

COVID-19 and Cancer Taskforce

COVID-19 and Cancer Global Modelling Consortium (CCGMC)

First Call: Monday/Tuesday 11/12th May 2020

The call will start at 15:00 US EST/ 21:00 CET/ 5:00 AEST

While waiting, please introduce yourself via the comments - including your name, institution, country, and professional background.

Secretariat email: covidandcancer@nswcc.org.au



Agenda

1. Introduction to the COVID-19 and Cancer Taskforce

Professor Richard Sullivan, Director, Institute of Cancer Policy, Kings College London, UK & Dr. Julie Torode, UICC

2. The COVID-19 and Cancer Global Modelling Consortium - summary of proposed governance, principles of engagement and working groups

Professor Karen Canfell, CCNSW

3. Consortium partner perspectives and links to data collection and other activities

Dr Freddie Bray, International Agency for Research on Cancer (IARC); Rami Rahal, VP, Cancer Systems, Performance and Innovation, Canadian Partnership against Cancer (CPAC) & Associate Professor Iris Lansdorp-Vogelaar, International Cancer Screening Network (ICSN)

4. Perspectives on linked activities

Dr. Andre Ilbawi, WHO – Development of WHO tools and resources for policy-makers in cancer control & Dr. Rocky Feuer, National Cancer Institute USA - NCI CISNET-related activities and interests.

5. Funding opportunities and future call schedule

Professor Karen Canfell

6. Discussion, questions and perspectives.



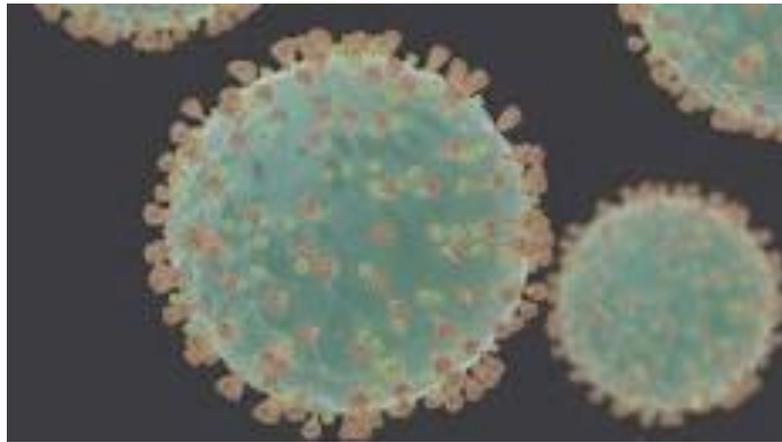
Introduction to the Covid-19 and Cancer Taskforce

Professor Richard
Sullivan, Kings
College London

Dr. Julie Torode,
UICC



Covid-19 and Cancer Taskforce



COVID-19 and Cancer Taskforce:

- Bello Abubakar Mohammed, President AORTIC, National Hospital, Abuja, Nigeria
- Zippy Ali, Kenya Hospices and Palliative Care Association
- Michael Baumann Director DKFZ, Germany
- Freddie Bray, Head of Cancer Surveillance, International Agency for Research on Cancer Lyon, France
- Nirmala A/P Bhoo Pathy, Department of Social and Preventive Medicine, University of Malaya, Malaysia
- Christopher Booth Cancer Professor Research Institute, Queen's University Kingston, Canada
- Karen Canfell Director, The Daffodil Centre, University of Sydney, Australia
- James Cleary, Professor and Director of Supportive Oncology, Indiana University School of Medicine and IU Simon Cancer Center, Indiana, USA
- Jan-Willem Coeburgh Professor em. of Cancer Surveillance, Head of Research at IKZ Erasmus University Rotterdam, Netherlands
- Sakari Karjalainen, Secretary General, Cancer Society of Finland
- Tezer Kutluk Director of Paediatric Oncology, Hacettepe University, Ankara, Turkey
- Valery Lammens, Member of the Board of Directors at IKNL / Comprehensive Cancer Organisation the Netherlands
- Dorothy Lombe, Cancer Diseases Hospital, Zambia
- Deborah Mukherji, American University of Beirut, Lebanon
- Raul Murillo, Universidad Javeriana, Colombia
- Groesbeck Parham, Centre for Cervical Cancer Prevention in Zambia
- CS Pramesh, Tata Memorial Centre, Mumbai and coordinator for the National Cancer Grid
- Diana Sarfati Interim Chief Executive, Cancer Control Agency, and University of Otago, New Zealand
- Omar Shamieh, Director Palliative Medicine, King Hussein Cancer Centre, Amman, Jordan
- Richard Sullivan, Director, Institute of Cancer Policy, Kings College London, UK
- Julie Torode, UICC Switzerland
- Audrey Tsunoda Director of Gyn. Onc. Erasto Gaertner Hospital, Curitiba, Brazil
- Verna Vanderpuye, Executive Council AORTIC and National Center for Radiotherapy and Nuclear Medicine, Korle-Bu Teaching Hospital, Accra, Ghana
- Mieke Van Hemelrijck School of Cancer & Pharmaceutical Sciences, King's College London, UK
- Aasim Yusuf, Chief Medical Officer, Shaukat Khanum Memorial Cancer Hospital and Research Centre, Lahore, Pakistan

