

MaineHealth

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Costas T. Lambrew Research Retreat 2021

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The NCI/NIH Cancer Moonshot BioBank (CMB) and the Maine Cancer Genetics/Genomics Education Core (ME-CGEC) Collaborate to Improve Cancer Care in Maine

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Cancer Moonshot BioBank (CMB):

Goal: To better understand drug resistance and sensitivity in patients with late stage (Stage III & IV) cancers that are receiving standard of care molecularly targeted therapies through next generation sequencing (NGS) of biopsy and blood samples collected longitudinally (diagnosis--treatment--progression)

CMB Study Plan:

5 cancers initially: lung, prostate colorectal, gastroesophageal and multiple myeloma. Future expansion to other cancers

Inclusion: age 13+, late stage cancer, SOC therapy only, consent to longitudinal sample collection, consent to collection of research biopsy, tumor amenable to image guided or direct vision biopsy

Exclusion: cannot be enrolled in a clinical trial or be receiving non standard of care therapy

Samples collected throughout MHCCN---15 sites

5 year study: 1,000-2,000 patients nationally (NCORP sites)

NGS testing: Ion Torrent Oncomine Comprehensive Assay and Foundation One Heme

Patient Provider Website: Return of NGS test results

Online Catalogue of Available Specimens

Development of PDX models

CMB Updates:

NCORP/CMB award received Dec 2019.

NIH CMB Launch: September 16, 2020

MHCCN Site Activation: Decmeber 8, 2020

Start Date: March 2021

MMP Oncology South Portland, SMHC and Pen Bay Medical Center

4 patients enrolled: 2 multiple myeloma and 2 colorectal cancer



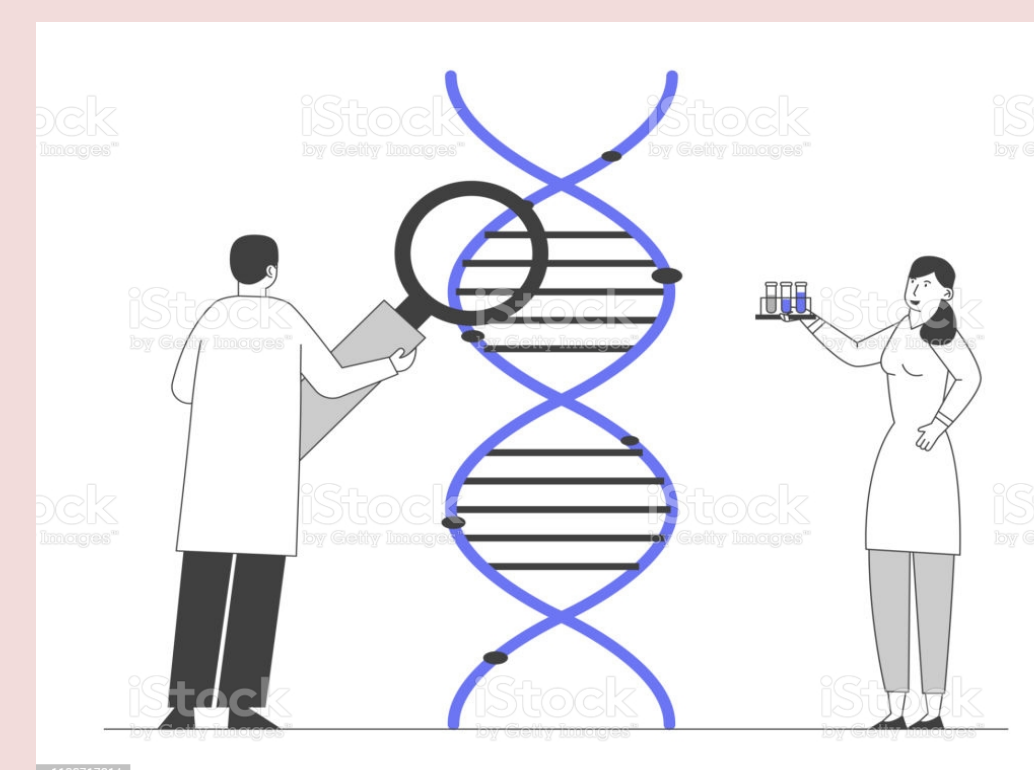
Stage III/IV
Cancer, CMB
eligible

What is genomic
testing? How will
it help me?



Patient/Provider
Advisory Board
& Focus Groups

NIH genomic
testing of CMB
tissue samples



Return of test
results: Patient/
Provider Portal

Guided therapy
options



Improved
patient care
and outcomes

Maine Cancer Genetics/Genomics Education Core (ME-CGEC)

GOAL: to examine/address treatment education, decision & social support needs of rural & socioeconomically disadvantaged MHCCN cancer patients, focused on barriers to CMB enrollment & related research by leveraging partnerships with rural sites, advocacy groups & existing collaborations

Aim 1. Identify barriers to participation of rural cancer patients in CMB

Aim 2: Develop inventory of educational and support resources to address barriers identified in Aim 1

Aim 3: Prioritize inventory and develop 2 resources based on Aim 1 results and feedback from stakeholders, including patients and providers and health literacy experts

ME-CGEC: Organizational Structure

The ME-CGEC Advisory Board (AB), composed of MH CMB, NCORP, MMCRI, NNE-CTR & JAX leaders, patient, provider, practice & advocacy organization representatives & educators/health literacy experts

- Establish, direct & oversee all short & long-term ME-CGEC efforts, facilitate CMB & NCORP communication/collaboration & seek funding to sustain ME-CGEC.

