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Commentary

The 2022 AACI/CCAF Annual Meeting *Cancer Center Collaboration Meets Federal Cancer Policy*

By Cornelia Ulrich, MS, PhD



Cornelia Ulrich, MS, PhD, is the executive director of the Comprehensive Cancer Center, Huntsman Cancer Institute, University of Utah. She served as chair of the 2022 AACI/CCAF Annual Meeting Program Committee.

Commentary Overview

- AACI cancer centers and the National Cancer Institute need to work together so that both are important partners to the White House for the reignited Cancer Moonshot.
- A letter from AACI cancer center directors to NCI Director Dr. Monica Bertagnolli calls for more effective and efficient conduct of clinical research that represents the populations we serve.
- A day of sessions for new cancer center directors offered guidance on challenges such as communicating with institutional leaders, elevating the impact of the clinical trials office, and navigating community outreach and engagement.

As chair of the program committee for the 2022 AACI/CCAF Annual Meeting I would like to thank the hundreds of cancer center colleagues who turned out in Kansas City for AACI's first in-person annual meeting in three years. It was a great pleasure to reconnect with so many of you.

With President Biden's relaunch of the Cancer Moonshot program in February, and the new director of the National Cancer Institute (NCI), Dr. Monica Bertagnolli, starting her tenure during the meeting, the impact of changes in federal cancer policy on cancer centers was top of mind for many of us in attendance.

A panel discussion on the Cancer Moonshot, which I co-moderated, highlighted the need for the cancer centers to present themselves as NCI allies, working together so that both the NCI and cancer centers are important partners to the White House for the reignited Cancer Moonshot. Cancer centers are through their COE activities engaged in significant outreach and inreach activities and work closely with communities to broaden access to cancer care, prevention, and trials.

The engaging panelists for the session were Dr. Danielle Carnival, White House Cancer Moonshot coordinator; Dr. Dinah Singer, the NCI's deputy director, scientific strategy and development; Dr. Ruben A. Mesa, director of the Mays Cancer Center at UT Health San Antonio MD Anderson; and my co-moderator, David Darr, associate director of administration at Duke Cancer Institute, Duke University Medical Center.

With the roll-out of the Advanced Research Projects Agency for Health (ARPA-H), and its charge to support a variety of projects that drive biomedical advances, including cancer research, cancer centers are understandably eager to see funding for ARPA-H synergistically complement—not limit—NCI funding. With new directors at both ARPA-H (Dr. Renee Wegrzyn) and the NCI, we look forward to working collaboratively with them.

Asked how cancer centers can work with the White House to advance the Moonshot program, Dr. Carnival said that the administration and federal agencies are seeking to set priorities that reflect the expertise at the cancer centers and, ultimately, improve patient care. Beyond forums like AACI's annual meeting, Dr. Carnival noted that input on the Moonshot can be submitted directly through the White House's [Cancer Moonshot website](#).

On the theme of speaking with a unified voice, a [letter to Dr. Bertagnolli](#), signed by 96 cancer center directors at the meeting and afterwards, cited a key challenge for cancer centers – the need to more effectively and efficiently conduct clinical research that represents the populations we serve. The letter indicated that cancer centers stand ready to form a strong partnership with the NCI to develop novel approaches to reduce administrative burdens, improve efficiency, and increase the scientific value of clinical research.

In his NCI director's report, Dr. Douglas Lowy, now the agency's principal deputy director after serving as acting director, laid out four goals for NCI's strategic vision for clinical trials: streamline processes for trial design and execution; decrease regulatory hurdles and broaden trial access; focus on essential endpoints; and increase efficiency of data collection. Many of these processes will help reduce the burden of clinical trial participation on disadvantaged groups (including underrepresented minorities and rural/frontier populations), thus broadening access.

Other priority areas for the NCI include better communicating the value of cancer research, in part to counteract misinformation about cancer that patients find online and to increase the value of science and research with the public.

Dr. Lowy also touted the need for technology development in health disparities research, urging that disparity considerations come at the beginning of the process when developing a new tool. For example, using telehealth and other high-tech approaches to facilitate overcoming distance as a disparity.

Technological advances also figured prominently in the session on "The Next Generation of Precision Oncology" with panelists debating the utility of genomics as a precision oncology strategy. Other approaches, including functional precision medicine, may provide valuable information for patients and providers.

A recurring theme throughout the meeting was the need to support clinical trials at cancer centers, especially in light of major staff shortages in the wake of the COVID-19 pandemic. Both speakers and attendees engaged in a lively discussion on what aspects of cancer center employment are valuable, both to staff and to researchers, and how we can increase connection and job satisfaction on all fronts.

The COVID-19 pandemic was also the focus of the meeting's final session, "Emerging From COVID-19". The session's moderator, Dr. Steven Leach, director of the Dartmouth Cancer Center, referenced twin pandemics that have challenged cancer centers and their communities – systemic racism and COVID-19. And now, he said, there is a third pandemic, the so-called "Great Resignation," which has undermined cancer center operations including clinical trials and

community outreach and engagement.

Preparing the Next Generation of Cancer Center Leaders

For the first time, AACI hosted a day of sessions aimed at new cancer center directors, with the association identifying 15 directors who started their tenures in 2020 or later. Led by seasoned cancer center leaders, the meeting agenda offered candid guidance on challenges such as communicating with institutional leaders, elevating the impact of the clinical trials office, and navigating community outreach and engagement. Discussion focused in part on building relationships and trust with academic medical partners—hospital leadership and deans of other schools, for example—as well as leveraging connections with influential members of the community and elected officials.

In a similar vein, AACI President Dr. Caryn Lerman provided an update on her presidential initiative, the [Leadership Diversity and Development Initiative](#). As part of the initiative, AACI will host a meeting November 8-9, at the Loews O'Hare Chicago Hotel, for emerging cancer center leaders. The meeting will include a session on how to be a persuasive communicator and negotiate like a CEO.

The annual meeting featured many other sessions that provided great value to AACI's members, including talks on drug development, leveraging patient engagement to improve clinical trials, tackling new components of the CCSG, and an engaging keynote presentation from Dr. Matthew Naylor, president and CEO of the National WWI Museum and Memorial, who provided an in-depth look at the WWI-era chemical weapons—including mustard gas—that evolved to become chemotherapy as we know it today.

I very much appreciate the hard work of the annual meeting program committee over the past year in putting together a high-quality program that addressed the needs and interests of a broad array of cancer professionals. Reuniting at the annual meeting brought renewed excitement to cancer center leaders and reminded many of us that much more can be done to advance progress – especially if our centers work collaboratively.

Our Mission

The Association of American Cancer Institutes (AACI) represents 106 premier academic and freestanding cancer centers in the United States and Canada. AACI is accelerating progress against cancer by empowering North America's leading cancer centers in their shared mission to alleviate suffering.

About AACI Commentary

To promote the work of its members, AACI publishes *Commentary*, a monthly editorial series focusing on major issues of common interest to North American cancer centers, authored by cancer center leaders and subject matter experts.

