, the performance of others. This is with a view to ultimately enhancing cancer preparedness in the region, leading to better outcomes for cancer patients.

Contributed by Terence Khoo

1. The Economist Intelligence Unit. *Cancer Preparedness in Asia-Pacific: Progress towards universal cancer control. 2020.* Available from: <https://worldcancerinitiative.economist.com/cancer-preparedness-asia-pacific>

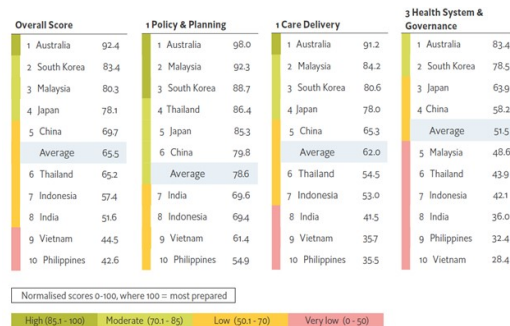


Figure 1: Index for Cancer Preparedness – Asia-Pacific results

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Australasian Leukaemia & Lymphoma Group (ALLG)



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

On the back of the resounding success of its May Virtual Scientific Meeting, the Australasian Leukaemia & Lymphoma Group (ALLG) is again holding its October scientific meeting in a virtual format. The ALLG expects over 500 ALLG Members, staff and supporters to attend the week-long event, running from October 12 to 16. The October meeting will feature new sessions, more international guest speakers, and a joint poster abstract session for trainees and registrars facilitated by the HSNZ. Full trial updates from the various disease-focused working parties, including Acute Leukaemia & MDS, CLL, CML & MPN, Laboratory Sciences, Lymphoma, Myeloma, Supportive Care and the Transplantation & Cell Therapies Working Parties, will be provided. In addition, the ALLG will release its 2019-20 Annual Review at its annual general meeting, scheduled for Thursday, October 15. ALLG Members are encouraged to attend the AGM to recap the year from a corporate and scientific perspective.

In exciting news, the ALLG MM13 clinical trial was published in late July in the *Journal of Clinical Oncology*. Led by Chief Investigator (CI) and ALLG Scientific Advisory Committee Chair, A/Prof Peter Mollie, the MM13 trial results are a significant advancement for patients living with systemic light-chain (AL) amyloidosis, showing that bortezomib significantly improved response rates and overall survival in previously untreated patients. The absolute improvement in survival of approximately 30% with the addition of bortezomib is a staggering result almost

never seen in blood disorders.

The ALLG also has a full pipeline of upcoming ALLG trial ready to launch across Australia and New Zealand.

- **ALLG AMLM23** (CI: Prof Paula Marilton) has begun recruiting at lead site, Princess Alexandra Hospital in Brisbane as well as Fiona Stanley Hospital in Perth. The trial, which is the Australian arm of a European study, HOVON150, run by the HaematoOncology Foundation for Adults in the Netherlands (HOVON) and the German-Austrian AML Study Group (AMLSG), aims to understand whether the addition of new therapies to existing standard treatments improves outcomes in patients newly diagnosed with specific sub-types of acute myeloid leukaemia (AML) and myelodysplastic syndrome (MDS).
- **ALLG AMLM24** (CI: A/Prof Andrew Wei) will be launched soon. This trial is the Australian arm of a HOVON-AMLSG co-run international trial,

which is investigating whether the addition of new therapies to existing standard treatments, improves outcomes in patients newly diagnosed with specific genetic sub-types of AML.

- **ALLG AMLM25 “INTERVENE”** (CI: A/Prof Andrew Wei) has begun recruiting at three sites, including the lead site at the Alfred Hospital in Melbourne. This trial aims to improve treatment for people aged > 60 years with AML who have not already received previous chemotherapy, or those who are not able to receive intensive initial chemotherapy.
- **ALLG CML13 “ASCEND-CML”** (CI: Dr David Yeung, Prof Timothy Hughes) will also be launching soon. The trial aims to improve treatment for people with chronic myeloid leukaemia (CML) by reducing the side-effects seen with current standard therapies.

ALLG *Virtual* Scientific Meeting

WEEK OF OCTOBER 12, 2020

Global Leaders, Global Impact
through Partnerships & Collaboration

ALLG (cont.)

- **ALLG NHL33 “WAMM”** (CI: A/Prof Eliza Hawkes) has begun recruitment at the lead site, Austin Hospital, as well as Princess Alexandra Hospital. The trial is testing a new treatment for treatment-naïve Mantle Cell Lymphoma (MCL) called acalabrutinib when added to combination chemotherapy and autologous stem cell transplantation, which are the standard treatments for this condition.

For regular ALLG new and trial updates, please check out the latest issue of ALLG News [here](#). Subscribe to our bi-monthly ALLG News [here](#).

