

Prevention: The Future for the CPRIT Cancer Prevention Program

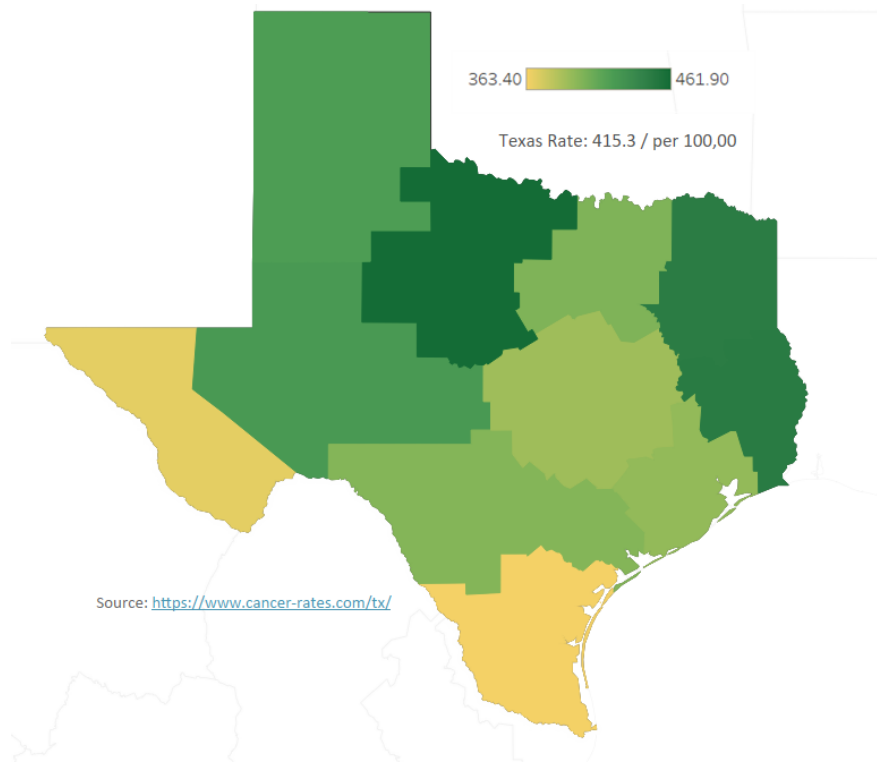
Navkiran “Kiran” K. Shokar, MA, MD, MPH

The University of Texas at Austin Dell Medical School

Ernest Hawk, MD, MPH

The University of Texas MD Anderson Cancer Center

Invasive Cancer Incidence Rates in Texas By Public Health Region



**Estimated new cases,
2023**

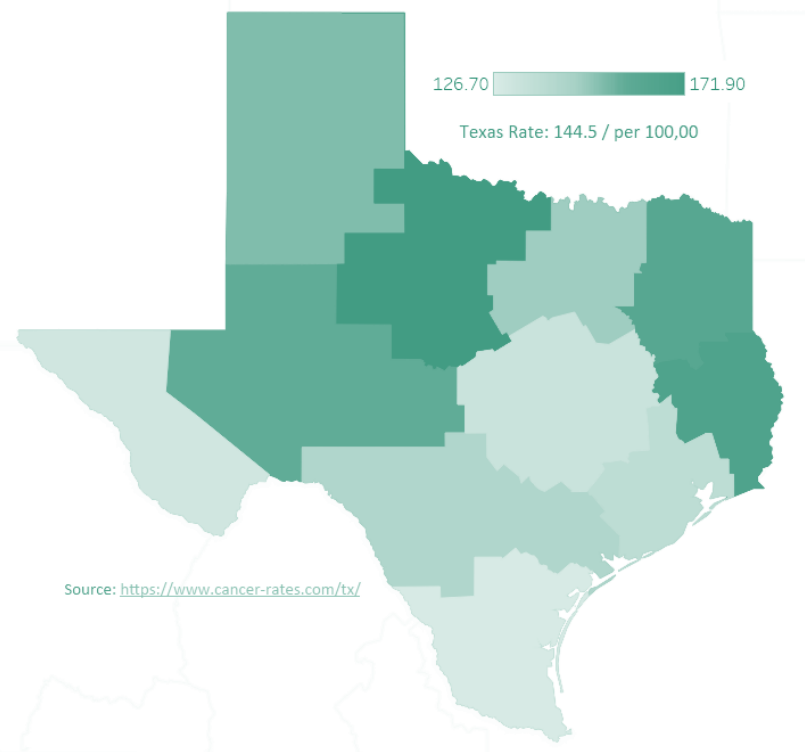
139,100

**Incidence rates, 2015-
2019**

415.3

Average annual rate per 100,000,
age adjusted to the 2000 US
standard population.