Priority working groups

1. Direct Risk of Covid-19 to Cancer Patients
2. Modelling the Indirect Impact; Recovery and Mitigation
3. The direct impact on oncology health workers as the pandemic progresses

Other key issues:

Research, New Practices, Economic Impact Assessment, Inequalities

The COVID-19 and Cancer intelligence hub

Risk factors for cancer patients

COVID-19 and Cancer: Lessons From a Pooled Meta-Analysis

Aakash Desai, Sonali Sachdeva, Tarang Parekh, Rupak Desai, *Journal of Clinical Oncology*, (06.04.2020)

Challenges posed by COVID-19 to children with cancer

Rishi S Kotecha, *The Lancet Oncology*, (25.03.2020)

Management during the pandemic

Recommendations for prioritization, treatment, and triage of breast cancer patients during the COVID-19 pandemic. the COVID-19 pandemic breast cancer consortium

Jill R. Dietz, Meena S. Moran, Steven J. Isakoff, Scott H. Kurtzman, Shawna C. Willey, Harold J. Burstein, Richard J. Bleicher, Janice A. Lyons, Terry Sarantou, Paul L. Baron, Randy E. Stevens, Susan K. Boolbol, Benjamin O. Anderson, Lawrence N. Shulman, William J. Gradishar, Debra L. Monticciolo, Donna M. Plecha, Heidi Nelson, and Katharine A. Yao¹, *Breast Cancer Research and Treatment*, (24.04.2020)

Impact of lockdown and self-isolation measures

Impact of the COVID-19 Epidemic on a Pan-Asian Academic Oncology Clinical Trial

Eva Segelov, Hans Prenen, Daphne Day, C. Raina Macintyre, Estelle Mei Jye Foo, Raghbir Ali, Quanyi Wang, Xiaoting Wei, Gilberto de Lima Lopes Jr, Kefeng Ding, Gong Chen, John Whay Kuang Chia, Han Chong Toh, on behalf of the ASCOLT Investigators, *Journal of Clinical Oncology*, (15.04.20)

Using Clinical Informatics to Navigate a Crisis: How Technology and Policy Change Can Influence Cancer Care Delivery

Debra Patt, *Journal of Clinical Oncology*, (13.04.20)