Contributed by Cara Markovic

CREST’s ongoing Capacity Building Support

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

Whether it’s 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. 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
- Richard.deabreulourenco@chere.uts.edu.au



Primary Care Collaborative Cancer Clinical Trials Group (PC4)

PC4 are excited to announce the return of our podcast “Research Round-up” which is hosted by PC4 National Manager Dr Kristi Milley. Kristi dives into current cancer research and how this impacts primary care. Research Round-up includes a wide range of researchers and provides insight into current and historical contexts of cancer in primary care literature.

You can find all our episodes here: <http://pc4tg.com.au/tag/podcast-research-roundup/>

We would love your feedback if you’d like to comment on your favourite episode.

We have adapted to a new online environment and have organised a range of online workshops for our Early Career Researcher Network (ECRN). The ECRN provides support for our members to develop their skills and knowledge. Our latest two workshop have been a huge success with Prof Jon

Emery (PC4 Director) and Dr Claudia Rutherford (Quality of Life Office) hosting them. Our next workshop we be hosted by Dr Natalie Taylor from the Cancer Council of NSW and will focus on implementation and hybrid trial design. We are always welcoming new researchers so head to our website to join.

PC4 recently developed a graphic design tools pack for our members. This included websites and free downloads that would help produce plain language

statements, consent forms, trial summaries, powerpoint presentations, conference posters and funding applications that stand out.

Stay tuned for our upcoming PC4 and CaPRI webinars that will be available to all PC4 members. Not a member? It’s easy to join and FREE. You get exclusive access to events, resources and can network with your peers. Join here: pc4tg.com.au/join-us/

Contributed by Carmody Forbes



Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP)

Trial News

In August 2020, we activated our ENZA-p trial (ANZUP 1901) and the first patient was randomised at Austin Health on Monday 17 August, marking a huge milestone for all involved in the project. The ENZA-p trial is an ANZUP-led randomised phase II trial using PSMA as a therapeutic agent (Lutetium-PSMA) and prognostic indicator (PSMA-PET) in men with metastatic castrate-resistant prostate cancer treated with enzalutamide. The study is being led by Prof. Louise Emmett from St Vincent's Hospital in Sydney and aims to recruit 160 patients, across 12 sites.

difficult decision to postpone our July 2020 ASM due to COVID-19. Due to overwhelming support from our members, we will be holding a mini-ASM on Sunday 29 and Monday 30 November.

Professor Henry Woo will be the #ANZUP2020 Convenor and popular sessions such as the MDT Masterclass, Symposium, ANZUP Trial Updates and ANZUPx will return in 2020 and we promise to deliver one of the most engaging and interesting meetings of the year.

Look out for some surprises, innovation ('not just another Zoom

the one event you don't want to miss this year, so put the date in your diary and [register to attend today!](#)

ANZUP GU Preceptorship in Prostate Cancer

ANZUP will again be holding our GU Preceptorship in Prostate Cancer with Convenor Professor Eva Segelov ably supported by her co-conveners Cam McLaren and Shahlini Subramanian.

The 1 ½ day virtual workshop will cover landmark clinical trials in prostate cancer and participants are trainees and junior specialists in urology, radiation oncology, medical oncology, nuclear medicine and imaging.

Applications will open soon for the virtual event being held on Friday 11 and Saturday 12 (am only) December 2020.

Asia Pacific Advanced Prostate Cancer Consensus Conference

On Monday 26 October 2020 ANZUP will be hosting the inaugural 'virtual' Asia Pacific (APAC) Advanced Prostate Cancer Consensus Conference (APCCC) Satellite Symposium. The objective of the Symposium is to review recommendations from the 2019 St Gallen APCCC held in Basel,



ANZUP @ANZUPtrials · Aug 17

Congrats to @Austin_Health recruiting 1st pt @ANZUPtrials #ENZAp study led by @drlouiseemmett & team with collaborators #ProstateCancerResearchAlliance @MovemberAUS @CancerAustralia @adacap_news @AstellasEurope #ARTnet @StVincentClinic @roymorganonline @GenesisCare @TrialsCentre



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Our DASL-HiCaP trial (ANZUP 1801) continues to open more sites across the country (16 sites so far) and has recruited 30 patients since opening on 30 April. It has been great to see this important trial for men with high-risk localised prostate cancer able to be activated and start recruiting during this COVID-19 period. Congratulations to everyone involved and we look forward to opening the trial internationally later this year. Other trials to spotlight and congratulate for their recruitment efforts include TIGER, PCR-MIB, KeyPAD, UNICAB and in July the NMIBC-SI evaluation study completed recruitment.

#ANZUP2020 Mini Annual Scientific Meeting (ASM)

Earlier in the year we made the

conference') and impressive national and international guests - that the ANZUP ASM has become renowned for. We are also planning to host a number of 'hubs' across the country (where possible with COVID restrictions), where people can watch the meeting together (socially distancing of course!). #ANZUP2020 is



#ANZUP2020

ANZUP Cancer Trials Group Limited

Mini Annual Scientific Meeting
29 - 30 November 2020

ANZUP (cont.)