Cancer Mortality Rates in Texas By Public Health Region



Death rates, 2016-2020

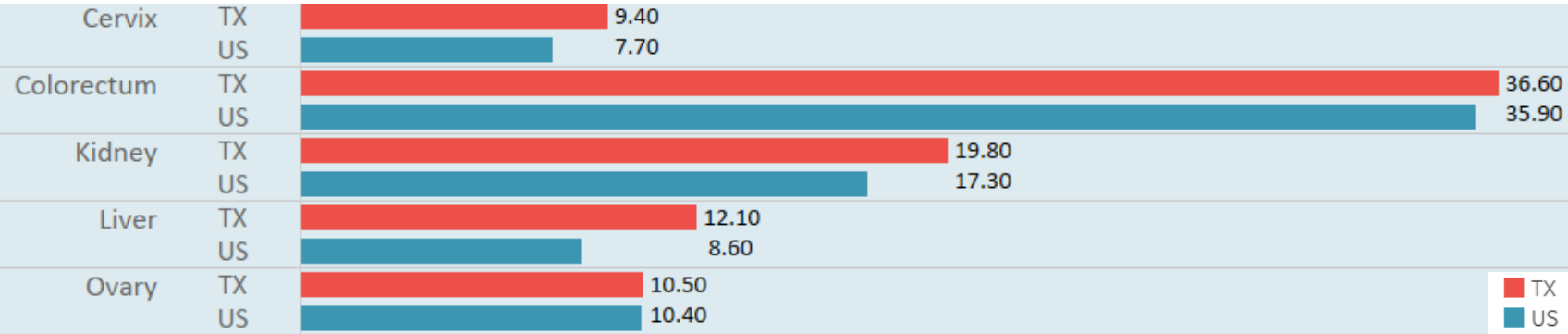
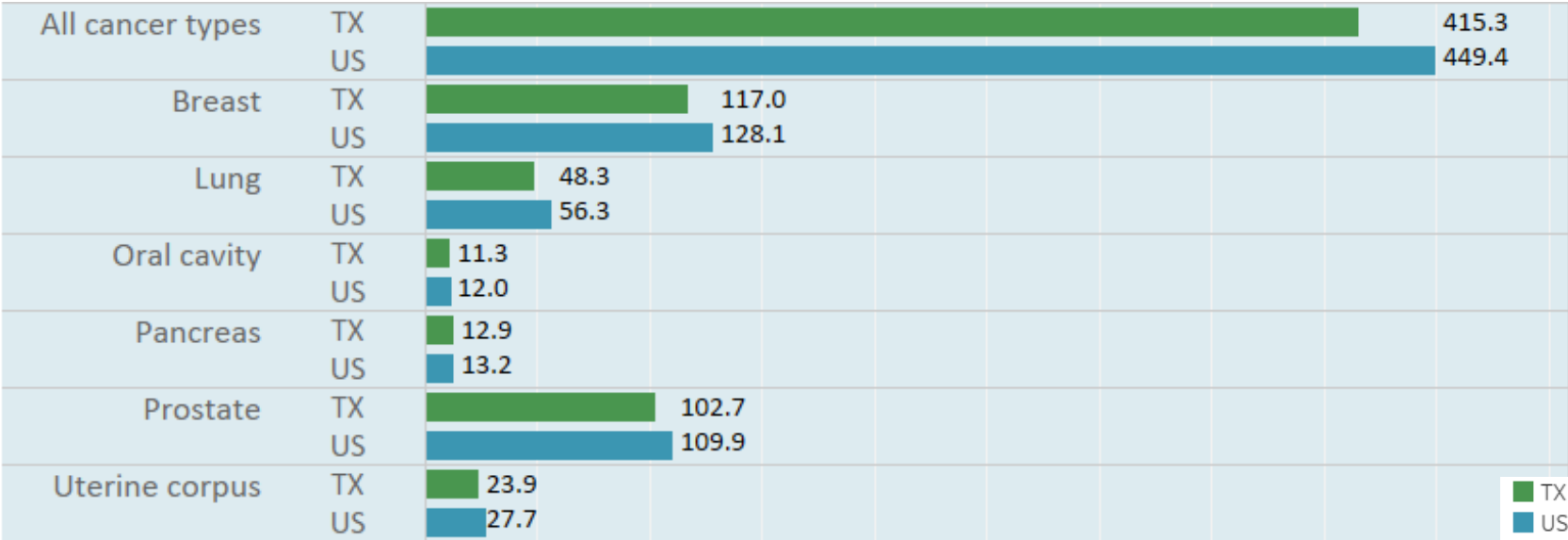
144.5