Registries and additional sources of information

COVID-19 and NCDs

World Health Organisation

The COVID-19 and Cancer Consortium CC19

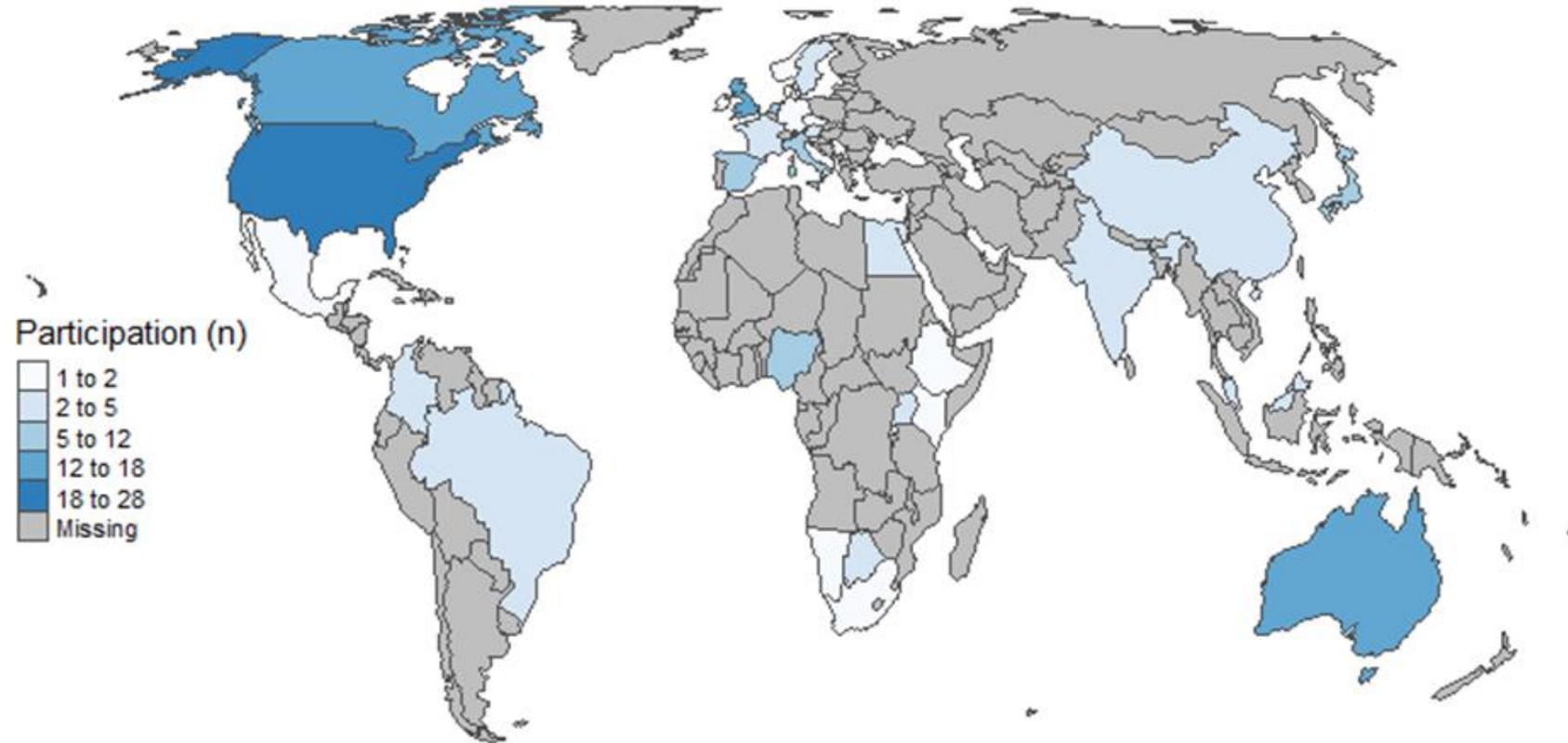
The Global Coalition for Radiotherapy Action Radiotherapy

The COVID-19 and Cancer Global Modelling Consortium (CCGMC)



