

THE GEORGIA BLOOD CANCER TRIALS NETWORK

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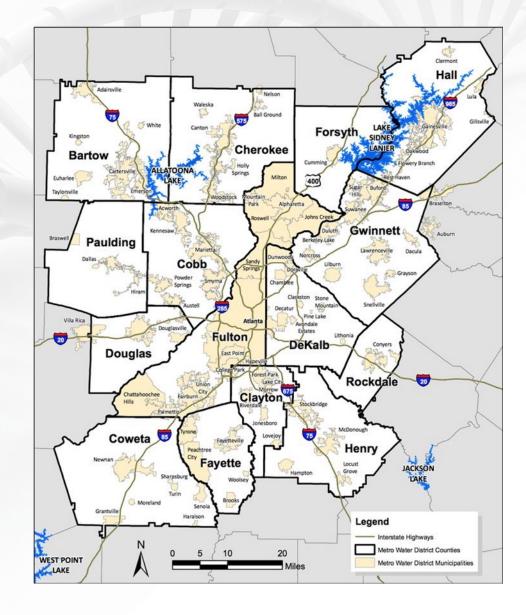
Emory University – Winship Cancer Institute



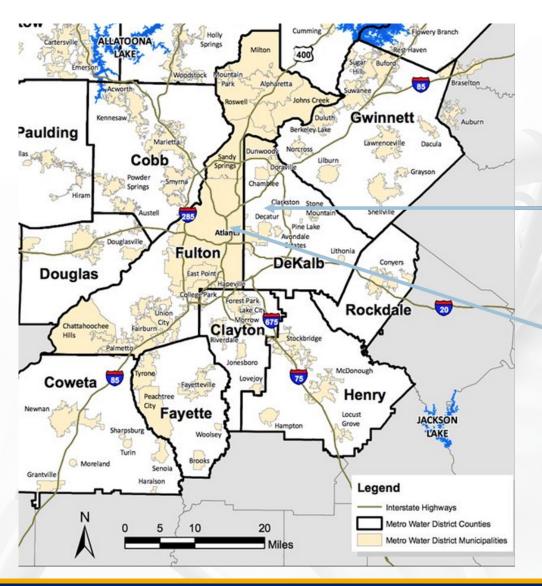


WHY IS A TRIALS NETWORK NEEDED?



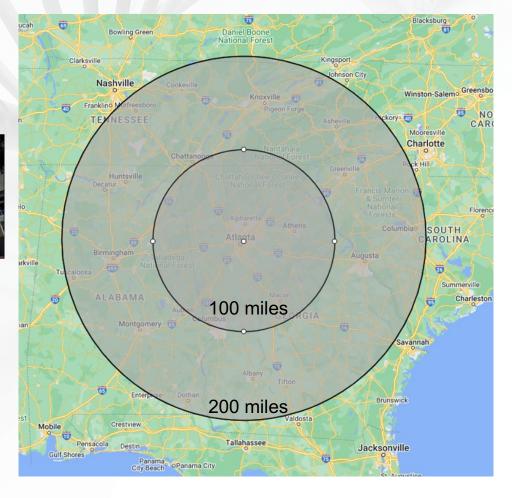


DISTANCE TO WINSHIP CAN BE DIFFICULT FOR MANY









GEORGIA DEMOGRAPHICS

- •8th most populous state in the country population approaching 11m
 - 3.3million Black/African American
 - 1.1million Hispanic
- Atlanta is 6th largest metro area in country

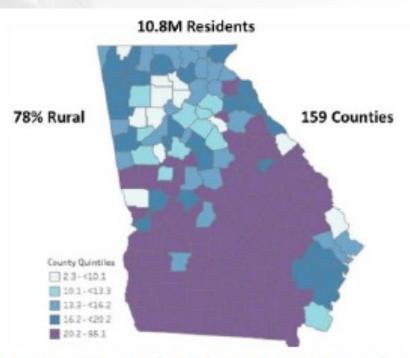


Figure 2. Poverty Rate in Georgia Counties

CHALLENGES WITH ACCRUAL TO HEMATOLOGY TRIALS

- Often uncommon, aggressive diseases which require intensive management.
- Patients more likely to require transfusion support and other intensive care.
- Travel to primary site can be very cumbersome and available only to people with resources.
 - Roughly 1/3 of patients enrolled to lymphoma non-therapeutic studies are from > 50 miles away
- Patients frequently not aware of availability and appropriateness of trials.

