# Cancer Medicines Outcome Project (CMOP)

Professor Marion Bennie

University of Strathclyde

Collaborative Programme with NHS GG&C funded by Scottish Government

# Aims

- To co-ordinate an incremental program of planned studies to test the **connectivity and linkage** of current and evolving local and national datasets to determine clinical outcome data for cancer medicines.

- **To test the feasibility of collecting and analysing quality of life data from clinical practice, aligned to the early exemplar studies, to inform a potential enhanced data strategy for collection and analysis of patient reported outcome measures (PROMs).**

Clinical
Effectiveness

Quality of
Life

PATIENT
&
CLINICIAN

Quantitative Work Stream

Qualitative Work Stream
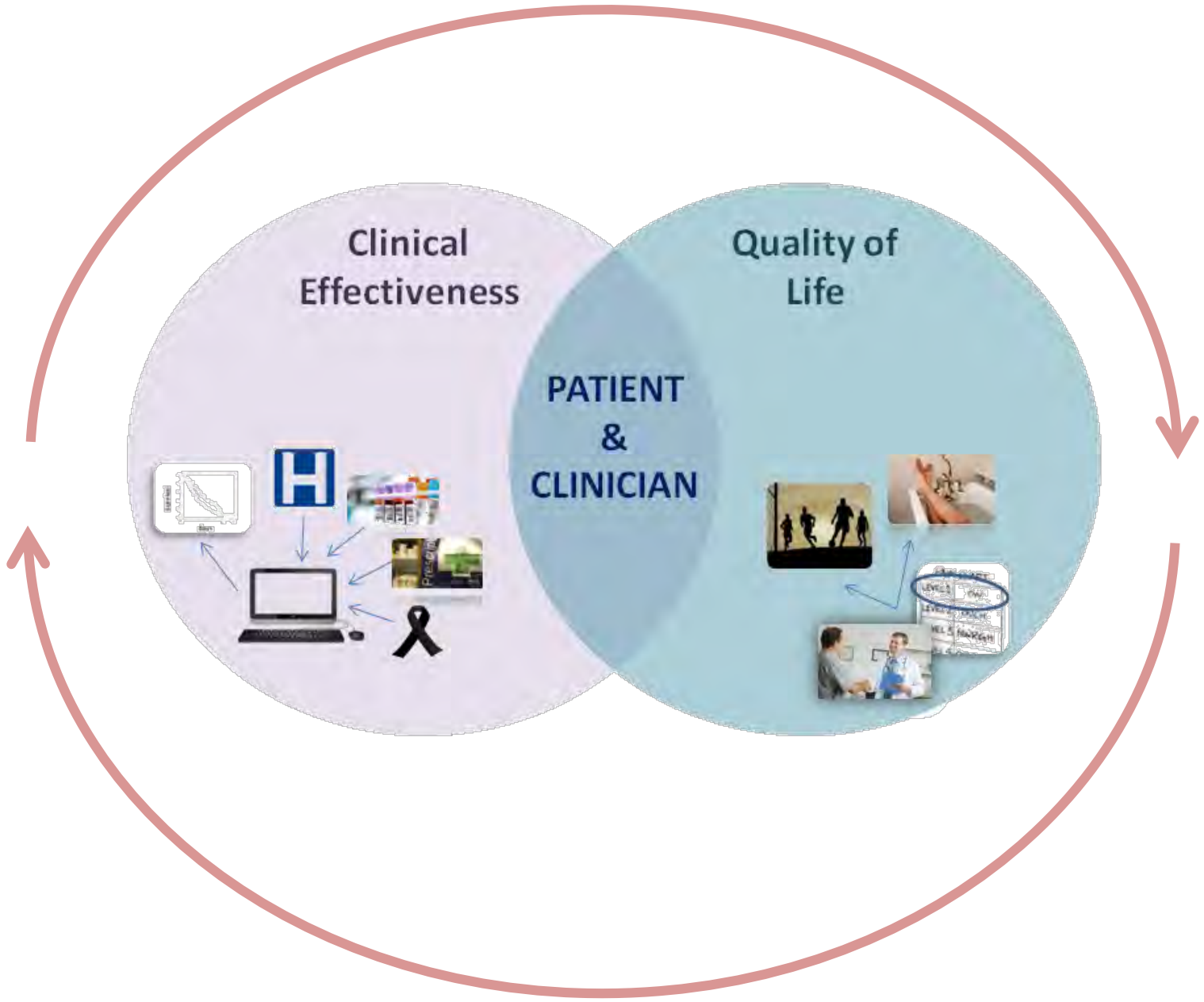
# Year one exemplar projects



