



FACULTY OF
MEDICINE | UNIVERSITY OF
CALGARY

Department of **Oncology**



Annual Report July 1, 2014—June 30, 2015

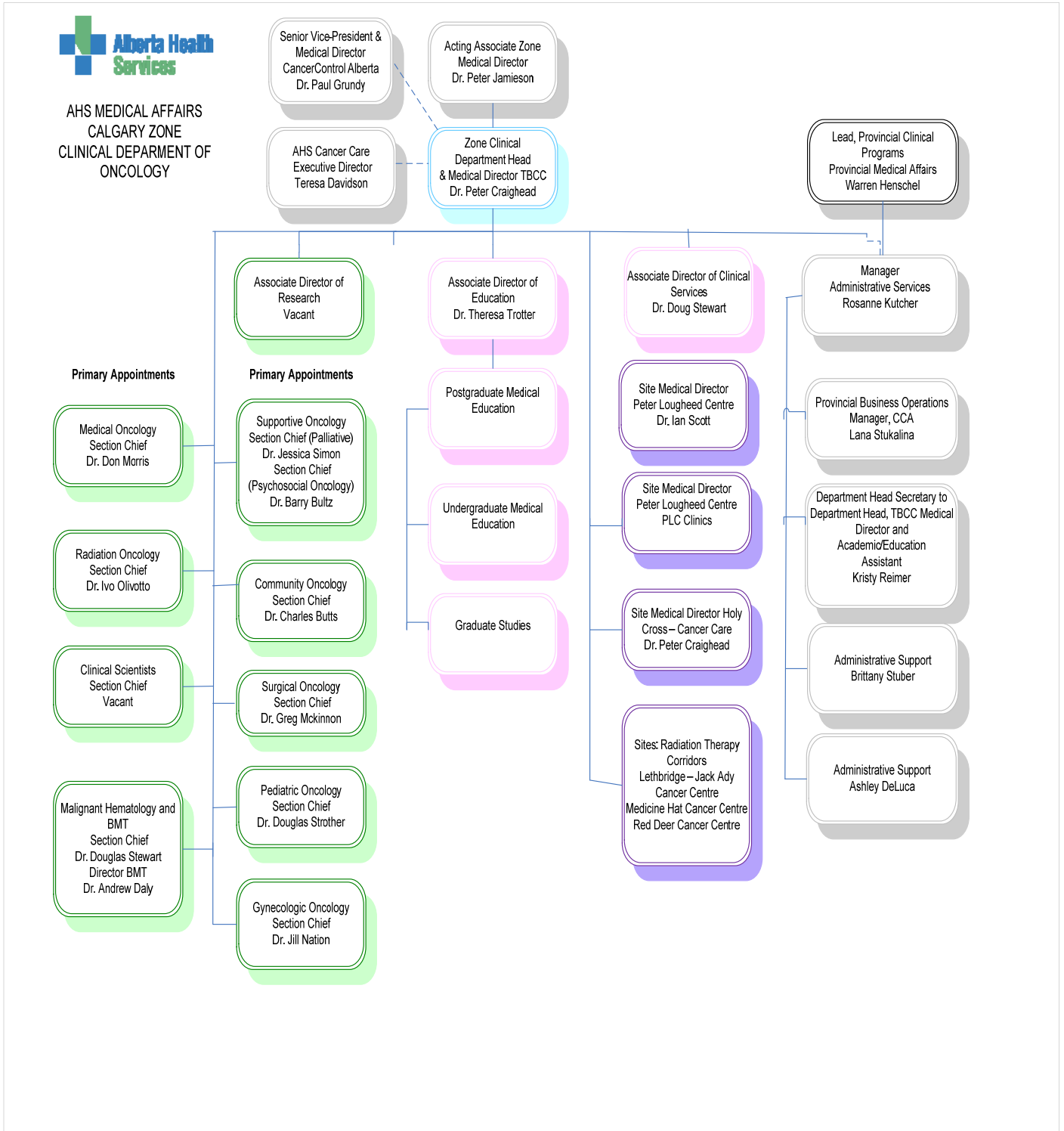
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DEPARTMENT HEAD SUMMARY

The year 2014-2015 was a pivotal year for a number of reasons. During this year we saw significant changes in leadership roles which have included the addition of Teresa Davidson to the Executive Director role at the Tom Baker Cancer Centre, several new Section Chiefs, several new Managers as well as new positions provincially being assumed by individuals from Calgary. I am proud to say that despite continued increases in workload and pressures to compete at the academic level we have done well to work in a focused way towards our strategic direction of leading research and being proud to care.

DEPARTMENT STRUCTURE AND ORGANIZATION



ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

Summary of Clinical Highlights and Challenges

Our five year capacity plan prepared during this period highlights our clinical challenges both annually and for the next five year period. It is clear that approximately a 3% increase on an annual basis of new consults will be the experience we can expect for at least the foreseeable future. Systemic treatment increases will be higher than this and will be approximately 4-5% annually and radiotherapy will continue to increase at approximately 2-3% annually. On a time period basis this means that by 2020 when the new cancer centre would have originally been slated to open we will have seen 15% new cases with the workload associated with that statistic.

The clinical challenges associated with continuing a service that is distributed across the city is that several areas are no longer under our domain. This includes the liver clinic, most prostate cancer and other GU clinic patients, several colorectal cancer initiatives as well as thyroid cancer. What is obvious from a systems perspective is that these challenges have resulted in surgeons and other para cancer experts having to function with resources outside of the cancer centre and have often done so despite the challenges they have faced. The importance of stating this challenge is to ensure that in the planning for the new cancer centre we allow for sufficient space so that surgeons and other non-oncology cancer experts are provided opportunities to address the needs of their patients in an integrated manner.

The other clinical challenges that are more germane to this period include:

1. Continued difficulty of the breast health program to operate within the Calgary Zone, see patients quickly enough, and function in an integrated manner with the cancer centre.
2. Other clinical challenges have been that the wait time for external beam radiotherapy has crept up and was outside of the tier 1 indicator status that we are expected to perform at. With diligent work done by Dr. Ivo Olivotto and Cynthia Stulp they have used a lean initiative to reduce the wait time so that it is now running at approximately the same wait time as the performance indicator states. Other wait times have also increased including the referral to consult wait time as well as the time for treatment with chemotherapy.
3. The clinical challenge of providing sufficient capacity for operating time has been well addressed by Drs. John Kortbeek and Greg McKinnon. For the last year and a half the upload for cancer surgery capacity has been able to reduce the waiting for any cancer surgery within the zone.
4. The major challenge for the Tom Baker Cancer Centre is the lack of space and the potential of the Holy Cross lease not being maintained. After a year and a half of clinical operations at Richmond Road subsequent to the flood of 2013 our clinical operations moved back to the Holy Cross at the end of February 2015. We have been informed that the current lease will expire in 2018 and are working to consider moving all of the workload back to the Foothills

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

site by that time. This however will require a significant influx of funding to ensure that the resources are appropriate to maintain our clinical services.

