Pathways to addressing evidence gaps: funder's perspective

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NASEM Committee on Addressing Evidence Gaps in Clinical Prevention

NIH NATIONAL CANCER INSTITUTE

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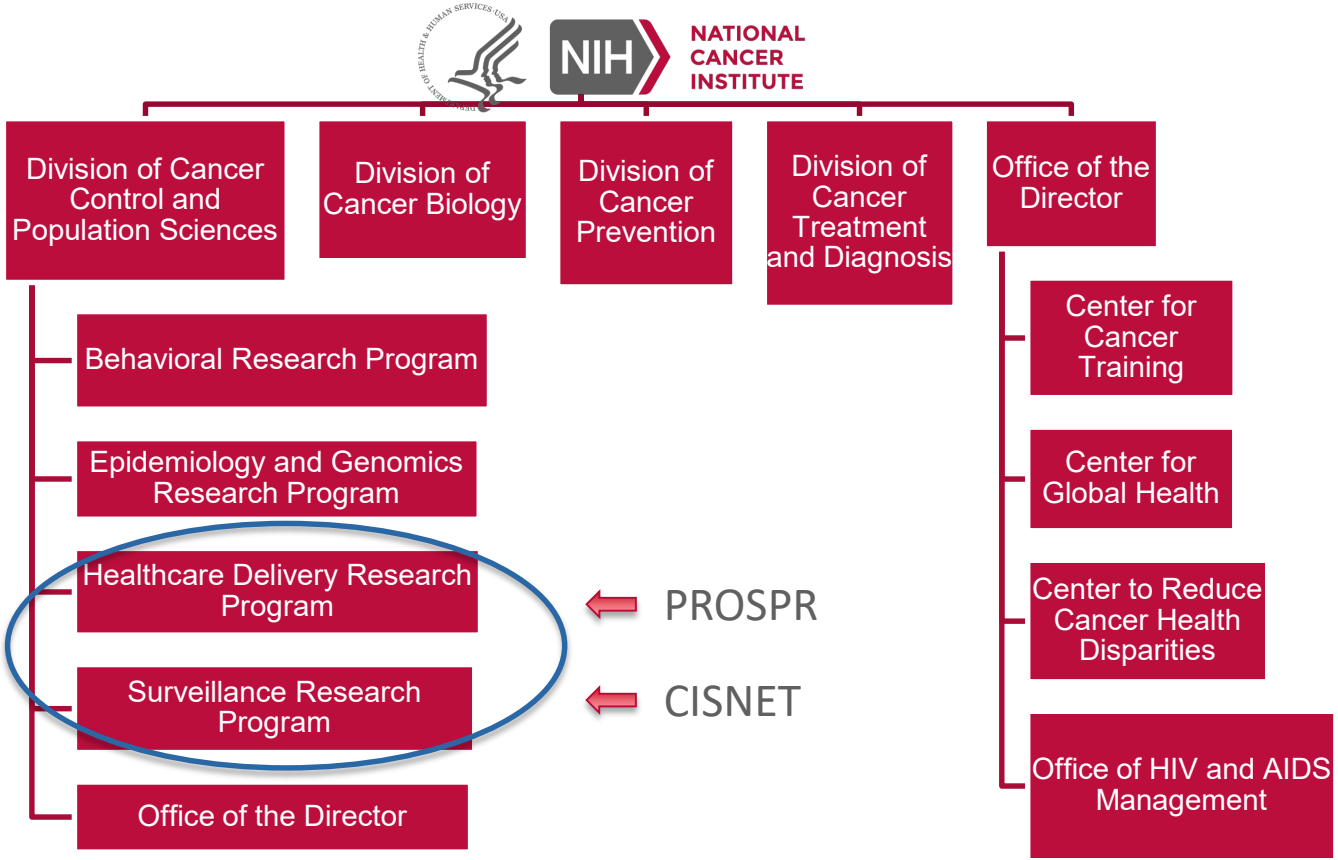
Funding Opportunity Announcement (FOA) mechanisms: tools in the box

- RFA
- PA
- NOSI

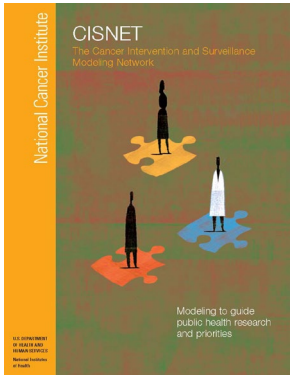
- In addition, investigator-initiated applications are encouraged!