Switzerland and to consider their relevance and applicability in the context of healthcare in the APAC region. We believe there may be particular issues relating to the diversity within the APAC region with respect to prostate cancer biology, epidemiology, genetics, and of course implications for health care relating to models of care, social norms, and health economics. A paper will be drafted from our discussions and will be submitted for publication in the BJUI.

Below the Belt #YourWay Challenge
This month ANZUP is holding our inaugural [Below the Belt #YourWay Challenge](#). During the month participants can run, walk, swim or cycle #YourWay as many kilometres as they can to raise awareness and much

needed funds for below the belt cancer research. Improve your fitness, raise awareness and help us fund future clinical trials for below the belt cancers.

Contributed by Nicole Tankard



Sydney Quality of Life Office (SQOLO)

The Sydney Quality of Life Office is pleased to announce the three-part Educational series is now available online to all members and staff of the Cancer Clinical Trials Groups (CTG).

We recommend all new CTG staff, and new investigators considering collecting Health-related Quality of Life and Patient-Reported Outcomes (PROs) in their studies watch all three of these short presentations by Dr Claudia Rutherford covering the basic considerations for collecting PROs in clinical trial research.

1. [What is Quality of Life? Definitions and Terminology](#) (12 minutes)
Access code: **QOL-TS**
2. [How to select a Patient-Reported Outcome Measure](#) (24 minutes)
Access code: **QOL-TS**
3. [Principles of good Patient-Reported Outcome research design](#) (22 minutes)
Access code: **QOL-TS**



Presenter:

Dr Claudia Rutherford

Senior Research Fellow and Deputy Director, Sydney QOL Office, School of Psychology, and à Beckett Senior Research Fellow, Sydney Nursing School, University of Sydney.
Co-Editor-in-Chief, Quality of Life Research Journal.

Please also note that many of our resources are online and accessible to all CTG members and staff. If you are developing a CTG led/endorsed study,

you can contact us directly for advice on including PROs via our online query form or by email.

Contributed by Margaret-ann Tait



THE UNIVERSITY OF
SYDNEY



Australia New Zealand Gynaecological Oncology Group (ANZGOG)

ANZGOG'S TRIALS NOW OPEN TO RECRUITMENT

Despite the challenges faced with COVID-19, ANZGOG has been able to ensure that all its trials are open to recruitment and a number of other studies are in development.

COVID-19 has represented an unprecedented challenge to the health and research sectors. During this time, the safety and well-being of patients, research participants and their families, and health care professionals, researchers and other staff involved in patient care and research have been ANZGOG's priority. We wish to thank our Operating Centres and Sites for their commitment to ANZGOG's trials and the amazing work all our teams have done to look after patients and ensure the best approach for treatment on our trials.

Please follow the links through this update to our website to see the details of trials underway.

AtTEnd OPENS TO RECRUITMENT

The AtTEnd study is now recruiting in Australia. AtTEnd is a double blind randomised placebo controlled trial of atezolizumab in combination with paclitaxel and carboplatin in women with advanced/recurrent endometrial cancer. The trial is led internationally from Italy by Mario Negri Gynecology Oncology Group (MaNGO) - Istituto di Ricerche Farmacologiche "Mario Negri" and is led by ANZGOG in Australia.

OVARIAN CANCER NATIONAL ACTION PLAN

ANZGOG has united with Ovarian Cancer Australia and the Australian Society of Gynaecologic Oncologists (ASGO) to launch the Ovarian Cancer National Action Plan (NAP) 2020 –

2025. This continues ANZGOG's focus on collaborations which will raise awareness for ovarian cancer research, increase collaborations and impact on improving life for women and their families.

ANZGOG'S RESEARCH RECEIVES FUNDING

It's congratulations all round to a number of ANZGOG members for their successful MRFF grant initiatives in reproductive and gynaecological cancers to be conducted under the ANZGOG banner. Prof Linda Mileskin, A/Prof Rhonda Farrell, and A/Prof Chee Khooon Lee achieved a total of \$4.3 million in funding, allocated to projects in the recent MRFF grant announcement via Health Minister Greg Hunt MP.

ANZGOG was also able to achieve philanthropic funding for Assoc Prof Pamela Pollock, whose pre-clinical study into endometrial cancer has been awarded Perpetual grant funding.

ENDOMETRIAL CANCER WORKSHOP

ANZGOG held an exciting Endometrial Cancer Research Workshop in September to identify its research goals for endometrial cancer. 55 researchers attended with an outstanding interest in driving a wide range of new research activities and collaborations. Attendees came from every state in Australia and also New Zealand, representing surgical, radiation oncology, physicians, quality of life, health economics and pre-clinical and translational researchers, as well as consumers. A steering committee is being formed this month with the goal of taking the initiative public in early 2021.