5. We continue to have significant challenges in our maintenance of the inpatient service for both BMT and other oncology services. Increasingly the proportion of patients having to move to and from the Tom Baker Cancer Centre on a daily basis for treatment from other hospitals has increased to almost double figures. This means that patients who are fairly ill need to be transported for radiotherapy, usually for four to five days.

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

TIMELINESS OF CARE- REFERRAL TO FIRST CONSULT

Type of First Consult	Facility	Number of referred patients with first consult attended	% that met benchmark (4 weeks)	Number of weeks by which 50% of patients had their first consult	Number of Weeks by which 90% of patients had their first consults
Medical Oncologist	Central Alberta Cancer Centre	465	84%	2.1	4.7
	Cross Cancer Institute	3,357	73%	2.6	6.0
	Grande Prairie Cancer Centre	315	83%	2.0	5.1
	Jack Ady Cancer Centre	205	58%	3.9	5.1
	Margery E. Yuill Cancer Centre	167	70%	3.0	5.8
	Tom Baker Cancer Centre	4,375	80%	2.0	5.3
	Total for Medical Oncologist	8,884	77%	2.1	5.6
Radiation Oncologists	Central Alberta Cancer Centre	259	92%	1.3	3.6
	Cross Cancer Institute	2,977	89%	1.9	4.0
	Grande Prairie Cancer Centre	51	67%	3.1	5.4
	Jack Ady Cancer Centre	436	93%	1.4	3.2
	Tom Baker Cancer Centre	1,701	76%	2.3	6.3
	Total for Radiation Oncologist	5,424	85%	1.9	4.9

*First Consult initiated between 2014-April-01 and 2015-March-31

**Generation date: 2015-September-08

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

TIMELINESS OF CARE – READY TO TREAT

Facility	Number of patients who started radiation therapy	% meeting AHS target	Number of weeks by which 50% of patients had their first treatment	Number of weeks by which 90% of patients had their first treatment
Central Alberta Cancer Centre	425	95%	0.6	2.1
Cross Cancer Institute	3,687	84%	1.0	3.0
Jack Ady Cancer Centre	415	76%	0.0	0.9
Tom Baker Cancer Centre	2,911	76%	1.3	3.6
Overall Total	7,438	83%	1.0	3.1

*First Treatment between 2014-April-01 and 2015-March-31

**Generation date: 2015-September-08

EDUCATIONAL ACCOMPLISHMENTS

POSTGRADUATE MEDICAL PROGRAMS

- Radiation Oncology
- Medical Oncology
- Hematological Oncology
- Surgical Oncology
- Gynecological Oncology
- Pediatric Oncology
- Palliative medicine

GRADUATE PROGRAMS IN NON-MEDICAL AREAS

- SACRI
- Medical Physics
- Psychosocial Oncology
- Radiation Therapy
- Preventive Oncology

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

CARMS MATCH 2014/2015

DIVISION	NUMBER OF POSITIONS AVAILABLE	NUMBER OF APPLICANTS
Medical Oncology	3 (1 unfilled)	17
Radiation Oncology	1	18
Surgical Oncology	1	38
Gynecologic Oncology	2	Not known
Palliative Medicine	3	8
Hematological Oncology	3	16
Pediatric Oncology	3	6

PSYCHOSOCIAL STUDENTS, INTERNS, POSTDOCS FOR 2014-2015

Clinical Post Doc	4
Pre-Doctoral Psych Residents	1
Psychology Clinical practicum	0
Psychiatry residents	0
MSW	1
Post-Doctoral Fellow-Research	3
PhD, masters-research	8
Honours-research	4
Summer/Visiting Scholar	5
Total	26

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

TRAINEE NUMBERS 2014- 2015

Radiation Oncology	19 - Rotating Residents 23 - Clinical Clerks 18 - Medical Students 2 - Fellowships 8 - Program Residents 2 Observerships
Medical Oncology	11 - program residents 63-off service residents 41-medical students 3-fellows
Gynecologic Oncology	7- program residents 20 - off service residents 19 -medical students 1 – fellow 2 - Observerships
Surgical Oncology	3-program residents 23-off service residents 1-fellow 21 Gen Surg rotating residents
Palliative Medicine	4 -program residents 121-offservice residents (119 + 2 electives)
Malignant Hematology & Bone Marrow Transplantation	8 – Program residents 41/13 – off service residents (including BMT) 25/8 – med students 2-fellows
Medical Physics	6-Ph.D 5-MSc 2-Residents 1-Certificate 7-Summer Students 2-Undergraduate Project Students 2-International Exchange Student

EDUCATIONAL HIGHLIGHTS 2014

ACCOMPLISHMENTS, HIGHLIGHTS & CHALLENGES

DIVISION	RESIDENTS	ROTATING RESIDENTS	CLINICAL CLERKS	MEDICAL STUDENTS
Medical Oncology	9 1 (Fellowship)	52	14	14
Radiation Oncology	9	15	-	7
Gynecologic Oncology	5	33	-	24
Surgical Oncology	3	3	-	-
Palliative Oncology	3	93	-	1
Pediatric Oncology	2	16	14	5
Hematology	5	55	30	-
Medical Physics	2			
Psychosocial	2	-	-	51
Neuro Oncology	-	-	-	-
BMT	(1 Fellowship)	1	-	-
Total	42			

WORKFORCE PLANNING

Based on a three year rolling plan which we have completed annually for the last five years the department has emphasized a focus of workforce planning, recruitment and retention. At this time we are in the process of negotiating with Mr. Nick Tait of Social Metrics to perform a time in motion study with our colleagues in Edmonton to ensure that it is fully understood the workload impact of a clinical oncologist. The intent of this work is to ensure that we are able to proactively define the amount of work associated with funding for an oncologist. This would then allow us to both plan for the future as well as create compensation models that would allow for an integrated system to be retained. During 2014-2015 we were able to recruit into all of our positions although the delay in being able to bring people on has forced us to be without medical oncologists for approximately a six month period. The lack of locum availability has put us in a difficult position to cover roles. We are also in the process of recruiting into two positions in radiation oncology which have been vacated by a relocation and a retirement. We have supported hematology to bring on a number of hematologists to address both the benign and malignant workload as well as have worked with surgical oncology to ensure that they are adequately resourced. We have also ensured that our support services of both clerical and research wise are optimal.

