

April 2026 | ISSUE #54

Patient and Family Advisory Council

Cuthbert Lab & Oncology Outcomes

Welcome

We are thrilled to share that we are officially planning for Real-world Data Research Day (R2D2): the second annual Oncology Outcomes in Real World Evidence Day. This exciting one-day event will include topics ranging from AI in healthcare to patient engagement and more. If you are interested in attending as a patient partner, please reach out to Christie!



Real-world Data Research Day (R2D2)

The second annual Oncology Outcomes in Real World Evidence Day

SAVE THE DATE

Date: Wednesday, November 4, 2026
Venue: Arthur J.E. Child Comprehensive Cancer Centre

Bringing together researchers, clinicians, analysts, and health system leaders to explore the evolving role of real-world evidence in oncology.

Stay Connected! More details coming soon

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We are also looking forward to discussing R2D2 and more at our next meeting, which will be held on May 11 from 4:00-5:30pm. Please save the date!

Research Highlights

Oncology Outcomes

Real-World Outcomes of Atezolizumab with Bevacizumab Treatment in Hepatocellular Carcinoma Patients: Effectiveness, Esophagogastroduodenoscopy Utilization and Bleeding Complications.

STUDY PURPOSE AND METHODS

The IMbrave150 trial...

- Established [atezolizumab + bevacizumab \(A+B\)](#) as [standard care](#) for [hepatocellular carcinoma \(HCC\)](#).
- Recommended [esophagogastroduodenoscopy \(EGD\)](#) within 6 months into treatment initiation.

To prevent bleeding from esophagogastric varices.

The necessity of mandatory EGD for all patients remains unclear.

Retrospectively analyzed **112 HCC patients** treated with **A+B** at **5 Canadian cancer centers** from **July 2020 to August 2022**.

CONCLUSIONS AND FUTURE IMPACT

A+B was first line therapy for **90%** of patients.

- Median overall survival = **20.3 months**.
- Median progression-free survival = **9.6 months**.

No survival difference was found between patients **with bleeding** and those **without**.



Outcomes for HCC patients treated with A+B in Canada were **comparable to IMbrave150**.

Omitting EGD in **specific HCC patients** may be a **safe and cost-effective** strategy for those undergoing A+B, **without** leading to **elevated risk of bleeding complications**.

[Click here for full article.](#)

Cuthbert Lab

PATIENT-REPORTED SYMPTOM BURDEN AND SUPPORTIVE CARE NEEDS OF PATIENTS WITH STAGE II-III COLORECTAL CANCER DURING AND AFTER ADJUVANT SYSTEMIC TREATMENT: A REAL-WORLD EVIDENCE STUDY

Colleen Cuthbert, Dylan O'Sullivan, Devon Boyne, Darren Brenner, Winson Cheung

Colorectal cancer (CRC) patients face various physical and psychological symptoms as part of their disease burden. This study looked at **symptom burden** and **care needs**, identifying factors linked to changes in severity.



PURPOSE

RESULTS

Common symptoms included **tiredness, pain, and poor well-being** both during and after treatment. Deterioration of symptoms was associated with older age, comorbidities, rural living, and higher income.



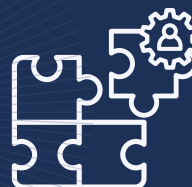
Conducted was a **retrospective study** on newly diagnosed **stage II-III CRC** patients in Alberta (2016-2019) using **surveys on symptoms & care needs during and after treatment**. We analyzed **changes in symptoms and key factors**.



METHODS

CONCLUSIONS

Most patients had low symptom severity, with symptoms improving or remaining stable. **Ongoing assessments and interventions** are needed to **address physical, psychological, and supportive care needs** during and after CRC treatment.



Study #1

Study Recruitment



What is the study about?

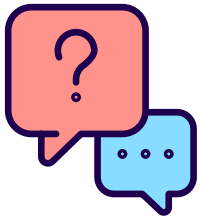
Head and neck cancer (HNC) treatment is often associated with physical and psychosocial burdens. Your participation will be used to understand the views of participants when it comes to difficulties involved on social isolation and loneliness during HNC treatment

What is involved?

Participate in an interview (**approximately 60 minutes**) to share your thoughts and views on social isolation and loneliness during cancer treatment

Who is eligible?

Individuals diagnosed with HNC as an adult and had completed treatment for at least 1 year



This study has received ethics approval from the Health Research Ethics Board of Alberta HREBA.CC-24-0468
Contact us at laisrenata.cezariosa@ucalgary.ca to join!



Study #2

Join Our Research Study!

Sociodemographic and Psychosocial Patient and Physician Factors in Oncology Treatment Decision-Making

What?

We want to understand how the background, experiences, and personal beliefs of patients and physicians affect the way they make treatment decisions together AND how these decisions impact patient's health. Share your experiences in a focus group with us!

Who?

- 18 years old or over
- Living in Alberta
- Received a cancer diagnosis within the past 2 years
- Referred to a medical oncologist for a chemotherapy assessment



Contact us at cacuthbe@ucalgary.ca

This study has received ethics approval from the Health Research Ethics Board of Alberta (HREBA.CC-25-0065). Contact HREBA at 780-423-5727. This poster was created in accordance with the HREBA.CC-25-0065-Patient ICF_V1 documented on February 10, 2025.

Coming Up

Our next PFAC meeting will be held on
May 11 from 4:00-5:30pm.

The next newsletter will release
in May 2026.

Previous issues of the PFAC newsletter
have been posted online:
<https://www.cuthbertlab.com/advisory-council>

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