The Georgia Blood Cancer Trials Network (BCTN) is designed to leverage resources throughout the state to increase participation in therapeutic clinical trials by patients with hematologic malignancies.

GEORGIA BLOOD CANCER TRIALS NETWORK (BCTN)

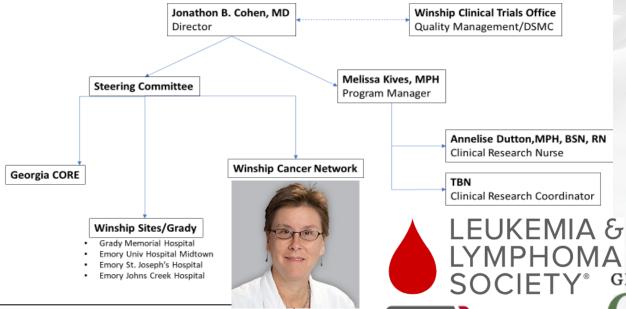












IMPACT Key Investigators:

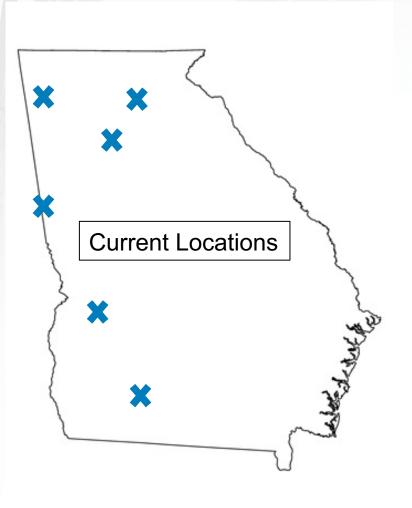
Lymphoma: Cohen, Allen, Lopez

Myeloma: Joseph

Leukemia/Myeloid Diseases: Hunter



1R50CA276010 - Clinician Scientist Award



KEY LEADERS AT EMORY

Steering Committee Member	Role		
Dr. Jonathon B. Cohen, Chair	Georgia BCTN / IMPACT Director		
Dr. Pamela Allen	Lymphoma Leader		
Dr. Nisha Joseph	Myeloma Leader		
Dr. Anthony Hunter	Leukemia/Myeloid Disease Leader		
Dr. Carlos Lopez	Leader, Grady Memorial Hospital / Winship sites		
Dr. Amelia Langston	Medical Director, Winship Cancer Network		
Dr. Theresa Gillespie	Associate Director, Community Outreach and Engagement		
Dr. Sheryl Gabram	Chief Scientific Officer, Georgia CORE		
Mr. Ildemaro Gonzales	Chief Diversity Officer, Winship Cancer Institute		



Annelise Dutton
Clinical Research Nurse



Ashley Turner Project Coordinator



Melissa Kives
Program & Research Manager

IDEAL STUDIES FOR THIS MECHANISM

- Low grade/precursor entities
- Outpatient treatment with currently FDA approved therapies
- Modest follow-up schedule
- Lack of need for specialized inpatient care
- Meets a need of the community
- Cooperative Group, Industry-sponsored, or Investigator-sponsored trials
- Please tell us if there's a patient group in need of trials.

TRIALS IN THE NETWORK

Disease Group	Cooperative Group	IIT	Industry	
Leukemia			ASC2ESCALATE	
	S1918	Winship		
Lymphoma	A052101	5186-20		
	EA1173			
Myeloma	10440*			
* Available to FIC and Grady only pending				

^{*} Available to EJC and Grady only, pending approval by the multi-site team

ASC2ESCALATE: A PHASE II MULTICENTER, OPEN-LABEL, SINGLE-ARM DOSE ESCALATION STUDY OF ASCIMINIB MONOTHERAPY IN 2ND AND 1ST LINE CHRONIC PHASE CML.