DIVISION OF FUNDAMENTAL RESEARCH

DIVISION HEAD

Vacant, Associate Director of Research

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

DIVISION OF GYNECOLOGIC ONCOLOGY

DIVISION HEAD

Jill Nation, MD, FRCSC

DIVISION HIGHLIGHTS

1. Full accreditation of our Royal College training program in gynecologic oncology.
2. Oncology surgical uplift allowing more timely surgery for our cancer patients.
3. Final relocation of our pre-invasive colposcopy program as a result of flooding of the Holy Cross site in June 2013.

CURRENT ISSUES

1. Workforce planning continues due to increasing numbers of patients and lack of available space for expansion at Tom Baker Cancer Centre on Foothills Medical Centre site.
2. Wait lists for oncology surgery are continuing to increase and will be accentuated by planned summer closures at Foothills Medical Centre operating rooms.
3. Functional planning for the new cancer centre.

STRATEGIC PLANNING

1. Stable funding for 3rd year of the Gynecologic Oncology Fellowship Training Program to enhance research opportunities and academic development for our fellows and make them competitive for recruitment after completion of fellowship.
2. Gynecologic Oncology Tumour Group participation in clinical data integration initiative.

RESEARCH HIGHLIGHTS

Our division is involved in gynecologic oncology clinical trials at a national level. Dr. Prafull Ghatage was local principal investigator for 14 funded clinical trials in this reporting period while the other four gynecologic oncologists participate in all trials as local sub-investigators. Dr. Sarah Glaze is the Co-PI on a new grant looking at radiation toxicities. Dr. Gregg Nelson is the principal investigator of an in-house randomized clinical trial with analysis of results of the pilot study underway and is the Co-PI for an AIHS-PRIHS operating grant.

Gynecologic oncologists published nine papers in 2014-2015, three posters, five abstracts and were involved in research projects with fellows in our training program resulting in presentations at the Department of Obstetrics and Gynecology and Department of Oncology Research Days.

PROGRAM

1. Multidisciplinary pre-invasive and invasive cancer care spanning initial diagnosis, cancer surgery, chemotherapy, collaborations with radiation oncology and palliative care.
2. Gynecologic cancer consultation for Southern Alberta, South Eastern British Columbia and South Western Saskatchewan.

DIVISION OF GYNECOLOGIC ONCOLOGY

3. Leadership in colposcopy: Dr. Nation is the Director of Colposcopy at both the Tom Baker Cancer Centre and Women's Health Services clinics and serves as the Provincial Chair of the Alberta Cervical Cancer Screening Program Advisory Committee.
4. Leadership in educational programs: Dr. Ghatage is the Program Director for the Royal College accredited University of Calgary residency program in gynecologic oncology. Dr. Chu serves as an oral examiner for the Royal College exams in obstetrics and gynecology.

AWARDS

- Nation, J. 2014 Star Educator Award – PGY1 Program Residents Rockyview General Hospital, University of Calgary.
- Nation, J. Honour Roll Award Certificate from Faculty of Medicine Medical Student Class of 2016.
- Nelson, G. 2014 Star Educator Award – PGY1 Program Residents Rockyview General Hospital, University of Calgary.

DIVISION OF HEMATOLOGIC MALIGNANCIES & BMT

DIVISION HEAD

Peter Duggan, MD, FRCPC

DIVISION HIGHLIGHTS

This year the division welcomed Dr. Adrienne Lee and Dr. Jennifer Grossman, while Dr. Danielle Oh and Dr. Joanna Graczyk completed Lymphoma fellowships at the TBCC.

The introduction of a rapid access biopsy clinic developed under the leadership of Dr. Greg McKinnon (surgical oncology) has provided a pathway to quickly diagnose patients suspected to have new or recurrent lymphoma.

The Bone Marrow Transplant program underwent successful FAHCT accreditation in May 2015.

CURRENT ISSUES

The division is experiencing steady growth in all areas that places considerable pressure on both inpatient and outpatient resources. For example, in 2014, the bone marrow transplant program performed more than 200 transplants in a year for the first time, with numbers expected to be higher for 2015. It has become increasingly difficult to accommodate new and follow up patients in existing clinics, especially with the growing complexity of treatment for myeloma, leukemia, and MDS, and the mandate to accrue to clinical trials. While new oncology patients continue to be seen within expected time frames, there is a waitlist for non-urgent benign hematologic disorders of approximately 600 patients with average time to be seen at 35 weeks.

STRATEGIC PLANNING

A division retreat was held in November 2014 to help plan the direction of the division for the next five years. The division recognizes a need to further develop a thrombosis program in the city, and to recruit hematologists with specialization in hematologic cancer to address the growing demands in malignant hematology. We will recruit two hematologists with specialization in thrombosis over the next two years to work with general internal medicine in building a city wide thrombosis program, that will play a role in managing cancer related thrombosis. Dr. Deepa Suryanarayan will be the first of these, starting practice in Calgary in September 2015 after completing a two-year fellowship at McMaster University.

Meanwhile there are plans to strengthen the clinical and academic programs in malignant hematology with recruitment of Dr. Jason Tay to the myeloma/BMT programs in October 2015.

Other strategies to help address capacity issues include a nurse practitioner to run long-term follow up clinics, clinics dedicated to the follow up of patients on long-term oral therapy for CML and myeloproliferative disorders, and efforts to facilitate early discharge of patients to the community after completion of therapy.

DIVISION OF HEMATOLOGIC MALIGNANCIES & BMT

Plans for consolidation of inpatient hematology services at one site await the final zone master plan as well as plans for the new Calgary Cancer Centre.