Average annual rate per 100,000,
age adjusted to the 2000 US
standard population

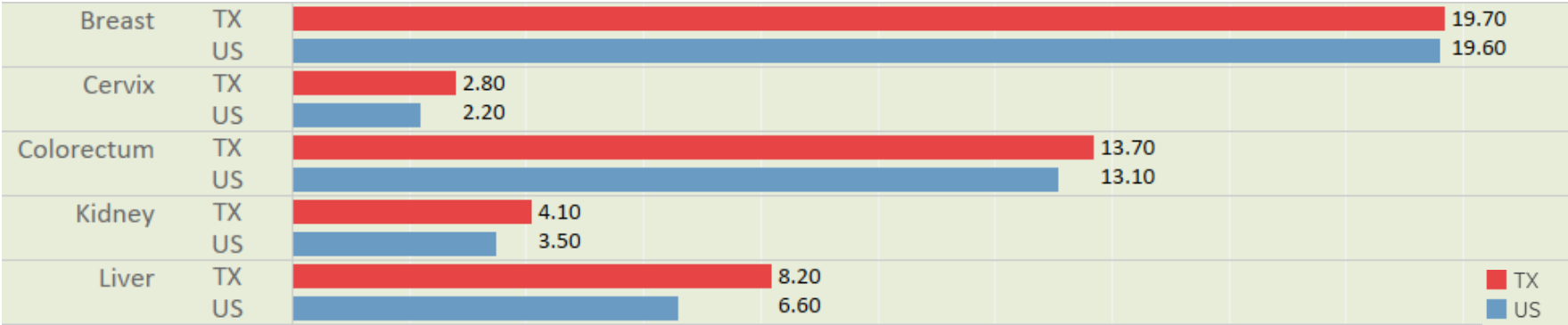
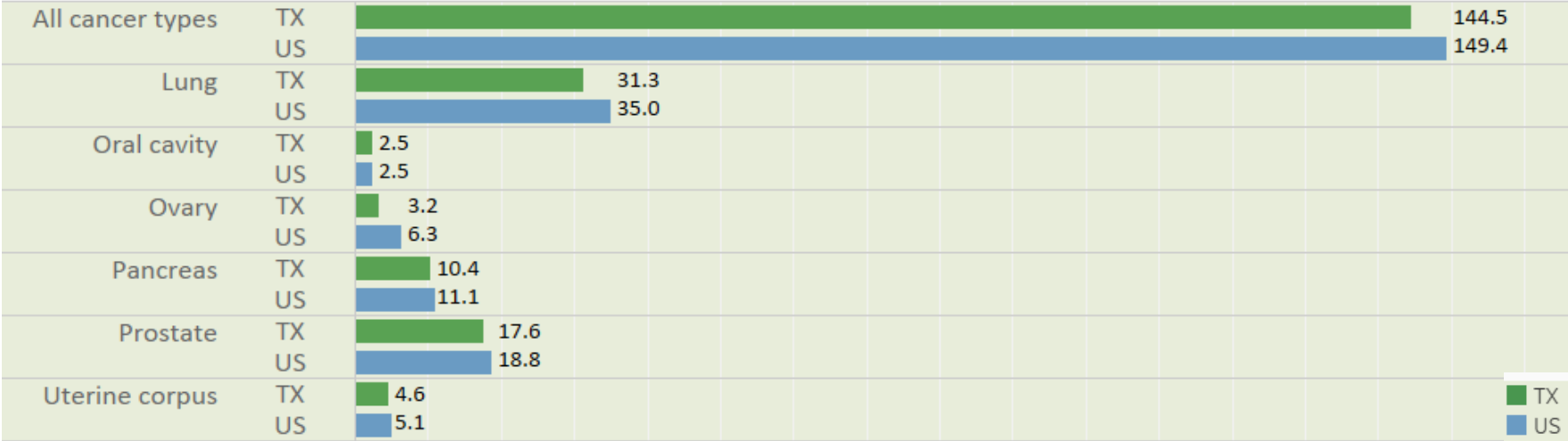
Estimated deaths, 2023