Professor
Karen Canfell

165 registrants, 35 countries, 142 organizations



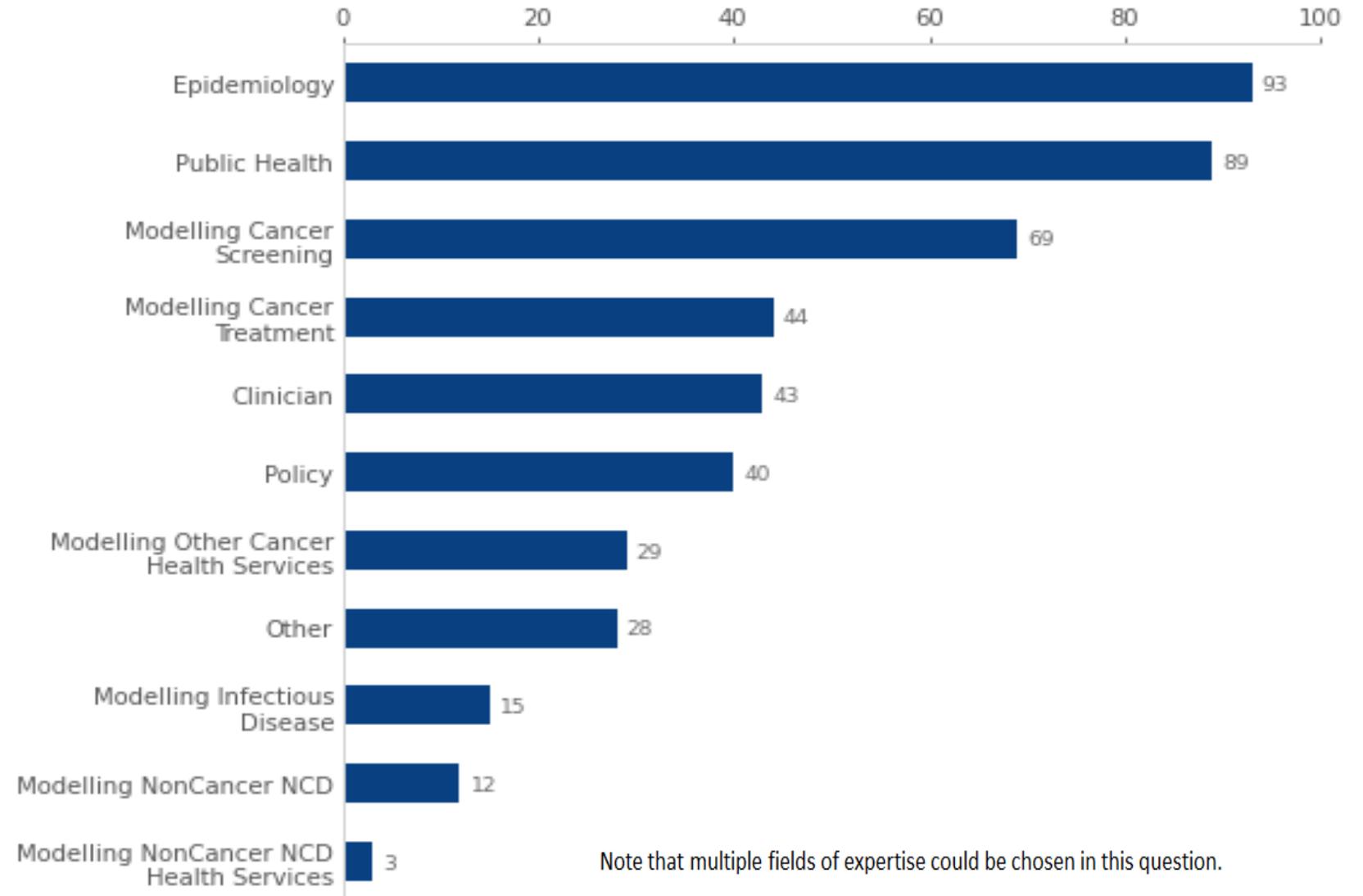
As at 11th May 2020



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PARTENARIAT CANADIEN
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Field of expertise



Summary of Themes / Working Groups



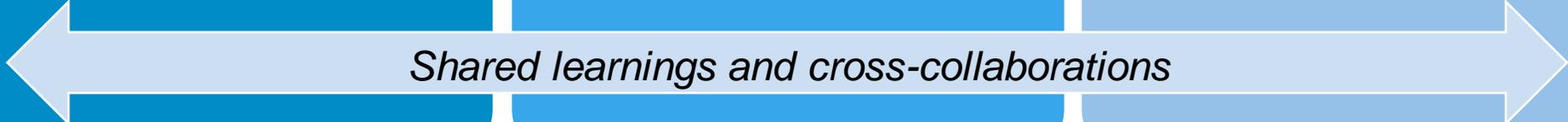
THEME 1
Direct impact of infection on cancer outcomes & treatment services



THEME 2
Impact on cancer screening & recovery strategies



THEME 3
Impact on cancer risk & recovery prevention strategies



Shared learnings and cross-collaborations



Summary of proposed governance and principles of engagement

- The CCGMC is one of three streams of activity under the banner of the Global Taskforce, and it will both **tap into** and **inform** the other two streams of work on characterising impact on cancer treatment and psychosocial impacts
- A Steering Group representing the Covid-19 and Cancer Taskforce, CCGMC Partner representatives, and WG chairs will be formed
- Each Working Group will appoint a chair or two co-chairs:
 - CCGMC partners will be represented
 - Please contact the coordinating center with any suggestions (covidandcancer@nswcc.org.au)



Summary of proposed governance and principles of engagement

- An open and collaborative approach is envisaged, with key principles involving:
 - Sharing our learnings
 - Co-publication of joint work (whilst recognising that many groups will bring in their own models and IP)
 - Capacity building
 - Taking the longer-term perspective - we are not just here for the acute response but to inform longer term planning & recovery
 - Development of tools that will be widely useful for policy-makers in understanding the impact of the crisis and the optimum recovery strategies
- These principles will be captured in a Terms of Reference for collaborators
- Disclosures – all participants to follow standard principles
 - We are considering the approach for industry affiliates (e.g. potentially engage as observers).



