Common Sense Oncology

Outcomes That Matter

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ICRP

May 2024





Disclosures

I have no relationships with the pharmaceutical industry

The privilege of practicing oncology

The essence of oncology





Outline

- 1. Three Paradoxes
- 2. The Cancer Value Crisis
- 3. Common Sense Oncology





The Cancer Medicine Paradox

- 1. There is substantial over-utilization of marginal, toxic and expensive medicines (especially near the end of life).
- 2. At the same time, due to problems with access and affordability most patients in the world do not get the cancer medicines which make a big difference in outcomes.





Three Buckets Paradox







Last 6 months of Life Paradox

- Patient with refractory metastatic cancer, progressed on 2nd line therapy
 - \$100,000 drug, side effects, time
 home care





Oncology Successes

- \implies knowledge of cancer biology
- → some remarkable treatments
- \implies improved outcomes for some cancers
- \implies more patient engagement
- → more attention to psychosocial and palliative care
- \implies oncology as a global health issue



OUTCOMES THAT MATTER

The cancer value crisis

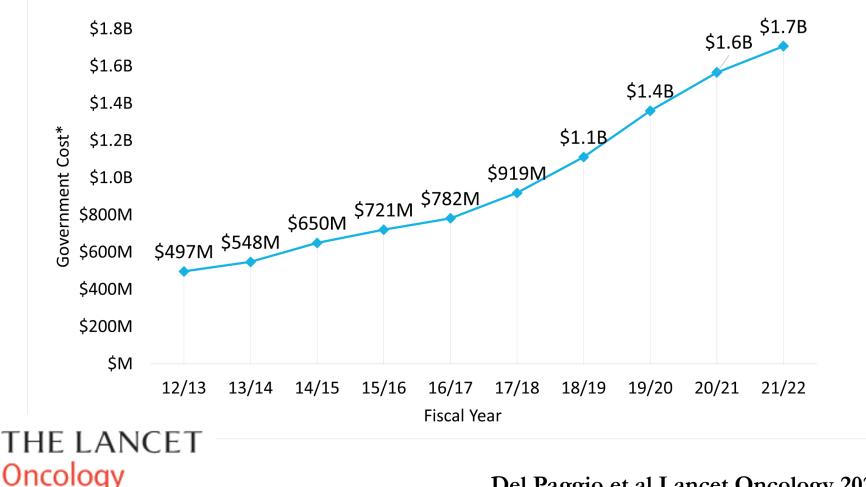
clinical trial pitfalls
 dubious endpoints
 small effect size
 staggering price
 communication breakdown





Cost and value of cancer medicines in a single-payer public health system in Ontario, Canada: a cross-sectional study

Joseph C Del Paggio, Rohini Naipaul, Scott Gavura, Rebecca E Mercer, Rachel Koven, Bishal Gyawali, Brooke E Wilson, Christopher M Booth

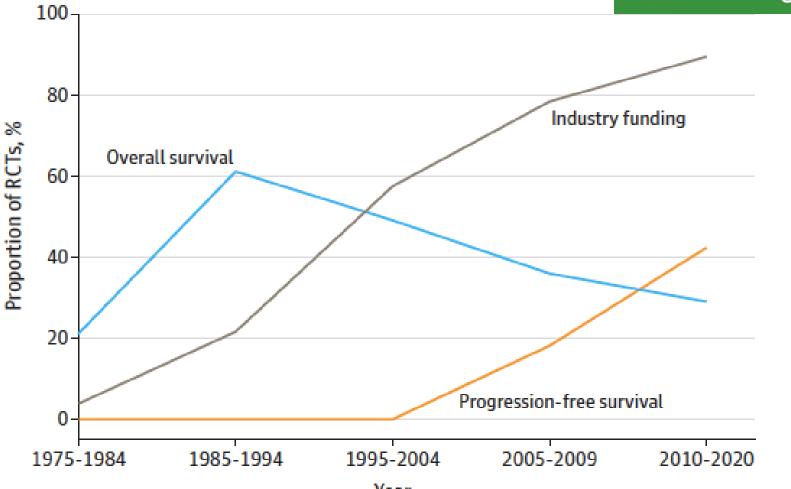


Del Paggio et al Lancet Oncology 2024

JAMA Oncology | Original Investigation

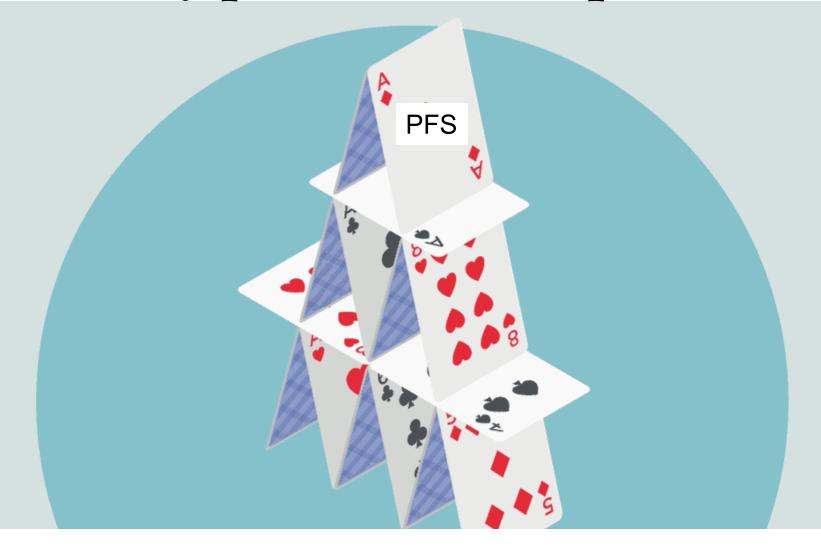
Evolution of the Randomized Clinical Trial in the Era of Precision Oncology

