Urban Latino African American Cancer (ULAAC) Disparities Project

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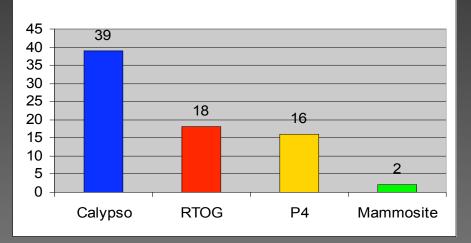


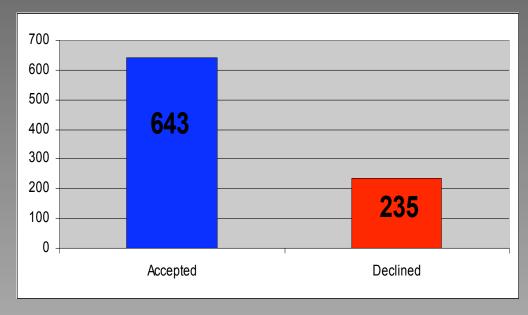




Patient Accrual

Protocol Patients





Chronology and Challenges

- Grant awarded on 09/30/2003 (Initially awarded to DF Memorial/Tenet)
- 9/04 Tenet Healthcare sells DF Memorial, DF Marina, Centinela Hospitals
 - Reorganized as Centinela Freeman Health System (CFHS)
- 18-months to open clinical trials
- 15-months to start navigating patients
- 6/06 Acute services at Daniel Freeman Memorial close (Radiation Oncology, ULAAC, and Rehabilitation Services remain)
 - Local church leases hospital space, which becomes more profitable as a movie set!
- 11/07, Centinela Medical Center sold to Prime Health System
 - New owner cancels Radiation Oncology Center venture
 - February 2008, Daniel Freeman Memorial Hospital closed
- CFHS had thought that ULAAC grant was "sold" to Prime
 - Neither administration wished to continue grant
- DF Memorial Staff and ULAAC staff flee
 - Clinical Research Coordinator, Nurse, Social worker, etc
 - Administrator takes another job and leaves with computers

Chronology recap

- February 2008, Radiation Oncology clinic to see patients for consultation and follow up
 - Radiation oncology patients receive daily treatment at Santa Monica
 Cancer Treatment Center, Santa Monica, CA
 - ULAAC office relocates back to original office space
 - ULAAC continues to provide navigation services
 - Telesynergy relocated to ULAAC office space
 - ULAAC staff disband due to uncertainty of grant
 - One staff member and a few navigators continue navigation services
 - ULAAC unable to conduct clinical trials due to status of grant
- Oscar Streeter becomes the Chairman of Rad Onc at Howard University
- Michael Steinberg becomes Chairman of Rad Onc at UCLA and agrees to continue to work with ULAAC as co-PI

- August 2008, NCI approves transfer of ULAAC grant to 21st Century Oncology/SMCTC
 - ULAAC still unable to conduct clinical trials until NIH approves paperwork
 - Begin recruitment of administrator, health educator, and clinical trial coordinator
- Santa Monica Cancer Treatment Center able to open AIM trial in 9/08 (clinical research coordinator provided by Calypso)
- <u>39 patients accrued to AIM trial in 8 months</u>

- Accomplishments
 - August 2008, began revving up clinical trials and navigation components
 - 39 Patient accrued to Calypso trial
 - August 2008, start development plans for new free-standing state-of-art cancer center, El Segundo, CA
 - July 2009, hired a clinical research associate (formerly from Calypso) with hopes of being awarded u54 grant
 - Began opening new RTOG trials
 - 9/09 Notified that we were not awarded u54
 - Options were reviewed to try to continue grant work
 - Initiated dialogue with Partners In Care Foundation for new funding opportunities
 - October 2009 submitted new RTOG 0614 & RTOG 0825 protocols to WIRB

 In January 2010, opened free-standing new start-of-the-art treatment facility "the *Los Angeles Cancer Institute*" in the city of el Segundo



- In February 2010, began seeking new funding opportunities to sustain clinical trial and navigation components
- March 2010- Initially it was thought that there would be sufficient funds to carry the grant for another 12 months. However, after all bills were paid, it became apparent that there would be enough money for 4 months, ie through June.

- In an effort to conserve cash, navigation services (primarily transportation) cut sharply
- Grant employees were notified of impending grant closure so that they could find another job
- In April 2010, grant winding down services and relocates the ULAAC staff to LACI to conserve funding

- In June 2010, Dr Khan facilitates transfer of Erika Cobb (Lead Navigator) to New Patient Coordinator at Los Angeles Cancer Institute (LACI)
- Dr Khan is currently negotiating with 21st Century Oncology to bring the current Clinical Research Coordinator as a full time employee at LACI

Moving Forward

- ULAAC changed hands 3 separate times over the life of the grant. As a result, key personnel were forced to relocate due to uncertainties associated with the future of the project.
- We hope to be able to retain the CRC and with the help of Erika who has gained invaluable experience with navigation, we have the tools to offer some basic navigation and expect to revive clinical trials

Moving Forward

 The 21st Century Oncology Foundation, 21st Century Care is planning on a golf tournament with proceeds to help facilitate cancer care for the underserved and navigation.

KEY ACCOMPLISHMENTS

- Enrolled 18 patients on RTOG trials (would have been many more if the hospital based program had not closed in 2007)
- Enrolled 39 patients on Calypso trial in 8 months (Highest accrual out of 6 sites).
- Established a clinical trial infrastructure.

KEY ACCOMPLISHMENTS

- Developed a lay patient navigator program to:
 - Decrease barriers to receive cancer care
 - Examine process of care and cancer disparities
 - Examine the possibility of increasing voluntary accrual to clinical trials though the function of the lay navigator

ACCOMPLISHMENTS (Cont.)

- Created a mapping process to:
 - Track and record barriers in real-time
 - Track navigator interventions
 - Improve navigation
 - Track patient care
- Implemented health analysis and quality assurance tools

New Publications/Presentations

- Patient Reported Reduction in Acute GU and GI Side Effects for Prostate Cancer Patients Treated with 81 Gy IMRT Using Reduced PTV Margins and Electromagnetic Tracking
 - Oral Presentation ASTRO 2009
- Reduction in Patient-Reported Acute Morbidity in Prostate Cancer Patients Treated with 81 Gy IMRT Reduced PTV Margins and Electromagnetic Tracking: Assessing the Impact of Margin Reduction
 - Sandler HM, Liu PY, Dunn RL, Khan DC, Tropper S, Sanda M, Mantz C. Urology 75(5): 1004-1008.
- Efficiency and Clinical Workflow of Delivering 81 Gy IMRT to the Prostate Within 2mm Tolerances
 - Poster ASTRO 2009