Proposed working group structure

Overarching responsibility: Steering Group representing the Covid-19 and Cancer Taskforce & CCGMC Partners

WG1 Cancer treatment

WG2 Screening

WG3 Prevention

All WG to access expertise to inform modelling of future scenarios for infection rates and societal/health services disruptions

Infectious disease modeller reference group

Clinical expert reference group

All WG to access expertise to inform modelling of impact of disruptions or changes in cancer

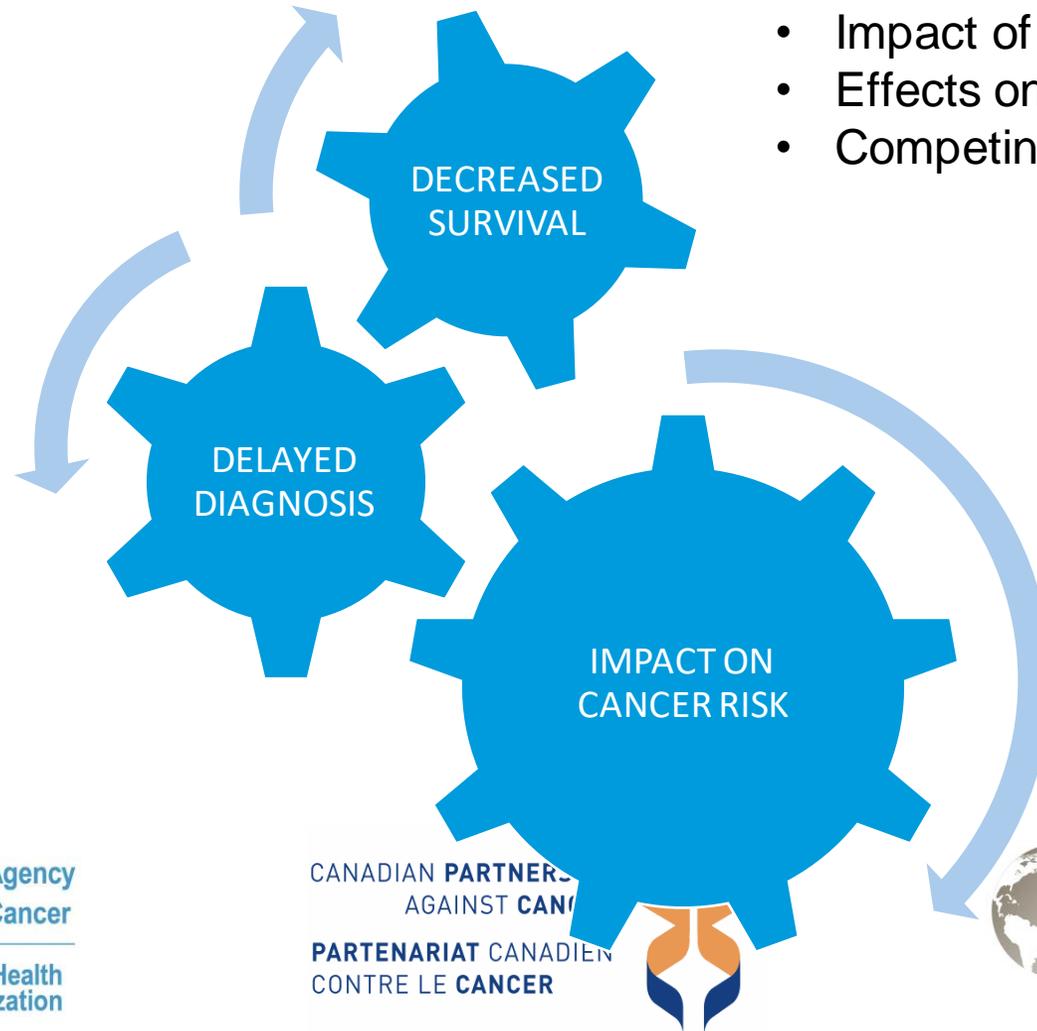
Secretariat support at CCNSW (soon to be the Daffodil Centre, The University of Sydney)

Access to ongoing scoping/systematic reviews of emergent clinical data on cancer outcomes