ANZGOG has a very full calendar of research development activities

through to our Annual Scientific Meeting which will be held Friday 12 February 2021. We are conducting a number of educational activities with a Preceptorship in Cervical Cancer in late November, consumer education sessions for our Consumer Research Panel and Research Development meetings during October. Watch this space to learn more about TR-ANZGOG (translational ANZGOG) a significant new program supporting gynaecological cancer translational research which is being launched in October this year.

ANZGOG is celebrating 20 years of Research in 2020 with the largest number of open trials, 1065 members in Australia and New Zealand and a strong focus on further new research development and collaborations, both locally and globally.

I wish to thank our many committed members who give their time voluntarily and our staff for helping to ensure ANZGOG has continued to conduct its trials during this difficult time.



Contributed by Associate Professor Philip Beale, Chair of ANZGOG



Improving life for women through cancer research

Australasian Gastro-Intestinal Cancer Trials Group (AGITG)

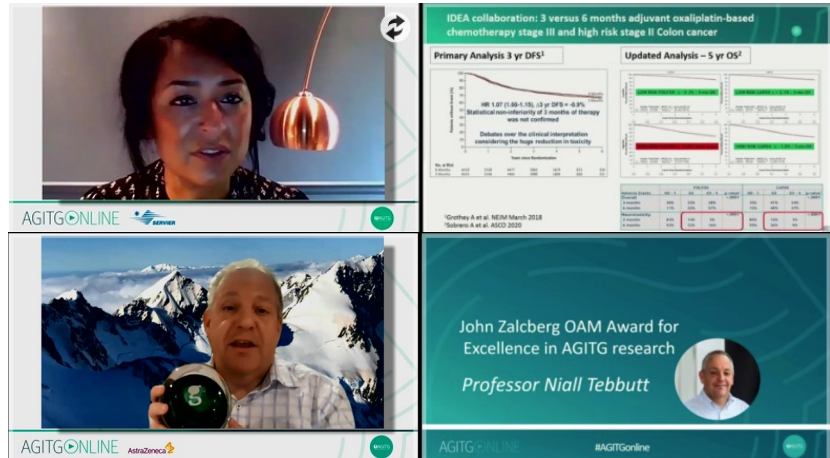
#AGITGonline: The 22nd AGITG Annual Scientific Meeting

For 2020, the Australasian Gastro-Intestinal Trials Group (AGITG) Annual Scientific Meeting (ASM) went virtual for the first time. Over 460 AGITG delegates connected online to share the latest updates in GI cancer clinical trials and research.

Meeting Convenor, Professor Stephen Ackland, welcomed delegates from across Australia and New Zealand, as well as Invited Faculty from Japan and the United Kingdom. “At the AGITG we have a family culture. We like to demonstrate that people can speak their minds at meetings, have fun, and interact well,” he said, setting the tone for a lively and engaging day ahead.

The meeting featured two insightful Keynote presentations, sponsored by Servier. Professor Kohei Shitara, medical oncologist at Japan’s National Cancer Center East, presented the Opening Keynote on ‘Gastric Cancer: Current practice and controversies/developments’. While Doctor Naureen Starling, Consultant Medical Oncologist at the Royal Marsden Hospital, London, closed the meeting with her presentation exploring ‘Colorectal Cancer: Current Practice and Controversies/Developments’.

The meeting featured updates on the AGITG’s Upper and Lower GI cancer



(Top) Dr Naureen Starling presents the Closing Keynote, (Bottom) Professor Niall Tebbutt accepts the John Zalberg OAM Award for Excellence in AGITG Research

trials, as well as the ever-popular New Concepts Symposium and Best of Posters Session, highlighting innovative new concepts and research.

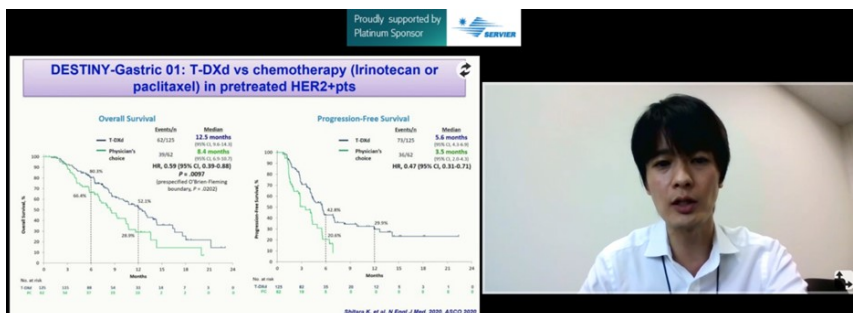
The 2020 AGITG awards were:

- **The John Zalberg OAM Award for Excellence in AGITG Research** was awarded to Professor Niall Tebbutt, the Director of Medical Oncology at the Olivia Newton-John Cancer Research and Wellness Centre.
- **The AGITG Outstanding Site Award** was presented to Monash Health, and accepted by Unit Manager Karen Gillett.
- **The Merck-AGITG Clinical Research Fellowship for 2021-22** recipient was announced as Doctor Fiona Paxton-Hall.

