CV CARE: CardioVascular Care of Androgen-Related Effects in Patients With Prostate Cancer

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Condition: Prostate cancer—quality of care
Institution: Dana-Farber Cancer Institute

CV CARE is a trial enrolling patients undergoing treatment with androgen deprivation therapy (ADT) in order to assess and manage reversible cardiovascular (CV) risk factors. In this quality improvement initiative within the Dana-Farber Cancer Institute (DFCI) genitourinary oncology clinic, the clinical team will systematically leverage existing follow-up visits for prostate cancer care by integrating CV risk assessment, electronic medical record alerts and communications, and counseling to ensure improved adherence to guideline recommendations addressing reversible CV risk factors. The initiative also includes standardized communications with local cardiology care or seamless referral to cardio-oncology for the highest-risk patients who do not have known cardiac care providers. This research is being conducted to test a program to assess and manage reversible CV risk factors in participants with prostate cancer starting ADT, with the goal of integrating a standardized method into DFCI clinics for all such patients. After completing an initial iteration, the study will gather feedback from clinician and patient participants to identify areas for improvement. These changes will be made when feasible, and a second program, CV CARE 2, will be launched based on the learnings from the primary initiative.

Primary Objective/Aim:

- Determine the feasibility of integrating the revised CV CARE program (CV CARE 2) into the genitourinary oncology care workflow at DFCI. Feasibility of the program will be determined by a continued participation rate in the revised iteration of the program (CV CARE 2) of ≥75% of patients who participate at month 1

Secondary Objectives:

- Quantify the proportion of patients who start or adjust statin medications between 1 month after ADT initiation and the 6-month follow-up visit among those who have an atherosclerotic CV disease (ASCVD) risk score >10% and 20% at month 1
- Quantify the proportion of patients who start or adjust blood pressure medications between 1 month after ADT initiation and the 6-month follow-up visit among those who have an ASCVD risk score >10% and 20% at month 1
- Compare the proportion of patients with average blood pressure <130/85 mm Hg after CV CARE (average of weeks 12 and 24) versus before CV CARE (average of ADT initiation and week 4)
- Assess patient-reported satisfaction with CV CARE visit location and duration, and clinician communication of CV risk factors
- Assess clinician-reported satisfaction with frequency of engagement with local CV care teams, referrals to cardio-oncology, and CV CARE visit location and duration

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This feature highlights an NCCN study funded through the grant mechanism.

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For more information on specific trials, including patient selection criteria, use the contact information listed with each study.

For more information on the NCCN ORP, including a complete detailing of the clinical studies currently underway at NCCN Member Institutions, go to www.nccn.org/education-research/nccn-oncology-research-program/orp-main-page.