Potential mechanisms of impact on cancer outcomes

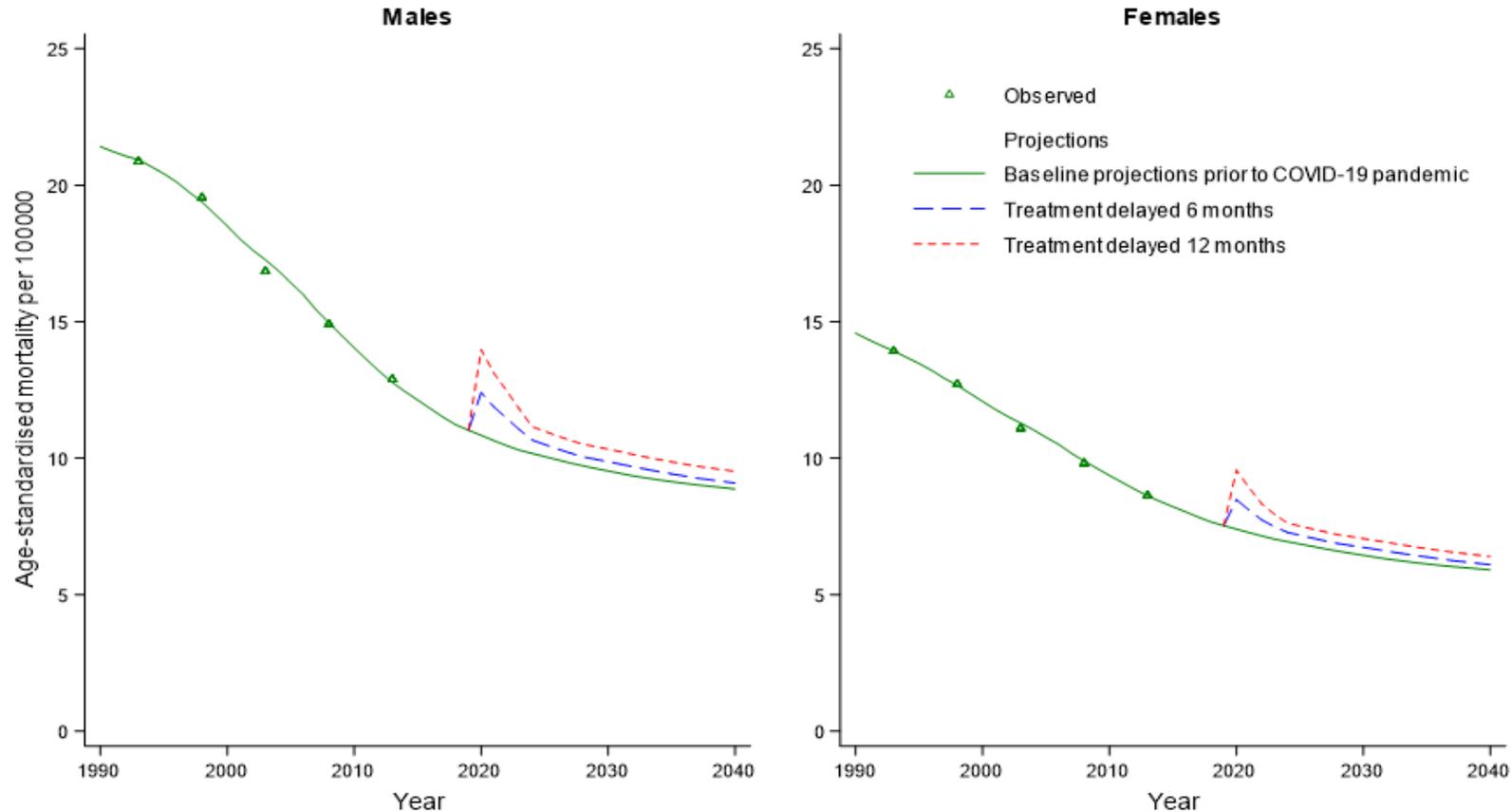
- Disruptions to screening programs
- Delays in symptomatic presentation



- Direct 'biological' impact on survival
- Impact of treatment disruptions
- Effects on co-morbid conditions
- Competing mortality risk from infection

- Direct 'biological' impact on risk
- Effect of risky behaviours during crisis

Illustrative results: Impact of delayed treatment of lung cancer



Consortium partner perspectives and links to data collection and other activities:

Dr Freddie Bray,
International Agency
for Research on Cancer
(IARC)