- **The AGITG Member Fundraiser of the Year** was Doctor Matthew Burge for raising over \$47,000 this year for the Innovation Fund through the Gutsy Challenge.
- **The Best New Concept Award** went to Associate Professor Jeanne Tie for ‘RESOLUTE: Randomised Phase II Trial to Evaluate the Strategy of Integrating Local Ablative Therapy with First-Line Systemic Treatment for Unresectable Oligometastatic Colorectal Cancer’.
- **The Best of Posters Award** was presented to Doctor Oliver Piercey for his Poster on ‘Adjuvant chemotherapy in elderly patients with stage III colorectal cancer’.

Despite the COVID-19 pandemic, the collegiality and enthusiasm of AGITG members meant that the ASM was not only the group’s first virtual meeting, but one of its best yet. There has been great progress with our research and all AGITG members are to be acknowledged for their commitment to furthering GI cancer research, while always keeping the patient at the centre of their work.

Contributed by Erin Burgess



Professor Kohei Shitara presents the Opening Keynote

What Matters to Potential Patients in Chemotherapy Service Delivery? A Discrete Choice Experiment

The preferences of patients are important in designing and funding patient-centric chemotherapy care. In Australia, specialist care is heavily concentrated in metropolitan settings which represents a major logistical challenge for people with cancer living outside of these cities. Issues such as convenience, outcomes, cost, and continuity of care are all potentially important in how patients access care. However, how patients might value these different aspects of care is not clear.

Norman et al. (2020) recently conducted a study to quantify the relative value of the different aspects of chemotherapy service delivery by administering a discrete choice experiment in an older Australian general population sample without cancer. (1)

The survey asked respondents a series of hypothetical choice sets which allowed estimation of the relative value of different aspects of care (Table 1). The selection of appropriate attributes was undertaken through a brief review of the literature around patient preferences for chemotherapy and subsequent discussion with a Consumer Reference Group consisting

Attribute	Level
Psychological (emotional) and social support	Available staff specialising in emotional health No available staff specialising in emotional health
Setting in which chemotherapy is delivered/travel time to get to the chemotherapy unit	At home Private, patients are in individual cubicles/30–60 min away Private, patients are in individual cubicles/more than 60 min away Open, patients can see other patients/30–60 min away Open, patients can see other patients/more than 60 min away
Number of times you have to receive treatment each cycle	Twice in any three-week period Once in any three-week period
Continuity of care after completing chemotherapy	Information about your treatment will be provided to your local GP to allow them to follow you up Your oncologist will follow you up
Hair loss	You will experience complete hair loss over the 18 weeks You will experience partial hair loss over the 18 weeks
Out of pocket cost (in Australian dollars) to you for the entire 18-week treatment (including cost of treatment and any over-the-counter medicine you may need)	\$1000 \$3000 \$5000

Table 1: Final attributes and levels used in the experiment (Source: Norman et al. (2020))

Attribute	Conditional logit			Mixed logit	
	Level	Coefficient (SE)	WTP (\$) (95% CI)	Coefficient (SE)	Standard deviation (SE)
Psychological (emotional) and social support (base is provided)	No support	-0.637 (0.044)***	-962 (-1182, -805)	-0.819 (0.061)***	0.752 (0.097)***
Location/distance (base level is home-based)	Private, 30–60 min	-0.919 (0.069)***	-1386 (-1605, -1168)	-1.123 (0.076)***	0.226 (0.242)
	Private, more than 60 min	-1.515 (0.081)***	-2285 (-2550, -2021)	-1.924 (0.089)***	0.546 (0.141)***
	Open, 30–60 min	-1.216 (0.083)***	-1835 (-1571, -2098)	-1.511 (0.091)***	0.862 (0.164)***
	Open, more than 60 min	-1.799 (0.084)***	-2713 (-3003, -2424)	-2.351 (0.092)***	0.165 (0.312)
Treatment per course (base is two)	Once	0.065 (0.042)	98 (-25,222)	0.161 (0.057)***	0.830 (0.099)***
Continuity of care (base is GP)	Oncologist follow-up	0.585 (0.045)***	882 (745,1,019)	0.821 (0.064)***	1.152 (0.089)***
Hair loss (base is complete loss)	Partial loss	0.223 (0.041)***	336 (217,455)	0.326 (0.051)***	0.168 (0.124)
Cost (\$000 s)	Thousands per course	-0.663 (0.026)***		-1.293 (0.056)***	0.843 (0.050)***
Log likelihood		-4841		-4421	

Statistical significance is denoted at the 1% (***), 5% (**) and 10% (*) levels
CI confidence interval, SE standard error, WTP willingness to pay

Table 2: Conditional logit and mixed logit (Source: Norman et al. (2020))

of three people with personal experience of chemotherapy.

