NCCN Collaborates to Alleviate Adult Cancer Pain in China

Approximately 70% of patients with cancer require pain therapy during the course of their disease, making pain management a significant and overarching aspect of oncology care. Dr. Robert Swarm of Washington University School of Medicine routinely handles complex pain management cases referred by oncologists at Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine.

Recently, Dr. Swarm brought his experience with pain management and his expertise as Chair of the NCCN Guidelines Panel for Adult Cancer Pain to China. Dr. Swarm gave thoughtful, evidence-based presentations to a live audience of 150 oncology professionals who eagerly participated in a live symposium in Beijing on October 30, 2010. Initially, Dr. Swarm educated the group on the fundamentals of the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) and the data that supports some of the key decisions behind featured recommendations from the NCCN Guidelines Panel for Adult Cancer Pain. He stressed the importance of considering symptom control to be a core component of comprehensive cancer care, along with the more commonly discussed prevention, detection, and treatment. To emphasize the need for this focus, he illustrated how, in developed countries, 1 in 8 people is at risk of dying of cancer with severe pain. Dr. Swarm referenced and evaluated the World Health Organization (WHO) Analgesic Ladder as a tool that can be used in decision-making with the patient’s individual goals in mind. He also described and discussed opioids as having a large role in the management of pain symptoms in oncology patient population.

While outlining select recommendations from the NCCN Guidelines for Adult Cancer Pain, Dr. Swarm identified the principal features as universal screening and assessment, comprehensive pain assessment, and analgesic therapy for each patient titrated to his or her goals of comfort and function. He also noted the multidisciplinary composition of the NCCN Guidelines Panel for Adult Cancer Pain, which includes anesthesiology (pain), medical oncology, neurology, nursing, palliative and supportive care, clinical pharmacy, psychology, and radiation oncology. He closed the talk with a pertinent quote from Robert G. Twycross, “Good symptom control requires clearly defined medical leadership.”

Building upon his presentation on the NCCN Guidelines, Dr. Swarm provided an insightful lecture on interventional pain management to the same audience in Beijing. This lecture focused on some specific challenges that face practicing clinicians and their patients with cancer pain. The Chinese professionals in attendance were openly appreciative of the opportunity to hear Dr. Swarm and to discuss strategies to mediate discomfort without overburdening patients with side-effects. He revisited the WHO Analgesic Ladder and focused on the top tier: Freedom from Cancer Pain. Unfortunately, this clearly has not been achieved in full, and according to Dr. Swarm, it is often helpful to reapply the ladder while making adjustments for optimal results.

Differentiation and the need for careful titration of therapy for opioid-naïve versus opioid-tolerant populations were described. Further to this topic, considerations regarding opioid tolerance, hyperalgesia, and toxicity were presented by Dr. Swarm. He evaluated the various analgesic delivery methods and, additionally, neurolytic celiac plexus block, vertebroplasty, and pathologic vertebral compression fracture as alternatives.

During his time in Beijing, Dr. Swarm also participated in the launching activity for the development of a region-specific, Chinese language version of the NCCN Guidelines for Adult Cancer Pain. This involved a non-public meeting with a panel of China’s thought leaders in oncology pain management to form consensus on modifications to make the recommendations more applicable for use in China. The NCCN Guidelines for Adult Cancer Pain: China Edition will be available on the International portion of NCCN.org in early 2011.
NCCN Receives $2.1 Million in Oncology Research Funding from Pfizer

NCCN has been awarded a $2.1 million grant from Pfizer to develop a program to scientifically evaluate and define the clinical activity of axitinib in various tumor types.

“The funding not only helps accelerate potentially life-saving research in the field of cancer, but also creates a collaborative opportunity for investigators from NCCN Member Institutions,” said William T. McGivney, PhD, Chief Executive Officer, NCCN. “NCCN is committed to enhancing cancer care by evaluating new investigational agents such as axitinib to determine their full potential in treating several types of cancer.”

The first phase of the program will involve the establishment of an NCCN Axitinib Request for Proposals Development Team to evaluate existing data and to discuss and define the types of studies necessary to further evaluate the activity of axitinib in solid tumors.

Axitinib is an oral and selective inhibitor of vascular endothelial growth factor receptors (VEGF) I, II and III which may play roles in tumor growth, vascular angiogenesis and metastatic progression of cancer. Axitinib has been tested in various phase I, II and III trials including thyroid cancer, non-small cell lung cancer, and advanced renal cell carcinoma. An additional phase II trial in HCC is underway. Pfizer recently announced that the global randomized phase III AXIS 1032 trial (A4061032), studying axitinib in previously treated patients with metastatic renal cell carcinoma (mRCC), met its primary endpoint of progression free survival. Axitinib is an investigational compound.