RESEARCH HIGHLIGHTS

The section of Hematology and Hematologic Malignancy continues to lead clinical trials accrual, with 17-20 active trials in leukemia, myelodysplasia, lymphoma, myeloma, and bone marrow transplantation. In addition, the division is increasingly involved with phase I studies, and has a growing number of trials initiated by local investigators. Current investigator initiated trials include: a trial of PARP inhibitors in myeloma (N. Bahlis), gemcitabine and melphalan as conditioning for stem cell transplantation in relapsed lymphoma (M. Shafey), use of haploidentical bone marrow transplant donors (A. Daly), and a trial of pre-emptive therapy for GVHD (J. Storek). Meanwhile, Dr. Lynn Savoie has been national chair of the NCIC trial “A Randomized Phase III Study of Standard Cytarabine plus Daunorubicin (7+3) Therapy or Idarubicin with High Dose Cytarabine (IA) versus IA with Vorinostat (IA+V) in Younger Patients with Previously Untreated Acute Myeloid Leukemia (AML)”.

The tumour group had 31 published manuscripts (45 for the entire hematology division) as well as 15 meeting abstracts.

The myeloma group continues to make significant contributions in basic science, translational, and clinical trials research. Dr. Bahlis’ ongoing support of multicenter trials and accrual to these studies culminated in a New England Journal of Medicine Publication, “Lenalidomide and dexamethasone in transplant-ineligible patients with myeloma” as local principal investigator for this pivotal trial in myeloma therapy. Dr. Paola Neri was invited to give two oral presentations at the American Society of Hematology’s annual general meeting, as well as to chair a session on “myeloma genomics” at the same meeting.

PROGRAM

Bone Marrow Transplant Program (Director: A. Daly) TBCC, ACH and CCI: Successful Foundation for the Accreditation of Hematopoietic Cell Therapy (FAHCT) re-accreditation MAY 2015

Hematology Tumor Group (Leader: C. Owen) TBCC

The division continues to provide inpatient hematology services at the Peter Lougheed Centre (PLC) and Foothills Medical Centre (FMC), an inpatient bone marrow transplant service at FMC, 24 hour consult service to all Calgary hospitals, outpatient malignant hematology services at PLC and FMC, and general hematology clinics at FMC, PLC, and South Health Campus. In addition, Calgary hematologists continue to attend outreach hematology clinics in Medicine Hat every three weeks, and BMT clinics in Edmonton every two weeks.

DIVISION OF HEMATOLOGIC MALIGNANCIES & BMT

AWARDS

- Geddes, M. Associate Dean's Letter of Excellence. The University of Calgary Faculty of Medicine.
- Geddes, M. Bronze Teaching Award. University of Calgary Faculty of Medicine.
- Geddes, M. Luminary Award for Teaching. Department of Oncology, University of Calgary.
- Jenkins, D. Associate Dean's Letter of Excellence. The University of Calgary Faculty of Medicine.
- Jenkins, D. Platinum Teaching Award. The University of Calgary Faculty of Medicine.
- Poon, M.C. Associate Dean's Letter of Excellence. The University of Calgary Faculty of Medicine.
- Storek, J. Award for Research Excellence, Department of Oncology.

DIVISION OF MEDICAL ONCOLOGY

DIVISION HEAD

Don Morris, MD, PhD, FRCPC

DIVISION HIGHLIGHTS

Dr. Aalok Kumar joined the Division of Medical Oncology in November 2014 after completing a fellowship in GI and gynecological oncology in Vancouver. He was a great addition to the GI and Breast tumour sites. Unfortunately due to external influences Dr. Kumar resigned from his position in May 2015 in order to return to his home province of British Columbia. Dr. Xiaolan Feng joined Medical Oncology as a locum in October 2014 and worked within the GU and breast tumor groups providing coverage for physicians absent due to leaves. Dr. Hatim Karachiwala completed his fellowship in sarcoma/musculoskeletal oncology during 2014 while at the same time providing locum service activities and as of July, 2015 has moved on to take on a medical oncologist position in Red Deer, Alberta. In addition Dr. Soundouss Raissouni (GI research clinical fellow) and Dr. Amal Imbulgoda (resident) have accepted positions in Medicine Hat and Lethbridge, respectively. These three trainees have now significantly bolstered Medical Oncology academic and service needs in our regional cancer centres. Dr. Rodel Cenabre joined Medical Oncology in 2014 as a Clinical Associate assisting in the Breast Tumor Group.

Dr. Dean Ruether has accepted the position of Medical Lead, Community Oncology, with CancerControl Alberta and Dr. Sunil Verma will be starting in his new his role as TBCC Medical Director and Department Head of Oncology in January 2016, and will be joining the Medical Oncology Breast Tumor Group.

A Retreat was held in November 2014 for the Division/Section of Medical Oncology. The topics of Education, Research and Clinical Operational efficiencies were discussed. It was well attended with the majority of trainees, Clinical Associates and Medical Oncologists able to participate. New relative merit value scoring for assessment of productivity was discussed with roll out to begin in the later part of 2015.

CURRENT ISSUES

Challenges being faced at this time are space, both clinical and professional, the need for increased nursing support, and for protected time for research and education academic activities. Educational leaves (sabbaticals) are currently being discussed as to how to operationalize these important academic activities to help inform and improve overall patient care. Dr Dean Ruether was able to spend two to three days per week in Edmonton liaising with the radiopharmaceutical group with the intent of bring this technology and class of therapeutics to Southern Alberta.

Reducing patient wait lists, scheduling of complex treatments and increasing availability of clinical trials for our patients continue to be issues for the division. Significant preparatory work is currently being done to optimize clinic templates to maximize current space and resource constraints.

DIVISION OF MEDICAL ONCOLOGY

STRATEGIC PLANNING

The Systemic Treatment Program has been stressed due to the volume of patients requiring treatment coupled with shortages in space and staffing. There was a change in managers over the past year, with hematology/BMT joining the larger DCU group. Changes in clinic scheduling have been initiated at the Holy Cross Site, using the Clinic Booking Rules, and several more phases will be put in place over the next few months.

RESEARCH HIGHLIGHTS

PROGRAM

TBCC CTU Report - Gwyn Bebb

The last 12 months has been notable. The TBCC CTU continues to grow, develop and indeed thrive as we focus on our four key guiding principles – quality, fiscal clarity, easy accrual and maturing into a research centre. We have made significant progress on each front. The drive for quality continues with several initiatives. The last four months saw the launch of the Tumour Group Report Card that provides feedback to each tumour group how they are performing on the clinical trials front. This report card contains a mixture of objective metrics data as well as subjective feedback from members of the clinical trials unit to the tumour group on how well processes of accrual are running. The report cards have been very well received and due to popular demand, a second initiative saw a report card being produced for each individual investigator. It is hoped that this will provide each one of us with discreet analysis of how our clinical trials activity can be improved over time. A second initiative is that of better processes for the interpretation of clinical trials scans. We hope to soon have in place an agreement with the radiologists regarding consistent reading of CT and MRI scans in particular the outlining of RECIST criteria tumour measurements. The relentless pursuit of quality permeates every aspect of our activities.