These attributes were used to develop a survey that asked respondents to choose between different chemotherapy services. A total of 1,062 individuals were included in the analysis.

There was a strong population preference for home-based chemotherapy, follow-up by a specialist, psycho-social support, and low-cost care (Table 2).

The results showed that respondents differed in the preferences for the

various attributes; there was heterogeneity observed in the choices made. The authors noted that this suggests that it is important that the treating team explores each patient's value set separately when designing care for an individual patient.

The study concluded that population preferences should be considered when designing chemotherapy care. This information can help policymakers identify the components of good value care. The authors stated that future studies should aim to compare the preferences of the general population to a cohort of people with experience of chemotherapy.

Contributed by Terence Khoo

1. Norman, R., Anstey, M., Hasani, A. et al. What Matters to Potential Patients in Chemotherapy Service Delivery? A Discrete Choice Experiment. *Appl Health Econ Health Policy* 18, 589–596 (2020). <https://doi.org/10.1007/s40258-020-00555-y>

Australia and New Zealand Sarcoma Association (ANZSA)

While COVID-19 continues to affect many within the sarcoma community, the Australia and New Zealand Sarcoma Association (ANZSA) is pleased to share that our research and clinical trials priorities are progressing well.

The ANZSA Virtual Annual Scientific Meeting (ASM) 2020 is now open for registration. It will be held via Zoom on Thursday, 8 October (4pm-6pm AEST) and Friday, 9 October (2pm-4pm AEST). The theme is "Sarcoma: What's New in 2020".

The program is designed to discuss the most up to date progress on sarcoma research and treatments. We welcome all local and international sarcoma specialists, researchers, allied health and nurses to join us.

We're also pleased that two international sarcoma specialists will be speaking at the ASM:

1. 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.
2. Dr Angelo Paolo Dei Tos – Professor of Pathology, University of Padua School of Medicine and Director, Department of Pathology, Azienda Ospedaliera Universitaria di Padova, Italy.

The ASM web pages are now live, and you can find more details of the program, international speakers, sponsors and abstracts.

You can register here - sarcoma.org.au/asm-2020/welcome. We look forward to seeing you online on 8 and 9 October.

ANZSA VIRTUAL ANNUAL SCIENTIFIC MEETING 2020

REGISTER NOW

8 OCTOBER 2020 (4PM-6PM AEST)

9 OCTOBER 2020 (2PM-4PM AEST)

As noted earlier, all ANZSA clinical trials and research have managed to continue with little disruption. It is encouraging to see that some sites have resumed clinical trial recruitment and that new research studies are being developed and are in the process of approvals.

We have three ongoing clinical trials open for patient recruitment:

- **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. Open for recruitment across three sites in Australia.
- **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 across Australia.
- **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. It is now open for patient recruitment in 11 sites across Australia.

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

July was a busy month for ANZSA as we organised many initiatives in conjunction with Sarcoma Awareness Month. Our webinar topics on clinical trials, managing practical issues, and survivorship issues were well received by health professionals and consumers alike. Similarly, Dr Denise Caruso, ANZSA CEO, was interviewed by Rare Cancers Australia and the Cooper Rice-Brading Foundation to raise awareness for sarcoma and ANZSA. We are thankful to our partners and all who participated.

Lastly, we are saddened to hear about the passing of our friend, mentor and colleague – Prof Martin Tattersall AO.

Prof Tattersall was a founding Board Director and member of ANZSA (then known as ASSG). It was his vision to bring together the adult and paediatric sarcoma researchers around Australia -

ANZSA (cont.)

and New Zealand to improve the outcomes of patients with sarcoma.

Prof Tattersall's work will continue to influence sarcoma care in Australia and globally. His desire to ensure progress in sarcoma biology and treatments, including paediatric types, ensures he is recognised as a holistic sarcoma pioneer for all.

To honour Prof Tattersall's incredible contribution to sarcoma research and care, ANZSA has named the plenary lecture at our ASM The Professor Martin Tattersall Lecture.

You can read our tribute to Prof Tattersall on our website.

Contributed by Jeffrey Goh

What has CREST been up to?

Trial Group Collaborations:

Attendance at various ANZUP Subcommittee meetings, July and August 2020.

Attendance at AGITG Upper and Lower GI Working Party Teleconference, August 2020.

Attendance at the BCT Research Strategy – Focus Group Teleconference, August 2020.

Participation at TROG Scientific Advisory Committee online reviews, September 2020.

Attendance at the ANZGOG Endometrial Cancer Initiative Workshop, September 2020.

