The Prostate Cancer Advisory Council 2024 Annual Report

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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, State Surgeon General and 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 is a collaborative, multi-institutional and inter-disciplinary advisory body focused on a communication platform that promotes education and awareness as well as improved detection and management of prostate cancer statewide. The Council is required to file an annual report update to the Governor, State Surgeon General and the Florida Legislature.

Membership in the UFPDC/PCAC is by appointment of the executive director of the UFPDC in consultation with the Department of Health's Comprehensive Cancer Control Program and 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.

2025 PCAC Proposed Membership Renewals

- **Nicole Bixler, DO, MBA, FACOFP**
  - Statute: Medical Doctor/ physician licensed under chapter 459 (DO)
  - Term: January 2024 - January 2028 4 Years

- **Daniel Landau, MD**
  - Statute: Cancer Related Specialty
  - Term: January 2024 - January 2026 2 Years

- **Ali Kasraeian, MD**
  - Statute: Medical Doctor/ physician licensed under 458 (MD)
  - Term: January 2024 - January 2026 2 Years

- **Raymond W. Pak, MD, MBA**
  - Statute: Cancer Related Specialty
  - Term: January 2024 - January 2026 2 Years

- **Paul Hull, PhD, MPH**
  - Statute: Patient Advocate/Prostate Cancer Survivor Group/American Cancer Society
  - Term: January 2024 - January 2028 4 Years

EXECUTIVE SUMMARY

PCAC 2024 Activities:

- The PCAC leadership formulated a 3-year strategic plan to improve access to prostate cancer screening in African American men. (Attachment I) It highlighted available state infrastructure that may serve for a state-wide initiative to improve prostate cancer awareness and access to screening for underserved populations.

- The interim 2024 interim chair worked with UF leadership to prepare the incoming Executive Chair to continue long term PCAC activities.

PCAC 2024 Annual Meeting

Dr. Tarik Benidir, the Chair PCAC, opened the meeting by introducing the council members as well as attendees from BRAC and CCRAB. He then asked if any of the current members would like to be excused from the committee, none of the members asked to do so. He then congratulated Dr. Thom Stringer on his recent appointment as President Elect of the American Urological Society and Dr. Paul Hull on his recent PhD.

The annual meeting addressed challenges with implementing and maintaining prostate cancer awareness, early detection initiatives statewide and education of practitioners to improve best treatment of men with elevated prostate specific antigen (PSA) or newly diagnosed prostate cancer. Dr. Tarik Benidir began by presenting the prior proposal for a 3-year Outreach Program that would engage the Regional Cancer Collaboratives and other state resources. (Attachment). Limitations on implementation and resources needed were highlighted and included:

Limitations:

1. Cultural Resistance: Overcoming cultural taboos and misconceptions about prostate cancer and screenings may be challenging.
2. Budgetary Constraints: Implementing large-scale awareness campaigns and clinics will require sufficient funding.
3. Access to Healthcare: Ensuring adequate access to healthcare facilities and providers in underserved areas may pose logistical challenges.
4. Sustainability: Maintaining long-term engagement and momentum in the community may be difficult.

Resources Needed:

1. Funding: Secure financial support from government grants, private donors, and corporate sponsors to cover program expenses and outreach efforts.
2. Partnerships: Collaborate with local healthcare providers, community organizations, and advocacy groups to leverage existing networks and resources.
3. Educational Materials: Develop culturally relevant educational materials in multiple formats, including print and digital.

4. Media Channels: Allocate resources for media campaigns through television, radio, social media, and online platforms.

Dr. Benidir presented an initiative regarding the value of genomic markers (specifically Decipher ™) in African American men, being considered for active surveillance for presumed low risk prostate cancer. The ability of this genomic marker to act as a measure of disease progression, when the biopsy states the patient has low risk prostate cancer, may potentially service as an opportunity to reduce the rapid progression and metastatic difference we see in African American men as compared to non-African American men. Hopefully Decipher use will provide an ability to measure the biologic under toe in this at risk population when the biopsy snapshot suggests low risk disease. Dr. Benidir is working with the University of Florida and Veracyte (company of Decipher) to explore this question. A potential future grant should Decipher ™ prove to be helpful would be considered.

Dr. Ramzi Salloum gave the committee an update from CCRAB (Cancer Control Research Advisory Board) annual 2024 report, The STAT of Cancer in Florida. Cancer was the second leading cause of death for the residents in Florida, and prostate cancer was third in mortality behind lung and breast. Prostate cancer incidence when age adjusted was the second leading cancer by incidence in Florida behind breast cancer. Dr. Salloum recommended that PCAC attend the CCRAB to work collaboratively on setting goals that include inclusivity and community implementation. Dr. Salloum also discussed the UF Health new mobile cancer screening unit and its deployment into our communities.

Dr. Daniel Armstong gave the committee and update from BRAC (Biomedical Research Advisory Council). For fiscal year 2024-2025 the following funding opportunities were discussed:

1. James and Esther King Biomedical Research Program - $7.85 million
2. Bankhead-Coley Cancer Research Program - $10 million
3. Casey DeSantis Cancer Innovation Fund (CCIF) - $60 million

Discussing grant research priorities awarded, there were 28 awards given in the prevention and treatment. These focused on prevention and improved treatment or care delivery that contributes to a reduction in the deaths in at least one of the following types of cancers: pediatric, lung, breast, *prostate*, colon, or melanoma.

Dr. Armstrong then discussed the 10-year strategic plan for BRAC. They will take input from CCRAB, PCAC, NCI designated programs, Cancer Centers of Excellence. Research priorities that have potential to accelerate improved patient outcomes will be prioritized.

Dr. Matthew Abramowitz presented habitat imaging in radiation micro-boost delivery to prostate cancer. This is a form of machine learning in the imaging space known as radiomics.

1. Habitat risk Score (HRS) may improve micro boost contouring during radiation treatment.
2. Proposed goals for 12-month pilot study aim to improve accuracy and consistency. Expand access to innovative care and provide training and resources.
3. Prostate mpMRI Analysis to Normalize Targets using HRS for Expanding Access to Radiation Micro boosts, (PANTHER Florida Trial.)

Charles Griggs from 100 Black Men of Jacksonville chapter discussed the chapter's proposal to re start the Minority Health Fund, their utilization of the mobile health units in Jacksonville to engage with the community as well as the use of WeCare funding in Jacksonville to cover community cancer screening and treatment.

Mr. Griggs will be attending their group meeting in March and will update us after that meeting as it relates to health, wellness, and early diagnosis.

Dr. Ali Kasraeian discussed potential research opportunities with UF Health related to Decipher data that he has and future multi-institutional collaborations.

PCAC 2025 Initiatives

- Assess challenges and opportunities in implementing statewide prostate cancer early diagnosis awareness amongst African American men.
- Improving diagnostic and therapeutic equipoise as standard of care in the state of Florida. Equity is the key to better outcomes in at risk groups.
- Seek sources of funding for prostate cancer awareness initiatives.
    - Community outreach and engagement
    - Treatment equipoise
        - Treating all patients to the level 1 evidence standard of care
        - Standard of care does not always mean equal care.
    - Exploring the biological/genomic differences unique to this patient population
        - (Histology does not always translate to biology)

Respectfully Submitted by:

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