Extramural Divisions at NCI



Cancer Intervention and Surveillance Modeling Network (CISNET)

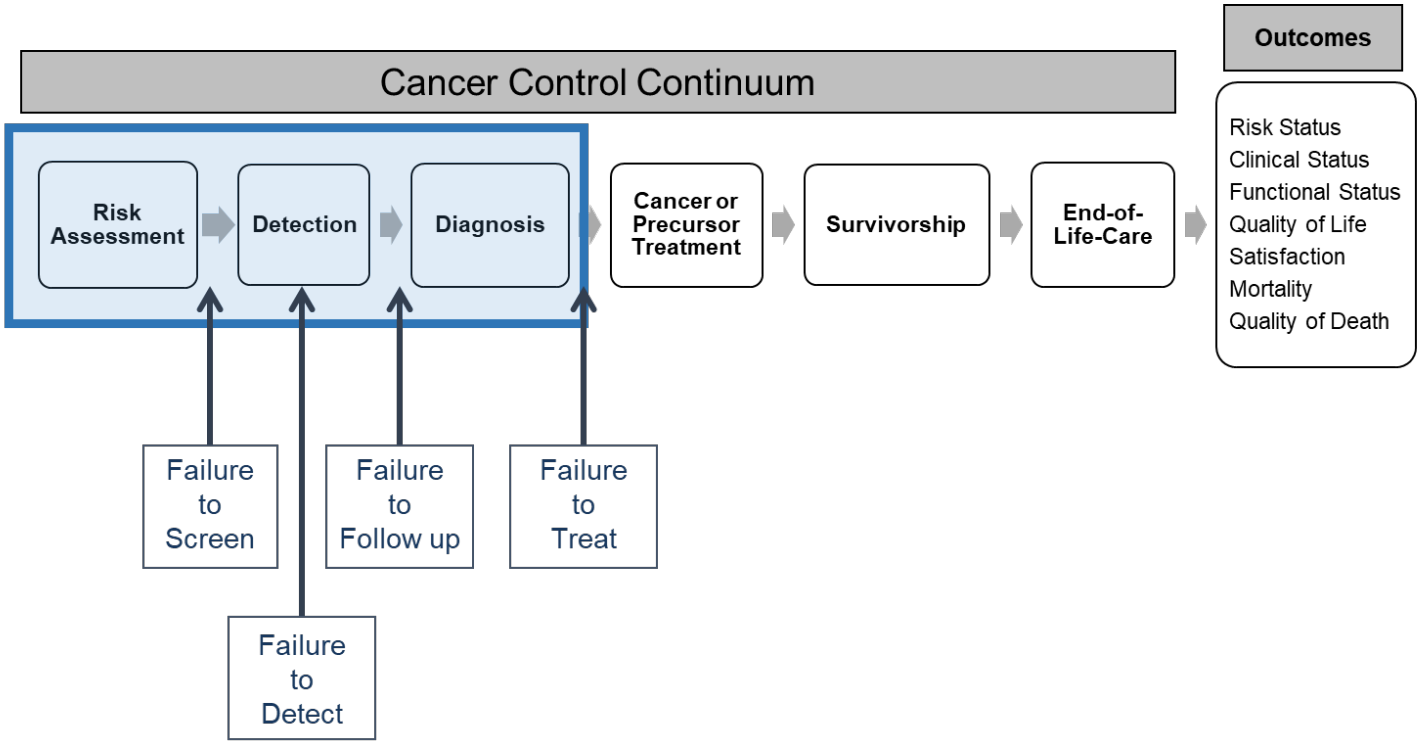
- NCI Sponsored Collaborative Consortium (U01) of Modelers in Breast, Prostate, Colorectal, Lung, and Cervical cancers formed in 2000
- Use surveillance data and simulation modeling to guide public health research and priorities
  - Help address the formidable and growing gap between the rapid pace of innovation in cancer research and our ability to efficiently harness it to improve population health
- Comparative modeling: multiple-PI grants each focused on a different cancer site with a coordinating center and between 3-6 modeling groups



