

September 2026 | ISSUE #59

Patient and Family Advisory Council

Cuthbert Lab & Oncology Outcomes

Welcome

September marks the start of a new academic year, and our teams have been busy welcoming and getting new trainees settled into their roles.

Early this month, we were also thrilled to submit three new grant applications to the Canadian Institutes of Health Research (CIHR), addressing important topics including the growing complexity of cancer care, cancer and cardiac comorbidities, and cancer and serious mental illness comorbidities.

These projects reflect our continued commitment to using real-world evidence to better understand the needs of people with cancer and improve the delivery of care.

We look forward to sharing more about these projects and other team updates at our next PFAC meeting on Monday, September 28 at 4:00 p.m. via Zoom.

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Research Highlights

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A Real World Observational Study Characterizing Patients With Advanced Prostate Cancer Treated With or Without Androgen Receptor-Pathway-Inhibitor Therapies in Alberta, Canada

STUDY PURPOSE AND METHODS



Prostate cancer is the most commonly diagnosed cancer among men in Canada. While early-stage disease has high five-year net survival, outcomes drop sharply with Stage IV.



- Androgen deprivation therapy (ADT) plays a key role in treatment but is not curative, with most patients progressing to metastatic castration resistant prostate cancer (mCRPC).
- Clinical trials have shown that adding androgen receptor pathway inhibitors (ARPIs) improves survival, yet real-world use, patient characteristics, and outcomes remain poorly understood.

This study used population-level data from Alberta to examine treatment patterns, clinical outcomes, and predictors of treatment of ARPIs in patients with both de novo metastatic castration resistant prostate cancer (mCRPC) and nonmetastatic castration resistant prostate cancer (nmCRPC).



CONCLUSIONS AND FUTURE IMPACT



This study included 976 patients with mCSPC and 233 with nmCRPC of which 33.5% and 25.3% received an ARPI, respectively.

- ARPI-exposed mCSPC patients had longer median survival and higher 2-year survival than ARPI-naïve patients.
- Survival in nmCRPC was similar between ARPI-exposed and ARPI-naïve groups.
- ARPI use was associated with younger age, more recent diagnosis, and referral to a medical oncologist in both mCSPC and nmCRPC.
- In mCSPC, ARPI use was also linked to fewer comorbidities, more metastatic sites, and receiving surgery or radiation before ADT.



The findings highlight ongoing unmet clinical needs and the complexities of managing advanced prostate cancer, underscoring the importance of continued monitoring as treatment pathways evolve to better inform patient care and health policy.

[Click here for full article.](#)

Cuthbert Lab

DOES MULTIMODAL EXERCISE REDUCE C-REACTIVE PROTEIN LEVELS IN MAJOR DEPRESSIVE DISORDER? PRELIMINARY RESULTS FROM A RANDOMIZED CONTROLLED TRIAL

Vagner Deuel de O Tavares, Felipe B Schuch, Geovan Menezes de Sousa, Mats Hallgren, Megan Teychenne, Raissa Nóbrega de Almeida, Rodrigo Vieira Browne, Maria Luiza Barros, Renali Camilo Bezerra, Jaime Eduardo Hallak, Emerson Arcoverde, Scott Patten, Colleen Cuthbert, Nicole Leite Galvão-Coelho

PURPOSE & METHODS

- Systemic inflammation, measured by markers such as C-reactive protein (CRP), has been shown to be closely linked with depression.
- The anti-inflammatory effects of exercise may support the treatment of depression by modulating its inflammatory response.
- This RCT evaluated the adjunctive effect of a structured 12-week exercise intervention on CRP levels and depressive symptoms.
- Compared pharmacotherapy plus an affect-based, supervised, multimodal, online, and home-based exercise protocol to pharmacotherapy alone.

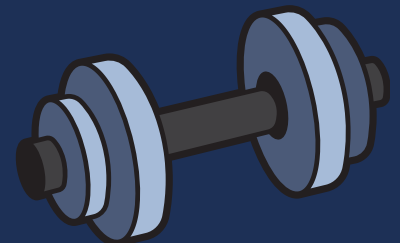
For this month's newsletter, we are highlighting a study where Deuel and Colleen collaborated with another team on a study outside of oncology!

FINDINGS

- At week 12, there was a significant decrease in CRP from baseline in the exercise group, while there was no change in the control group.
- Clinically meaningful reductions in CRP levels in the exercise group compared to the control group.
- Reduced inflammation in the exercise group was predictive of fewer self-reported depressive symptoms.
- Larger reductions in CRP between baseline and week 12 predicted a greater reduction in depressive symptoms.

CONCLUSIONS

- Multimodal exercise showed a promising synergistic effect for managing depression by reducing symptoms and enhancing emotional well-being, while also managing the inflammatory processes associated with depression.
- The findings support the value of an anti-inflammatory response as a predictor of clinical outcomes in depression.
- Future studies should explore the long-term effects of exercise on inflammatory markers and their link with depressive symptoms and other clinical outcomes.



Study Recruitment



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



Who?

- ≥ 18 years old and living in Alberta
- Self-identify as members of racial or ethnic minority groups and/or members of the 2SLGBTQ+ community
- Received a cancer diagnosis within the past 2 years
- Referred to a medical oncologist for a chemotherapy assessment

What?

Understand the factors that shape how patients and physicians make cancer treatment decisions together

- Background
- Identities (culture, race, and gender)
- Life experiences
- Personal beliefs



Contact us at cacuthbe@ucalgary.ca

This study has received ethics approval from the Health Research Ethics Board of Alberta (HREBA.CC-25-0065)



Coming Up



Our next meeting will be held on Monday, September 28 at 4pm via Zoom.

The next newsletter will release in October 2026.

Previous issues of the PFAC newsletter have been posted online:

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

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