Presentation at the BCT consumer group Workshop, September 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.

Scheduled meeting with Executive Officers of various Clinical Trial Groups and other Technical support services to discuss Health Economic needs and identify areas of collaboration.

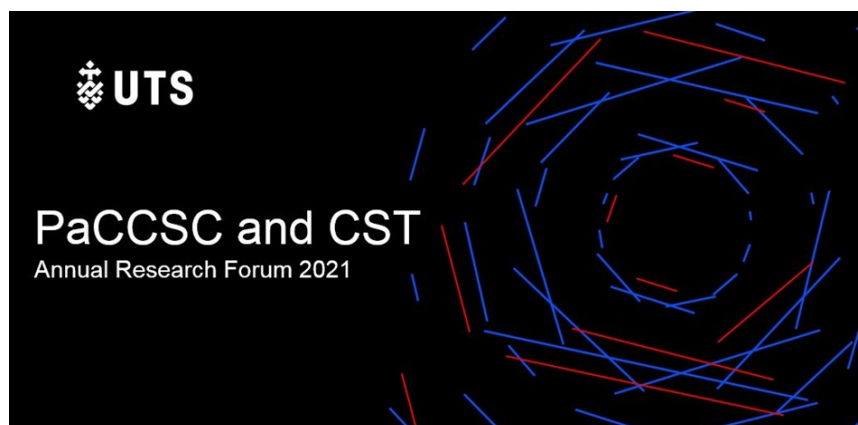
Cancer Symptom Trials (CST)

The PaCCSC and CST Annual Research Forum is our principal annual event. Past forums have supported new study ideas, provided networking opportunities and forged new collaborations.

We're back in 2021 with the theme Clinical Trials in a Changing World. This will be a joint forum for both PaCCSC and CST, bringing together leaders in palliative care and cancer symptom management.

Don't miss this chance to hear from our keynote speaker, Dr R Sean Morrison, Director of the National Palliative Care Research Center in New York. More information about the program and speakers will be updated at the link below in the coming weeks.

Contributed by Linda James



Event details

Date/time: Thursday 11 March 7.30am – 6.00pm AEDT

Friday 12 March 7.30am – 10.00am AEDT

Where: Online via Zoom

More info: [PaCCSC and CST Annual Research Forum 2021](#)

Register: [Forum registration](#)

Contact: PaCCSC@uts.edu.au

Breast Cancer Trials (BCT)

Discretionary Funding Projects

Full Members of Breast Cancer Trials (BCT) are eligible for discretionary funding support, to develop collaborative, high quality research projects and clinical trials, that aim to find new and better treatments and prevention strategies for breast cancer.

Projects include: pilot studies for proposed BCT trials; sub-studies of existing research protocols; small-scale translational research studies; and projects related to research methodology. One-off grants of up to \$50,000 per year over 1-2 years are available and funding is available thanks to the generosity of BCT supporters.

Recent results of discretionary funding projects include:

- A new proof-of-principle laboratory study has shown promising results for the treatment of oestrogen receptor positive (ER+) breast cancers that are resistant to current approaches, providing support for a potential new clinical trial. The project received discretionary funding which was awarded to Associate Professor Elgene Lim from



Elgene Lim

the Garvan Institute of Medical Research.

- New research has found that patients with metastatic breast cancer may benefit from having their genome profiled, to help identify tumours that could be treated with a targeted treatment. Called the SEGMENT study, the aim of the proof of concept research was to examine the feasibility of characterising genomic alterations using a customised next generation multi-gene sequencing panel on tumour specimens obtained from patients with incurable and/or advanced breast cancer. The project received discretionary funding



Sherene Loi

which was awarded to Professor Sherene Loi from the Peter MacCallum Cancer Centre.

For more information about BCT discretionary funding or to become a member of BCT, visit

www.breastcancertrials.org.au.

2019- 2020 Annual Report

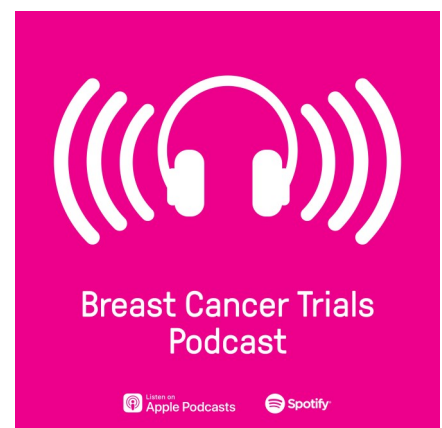
The Breast Cancer Trials 2019-20 Annual Report is now available on the BCT website and the report highlights our activities and achievements from 1 April 2019 to 31 March 2020. This year started like any other but as we've all seen, it has become an extraordinary time for us all. During the reporting period we have 8 clinical trials open to recruitment. There are almost 800

researchers from 107 institutions in Australia and New Zealand involved in the conduct of the BCT research program. More than 16,000 women have participated in our clinical trials since 1978.



