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Patient and Family Advisory Council

Cuthbert Lab & Oncology Outcomes

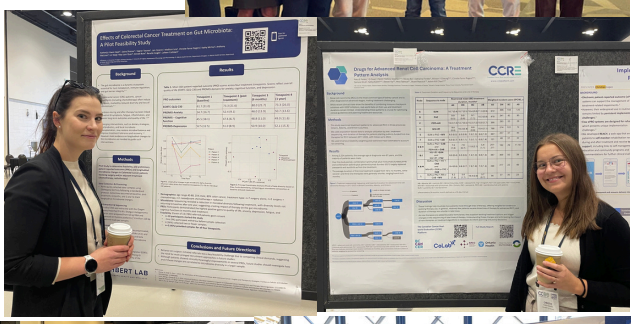
In this Issue

Welcome

Our teams recently attended the Canadian Cancer Research Conference where we had several posters from team members on topics ranging from mental health and cancer, biopsychosocial symptoms among head and neck cancer survivors, effects of colorectal cancer treatment on gut microbiota, and a treatment pattern analysis for advanced renal cell carcinoma drugs.

We attended 3 exciting days of presentations and are keen to implement many new ideas into upcoming projects. We also had the pleasure of seeing PFAC member John C at the conference!

CCRA ACRC 2025



RWE O2 Day

We are also thrilled to have successfully held our first ever Real-World Evidence (RWE) O2 Day on November 19!

This event brought together clinicians, scientists, administrators, and industry leaders with sessions on using RWE for cancer prevention and patient access, a framework for integrating RWE into healthcare decisions and programming, and a panel discussion on the opportunities and challenges of RWE in oncology. Based on the success of this event, we plan to host another one in 2026.

Research Highlights

Oncology Outcomes

The use of chemotherapy in older patients with stage II and III colon cancer: Variation by age and era of diagnosis.

STUDY PURPOSE AND METHODS

Older patients represent **72%** of colorectal cancer (CRC) cases in the US.

The incidence of CRC is expected to increase in the coming years.

Still, they remain underrepresented in clinical trials.

Lack of data adds to the challenge of preparing for the aging population.

Retrospective population-based analysis to determine trends in the use of, and outcomes associated with, adjuvant chemotherapy in older persons with stage II and III CRC.

RESULTS AND CONCLUSIONS

Administration of adjuvant chemotherapy for stage II /III colon cancer decreases with advancing age.

but improved outcomes are seen in stage III patients under 90 years of age.

Older adults should not be excluded from receiving adjuvant chemotherapy for stage III colon cancer based on age alone.

Future randomized prospective trials → Help to further define the benefit of adjuvant chemotherapy in older CRC patients.

Click here for full article.

Cuthbert Lab

THE CONTRIBUTION OF NONMEDICAL OPIOID USE TO HEALTHCARE ENCOUNTERS FOR OPIOID OVERDOSE AND USE DISORDERS AMONG LONG-TERM USERS WITH METASTATIC CANCER

Hannah Harsanyi, Lin Yang, Jenny Lau, Winson Cheung, Colleen Cuthbert

PURPOSE

Opioid misuse is recognized as a relevant problem among cancer patients. However, factors such as shorter prognoses and greater symptom burden complicate our understandings of these concerns. As such, this study aimed to investigate whether **nonmedical opioid use (NMOU)** was identified as contributing to **opioid-related healthcare encounters** among patients with **metastatic cancer** receiving **long-term prescribing.**

METHODS

This investigation consisted of the review of to cancer center visit records and opioid-related hospital encounters to identify **documentation of NMOU**. Patient **characteristics** were compared between those with and without documented NMOU.

Patient inclusion in this study was on the basis of:

- Stage IV cancer diagnosis
- had survival time ⩾ 1 year
- were opioid naïve at diagnosis
- receiving long-term opioid prescribing
- experienced ⩾ 1 hospitalization or emergency department visit relating to opioid overdose or use disorder

RESULTS

Charts of 46 patients were reviewed. Although NMOU contributed to opioid-related healthcare encounters, these events were often related to:

- **poorly controlled pain,**
- **declining functional status**
- **disease progression**

NMOU behaviors were documented for 35% of patients including **overuse of prescribed medications.** There were indications of use of opioids for psychological coping. Patients with NMOU were significantly more likely to have a **history of substance use** and **limited social support.**

CONCLUSIONS

Approximately **1 in every 3 patients experiencing opioid-related hospitalizations/emergency department visits had indications of NMOU.** Thus, the need for psychosocial care and interdisciplinary pain management to improve safe prescribing for patients with metastatic cancer is crucial.

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

The next newsletter will release in December 2025.

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

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