44,140

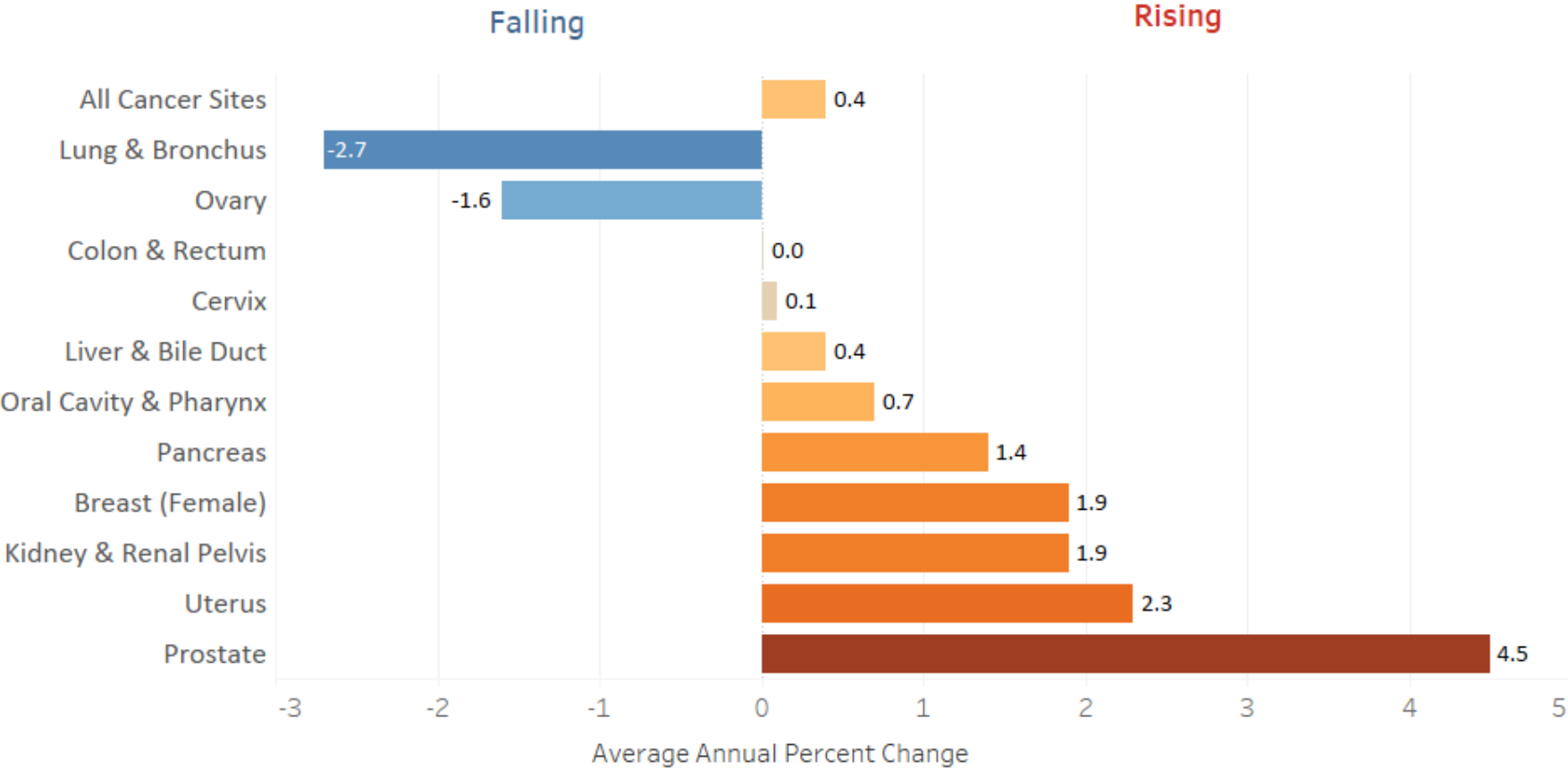
Texas vs US Incidence Rates



Texas vs US Mortality Rates

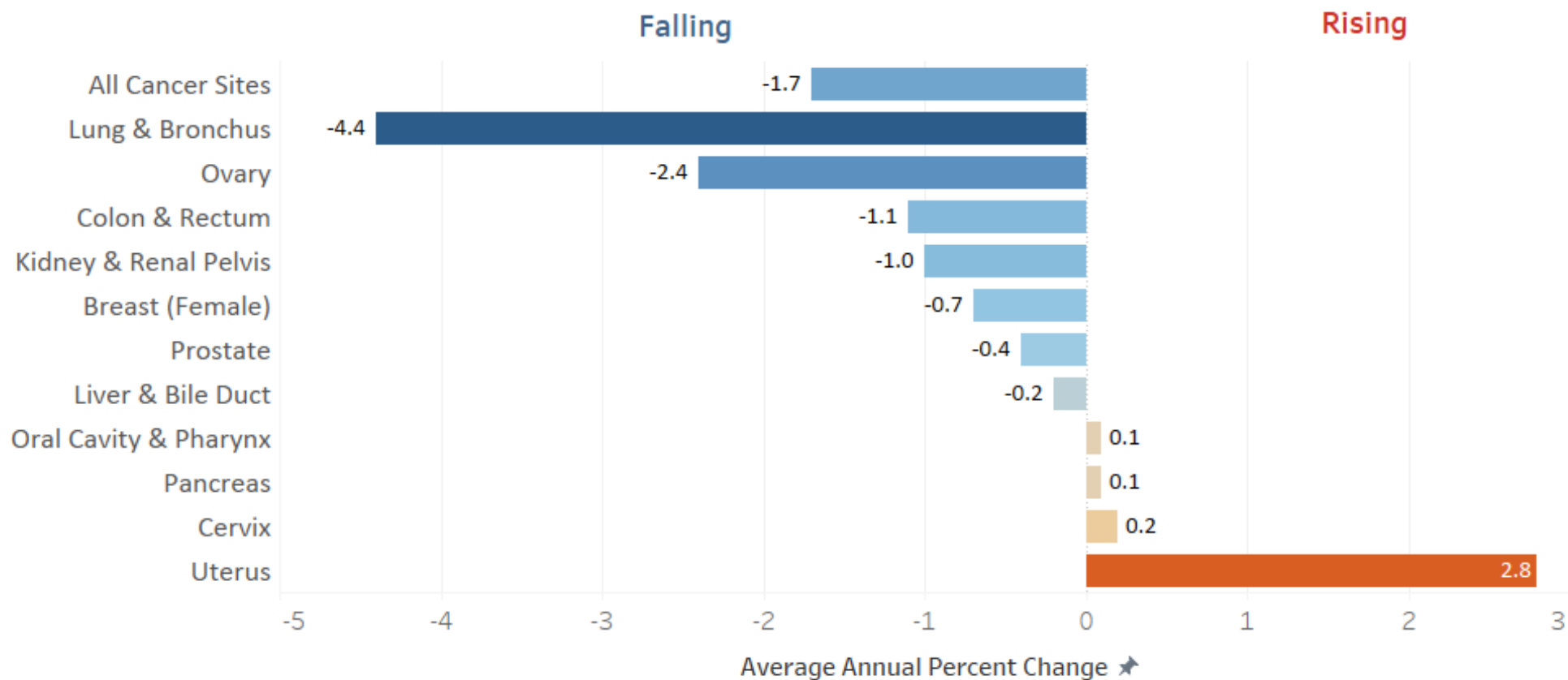