Encouragingly, this focus on quality is reaping dividends in terms of our perception with sponsors. We have received significant positive feedback from monitors and sponsors acknowledging smoother processes, greater engagement and improved data quality. Nowhere is this quality more important than in the Phase 1 sphere. We have worked very hard to improve our reputation in the field and boost our profile on the Phase 1 radar. Our improved fiscal understanding means that the contracts we draw up are much stronger than they used to be. We know precisely the costs incurred in opening any clinical trial and we make sure the contract covers those costs. Implementing such water tight contracts means that every tumour group is in the black rather than the red. The additional dividend here of course is the overhead flow. Greater overhead flow creates more opportunities to subsidize cooperative group trials and investigator initiated trials where many costs are not covered. So far the delegation of responsibility for drawing up a balanced clinical trial portfolio to the tumour groups is also working. Direct input from Margaret MacIssaac and the trial launch team has enabled us to identify trials where money will be lost. Creative ways of covering those deficits have been found in several instances spreading the clinical trial and research culture across the institute successfully.

DIVISION OF MEDICAL ONCOLOGY

In terms of accruals, this has also been a successful year for us. Over 500 patients were accrued to clinical trials in this 12 month period. This is extremely welcome and puts us well on the way to meeting some of our targets of putting 10, 15 and ultimately 20% of TBCC patients on clinical trials. Special recognition is owed to the hematology group who has led the way, accruing almost 40% of our patients. While this is very welcome, it does mean that in medical oncology we probably need to increase our accrual rate to some extent so that the CTU dependence on one tumour group is lessened. Ideally over the next year we will see increasing numbers of clinical trials being opened in all the key solid tumour groups with a subsequent increase in accrual rates across the board.

We are also taking important steps on the path to maturing into a research unit. A notable milestone was the hosting of the Phase 1 Partnership meeting on April 8, 2015. This brought together many stakeholders to discuss developing Phase 1 capabilities here. The guest speaker, Dr. Tony Tolcher, from San Antonio outlined the success they have enjoyed in developing one of the United States' premiere Phase 1 facilities by focusing on quality. This led to discussion that included Alberta Innovative Health Solutions, Alberta Health Services (AHS), Tom Baker Cancer Centre (TBCC), University of Calgary (U of C), University of Lethbridge (U of L), Innovation Calgary as well as legal and ethics representation on how we at the TBCC and the U of C can contemplate delivering such quality. A powerful testimony was given by one of the TBCC lung cancer patients on the importance of Phase I trials opportunities to those diagnosed with cancer. The follow up from this is that a business plan for the development of a Phase 1 unit at the U of C is now being drawn up and a follow up meeting with exactly the same theme will be scheduled for spring 2016. The opportunity of addressing some of the capacity limitations by increased partnerships with the university is something that we clearly need to think about.

Finally, I want to draw our attention to an outsider's perspective of how we are performing. The external review of TBCC CTU activities commissioned two years ago and carried out by Osmosis was a welcome validation of our efforts to improve the way we do things. Although only the preliminary report is available to us, its acknowledgment of improved quality metrics, a better profile nationally, recognition of increased participation and greater engagement across all aspects of clinical trials activity is something we can all be proud of. This external report puts us in a very strong position to continue building the momentum we have created, moving towards a vision of becoming one of Canada's leading cancer research centre's. While we have recently had to say "no" to some important clinical trial opportunities because of capacity issues, I'm convinced that with continued advocacy, clear leadership, a sustained vision and broad engagement we can overcome these challenges and make sure that the TBCC CTU continues to grow as it has for the last three years.

None of our recent successes would be possible without the key staff within the CTU and of course without the leadership of Sabine, Margaret, Marilyn, Kelly and Laureen. It also very important to acknowledge the role of each investigator within the TBCC plays in accruing patients to clinical trials. The more we accrue, the more overhead we generate and the more possibilities there are to enhance our capacity and increase our research capabilities within the institute. I would encourage every one of you to continue to accrue and to advocate strongly for the continued flow of overhead back to the TBCC CTU. With several IITs up and running, 142

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accruals to trials in the first quarter of 2015/2016 and a stunning seven Phase I trials in the launch process, the future looks bright indeed.

TBCC Gastrointestinal Tumour Group Report- Patricia Tang

Multidisciplinary tumor board rounds with radiology review and surgical input have improved the quality of care that we give our patients. Erin Benner, the GI dietician, has established a pathway for supplementary feeding extending to all of Southern Alberta for patients with gastroesophageal cancers. Psychosocial oncology has developed a new support group for women with GI malignancies, in addition to the preexisting one for men.

With respect to education, Dr. Raissouni completed her GI fellowship and will soon be working as a medical oncologist in Medicine Hat. Dr. Hunter successfully finished his stereotactic ablative body radiotherapy fellowship, and is currently employed in a locum position. Dr. Parimi presented a poster at the GI ASCO and had an oral presentation at CAMO. Dr. Aalok Kumar left the Tom Baker Cancer Centre; however, we were successful in recruiting Dr. Richard Lee-Ying who has completed a fellowship at the British Columbia Cancer Agency.

With respect to clinical trials, we anxiously await the opening of three trials developed at the Tom Baker Cancer Centre: Phase II Trial of RosuvaSTatin Combined with Standard Chemoradiation Therapy in the Treatment of High-Risk Locally Advanced Rectal Cancer (The STARC Trial, Dr. Monzon), A Phase 2 Study of Palliative Chemo-Radiotherapy with Carboplatin and Taxol in Non-Curative Cancer of the Esophagus (Dr. Kerba), Stereotactic Ablative Body Radiotherapy (SABR) for Oligo-metastatic Colo-Rectal Cancer with bio-marker evaluation for early progression (Dr. Sinha). Accrual to IND 210 (national co-chair Dr. Tang) has been completed, and we currently have ten open clinical trials.

TBCC Genitourinary Tumour Group Report - Daniel Heng

The genitourinary tumor group has had a productive year. Dr. Nimira Alimohamed has gone on maternity leave and we are currently looking for locum coverage. It should be noted that the demand for chemotherapy has increased as more data such as the CHARTED and STAMPEDE trials advocate for earlier use of chemotherapy in prostate cancer to greatly extend overall survival. Thus, clinical need is projected to grow substantially.