Slide adapted from E. Feuer

https://cisnet.cancer.gov/

Population-based Research to Optimize the Screening PRocess (PROSPR)



https://healthcaredelivery.cancer.gov/prospr/

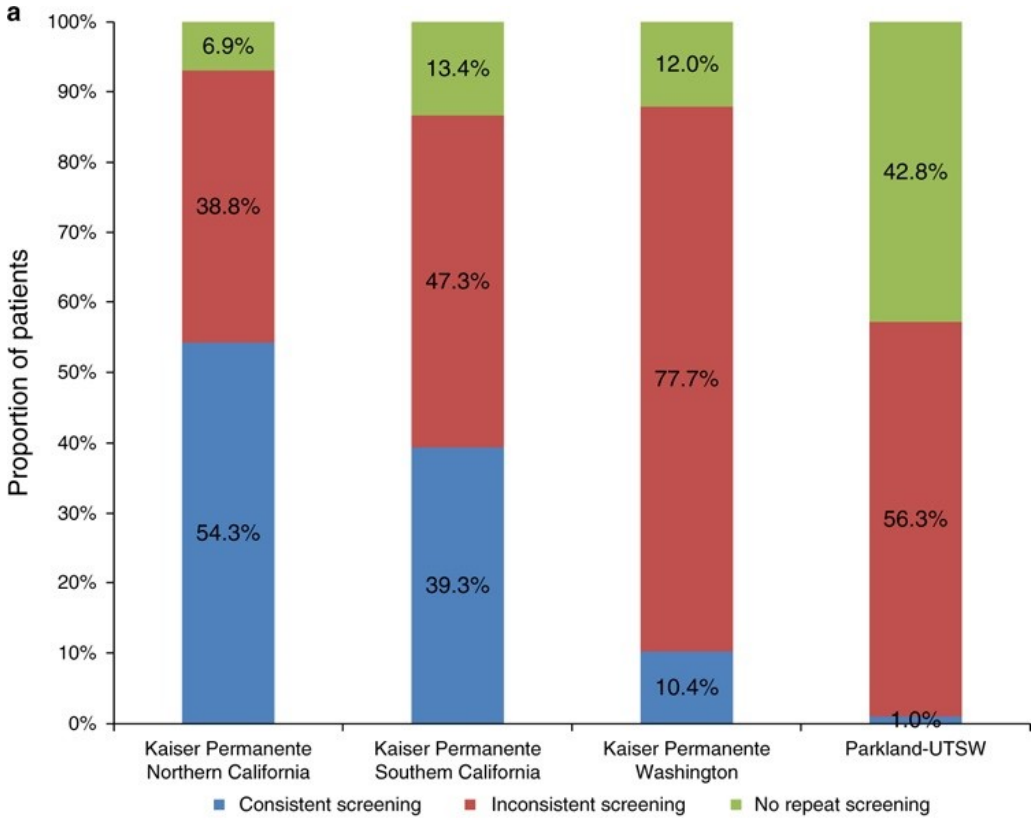
Emphases for PROSPR II

- Cervical, colorectal and lung cancer screening in 10 different healthcare systems across the US
- Focus on underserved patient populations: e.g., racial/ethnic minorities, lower socioeconomic status
- Trans-PROSPR research to develop common conceptualizations and measures for assessing
  - Systems-level factors
  - Screening quality
- Development and pilot-testing of interventions to improve the screening process

DCCPS initiatives addressing USPSTF-identified research gaps

Research needs and gaps	PROSPR	CISNET
RCTs: effectiveness of different CRC screening strategies	X	X
Effectiveness/accuracy of screening tests in Black adults	✓	✓
Risk factors: increased CRC incidence/mortality in Black adults	✓	✓
Effectiveness of sDNA-FIT, outcomes after FP sDNA-FIT	X	✓
Effectiveness of CT colonography, consequences of extracolonic findings	X	✓
CRC screening uptake/adherence and impact on benefits	✓	✓
Accuracy and effectiveness of emerging screening technologies	X	✓

