Levine Cancer Institute’s (LCI) research includes new data on disparities in lung cancer screening, a first-of-its-kind analysis of clinical trial enrollment, a large-scale re-evaluation colon cancer trials, and an evaluation of the role of pharmacogenomics in supportive care.

**Effectiveness of mobile computerized tomographic (CT) lung scanning unit for early diagnosis of lung cancer in under-served populations** *(Abstract: 6567; Presentation Saturday, June 1, 1:15 PM – 4:15 PM)*

Research by Derek Raghavan, MD, PhD, Mellisa Wheeler, BSW, MHA, and their LCI colleagues demonstrates that the country’s first mobile, low dose CT lung screening unit has detected cancer at rates comparable to the National Lung Screening Trial, but with significantly higher reach among rural patients, African-Americans, and patients enrolled in Medicaid or without insurance. LCI’s new approach has potential to alter lung cancer death rates significantly among a large, underserved population that has the highest mortality from lung cancer. LCI’s mobile lung unit also identified other cancers and undiagnosed cardiac disease.

**Impact of Electronically Accessible Pathways on clinical trial enrollment at a large multisite cancer center** *(Oral Abstract: 6517; Presentation Sunday, June 2 10:24 AM – 10:36 AM)*

Levine Cancer Institute’s physician-built software Electronically Accessible Pathways gives physicians real-time access to results from Atrium Health’s 400+ clinical trials and has allowed thousands of diverse patients to enroll in active clinical trials. A new study by lead author Jeryl Villadolid, PharmD and senior author Edward Kim, MD will share the results of a first-of-its-kind analysis of EAPathways data—demonstrating the software’s potential to boost clinical trial accrual across a large healthcare system that includes numerous regional sites.

Also reflecting his commitment to expand and diversify clinical trial accrual, Dr. Kim will take part in a colloquium hosted by ASCO and The Biden Cancer Initiative that will include a multi-party commitment to accelerate clinical trial enrollment. Dr. Kim will highlight LCI’s approach to increase the availability of clinical trials in community settings. (Presentation Saturday, June 1, 2019 from 1:15 PM – 2:30 PM)

**Re-Evaluating disease-free survival as an endpoint versus overall survival in adjuvant colon cancer trials with chemotherapy +/- biologics: An updated surrogacy analysis based on 18,886 patients from the Accent database** *(Oral Abstract: 3502; Presentation Saturday, June 1 3:24 PM – 3:36 PM)*

Mohamed Salem, MD is the lead investigator and senior author on an international, collaborative effort studying the optimal duration of follow-up to evaluate the benefits of adjuvant therapy in colon cancer patients. Dr. Salem is a member of the Adjuvant Colon Cancer End Points (ACCENT) Group, which
addresses scientific questions to improve patient outcomes and quality of life and reduce treatment side effects in early stage colon cancer treatment. This study is of critical importance, given recent results from the IDEA trial demonstrating that three months of adjuvant chemotherapy might be as good as six months in some patients with stage III colon cancer. The study results will have significant impact on the design of future adjuvant clinical trials, with practice-changing implications in colon cancer.

Supportive Care Medication Prescribing and Pharmacogenomics Relevance in 6,985 Cancer Patients Undergoing Distress Screening (Abstract: 11592; Presentation Monday, June 3, 1:15 PM – 4:15 PM)

A study by lead author Jai Patel, PharmD advances Levine Cancer Institute’s leading role in the field of pharmacogenomics by evaluating the potential role of pharmacogenetic testing to personalize medications that are commonly given to manage the side effects of cancer treatment—including pain, nausea, and depression. Understanding cancer symptom burden, supportive care medication use, and the impact of pharmacogenetic testing will allow for better selection of medications to alleviate such symptoms. The research also demonstrates the importance of preemptive genetic testing.

For interview requests contact Claire Simmons, Public Relations Manager 704-612-3055 or Claire.Simmons@atriumhealth.org

About Atrium Health
Atrium Health, previously Carolinas HealthCare System, one of the nation’s leading and most innovative healthcare organizations, provides a full spectrum of healthcare and wellness programs throughout the Southeast region. Its diverse network of care locations includes academic medical centers, hospitals, freestanding emergency departments, physician practices, surgical and rehabilitation centers, home health agencies, nursing homes and behavioral health centers, as well as hospice and palliative care services. Atrium Health works to enhance the overall health and well-being of its communities through high-quality patient care, education and research programs, and numerous collaborative partnerships and initiatives.