## Prostate Cancer

- Abiraterone and Enzalutamide

- Baseline characteristics including PS, co-morbidities

- Outcomes: duration of therapy, stop reason, OS, time to PSA progression, time to chemo/radio, Opiate prescribing
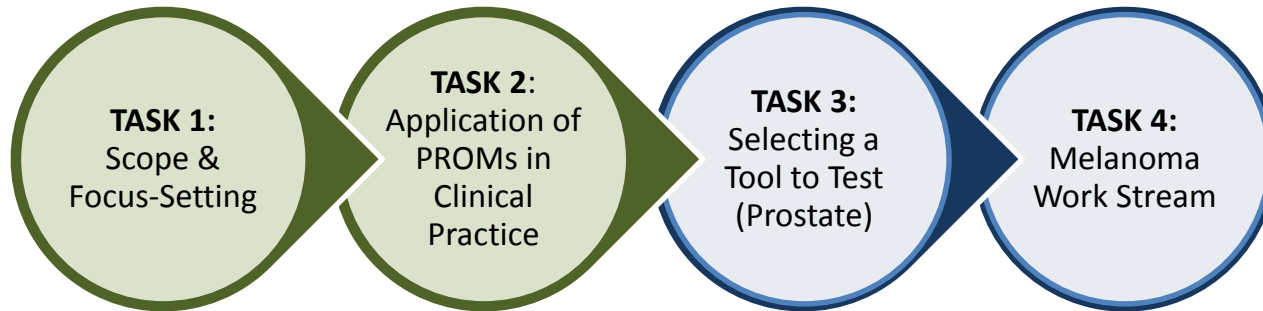
- PROMs

## Melanoma

- BRAF inhibitors/MEK inhibitors and immunotherapy

- Baseline characteristics including BRAF status, depcat score, prognostic scores, co-morbidities

- Outcomes: duration of therapy, OS, stop reason, toxicities including supportive meds and hospital admissions

# Patient Reported Outcome Measures (PROMs)

- Real life impact of these medicines on patients' quality of life (positive and negative) – not routinely captured.

- Examine the utility of adoption and /or adaption of recognised measures of general and disease specific quality of life tools into clinical practice.

- Identify PROMs tools already used in clinical practice

- What is useful / practical for patients / clinicians?  Barriers?

- How can inclusion of PROMs in addition to clinical outcomes supports improved decision making?

# Qualitative Methodological Approach

**TASK 1:** Scope & Focus-Setting

**TASK 2:** Application of PROMs in Clinical Practice

**TASK 3:** Selecting a Tool to Test (Prostate)

**TASK 4:** Melanoma Work Stream

| TASK 1 *(April 2017)* | TASK 2 *(May 2017)* | TASK 3 *(Nov 2017)* | TASK 4 *(TBC)* |
|---|---|---|---|
| • Agree scope & approach of PROMs work stream | • Collate and map use of PROMs applied in clinical practice globally | • Literature review of validated tools<br>• Qualitative data collection with stakeholder groups<br>• Analysis & Write-Up | • Literature review of validated tools<br>• Qualitative data collection with stakeholder groups<br>• Analysis & Write-Up |