PROSPR Example: Adherence to Repeat FIT

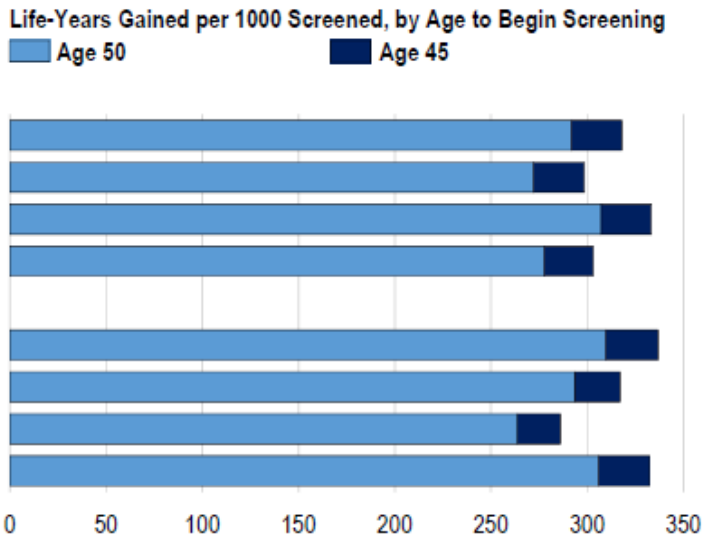


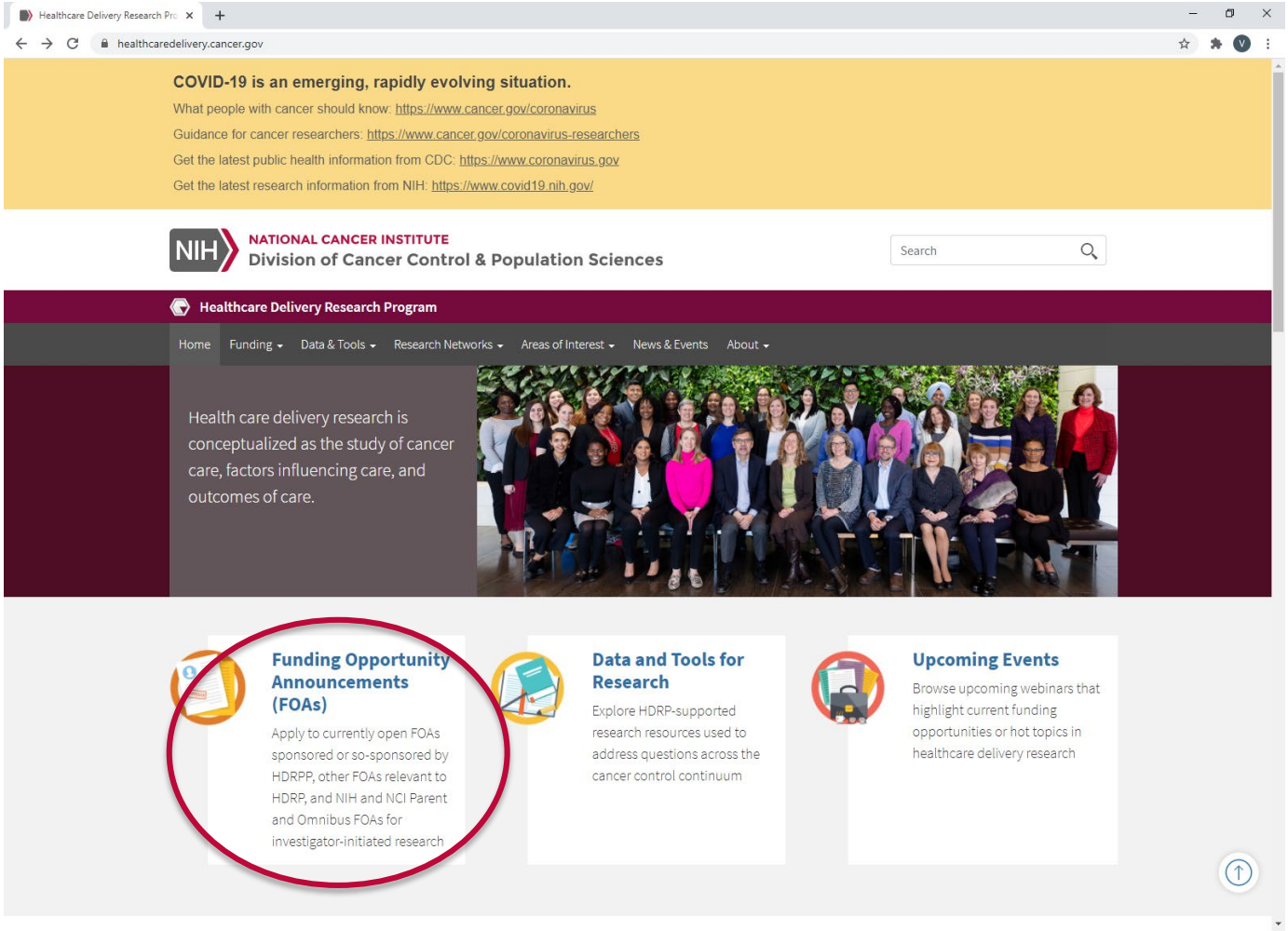
Singal et al., Am J Gastroenterol 2018;113:746-54