5-Year Rate Changes – Incidence Texas



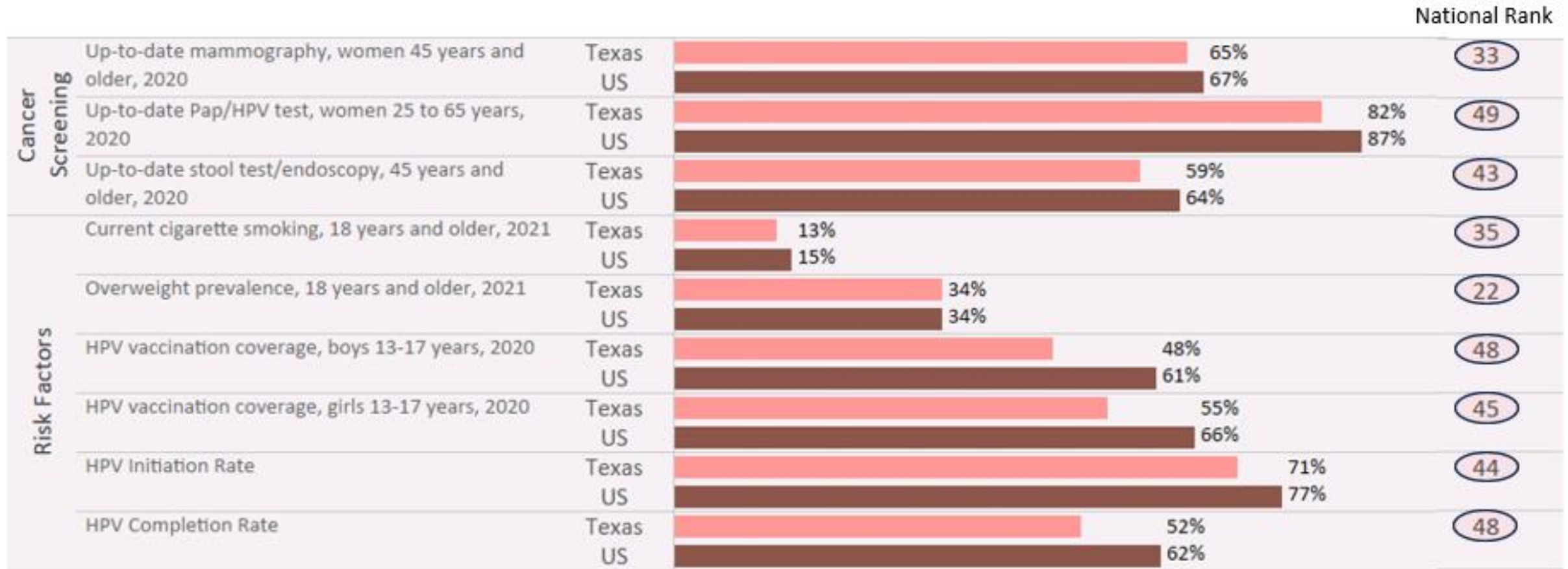
Source: <https://www.statecancerprofiles.cancer.gov/>

