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Patient and Family Advisory Council

Cuthbert Lab & Oncology Outcomes

Welcome

Our teams are hard at work preparing several submissions for the September Canadian Institute of Health Research Project Grant competition. As we settle into our new office spaces at the new cancer centre, we are hard at work planning out Fall projects, including projects focusing on equity, diversity and inclusion in cancer clinical trials, and on leveraging pre-existing programs for rural cancer survivorship. We wish you all a happy end of summer and look forward to our upcoming meeting this Fall, please stay tuned for details

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Research Highlights

Oncology Outcomes

Cost-Effectiveness of Surveillance after Metastasectomy of Stage IV Colorectal Cancer.

STUDY PURPOSE

65%

of patients who undergo curative-intent metastasectomy for metastatic colorectal cancer may experience disease recurrence.

Surveillance can be effective for detecting asymptomatic recurrence.

There is limited evidence supporting current guidelines.



Determine the most cost-effective strategy for surveillance following curative-intent metastasectomy of stage IV colorectal cancer (CRC).

CONCLUSIONS & FUTURE IMPACT

Over a 10-year time frame, following up every 12 months for 5 years was most economically favourable.



Clinic Visits

Computed Tomography (CT) Scans

Carcinoembryonic Antigen (CEA) Testing



Even with guidelines, good clinical judgement is still essential for individual patient management.

There is a need for additional research to determine adherence to guidelines and the impact of surveillance on CRC outcomes.

Click [here](#) for full article.

Cuthbert Lab

Improvement in patient-reported pain among patients with metastatic cancer and its association with opioid prescribing.

STUDY PURPOSE

Opioids are a key component of cancer pain management.



However, metastatic cancer patients are often excluded from relevant studies.



There is a lack of evidence on whether increased prescribing (dosage/duration) results in improved outcomes for this population.

Investigate whether increased opioid prescribing is associated with an improvement in patient-reported pain among patients with metastatic cancer.

CONCLUSIONS & FUTURE IMPACT

Increased dosage or duration may **NOT** be leading to greater improvements in pain.



Metastatic cancer patients may have difficult-to-treat pain.

Multidisciplinary pain management strategies as a supplement for opioid prescriptions could improve outcomes.

Further studies are warranted to evaluate:

- Reasons for elevated symptom intensity among patients receiving opioid prescriptions.
- Utility of multidisciplinary pain management strategies to improve these patients' outcomes.

Click [here](#) for full article.

Study

Recruitment



We continue to actively recruit participants for several studies right now, including:

- ▶ Healthcare Provider and Patient Views on Prescribing Opioids for Cancer Patients. [Poster Link to Share](#)
- ▶ Patients Perspectives of Value Frameworks Used to Guide Oncology Treatment Decisions [Poster Link to Share](#)
- ▶ Remote Assessment of Physical Fitness Measures: Reliability and Validity Study [Poster Link to Share](#)

If you think the studies might be relevant to your contacts, please feel free to share the website or poster links. For the additional details on each study click [here](#).

Coming Up

The next newsletter will release in September 2024.

The next PFAC meeting will be in the fall, stay tuned for more details!

Previous issues of the PFAC newsletter have been posted online:

<https://www.cuthbertlab.com/advisory-council>

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