In terms of research, our radiation oncologists have the honor of being tied for the highest accruing site in the world to the RTOG 0521 prostate cancer study which was recently presented at ASCO in Chicago. We continue to offer a wide spectrum of clinical trials and coordinate with the Southern Alberta Institute for Urology for patient accruals. Dr. Alimohamed had an oral presentation at the Genitourinary Cancers Symposium in Orlando looking at the role of neutrophil to lymphocyte ratio in prediction and prognosis in metastatic renal cell carcinoma. This year, our group has had authorship in publications in high impact factor publications including Lancet Oncology, Journal of Clinical Oncology, and European Urology.

Dr. Haoran Li has completed a clinical and research fellowship posting with the GU oncology group and now we welcome Dr. Jose Manuel Ruiz Morales from Mexico who will be doing a

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one year GU fellowship. Our previous fellow Dr. Nils Kroger, recently won the European Association of Urology award for best publication of the year for his work on non-clear cell carcinomas through the International mRCC Database Consortium.

Southern Alberta/TBCC Breast Tumor Group – Dr. Sasha Lupichuk

The Breast Tumour Group continues to be a dynamic, busy group. Theo Johnston, RN has triaged on average 129 new referrals per month in the first quarter of 2015 with about 20-25% coming in as E-Referrals. Dr. Marc Webster has continued to oversee the Breast Tumour Group clinical trial profile. Dr. Jan-Willem Henning and Dr. Tien Phan continue to work with the Clinical Data Integration Team with the goal of being able to more easily track our patient statistics and outcomes with quality improvement and research in mind.

The Alberta Provincial Breast Cancer Program Retreat took place at Hotel Alma starting the evening of April 9th through April 10th, 2015. Dr. Sasha Lupichuk, Dr. Siraj Husain and Dr. May Lynn Quan contributed to updates for medical, radiation and surgical oncology. Dr. Lupichuk presented provincial data on adjuvant TAC versus FEC-D chemotherapy for women under 50 with node positive, HER2 negative breast cancer. This project was made possible with the support and expertise of GURU members Xanthoula Kostaras and Derek Tilley. Dr. Hua Yang presented some data pertaining to Oncotype DX use over the past year since provincial funding was obtained. Dr. Lupichuk and Dr. Roger Tsang, in conjunction with Dr. Karen King in Edmonton, have initiated an in-depth study to examine Oncotype DX uptake and impact on adjuvant chemotherapy prescription. With the contribution of all attendees, existing Clinical Practice Guidelines were updated and posted.

AWARDS

- Bebb, G. Tom Baker Cancer Centre Clinical Trials Unit, Shortlist for Alberta Health Services Presidents Award, 2015.
Best Poster Award, Targeted Anticancer Therapies International Congress Meeting. Paris, France, 2015.
- Easaw, J. Top Accruing Oncologist to Clinical Trials for 2014, Department of Oncology, Tom Baker Cancer Centre.
- Hao, D. One of 5 finalists in Third Annual Alberta Health Services President's Excellence Award for Research, 2015.
- Heng, D. Arête Award for Research Excellence for Clinical Faculty (< 0.5 FTE in research time), Department of Oncology, The University of Calgary, 2014.
Mentor of the Year, Medical Oncology, Department of Oncology, University of Calgary, 2014.

DIVISION OF MEDICAL ONCOLOGY

Henning, J. W. 2014 – 2015 Medical Oncology Residency Program: Teaching Award, Tom Baker Cancer Centre.

Stewart, D. Internal Medicine Research Day Resident's Choice Oral Presentation Award, 2015.
American Society of Hematology Abstract Achievement Award, 2014.
(D. Oh)
American Society of Hematology Abstract Achievement Award, 2014.
(J. Graczyk)
Department of Oncology Overall Excellence Award, 2014.

DIVISION OF MEDICAL PHYSICS

DIVISION HEAD

Wendy Smith, PhD, MSc, FCCPM, MCCPM

DIVISIONAL HIGHLIGHTS

This has been a year of change and rejuvenation in the Division of Medical Physics. Dr. Wendy Smith was appointed Division Head as of July 1, 2014. The division conducted an extensive search to replace her and another departed member of the division. We are pleased to welcome our new members:

- Dr. Michael Roumeliotis recently completed his residency in medical physics, and obtained his membership in the Canadian College of Physicists in Medicine. He is eager to teach and enthusiastic about research. Dr. Roumeliotis is already developing and teaching lectures in our course “Medical Imaging for Radiation Oncology Physics” (PHYS 697.07).
- Dr. Colleen Schinkel joins us from Central Maryland Radiation Oncology, a community practice site of the University of Maryland School of Medicine. Dr. Schinkel completed her PhD at the University of Alberta and her residency at MD Anderson. She is enthusiastic to return to Alberta and academics, coordinating MDPH 633, the Radiation Oncology Physics Laboratory course.
- Dr. James Grafe is a recent graduate of our residency program. He was hired into a temporary physicist position from October to May. He added much needed capacity to our clinical program and was instrumental in developing the 2.5 MV imaging program, as well as many other projects. He successfully passed his CCPM exams and became a member of the Canadian College of Physicists in Medicine.

We have also welcomed staff into expanded academic leadership positions. Alana Hudson took on the role of Residency Director of our CAMPEP-accredited program. She is focused on refining the structure of this program to balance on-the-job training and theoretical learning. Dr. Nicolas Ploquin has expanded his academic leadership, and is now the Director of the Certificate program and Associate Director of the Graduate Specialization in Radiation Oncology Physics through the Department of Physics and Astronomy. Dr. Wendy Smith is the Associate Director of the Residency and Certificate programs and Director of the graduate program.