# 3 Main Tool Types

**Disease-focused**

**Cancer-focused**

**General QoL**

- SF-36 / SF12
- EQ5D

- EORTC QLQ-C30
- FACT

- EPIC-26
- QLQ-PR25      *P*
- FACT-P
- FACT-M        *M*
- Skindex-16

# Matrix of PROMS Applications in Cancer
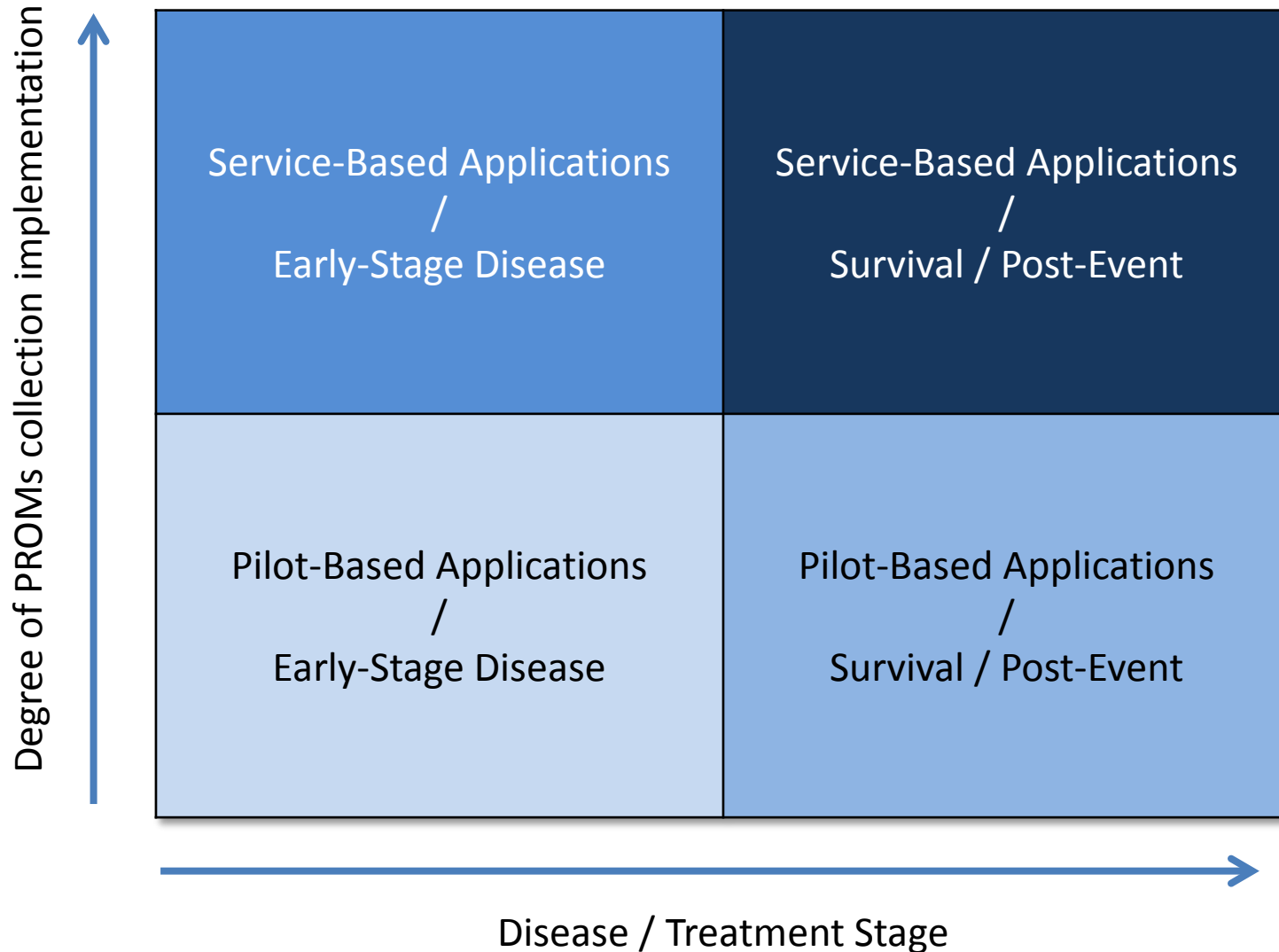
# General Health QoL Items:
## General, Cancer and Disease-Focused Tools

| Tool | General Health / QoL | Climbing / Walking / Moving | Personal Care | Purpose / Usefulness | Work | Social / Leisure | Family & Friends | Emotional Support | Sex | Body Image | Weight | Caring | Independence | Finances | Pain | Breathing | Energy & Sleep | Appetite | Digestion | Concentration | Anxiety / Stress | Mood | Expectations / Future |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **G** EQ5D, SF-36, WEBWEMS, SDI | | | | | | | | | | | | | | | | | | | | | | | |
| **C** QLQ-C30 | | | | | | | | | | | | | | | | | | | | | | | |
| **P** EPIC-26, QLQ-PR25, FACT-P, IIEF-5 | | | | | | | | | | | | | | | | | | | | | | | |
| **M** FACT-M, Skindex-16 | | | | | | | | | | | | | | | | | | | | | | | |
| **Count** | 5 | 6 | 4 | 4 | 7 | 6 | 6 | 2 | 5 | 2 | 3 | 3 | 1 | 2 | 7 | 2 | 5 | 3 | 5 | 3 | 7 | 6 | 5 |

# Disease-Specific QoL Items: Prostate Tools

| | Urination | | | | | | | Bowel Movements | | | | | Sexual Function | | | | Other Symptoms | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Control | Urgency | Frequency | Pain | Bleeding | Incontinence Aids | Daily Impact | Control | Urgency | Frequency | Bleeding | Daily Impact | Erectile Ability / Quality | Frequency Erection | Sexual Function | Intimacy / Satisfaction | Hot Flashes | Breast Tenderness | Bloating | Leg/Ankle Swelling | Gender Identity |
| EPIC-26 QLQ-PR25 FACT-P IIEF-5 | | | | | | | | | | | | | | | | | | | | | |
| | 2 | 1 | 3 | 2 | 1 | 2 | 2 | 2 | 1 | 1 | 2 | 1 | 4 | 2 | 3 | 1 | 2 | 2 | 1 | 1 | 1 |

# Disease-Specific QoL Items: Melanoma Tools

| | Site Pain | Swelling | Movement | Skin Changes | Numbness | Itching | Burning / Stinging | Irritation | Persistence | Skin appearance | Headaches | Fevers | Stomach Swelling | Bloody Stool |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FACT-M Skindex- | | | | | | | | | | | | | | |
| | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 |

# Key Points & Observations

- Literature details *pilots*, *projects*, *new tool development* or *reliability/validity testing*

- Prostate literature far more rich than melanoma

- Generic tools identified in cancer cover *work*, *pain*, and *anxiety/stress* most:

- Most applications are *project-based* and not service-integrated

- Most applications focus on *survival / post-events* and not on the disease trajectory

- Details on tools / tool development not always available

- NHS-based PROMs applications for event-based interventions and not part of practice for all