“It is a privilege for us to have the opportunity to collaborate with NCCN on the further evaluation of axitinib,” said Mace Rothenberg, MD, Senior Vice President of Clinical Development and Medical Affairs for Pfizer’s Oncology Business Unit. “Partnerships like this are vitally important in cancer research. By working collaboratively across the scientific community, Pfizer Oncology hopes to add to the broader understanding of new medications and to further our shared goal of improving the outlook for cancer patients worldwide.”

The NCCN Oncology Research Program (ORP) facilitates all phases of clinical research by identifying clinical investigators and initiating trials at NCCN Member Institutions. The ORP draws on the expertise of investigators at 21 of the world’s leading cancer centers and establishes collaborations with pharmaceutical and biotech companies in order to advance therapeutic options for patients with cancer. The ORP will use the grant from Pfizer to support investigator initiated clinical and correlative studies at its NCCN Member Institutions for axitinib. This research grant model has been very successful in moving science forward as evidenced by the many scientific articles published on ORP supported research. For more studies from the NCCN ORP, see page lviii.

National Business Group on Health Launches Major Initiative to Address Cancer in the Workplace

The National Business Group on Health, a non-profit association of more than 300 large U.S. employers, announced the launch of a major, multi-year initiative to help employers address a growing healthcare challenge—cancer in the workplace. The 3-year project, which is being conducted in collaboration with NCCN, will result in a series of comprehensive resources and tools for large employers, including an Employer’s Guide to Cancer Treatment and Prevention.

Cancer is a far-reaching problem in the United States. According to the American Cancer Society, almost 1.5 million new cancer cases were diagnosed in 2009 and more than 10 million Americans have a history of cancer. Additionally, cancer is the second Cont. on page lii
leading cause of long-term disability (LTD) and the sixth leading cause of short-term disability (STD) in the United States. The indirect costs of cancer to employees include an estimated $136 billion in lost productivity each year.

“Employers are becoming more and more concerned about cancer in their employees and families,” said Helen Darling, President and CEO of the National Business Group on Health. “Clearly, it is important that employers educate their beneficiaries about preventable forms of cancer. Moreover, employers need to implement strategies to manage and support employees who are diagnosed with cancer and also provide programs and services aimed at employee caregivers. This project will go a long way toward helping employers meet this challenge.”

The ultimate goal of the 3-year project is to develop an Employer’s Guide to Cancer Treatment and Prevention. This comprehensive set of tools and recommendations for the entire spectrum of employer-sponsored benefits and programs will be based on the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines), which encompass clinical guidelines and recommendations based on evidence and expert judgment for every aspect of the cancer care continuum. As outlined by the Business Group, the project includes the following objectives:

• Establish a 25-member National Advisory Committee on Employer Services for the Cancer Continuum of Care, which will develop recommendations for the design, quality assurance, structure, and integration of resources, programs, and services around the full range of benefits and programs to include the health plan, health and productivity programs, and health promotion/wellness services.

• Create a quick reference Summary Document on Employer-Sponsored Benefit Design, Pharmacy Benefits, and Contracting with Health Plans that will help employers determine whether their current benefits are consistent with evidence-based cancer care and will ensure access to care consistent with recommended NCCN Guidelines.

• Develop an Employer Cancer Health Benefits Toolkit covering general medical, pharmacy, and mental health benefits for the continuum of cancer care.

• Create a companion set of Benefit Manager Guides for other strategic audiences, such as disability managers, focused on the productivity indicators including incidental absence, short- and long-term disability, family medical leave, workers’ compensation and EAPs.

• Develop Tools for Employees: Cancer Survivorship, Health Promotion, and Wellness, which will include fact sheets, information brochures, and other literature on various aspects of cancer, treatment, and care.

“Our increasing understanding of cancer leads to the realization that cancer is really a multitude of disease states,” said William T. McGivney, PhD, CEO of NCCN. “Further, because of innovative treatments, many cancers are becoming chronic diseases. It is critical that the purchasers and providers of care work together to assure that the services delivered along the continuum, from prevention through treatment through long term follow-up, are optimal in terms of safety, effectiveness and efficiency.”

“While there is an abundance of information about cancer, currently there is a vacuum for the delivery of treatment, prevention, and support services associated with cancer in the workplace. The deliverables of this project are intended to eliminate this vacuum by providing systematic, evidence-based approaches to care design and delivery,” Ms. Darling concluded.

For more information about NCCN, visit NCCN.org; for more information on The National Business Group on Health, visit www.businessgrouphealth.org.