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Patient and Family Advisory Council

Cuthbert Lab & Oncology Outcomes

Welcome

We are excited to share that Dr. Winson Cheung was recently featured on The View on GU podcast talking all about Real-World Evidence and the Future of Cancer Care. Click the link here to check it out!

Dr. Cheung was also recently featured in the 10th anniversary special issue from 20Sense Research & Consulting, focusing on the past decade of pharmaceutical data, discovery and determination.



Perspectives on RWE, Now and in the Future

Q&A with **Dr. Winson Cheung**,
Director, Oncology Outcomes (O2)
Research Program

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Research Highlights

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Risk of Developing a Subsequent Primary Cancer among Adult Cancer Survivors

STUDY PURPOSE AND METHODS

With advances in cancer screening, detection, and treatment, the number of cancer survivors has increased substantially. However, survivors remain at elevated risk of developing subsequent primary cancers (SPCs). Several international studies have investigated the risk of SPC development; however, there are no Canadian data comprehensively characterizing the landscape of SPC risk. The goal of this study was to estimate the risk of developing a SPC among adult cancer survivors in Alberta, Canada, and to support the long-term goal of identifying survivorship groups that may benefit from further study and tailored screening guidelines.



This study used administrative data sources to identify the number of patients in Alberta who were diagnosed with a primary cancer between 2004-2020. This was followed by comparing the incidence of SPCs among cancer survivors to the incidence of a first cancer diagnosis in the general population.



CONCLUSIONS AND FUTURE IMPACT

In this study, there were 196,858 cancer survivors (93,284 females and 103,574 males). The 15-year risk of developing a subsequent primary cancer (SPC) was 16.2% for males 12.2% for females.

- Both sexes had an increased overall risk of SPC: Standardized Incidence Ratio (SIR) was 1.50 for males SIR was 1.58 for females
- SPC risk was significantly increased across nearly all age groups
- The greatest increase in SPC risk was seen in survivors diagnosed between ages 18 and 39, with a greater than five-fold increase
- Screen-detectable cancers (colorectal, lung, cervix, and breast) made up:
 - 46% of SPCs in females
 - 27% of SPCs in males

Cancer survivors from nearly all initial cancer sites faced a substantially increased risk of developing a subsequent primary cancer (SPC) compared to the general population. Given that many of these SPCs are screen-detectable, these findings underscore the importance of developing and implementing effective screening strategies tailored to cancer survivors to support early detection and improved outcomes.



[Click here for full article.](#)

Cuthbert Lab

SYMPTOM SEVERITY AND TRAJECTORIES AMONG ADOLESCENT AND YOUNG PATIENTS WITH CANCER

[Andrew Harper](#), [Nicole Maseja](#), [Reilly Parkinson](#), [Mohammadreza Pakseresht](#), [Sarah McKillop](#), [Jan-Willem Henning](#), [Linda Watson](#), [Colleen Cuthbert](#), [Winson Cheung](#), [Miranda M Fidler-Benaoudia](#)

purpose and methods:

It is understood that cancer patients often experience significant symptom burden as a result of both the disease and its treatment. However, adolescent and young adult cancer patients, aged 18 to 39, have been largely overlooked in research. This study aimed to investigate symptom severity in adolescent and young adults cancer patients during the first year after a cancer diagnosis and compare it with that of older adults (aged 40+). To achieve this aim, participants in Alberta aged 18+ who were diagnosed with a primary cancer between April 2018 and November 2019, were asked to complete questionnaires to quantify symptom severity.



conclusion:

Adolescent and young adult patients with cancer reported high levels of tiredness, poor well-being, and anxiety. The odds of having moderate to severe symptoms were statistically significantly greater among adolescents and young adults than in older adults with respect to pain, tiredness, nausea, depression, anxiety, and poor well-being.



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 April 2026.

Previous issues of the PFAC newsletter have been posted online:

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



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