5-Year Rate Changes – Mortality Texas



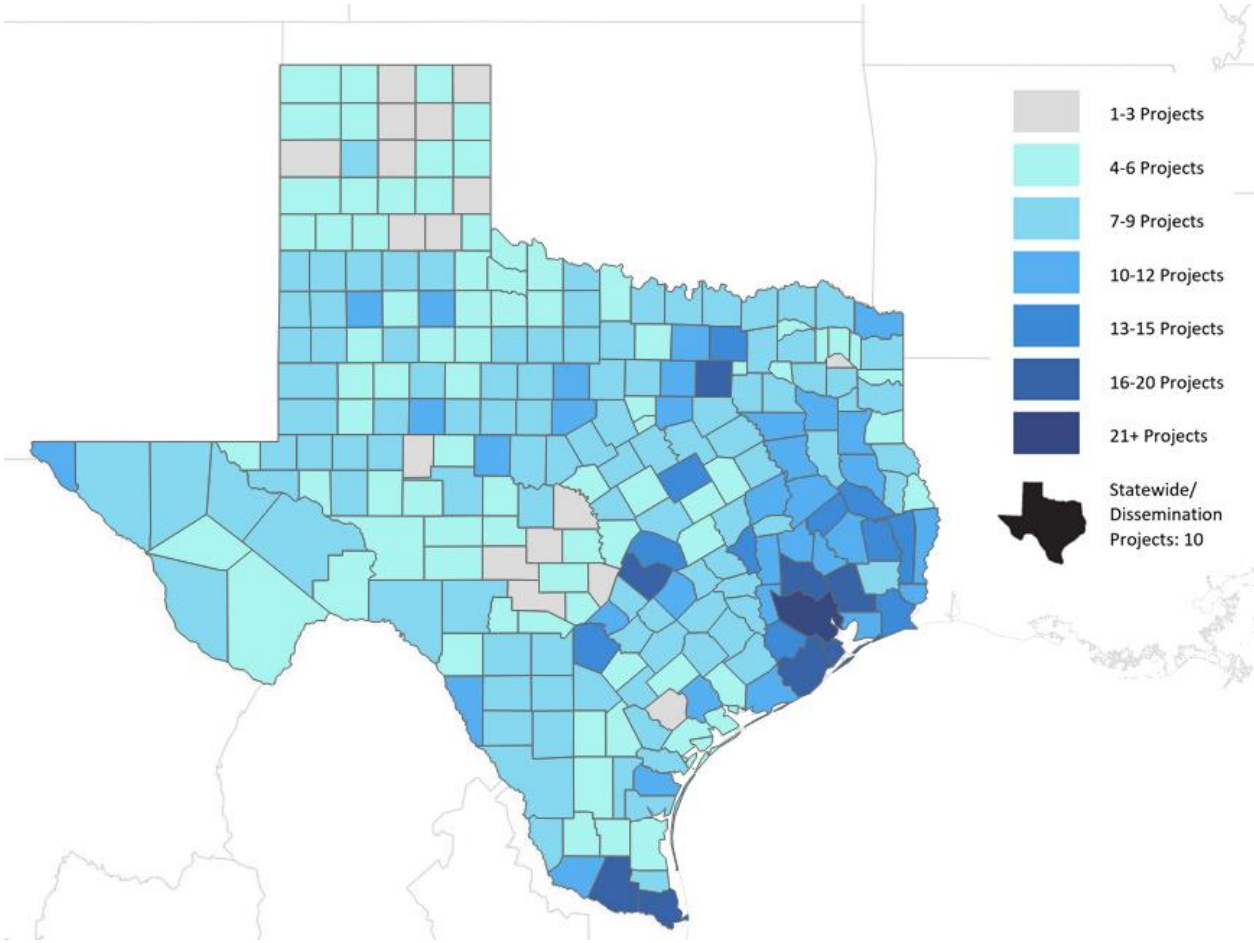
Source: <https://www.statecancerprofiles.cancer.gov/>