CISNET Example: Comparative Effectiveness

[A] Benefit: Life-years gained per 1000 individuals screened*

Screening Method and Frequency	Model Average† per 1000 Screened: Life-Years Gained if Start Screening at Age 50	Model Average† per 1000 Screened: Additional Life-Years Gained if Start Screening at Age 45
Stool tests		
FIT every year	292	+26
HSgFOBT every year‡§	272	+26
sDNA-FIT every year	307	+26
sDNA-FIT every 3 y§	278	+25
Direct visualization tests		
Colonoscopy every 10 y	310	+27
CT colonography every 5 y	293	+24
Flexible SIG every 5 y	264	+22
Flexible SIG every 10 y plus FIT every year	306	+26




Healthcare Delivery Research Pro
healthcaredelivery.cancer.gov
COVID-19 is an emerging, rapidly evolving situation.
What people with cancer should know: https://www.cancer.gov/coronavirus
Guidance for cancer researchers: https://www.cancer.gov/coronavirus-researchers
Get the latest public health information from CDC: https://www.coronavirus.gov
Get the latest research information from NIH: https://www.covid19.nih.gov/
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About
Health care delivery research is conceptualized as the study of cancer care, factors influencing care, and outcomes of care.
Funding Opportunity Announcements (FOAs)
Apply to currently open FOAs sponsored or so-sponsored by HDRPP, other FOAs relevant to HDRP, and NIH and NCI Parent and Omnibus FOAs for investigator-initiated research
Data and Tools for Research
Explore HDRP-supported research resources used to address questions across the cancer control continuum
Upcoming Events
Browse upcoming webinars that highlight current funding opportunities or hot topics in healthcare delivery research

Other Current HDRP Prevention-Related Funding Announcements

Announcement Title (Mechanism)	Announcement # (Exp. date)	Program Contact
Increasing Uptake of Evidence-Based Screening in Diverse Adult Populations (R01)	PA-18-932 1/28/2022	Erica Breslau breslaue@mail.nih.gov
Notice of Special Interest: De-implementation of Ineffective or Low-value Clinical Practices along the Cancer Care Continuum (R01)	NOT-CA-20-021 (5/10/2022)	Erica S. Breslau breslaue@mail.nih.gov
Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake (R01)*	PAR-19-360 (9/8/2022)	Veronica Chollette cholletv@mail.nih.gov
Accelerating colorectal cancer screening and follow-up through implementation science (ACCSIS)	RFA-CA-19-018 (N/A)	Sarah Kobrin kobrins@mail.nih.gov

*Additional announcements for R03 (PAR-19-359) and R21 (PAR-19-358)

Thank You!

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