

THE 2018 SCOPE OF WORK: 2017 YEAR IN REVIEW



Table of Contents

- I. Situation Analysis
- II. Executive Summary
- III. Scope of Work: 2018

<http://prostatecanceradvisorycouncil.org/>

Situation Analysis

The Florida Prostate Cancer Advisory Council (PCAC) was established in 2004 by state statute 381.911 and remains under the direction of the University of Florida Prostate Disease Center (UFPDC). The task of PCAC is to advise the governor, the state surgeon general and the state legislature on statewide issues regarding prostate cancer incidence and mortality as well as related health disparities for access to care and prostate cancer treatment. PCAC has focused on educational and collaborative goals to improve the detection and management of prostate cancer statewide. Goal performance for 2017 will be summarized in this report as well as proposed initiatives for 2018.

Membership criteria: Membership in the UFPDC Prostate Cancer Advisory Council is by appointment of the executive director of the UFPDC in consultation with the Department of Health's Comprehensive Cancer Control Program and the State Surgeon General to cover a geographically and institutionally diverse advisory council that shall consist of 9 members:

- Two persons from prostate cancer survivor groups or cancer-related advocacy groups
- Four persons, one of whom is a physician licensed under chapter 458, one of whom is a physician licensed under chapter 459, one of whom is a scientist, one of whom is the executive director of the UFPDC or designee
- Three persons who are engaged in the practice of cancer related medical specialty from health organizations committed to cancer research and control.

Membership is current. The surgeon general has approved the appointment of Dr. Matthew Abramowitz from the Department of Radiation Oncology at the University of Miami to replace Dr. Alan Pollack from the same institution as researcher/scientist.

Executive Summary

The annual meeting of PCAC was held December 9th in the UF Department of Urology. Discussants included council members and support staff, invited guests and representatives of the Department of Health, the Florida Cancer Control and Research Advisory Council (CCRAB) and the Biomedical Research Advisory Council (BRAC).

Council goals for 2017 centered on education and outreach, expansion of partnerships and definition of standards for detection and management of localized prostate cancer. Work groups were established in 2017 to address goals including the expansion of the website as well as to provide a resource document for localized prostate cancer treatment. As a result, PCAC website page views nearly doubled and a document linked to the AUA/ASTRO/SUO joint statement on management on localized prostate cancer was submitted to the state surgeon general in September. That document is in the final stages of revision based on recommendations from CCRAB leadership.

Partnerships are essential for successful messaging to patients, advocates and providers alike. Reflection on PCAC achievements this past year include expanded relationships with DOH, CCRAB and BRAC leadership. Multiple conference calls as well as face-to-face meetings were held over the year. Discussion items included the sharing of activities, priorities and plans. Funding gaps for meritorious grant applications were discussed as well as mechanisms for correction. Additionally, future efforts will be made to standardize and correlate PCAC, CCRAB and BRAC annual reports to the legislature.

Besides the expansion of existing partnerships, collaborative relationships were established with the CDC as well as with the Florida Community Health Worker Coalition this past year including attendance at the annual summit for the promotion of minority health. The members of PCAC continue to strongly support the ongoing assessment of statewide racial and geographic differences in prostate cancer detection, treatment and outcomes. The Florida Behavioral Risk Factor Surveillance System Measures for 2016 show a persistent decline in PSA testing across all age groups but most prominent in the black population as well as in lower income and less educated populations. Only one third of men make the decision for screening jointly with their doctor.

The CDC supports guideline-consistent informed decision-making for prostate cancer screening as well as funding support for communication initiatives, applied research and surveillance. CDC publications and educational aids emphasize that prostate cancer had the highest incidence of all invasive cancers in US men. Nationwide incidence is expected to increase from 250,000 cases in 2010 to 350,000 in 2020. However, prostate cancer death rates declined 3.4% from 2010-2014 and are expected to further decline 26.4% nationwide by 2020. In Florida, there were 11,146 new cases of prostate cancer in 2014. This translates to 83.1 men out of every 100,000. That same year, there were 2,162 men who died of prostate cancer. The rate of new prostate cancer cases varied from 74.9/100,000 for whites compared to 135.1/100,000 for blacks.

Outcomes including incidence and death rates are ,in part, related to appropriate screening with risk assessment and shared and informed decision-making (SDM). The American Urological Association (AUA) published a white paper on SDM in 2015. Dr. Chris Gonzalez as AUA Council Chair on Public Policy addressed PCAC meeting attendees on SDM, vulnerable at-risk patient populations and ongoing discussions for screening recommendations with the USPSTF including the removal the D status discouraging use of PSA screening.

Council member Nicole Bixler, D.O., additionally addressed prostate cancer screening recommendations in primary care. Discussion included the time challenges for comprehensive coverage of all screening parameters. Primary care providers need the assistance of PCAC generated initiatives for interdisciplinary dialogue on prostate cancer screening, education in shared-decision making and the provision of patient decision aids.

PCAC is uniquely comprised of scientists, physicians and patient advocates representing diverse communities and institutions dedicated to the improvement of prostate-cancer outcomes across the state.

Scope of Work 2018

- 1) Expand community outreach including incorporation of community health workers and patient navigators, Prostate Cancer Work Groups and PCAC speaker panels for the dissemination of prostate cancer information to patients and families
- 2) Support the implementation of prostate cancer survivorship questions on the Florida Behavioral Risk Factor Surveillance System (BRFSS) Measures Survey
- 3) Continue to explore funding mechanisms for prostate cancer outcomes research from state and federal sources
- 4) Continue to expand web presence including linking to recognized expert websites to serve as the primary educational resource of prostate cancer information for patients, advocates and providers in Florida
- 5) Expand collaborative efforts to include existing partnerships with CCRAB, BRAC, Florida DOH and the CDC in order to facilitate 2015 Florida Cancer Plan goals for 20% reduction in prostate cancer mortality by 2024.
- 6) Provide a clear and understandable central resource for prostate cancer that addresses the benefits and risks of screening which is risk-adjusted and promotes shared decision-making. The document is to be Florida focused, nationally aligned and adjusted real-time to reflect updates in guideline recommendations
- 7) Continue to work to develop collaborative quality initiatives (CQI's) between academic and private practice urologists to integrate and improve patient care related to prostate cancer management
- 8) Support the Florida Cancer Data System according to state statute

Submitted by

A handwritten signature in blue ink that reads "Tom Stringer". The signature is written in a cursive style and is positioned above a horizontal line.

Tom Stringer, MD
Executive Director
Prostate Cancer Advisory Council