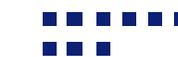
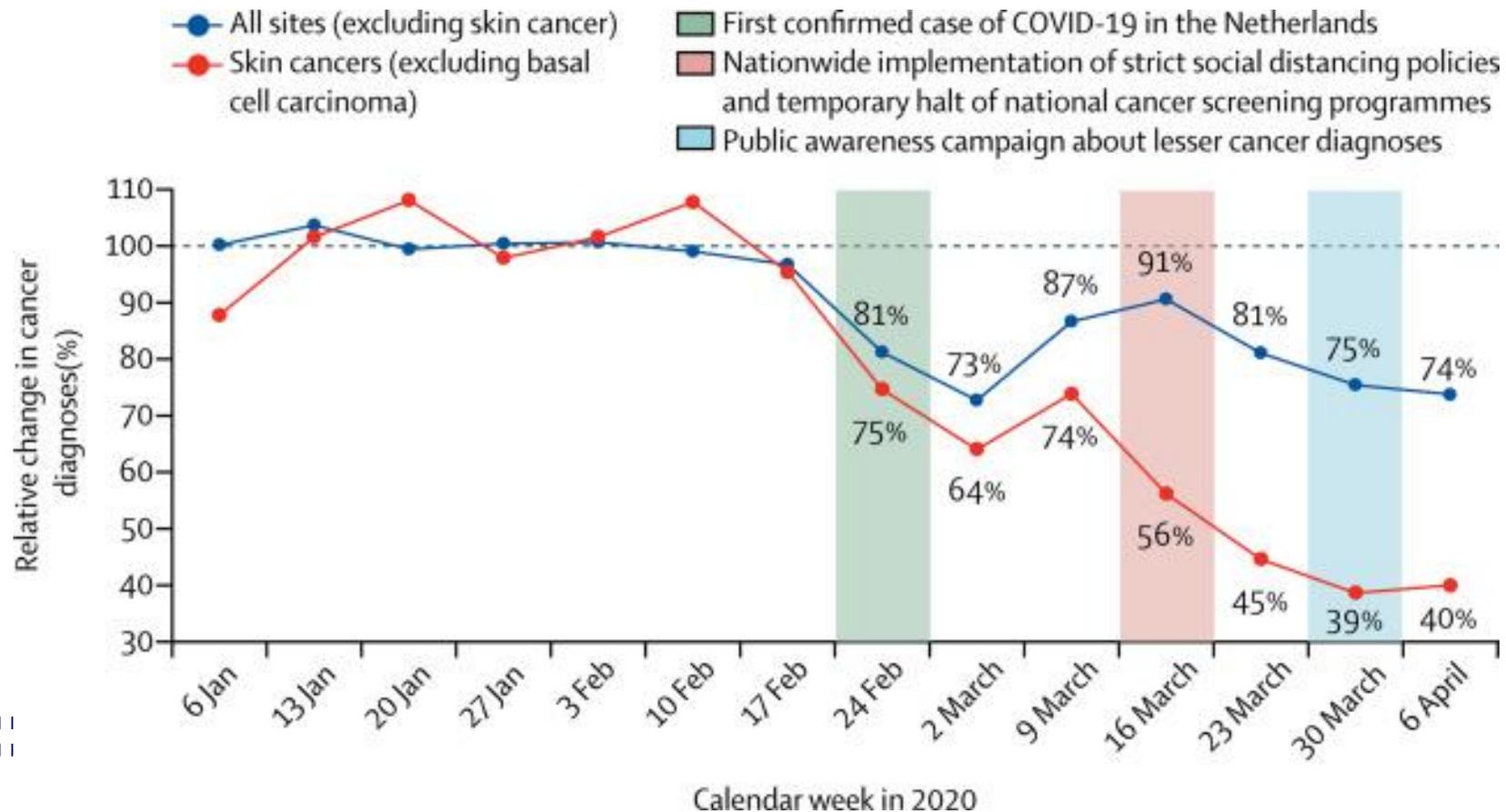
Rami Rahal, VP, Cancer
Systems, Performance
and Innovation,
Canadian Partnership
against Cancer (CPAC)

Associate Professor
Iris Lansdorp-Vogelaar,
International
Cancer Screening
Network (ICSN).