Our academic programs are internationally renowned and attract the highest quality applicants, as can be seen by the number and quality of awards our students and trainees receive. Our graduate program hit an all-time high in enrollment this year, with 12 students. Julia Stanely successfully defended her PhD examining errors in SRS under the supervision of Drs. Dunscombe and Spencer this spring. Jared Wiebe defended his PhD last August, modeling of the Novalis Classic linac using the Monte Carlo GATE simulation platform under the supervision of Dr. Ploquin. We have also expanded our course offerings to include “Medical

DIVISION OF MEDICAL PHYSICS

Imaging for Radiation Oncology Physics,” which was developed by Dr. Greg Pierce and taught jointly by Drs. Pierce and Roumeliotis. This increases our extensive teaching portfolio:

Graduate Courses (half courses, unless otherwise noted):

- MDPH 623 Radiological Physics and Radiation Dosimetry
- MDPH 637 Anatomy and Statistics for Medical Physics
- PHYS 697.18 Medical Imaging for Radiation Oncology Physics
- MDPH 623 Clinical Rotation (Quarter Course)
- MDPH 625 Radiation Oncology Physics
- MDPH 633 Radiation Oncology Physics Laboratory
- MDPH 639 Radiobiology and Radiation Safety for Medical Physicists
- PHYS 691.12 and 691.22 Graduate Seminar

Residency Courses (2 semesters):

- MDPH 711 - Clinical Competency 1
- MDPH 712 - Clinical Competency 2
- MDPH 721 - Clinical Projects 1
- MDPH 722 - Clinical Projects 2
- MDPH 731 - Radiation Oncology Physics Tutorials
- MDPH 741 - Treatment Planning
- Practica in Radiation Therapy Planning and Diagnostic Imaging

We also run a vibrant undergraduate research program, with 4 PHYS 598/599 students (research project for senior undergraduate students). We had four summer research students in 2014 and six in 2015. Many of the projects resulted in presentations at national and international conferences and/or publications.

CURRENT ISSUES

This year has been the first of likely several rebuilding years for Medical Physics. Several senior members, including Dr. Peter Dunscombe, Dr. Derek Brown and Karen Breitman, retired or moved on to other positions last year. Overall, more than half of our division has been here for less than three years. The new members of our division have brought a fresh perspective and enthusiasm for discovery, ushering an era of revitalization.

We face challenges with providing service for an increasingly demanding clinical program while maintaining our reputation for academic excellence and growing our research portfolio. The prospect of a new cancer centre will have a huge impact on our division, as planning and commissioning a project of this magnitude is extremely resource intensive for medical physics.

DIVISION OF MEDICAL PHYSICS

STRATEGIC PLANNING

We have selected and secured funding for our first fellow, and anticipate regularly hosting fellows will significantly expand our research capacity.

The division held its first ever Research Retreat in June, 2015. We laid the framework for increasing collaboration between physicists and outlined a more coherent research strategy.

RESEARCH HIGHLIGHTS

Much of our division's research is clinically informed, with a number of themes.

Research Tools: Dr. Eduardo Villareal-Barajas returned from sabbatical focusing on dose measurement in September. In collaboration with the ENEA-Frascati (National Lab, Italy) he is investigating the use of pure LiF crystals for dosimetry of clinical proton, C-ion and MV X-ray beams, and just started collaboration with Pina Colarusso (Snyder Institute, University of Calgary) to evaluate the use of confocal microscopy to evaluate the PL properties of irradiated LiF crystals. Dr. Ploquin has and is developing Monte-Carlo modeling of current treatment techniques such as VMAT, FFF and IMRT using GATE (Geant4 Application for Tomographic Emission). Combined with the validation of GATE as a MC platform for radiotherapy application, this will provide tools that will enable a variety of research projects by modeling our linear accelerators. In another publication, an open source optimizer that generates seed distributions for low-dose-rate prostate brachytherapy was designed, tested, and validated by Dr. Kahn.

We have a group forming to expand our existing motion management and measurement capabilities. We saw a number of publications in this area. Several publications also came from the group that focused on radiation therapy in low-income countries. The dose measurement group also had two publications this year. Dr. Kirkby, one of our division members in Lethbridge has published on gold-nanoparticle enhanced radiotherapy and the bystander effect.

PROGRAM

This is a year of tremendous progress and change in the Medical Physics Clinical Department.

- We have developed a new treatment planning physics group led by Dr. Colleen Schinkel, who are working closely with dosimetry, physicians and radiation therapists to review and update radiation therapy plan quality and delivery. This is a major focus for our group, clinically, for the next year.
- Our brachytherapy program, led by Dr. Tyler Meyer, expanded to include the third interstitial breast brachytherapy program in the country and is now serving as a teaching site for this technique. We will treat our first interstitial HDR gynecological patient in July, 2015, a technique commissioned by Dr. Michael Roumeolotis.
- A new TrueBeam linear accelerator was installed and commissioned under the leadership of Dr. Rao Khan in September.

DIVISION OF MEDICAL PHYSICS

- Dr. Meyer led the commissioning of RapidArc, as well as its implementation for prostate RT. Drs. Schinkel and Smith led the implementation for head and neck treatments. These improvements have meant a significant reduction in treatment times for our prostate and head and neck patients.
- The Canadian Nuclear Safety Commission conducted a Type 1 compliance inspection at the Tom Baker Cancer Centre. Drs. Spencer and Meyer led a review and refresh of our CNSC documents in preparation for this inspection, which was successful.
- We also continued to provide radiation safety support for the design and construction of the Grande Prairie Cancer Centre through Ferenc Jacso.
- The cobalt teletherapy unit was removed allowing us to use this vault as a ‘swing bunker.’

In addition, several members of the division are active with professional service organizations. Alana Hudson is a member of the Canadian Organization of Medical Physics Professional Affairs Committee (April 2014 – present) as well as an Alberta Medical Physics Association director and past president. Dr. Wendy Smith is the Secretary/Treasurer of the Canadian College of Physicists in Medicine, and board member of the Society of Directors of Academic Medical Physics Programs. She was also active in a working group that revised the physics curriculum for the Radiation Oncology Residency for the Royal College.

AWARDS

Pierce, G. and Hudson, A.	Award –Technical Poster Award, Canadian Organization of Medical Physicists Annual Scientific Meeting.
Smith, W.	Faculty of Graduate Studies, My SupervisorSkills, GREAT Supervisor Award. Best reviewer of the November-December 2014 issue of <i>Urology Journal</i> .

DIVISION OF PALLIATIVE MEDICINE

DIVISION HEAD

Jessica Simon MB ChB, MRCP (UK), FRCPC

DIVISION HIGHLIGHTS:

This year the division continued to move forward on our mission to support community focused palliative care via research and educational excellence, particularly by working on the groundwork for the new sub-specialty residency program in palliative medicine.