Cancer Screening and Risk Factor Prevalence

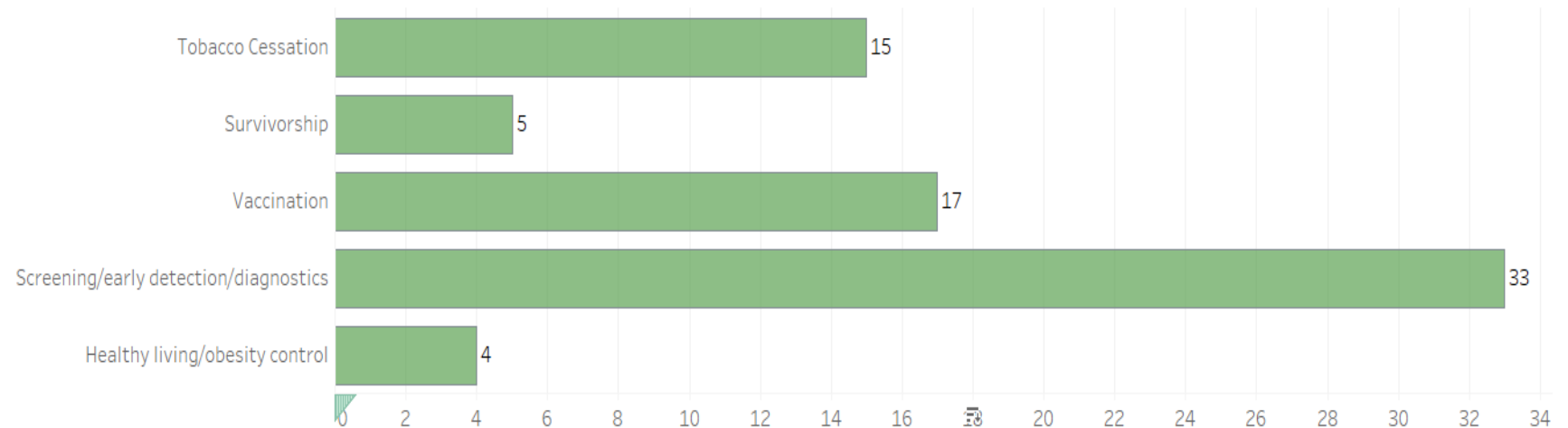
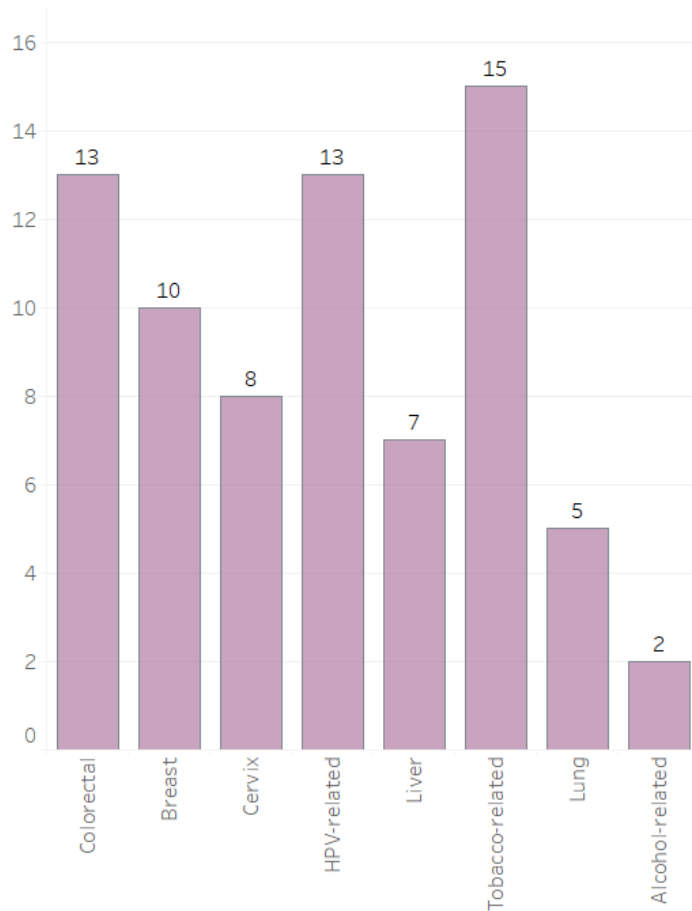


