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ARCC Research

ARCC's research agenda consists of five program areas:

- Health Technology Assessment
- Societal Values and Public Engagement
- Health Systems, Services and Policy
- Patients and Families
- Knowledge Translation Research

In 2010-11, ARCC provided seed funding for five new pilot projects:

[Dynamic Case Studies in Cancer Control: Methodology Development and Feasibility Assessment](#)

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Dynamic Case Studies in Cancer Control: Methodology Development and Feasibility Assessment

Principal Investigator: Mark Dobrow, co-Investigators: Jeffrey Hoch, Mary McBride, Melissa Brouwers and Julie Gilbert.

This proposal describes the second of a three-phase project with the overarching aim to develop Dynamic Case Studies (DCS) in Cancer Control. DCS represent ongoing and evolving case studies that will address challenging cancer control topics that are highly relevant to policy-makers, managers and/or clinicians (i.e., decision-makers) working within cancer care systems in Canada and around the world. DCS will bring together a wide range of difficult to access evaluative work, often conducted (but rarely published) by cancer care and other health care

organizations, as well as other grey literature, program delivery tools and media coverage, which will complement associated scientific research on a particular topic. DCS will be based on a web-enabled and searchable platform, hosted by ARCC, which will facilitate the exchange of ideas and information between and among decision-makers and researchers, and within and across jurisdictions.

Cancer Control Geo-mapping

Principal Investigator: Mary McBride, co-Investigators: Mark Dobrow and Scott Tyldesley

Objectives:

The objective of proposed study is to generate maps of geographic variation in prevalence and utilization of health services for female breast cancer survivors. It is hypothesized that there will be variation in utilization of care across health regions, probably related to availability of care rather than need.

Specific aims:

1. Assess distribution of a set of survivor and health care metrics (in the hospital and community care setting) by health administrative region for British Columbia; Determine geographic areas of high and low prevalence / demand;
2. Produce maps of these metrics by health administrative region for British Columbia, highlighting geographic areas of high and low prevalence / demand, and disseminate to relevant stakeholders.

Valuing Cancer Interventions: Is there a Cancer Premium?

Principal Investigator: Stuart Peacock, co-Investigators: Jennifer Gibson and Paulos Teckle

When making decisions based on evaluations of single therapies, Cost-Utility Analysis (CUA) poses important challenges for decision-makers in cancer which inevitably involve judgments about whether the QALYs gained are worthwhile. Three major challenges include

- Are all QALYs equal? That is, is the QALY framework adequate for drawing comparisons across all health care interventions, and across all potential beneficiaries from those interventions?
- How much is it reasonable to spend to achieve improvements in survival and quality of life both for cancer and for other health-related conditions?
- Do decision-makers and the public support the use of other criteria in making funding decisions, and if so, in what manner?

The project will seek to shed light on each of these challenges, with specific objectives to: 1. review the relevant literature; 2. conduct a pilot Discrete Choice Experiment (DCE); and, 3. submit an application for funding for a full scale study. Phase 1 will involve reviewing the international literature on reimbursement and adoption decision-making processes in cancer, focusing specifically on the role of health outcomes and other decision-making criteria. Phase 2 will consist of a pilot DCE survey to examine the value of a QALY in cancer and the influence of contextual factors on such valuations. The project will culminate in the submission of a full grant application.

Orienting non-expert stakeholders to resource allocation decision processes for cancer control: an on-line tutorial for improved participation

Principal Investigator: George Browman, co-Investigators: Colene Bentley and Louise Zitzelsberger

The general objective is to improve the perceived legitimacy of resource allocation decisions in cancer control by improving the role of non-expert stakeholders in priority-setting decision processes. The specific objectives are to: 1) pilot test the usability and acceptability of an online tutorial (educational tool) by two different stakeholder groups (policy makers/ advisers and lay members of the public) for the purpose of further tool refinement and 2)

identify how different stakeholder perspectives influence the tool's usability and acceptability. It is hypothesized that individuals from different stakeholder perspectives may require tailored presentations of the same educational material in order to benefit from the tool. This information will be useful in further design and subsequently more formal evaluation in validation studies

A pilot study evaluating Canadian cancer patients' treatment related out-of-pocket costs

Principal Investigators: Christopher Longo and Richard Doll, co-Investigators: Margaret Fitch, Michel Grignon and Amanda Ward

Objectives: This pilot project will feed into an existing quantitative CCSRI application examining cancer patients' out-of-pocket costs (OOPC) for health care services, and how inequities (if any) manifest in cancer patients during their treatment. This pilot phase explores these same issues using qualitative methods.