Joseph C. Del Paggio, MD; John S. Berry; Wilma M. Hopman, MA; Elizabeth A. Eisenhauer, MD; Vinay Prasad, MD; Bishal Gyawali, MD, PhD; Christopher M. Booth, MD JAMA Oncology



Year

Modern oncology is built on a very precarious endpoint



3 months

Fojo JAMA Oto 2014 Davis BMJ 2017 Del Paggio JAMA Onc 2021 Michaeli JCO 2022



3 months

Clinical toxicity Financial toxicity Time toxicity Efficacy-effectiveness gap





The Time Toxicity of Cancer Treatment

Arjun Gupta, MD¹; Elizabeth A. Eisenhauer, MD²; and Christopher M. Booth, MD^{2,3}

VIEWPOINTHas the Current Oncology Value ParadigmForgotten Patients' Time?
Too Little of a Good ThingJAMA Oncology

Fundytus, Prasad, Booth

JOURNAL OF CLINICAL ONCOLOGY

Informing Patients About Expected Outcomes: The Efficacy-Effectiveness Gap Gupta JCO 2023

Arnoud J. Templeton, MD¹; Christopher M. Booth, MD²; and Ian F. Tannock, MD, PhD³

Gupta JCO 2023 Fundytus JAMA Onc 2021 Templeton JCO 2020

COMMON SENSE ONCOLOGY

OUTCOMES THAT MATTER



THE LANCET Oncology



OUTCOMES THAT MATTER

Common Sense Oncology: outcomes that matter

Christopher M Booth ☑ • Manju Sengar • Aaron Goodman • Brooke Wilson • Ajay Aggarwal • Scott Berry • David Collingridge • Avram Denburg • Elizabeth A Eisenhauer • Ophira Ginsburg • Daniel Goldstein • Sanjeeva Gunasekera • Nazik Hammad • Kazunori Honda • Christopher Jackson • Deme Karikios • Kevin Knopf • Rachel Koven • Bernard L Marini • Deborah Maskens • Fabio Y Moraes • Ghulam Rehman Mohyuddin • Bishesh Sharma Poudyal • C S Pramesh • Felipe Roitberg • Fidel Rubagumya • Sally Schott • Bhawna Sirohi • Enrique Soto-Perez-de-Celis • Richard Sullivan • Ian F Tannock • Dario Trapani • Michelle Tregear • Winette van der Graaf • Verna Vanderpuye • Bishal Gyawali • Show less

Mission

To ensure that cancer care focuses on outcomes that matter to patients

Vision

Patients have access to cancer treatments that provide meaningful improvements in outcomes that matter, irrespective of where they live or their health system. To realise this

Booth Lancet Onc 2023

THE LANCET Oncology



Guiding principles

- 1 Access to quality cancer care is a basic human right—no patient should be denied access to effective therapy or forced into financial catastrophe to access meaningful cancer care
- 2 Patient and societal needs should drive cancer research and delivery of care
- 3 Patient and public involvement is essential when making policy decisions
- 4 Patients should expect that recommended cancer treatments meaningfully improve their survival or quality of life
- 5 <u>Shared decision making</u> between patients and oncologists should be based on patient values and grounded in evidence-based medicine and critical appraisal
- 6 Cancer treatments should be fairly priced for the context in which they are used
- 7 Equity in access to high quality care should be prioritised as much as innovation and new treatments
- 8 <u>Comprehensive patient-centred cancer care</u> includes timely integration of psychosocial oncology, survivorship, and palliative care

CSO: Core Pillars of Work

Evidence Generation

ensure clinical trials use and report outcomes that matter

Evidence Interpretation

foster critical thinking in oncology

Evidence Communication

improve patient, public, policy-maker understanding of cancer treatment options



CSO: Project Teams

- RCT design and reporting
- Education
- Stakeholder engagement
- Patient priorities
- Policy and Politics



OUTCOMES THAT MATTER

CSO will promote interventions that measurably improve the lives of patients. We will celebrate well conducted trials and promote effective treatments but we will also speak up about and challenge interventions that might cause more harm than good.



We will seek to decrease global and regional inequities in access to affordable high-quality care. Improvements in the generation, interpretation, and communication of evidence will help close these gaps and move our field closer to a future in which a patient's outcome is not determined by where they live, what they can afford, or the strength of a marketing campaign.



Common Sense Oncology: outcomes that matter

Evidence Generation Evidence Interpretation Evidence Communication



www.commonsenseoncology.org

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