Counties of Residence of People Served by CPRIT Prevention Projects

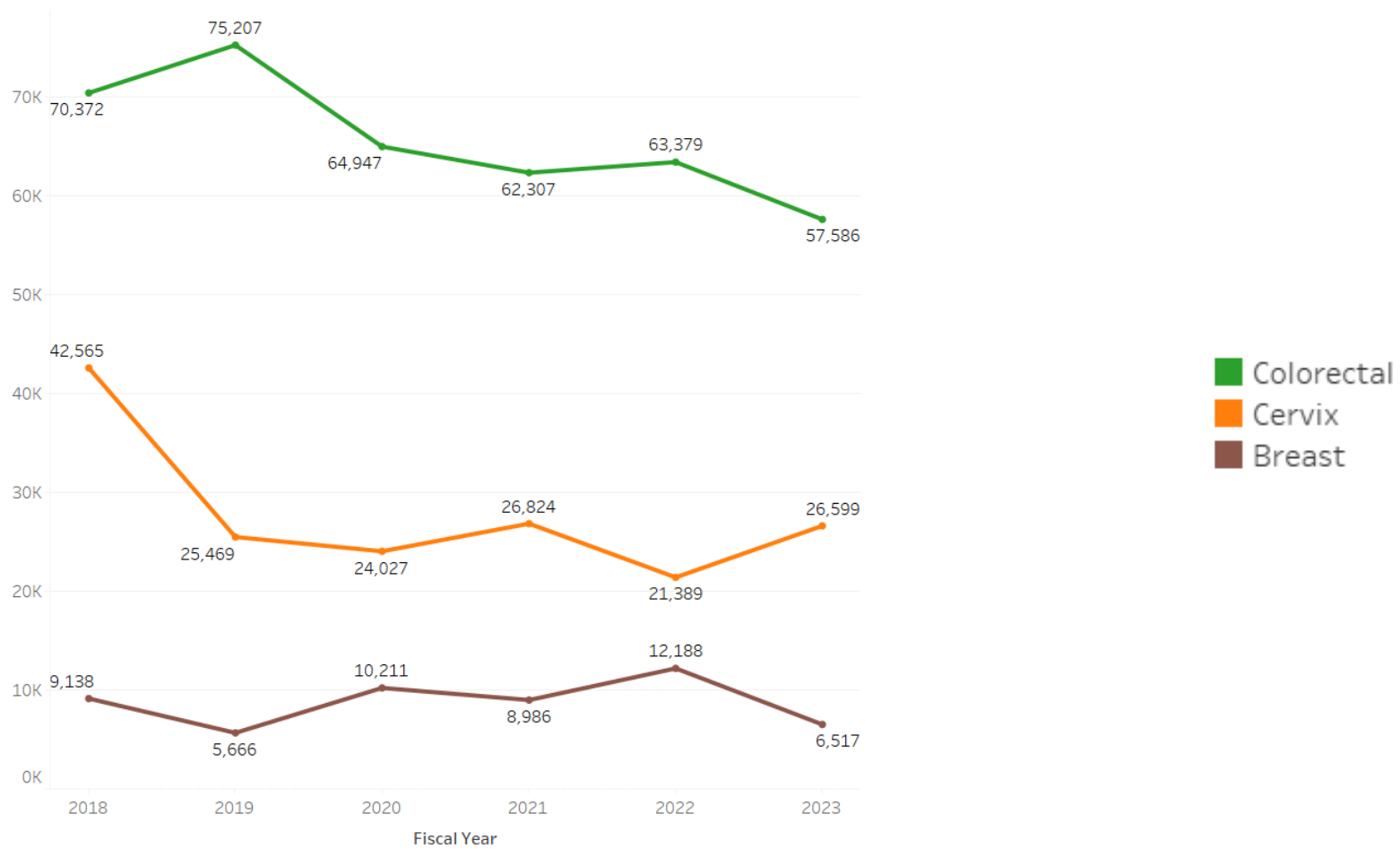
68 Active Projects – September 2023



Number of Active Projects by Cancer Type(s)



CPRIT related Cancer Screenings FY 2018 – FY 2023



↑
106 projects

↑
68 projects

CPRIT PAC

Keith Argenbright, MD	UT Southwestern, Moncrieff Cancer Institute
Abbey Berenson, MD	UTMB, Galveston
Roxana Cruz, MD	Texas Association of Community Health Centers, Inc.
Dorothy Gibbons	The Rose
Amanda Hall, MD	Associate Commissioner, Div. of Community Health Improvement, DSHS
Ernest Hawk, MD, MPH	UT MD Anderson
David Lakey, MD	UT System
Mike Pignone, MD, MPH	Dell Medical School, UT Austin
Kenneth Ramos, MD, PhD	Texas A&M Health
Rakhshanda Rahman, MD	TTUHSC
Navkiran Shokar, MD MPH (Chair)	Dell Medical School, UT Austin
Suncerria Tillis, MBA (Vice Chair)	American Cancer Society

- Meet throughout the year to identify priorities and work to get them done
- Annual presentation of recommendations to the CPRIT Oversight Committee

Successes:

- Evaluation of the CPRIT Prevention Program RFA
- CRC Treatment Initiative: \$10 million general revenue appropriation
- Statewide CRC Screening Coordinating Center RFA

CPRIT Prevention Program

- **Accelerate Research *and* Capacity in Prevention and Control Research**
- **Facilitate the development of a comprehensive statewide cancer prevention, early detection, and connection to care strategy**
- **Collaboration, Integration with the next Texas Cancer Plan**
- **Simplify access to Texas cancer prevention, early detection and treatment related statistics, resources, and program information**
- **Identify next cancer focus area for a statewide screening RFA**
- **Strategies to support CPRIT funded program development in a diverse array of organizations.**
- **Wider engagement**

CPRIT Prevention: WHAT NEXT?



Where are the gaps?

What should be prioritized? How?

What is the next BIG idea?

Prevention Gaps, Priorities, “BIG” Ideas - Possibilities

Focus on improved value (outcomes + experience/cost) at scale

- Screening
 - Delivery of individual vs. bundled initial screens – lung, cervix, colorectal, breast, prostate
 - Who is still in need?
 - How can they be reached?
 - What fraction of those screened are receiving serial, on-schedule testing over time?
 - How can serial delivery across time be best achieved?
 - Self- vs. clinical sampling?
- Role(s) of multi-cancer early detection tests (MCDs or MCEDs)
 - Various technologies/tests?
 - Average vs. various high-risk populations?
- Policy research to assist key decision-makers and/or state agencies

Prevention Gaps, Priorities, “BIG” Ideas - Possibilities

- Primary prevention
 - Implementation of targeted (e.g., active lifestyles, healthy diets, carcinogen avoidance, vaccination, clinical preventive services) vs. comprehensive programs
 - Level(s) of intervention
 - Individual
 - Family
 - Community
 - Cancer vaccines
 - What’s the future need/year?
 - How to assure delivery to all with interest?
 - Tobacco cessation
 - Delivery at scale to complement the state Quitline
 - Coordination with LCS for those eligible
- High-risk individuals/cohorts
- What’s intended re: “BIG” ideas – dollars, population, reach, anticipated impact on burden?