S1918: A PHASE II/III RANDOMIZED STUDY OF R-MINICHOP WITH OR WITHOUT ORAL AZACITIDINE (CC-486) IN PARTICIPANTS AGE 75 YEARS OR OLDER WITH NEWLY DIAGNOSED DIFFUSE LARGE B CELL LYMPHOMA, GRADE IIIB FOLLICULAR LYMPHOMA, TRANSFORMED LYMPHOMA, AND HIGH-GRADE B-CELL LYMPHOMAS WITH MYC AND BCL2 AND/OR BCL6 REARRANGEMENTS.

A052101: A RANDOMIZED PHASE 3 TRIAL OF CONTINUOUS VS. INTERMITTENT MAINTENANCE THERAPY WITH ZANUBRUTINIB AS UPFRONT TREATMENT IN OLDER PATIENTS WITH MANTLE CELL LYMPHOMA (INTERCON).

WINSHIP 5186-20: AN OPEN-LABEL PHASE II TRIAL OF ACALABRUTINIB PLUS OBINUTUZUMAB IN PATIENTS WITH UNTREATED, LOW TUMOR BURDEN FOLLICULAR LYMPHOMA AND OTHER INDOLENT NON-HODGKIN LYMPHOMAS.

EAA173: A PHASE III STUDY COMPARING OVERALL SURVIVAL IN PATIENTS WITH HIGH-RISK SMOLDERING MULTIPLE MYELOMA RANDOMIZED TO DARATUMUMAB- HYALURONIDASE SUBCUTANEOUS (SC)-REVLIMID-DEXAMETHASONE OR REVLIMID- DEXAMETHASONE.

10440: A PHASE 1/1A STUDY OF VENETOCLAX, MLN9708 (IXAZOMIB CITRATE) AND DEXAMETHASONE FOR RELAPSED/REFRACTORY LIGHT CHAIN AMYLOIDOSIS.

CHALLENGES AND OPPORTUNITIES ENCOUNTERED

Significant interest in collaborating sites but challenges devoting resources to these efforts due to limited staffing and infrastructure.

The regulatory process is different for IITs, NCTN, and Industry-sponsored trials.

Regulatory requirements and protocol-mandated activities can be onerous for patients and study teams.

Need for additional buy-in from industry collaborators to support opening trials at smaller, community sites.

HOW TO GET INVOLVED AND TO CONTACT US







404-778-0839

We have a dedicated BCTN phone line available where sites and partners can contact the BCTN Team during the hours of 9am - 5pm with any questions or concerns.

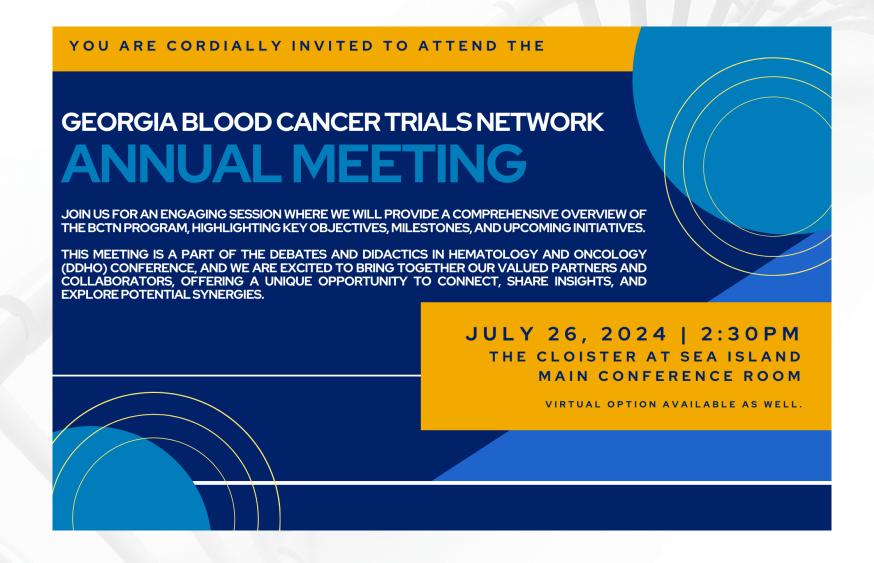
GABCTN@emory.edu

The BCTN Team is also available via email to answer any inquires and provide regular updates to our sites and collaborators.

BCTN SharePoint

We are delighted to provide a BCTN SharePoint where our sites and partners can stay updated on available trials and additional BCTN information.

MEETING TODAY!



THANK YOU