Hypotheses: *What type of inequities (if any) result as a consequence of cancer patients' OOPC? What are patients' perspectives on these inequities, quality of life effects and motivations for prior insurance purchases?*

Aims: This project seeks to better understand cancer patients' perspectives on the extent and nature of OOPC during treatment, and on quality of life and insurance purchase effects. This research goes beyond previous work of reporting the magnitude of costs, by also exploring how individuals cope with these financial burdens. This research is meant to inform a larger quantitative research initiative (CCSRI) by identifying additional themes or concepts that may not have been adequately addressed in the existing draft questionnaire.

Methods: Enrollment of up to twenty breast, colorectal, lung and prostate cancer patients will occur at a cancer centre over 2-3 months. Interviews will be done face-to-face during clinic visits and will be recorded, and then transcribed for analysis. The interview transcripts will be analyzed by a graduate student under the supervision of our research team. The team will collaborate early in the process to develop a preliminary coding scheme. The data will then be coded using the qualitative software NVivo 9.0, and used to assist in the development of an updated OOPC questionnaire.

For more information about ARCC's research programs please visit: www.cc-arcc.ca/research

Recent Events

Cancer Screening Decisions and Policy: When Mixed Evidence Meets Strong Preferences

October 23rd, 2010, Toronto ON

ARCC co-hosted this dinner symposium at the Society for Medical Decision-Making Conference. The co-chairs for this event were Elena Elkin, Jeffrey Hoch and Stuart Peacock. The speakers included Ruth B Etzioni, J. Sanford Schwartz, Clyde Schechter and Terry Sullivan. Approximately 150 people attended the event, which was well received by participants.

Listening for Direction Forum: Setting Research Priorities for Sustainable Cancer Control Policies and Systems in Canada

February 2nd, 2011, Toronto ON

The purpose of this forum was to draw from the diverse perspectives and experiences of decision-makers and policy-makers in provincial governments, cancer agencies, cancer societies and other non-governmental cancer organizations to provide input on research directions and priorities that will contribute to building sustainable cancer care policies and systems in Canada. The forum had approximately 25 participants, and ARCC received valuable feedback on its current and future research agendas.

Upcoming Events and Opportunities

The Canadian Cancer Research Alliance (CCRA) is hosting a pan-Canadian conference focusing on the entire spectrum of cancer research from basic science to health services in Toronto in November, 2011. ARCC will be contributing to the CCRA conference. More details to come!

ARCC Mentorship Program

Are you a graduate student looking for guidance from a senior researcher? ARCC is connecting students with mentors who have similar research interests and can provide insight from their experience. Email arcc@cancercare.on.ca if you are interested in pursuing this opportunity or if you would like more information on the program.

ARCC Network Member Profile

Paulos Teckle, PhD

Health Economist, BC Cancer Agency

Clinical Assistant Professor, School of Population and Public Health, UBC

Paulos conducts advanced health econometric modeling using STATA, and is currently involved in three ARCC-related projects: 'Health-related quality of life in cancer patients'; 'Long-term income and employment outcomes in cancer survivors', and 'Phase-specific and lifetime costs of cancer in British Columbia and Ontario'.

Whilst at the University of Aberdeen, Paulos was part of a research team that was commissioned by the Scottish Executive Health Department in 2006 to improve and refine the Arbutnott Resources Allocation Formula used in Scotland.

Paulos' research interests include health economics, economics of cancer, measuring health-related quality of life in cancer patients, determinants of income and employment in cancer survivors, applied econometrics, health services research, primary/secondary data quantitative analysis of cross-sectional and longitudinal data.

Did you know?

You can find a table of the top 10 oral cancer drugs by total provincial expenditure for six provinces in this recent publication:

Chafe R, Culyer A, Dobrow M, Coyte P, Sawka C, O'Reilly S, Liang K, Trudeau M, Smith S, Hoch J, Morgan S, Peacock S, Abbott R, Sullivan T. Access to Cancer Drugs in Canada: Looking Beyond Coverage Decisions. Healthcare Policy 2011; Vol6, No3: 27-35.

ARCC is accepting applications for Network Members. For more information please visit www.cc-arcc.ca/network or email arcc@cancercare.on.ca.



Canadian Cancer Society
Société canadienne du cancer