Impact of COVID on cancer screening

- Many cancer screening programmes across the world have been suspended: e.g.: USA, Canada, Europe, Hong Kong, New Zealand



ICSN and COVID

- Survey on how countries make:
 - decisions on delivery of screening and diagnostic services
 - plans for resuming preventive health measures

- Input for modeling to formulate guidance for the present pandemic

- To inform decision-making on the best strategies available to mitigate the effects of service delays



Theme 2: Modelling impact on cancer screening

- Potential questions to be addressed:
 - What is the long-term impact of suspension of the screening programmes?
 - Consequences of different ways of restarting screening and catching-up missed screening invitations
 - What is the best strategy to restart the programmes? Prioritization in programmes?
- Initial work by cancer site, with cross-fertilization across sites; later joint publications including multiple sites



Perspectives on linked activities

Dr. Andre Ilbawi, WHO:
Development of WHO
tools and resources for
policy-makers in cancer
control

Dr. Rocky Feuer,
National Cancer
Institute USA:
NCI CISNET-related
activities and interests.

Perspectives on linked activities

WHO & IARC Prioritization and Costing Tool to support policy-makers in cancer control

Core Tool Development Group:

Dr. André Ilbawi, Dr. Melanie Bertram, Dr Filip Meheus,
Dr. Dario Trapani, Dr Cindy Gauvreau, Dr Elena Fidarova,
Dr Rei Haruyama, Dr Catherine Lam, Dr Scott Howard

Technical experts and researchers at WHO, IARC & IAEA:

Dr Adriana Velazquez-Berumen, Dr María del Rosario Perez,
Dr Rania Kawar, Dr Mathieu Boniol, Dr Cherian Varghese,
Dr. Freddie Bray, Dr. Isabelle Soerjomataram, Dr May Abdul-Wahab,
Dr Eduardo Zubizarreta, Dr Alfredo Polo Rubio, Dr Lisa Stevens

Collaborators:

St Jude Children's Research Hospital, European Society for Medical
Oncology

WHO & IARC current work and mandate

SEVENTIETH WORLD HEALTH ASSEMBLY

Agenda item 15.6

WHA70.12

31 May 2017

OP1

- Develop **resource-stratified tool kits** to establish and implement programmes...**leveraging work of other organizations**

OP2

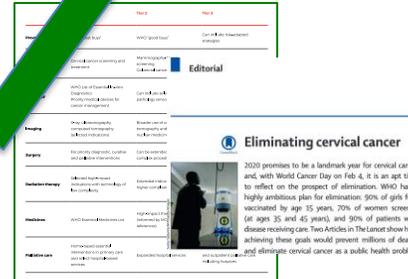
- Collect, synthesize and disseminate evidence on the **most cost-effective interventions** ...and to make an **investment case**

OP3

- Strengthen WHO to support implementation of cost-effective interventions and **country-adapted models**...

Pilots ongoing

- Formulate/cost cancer plan
- National investment case
- UHC benefit package design



Applicable to COVID-19 ?

COVID-19 Pandemic

Meet government need ?

Sufficient data available ?

Model calibration ?

Modeling coherency ?

Current Approach

Define need and coordination

- Ongoing dialogue with stakeholders
- Coordination within this taskforce (TF)
- WHO COVID-19 modeling network** for better coherency

Data inputs

- Alterations in service availability
- Delays in care (early diagnosis, screening)
- Treatment alterations
- Treatment interruptions
- ↑mortality (RR)
- Changes in behavioral risk factors

Model adaptation

- Cancer type and stage specific
- Adaptations in stage distribution / tumor types / sequence of services ?
- Link to cost data ?

Country-level support

- Evidence-based policy guidance and formulation ?
- Enhanced preparedness / better continuity of services ?

Funding

- The CCGMC is being initially formed on a volunteer basis
- Initial support:
 - The coordinating center (CCNSW Australia, soon to become the Daffodil Centre at the University of Sydney) will provide secretariat and expert scoping and systematic review support
 - UICC is exploring awarding one or two fellowships for trainee fellow(s) from LMIC
- We aim to jointly seek funding opportunities both for specific projects in each WG and for overall consortium support.



Future call schedule & next steps

- Each Working Group will aim to hold a call for more detailed discussion within the next 2-3 weeks
- The coordinating center will follow-up with:
 - Confirmation of working group membership
 - Completion of disclosure forms
 - More comprehensive 'audit' of model platforms developed by members
 - Initial draft of a Terms of Reference
 - Results of funding opportunities scan (please forward suggestions to covidandcancer@nswcc.org.au)
- The coordinating center will configure a website and newsletter
- The overall CCGMC consortium will have a follow-up call to update members on progress
 - Likely timing June 15/16 (will run Doodle poll to review best time).



Discussion, questions and perspectives

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