Improving accrual to interventional clinical trials and assessing diagnostic and genetic testing practices

2018-2019 PRIORITIES

• Improving breast cancer clinical care by focusing on:
  - Increasing accrual to clinical trials and building awareness
  - Identifying the proportion of high risk patients undergoing genetic testing and measuring turnaround times
  - Working together to harmonize care in the diagnosis and treatment of breast cancer
  - In Spring 2019: analysis of chemotherapy and radiation therapy wait times

STEERING COMMITTEE

The group aims to have multidisciplinary representation and meet at least 2x/year. 2018-19 meeting dates: April 2018, January 2019

Table 1: Steering Committee Membership

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Disciplines</th>
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<tbody>
<tr>
<td>Sarika Matarissian</td>
<td>MUHC</td>
<td>Surgeon</td>
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<td>Michael Thrillet</td>
<td>MUHC</td>
<td>Medical Oncologist</td>
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<td>William Foukes</td>
<td>MUHC-JGH</td>
<td>Geneticist</td>
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<td>Tanis Hjal</td>
<td>MUHC</td>
<td>Radiation Oncologist</td>
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<td>Frances Tremblay</td>
<td>MUHC</td>
<td>Surgeon</td>
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<td>Jean-Francois Boileau</td>
<td>JGH</td>
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<td>Cristiano Ferrario</td>
<td>JGH</td>
<td>Medical Oncologist</td>
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<td>Thierry Muirza</td>
<td>JGH</td>
<td>Radiation Oncologist</td>
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<td>Dawn Anderson</td>
<td>SMHC</td>
<td>Surgeon</td>
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<td>Adrian Langebien</td>
<td>SMHC</td>
<td>Medical Oncologist</td>
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<td>Natasha Ibrahim</td>
<td>RCN</td>
<td>Co-Leads</td>
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</tbody>
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BR1: Delays from biopsy to surgery

Fig 1: Patient pathway from symptom perception to treatment

- Diagnostic delay
- Biopsy delay
- Treatment delay

Fig 2A: Percentage of patients* receiving surgery within 50 days of biopsy (Measure 1)

- JGH
- MUHC
- SMHC

Fig 2B: Percentage of patients who have their surgery within 28 days of OR request (Measure 2)

- MUHC-JGH
- SMHC

BR3a: Genetic testing referrals for high risk breast cancer patients

BR3b: Genetic testing turnaround time for high risk breast cancer patients

Patient participation in clinical trials is a key measure of the delivery of quality care. In Canada, the breast cancer clinical trial participation ratio for 2014 was 0.041 (4.1%). ASCO states that exemplary clinical trials sites should accrue at least 10% of treated patients onto treatment-based clinical trials.

Enrollment Ratio in Breast Cancer Clinical Trials Across the RCN for 2016 and 2017

- JGH
- MUHC
- SMHC
- RCN

Fig 3: Enrollment ratio for breast cancer patients at the RCN

Fig 4: Distribution of interventional breast cancer trials across the Rossy Cancer Network as of November 2018

Data includes 382 prescreening events

Educational Session September 2018

Strategies to integrate clinical genetic testing in breast cancer patients’ trajectories of care within the RCN hospital sites

- A multidisciplinary educational session was held in collaboration with geneticist, Dr. William Foukes to discuss the current genetic testing delays within the RCN and what they are hoping to do to circumvent this issue.

- The mission is to offer rapid genetic testing to all newly diagnosed breast cancer patients, providing results within a 21 day period.

- Genetic Rapid Easy Access Testing (GREAT)/Analyse Génétique par Accès à un Test Accéléré (AGATA) clinic is expected to begin in 2019.

For questions, contact Natasha.ibrahim@mcgill.ca