The ME-CGEC Community Advisory Board, composed of patient/family members from Western Maine Health & the Coastal Healthcare Alliance

- Provide input on recruitment/design of focus groups, comment on results & support solutions to barriers to care.

Focus Group Studies Team, composed of qualitative investigators and educators who will

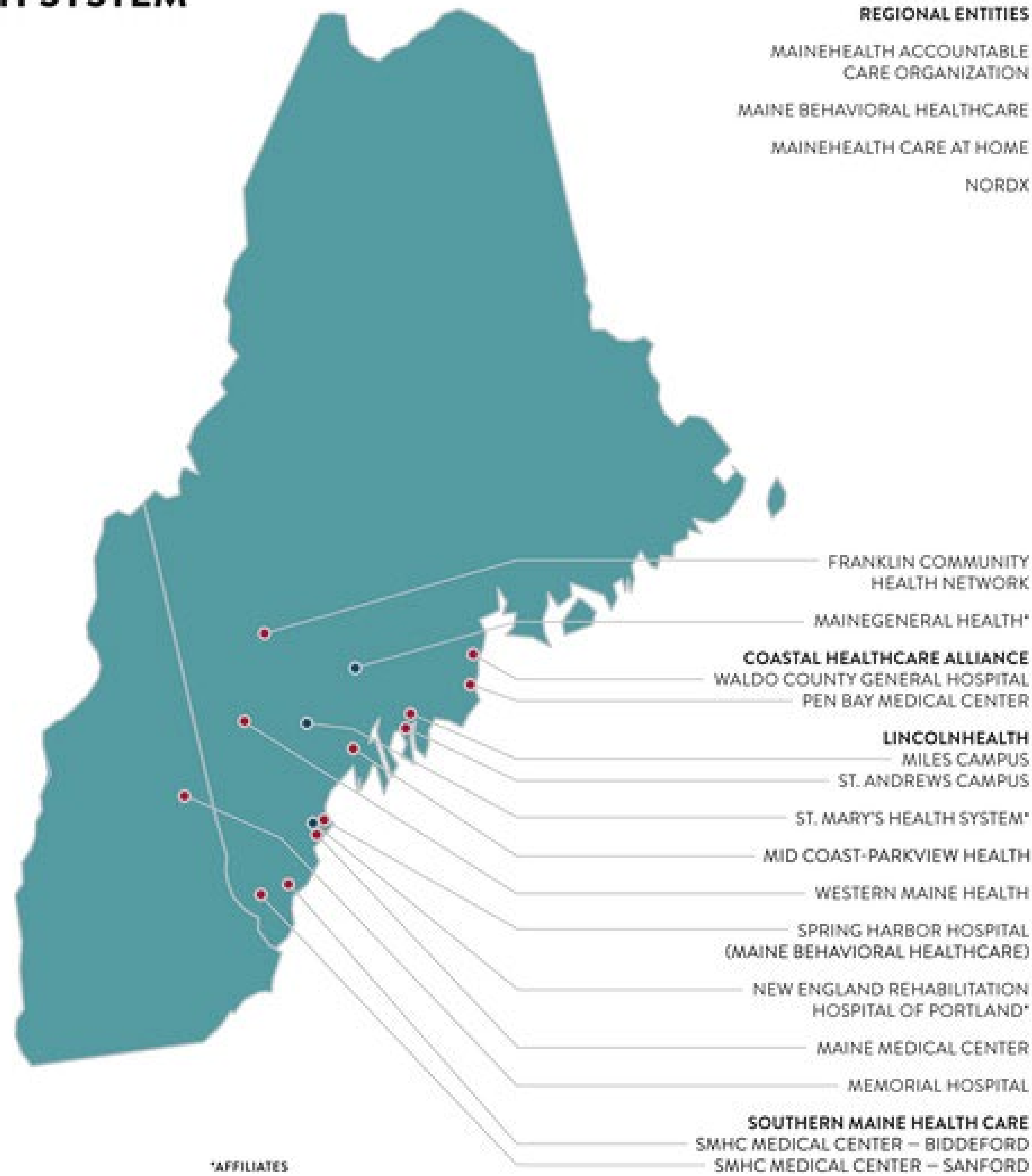
- Oversee development, implementation and analysis of focus group data
- Facilitate development of educational resources



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THE MAINEHEALTH SYSTEM



THANK-YOU!!!

QUESTIONS