The Breast Cancer Trials Podcast and Blog

Stay up to date with breast cancer research news and related topics through the BCT Podcast and our blogs. You can subscribe to our podcast by searching for Breast Cancer Trials in Apple podcasts, Spotify or Google Podcasts.



Contributed by Anna Fitzgerald

Trans-Tasman Radiation Oncology Group (TROG)

It's been another crazy few months but the way we have all continued to adapt and persevere has been commendable. Our team have been working from home while ensuring our world leading clinical trials continue.

Determination has never been in short supply with our team, and the way everyone has banded together during this time is remarkable.

A breakthrough in prostate cancer research — TROG 15.01 SPARK Trial

With over 16,000 Australian men estimated to be diagnosed with prostate cancer in 2020, we are proud

to be able to share our latest breakthrough thanks to the TROG 15.01 SPARK Trial.

The clinical trial, led by Professor Paul Keall and Professor Jarad Martin, proposes the use of KIM technology to provide more accuracy when targeting cancer cells.

This trial presents the opportunity for larger doses of radiation therapy to be given at each treatment session, thereby significantly reducing the number of sessions required. For example, a patient who previously required 40 visits may need as few as five.

Congratulations Professor Tomas Kron on receiving the TROG Cancer Research Lifetime Membership Award

Professor Tomas Kron has been working alongside our team for over twenty years, and in this time has been a key contributor to the success of our research and clinical trials.



He was the first physicist to provide significant support to TROG activities and first served as our Physics advisor between 1999-2001. He also played an important role as an advisor on the New Techniques and Technology committee, helping us maintain leading quality assurance systems and policies.

A huge thanks to Prof. Kron for his service and support over the years!

Contributed by Wendy Paterson

Trials recently closed to accrual

RAIDER (TROG 14.02)

Led by [Professor Robert Huddart](#) and [the Institute of Cancer Research in the UK](#), this trial has recently closed to accrual (April 2020).

345 participants were recruited, with 31 coming from TROG sites.

Many thanks to [Dr Ben Hindson](#) and the team at [Christchurch Hospital](#) who recruited 14 patients onto the study.

Participant follow up continues, with primary endpoint analysis expected to be completed in December 2021.

Thank you to all of the sites who continue to support this trial.

PET LABRADOR (TROG 12.02)

This trial has now closed to accrual with 24 participants randomised. Participant follow up continues. An analysis of MRI/PET imaging is planned for Quarter 3, 2020.

A big thanks to Trial Chair, [Associate Professor Verity Ahern](#) and [Westmead Hospital](#) for recruiting all participants in this study.



CREST Workshop videos available on the CREST website

As part of its capacity-building services for the Cancer Australia Collaborative Clinical Trials Groups (CTGs), CREST holds several health economics focused workshops each year.

Members of CTGs can access the material discussed at workshops via

short videos produced from previous workshops.

Topics currently available on the website include:

- Understanding health economics in cancer research

- Preferences in Cancer Trials – What Choices can tell us About Value
- Health Economics in Cancer Research – A Consumers' Guide

To access these videos please visit uts.edu.au/crest-training-videos

UNDERSTANDING HEALTH ECONOMICS IN CANCER RESEARCH

As part of its capacity building services, the Cancer Research Economics Support Team (CREST) is pleased to announce it will be holding a workshop at the Centre for Health Economics Research and Evaluation, UTS.

Title:	Understanding health economics in cancer research
Date:	9.30 am – 4.30 pm, <u>Monday 26th October 2020</u>
Venue:	Room 490, Level 3, Building 10, 235 Jones Street, Broadway, NSW
Cost:	<i>Registration is free to members of a Cancer Australia Co-operative Trials Group</i>

This workshop is for those working or interested in cancer research who may encounter health economics in research papers or policy documents, or who would like to consider how health economics may be incorporated into their own practice or research.

Workshop Program

The workshop will use a series of workshop-style seminars and exercises to provide theory and practical examples to cover:

- ⇒ An introduction to health economics and economic evaluation in research
- ⇒ Study design for economic evaluation in oncology research
- ⇒ Identifying, valuing and measuring outcomes
- ⇒ Identifying, valuing and measuring costs
- ⇒ Interpretation of results of economic evaluations

Participants at the workshop will receive a USB with course notes, including copies of the slides presented on the day, references used as examples throughout the workshop, and additional useful readings. Lunch and refreshments will be provided.

Participants will need to arrange their own travel to and from the workshop. CREST is unable to provide travel assistance for this workshop. The potential for online attendance will be considered pending demand.

To register, please send your name, trial group affiliation, any dietary requirements and whether you intend to attend in person or via online to:

Nancy Kim nancy.kim@chere.uts.edu.au

For more information about CREST, please visit our website: www.crest.uts.edu.au