Highlights included hosting the Canadian Society of Palliative Care Physicians' (CSPCP) annual Advanced Learning in Palliative Medicine (ALPM) Conference which was held in Calgary, May 2015. Division member Dr. Herx, chaired the conference organizing committee which included Drs. Chary, Galloway, Labrie, Murray and Simon and many members of the division presented at the conference (Drs. Slawnych, Wasylenko, Labrie, A Murray, Abdul-Razzak, Chary, and Spice). Titled, "New Frontiers of Palliative Medicine" the plenaries included three internationally recognized palliative medicine researchers: Dr. Eduardo Bruera, Dr. David Currow and Dr. Harvey Chochinov and past-president of the CMA Dr. Louis Francescutti. Two major reports were released at the conference: The "National Palliative Medicine Survey," which informs work-force planning and "Palliative Care - Canadian Medical Association's National Call to Action - Examples of innovative care delivery models, training opportunities and physician leaders in palliative care," which featured a Calgary hospice and several members of the division.

We welcomed three new division members Dr. Simon Colgan, Dr. Amane Abdul-Razzak and Dr. Jacqueline Hui. Dr. Neil Hagen retired from clinical practice and became the first Professor Emeritus for the Division of Palliative Medicine.

CURRENT ISSUES

The February 2015, Supreme Court of Canada judgment on *Carter v. Canada*, which ruled against the criminal prohibition on "Physician Assisted Death", (physician assisted suicide and euthanasia) has profound implications for all, including oncology and palliative medicine. The division has created a perspectives document and members are actively contributing to the ongoing dialogue locally, provincially and nationally in response to the judgment.

STRATEGIC PLANNING

The palliative medicine division created a strategic plan document for 2015-2020 with a major goal of positioning the division to be able to offer both the new RCPSC sub-specialty residency training program, the new CCFP certificate of added competency for palliative medicine. For this aim and to enhance our capacity for research we are seeking to develop our academic faculty with attention to both primary care and the specialties, which are the entry points for the new sub-specialty (anesthesia, pediatrics, internal medicine and neurology).

DIVISION OF PALLIATIVE MEDICINE

RESEARCH HIGHLIGHTS

An open, peer network for the division called the “Core Research Initiators Group” worked collaboratively to submit six grant proposals over the year. Drs. Spice and Sinnarajah were awarded a “Technology Evaluation in the Elderly Network” grant along with nursing colleague Linda Reed Paul and others for a project examining the use of Web-Based Videoconferencing (WBVC) for Rural Palliative Care Consultation in the Home. The major research program on-going is that of Drs. Simon and Hagen, “Advance Care Planning and Goals of Care Alberta: A population based Knowledge translation Intervention study”, known as ACP CRIO. Other division research is investigator driven without grant support, for example Dr. Sinnarajah has led several health services utilization studies, and supervised residents from a number of disciplines to examine the use of the “C2 goals of care designation order set” and the use lab tests in patients with C1 goals of care designation.

PROGRAM

The AHS palliative and end of life care service has been working diligently on many initiatives in order to develop a more robust, evidence-based program available to all in Calgary Zone and promote patient-based care. Led by medical director Dr. Sinnarajah, division members have been very involved with all of these initiatives. The current list of working groups to which we contribute include Provincial PEOLC Innovations Steering Committee (Dr. Sinnarajah), Dashboard and Indicators Working Group (Drs. Simon, Sinnarajah and Wasylenko), Advance Care Planning/Goals of Care Designation Policy Implementation Working Group (Dr. Simon), PEOLC Strategic Clinical Network (SCN) Pathways & Guidelines Working Group (Drs. Abdul-Razzak, Colgan, Herx and Sinnarajah), EMS Assess, Treat and Refer Working Group (Drs. Murphy and Sinnarajah), PEOLC Gateway Working Group (Dr. Chary), Palliative Care and Hospice Capacity Working Group (Dr. Falk), 24/7 Palliative On-Call Support Working Group (Drs. Sinnarajah and Spice).

The PEOLC Clinical ARP received approval of expansion up to 20.7 FTE. One positive impact on the Department of Oncology is that this has allowed for a dedicated palliative physician consultant to Tom Baker Cancer Centre (Dr. Lyle Galloway). This represents an expansion of the previous TBCC Pain & Symptom Management Clinic’s scope, in that along with a palliative care nurse practitioner, it allows regular access to palliative expertise five days a week. Creation of a palliative “tumor group” is being explored as another mechanism to enhance the provision of primary palliative care into the TBCC. An Alberta Cancer Foundation enhanced care grant project, the Tom Baker Cancer Centre (TBCC) & Palliative/End of Life Care (PEOLC) - Calgary Zone Collaborative Project entered its second year and will provide clinical pathways and targeted education to further improve the care of patients with advanced cancer and their caregivers.

DIVISION OF PALLIATIVE MEDICINE

Many members of the section have leadership roles, participating in many local, provincial and national medical committees related to palliative care primarily but also other medical areas. Some highlights (not already mentioned above) include:

Dr. Ted Braun has many key leadership positions within AHS including Acting Associate Zone Medical Director and Medical Leader for Public Health, Primary Care, Chronic Disease Management and Allied Health all for the Calgary Zone.

Dr. Srinu Chary is the Chair of the Pallium Foundation of Canada, which is involved in national educational activities related to palliative care. It has a \$3 million funding from the Federal Economic Action Plan 2013.

Dr. Simon Colgan is a member of the FMC Ethics Committee.

Dr. Marisa Dharmawardene is on the FMC Site Leaders Committee as well as the Residency Program Committee. She was also an invited speaker at the Harvard School of Public Health.

Dr. David Falk is involved in the Department of Family Medicine residency program as Domain Lead in Palliative Care, attending monthly Curriculum Evaluation Committee, FMRPC meetings, Domain Lead meetings, meetings with Care of the Elderly lead and meetings with hospice preceptors. Next step is to help out with the evaluation of curriculum and resident assessment process.

Dr. Lyle Galloway led a presentation on the use of neuraxial analgesia in Calgary at the 25th Annual Palliative Education and Research Days in 2014.

Dr. Leonie Herx is on the working group that's creating the new Royal College of Physicians and Surgeons of Canada's Palliative Medicine training program as well as being on the Board of the Canadian Society of Palliative Care Physicians.

Dr. Hubert Marr is a member of the PLC Ethics Committee and will make presentations at the Calgary hospitalist conference as well as the Canadian Bioethics Society annual conference.

Dr. Alison Murray led a presentation on the use of Denosumab in palliative care at the 20th International Congress on Palliative Care in 2014. She was also the runner-up when she presented on Managing End of Life Symptom Crises in the Home at the 10th Annual Advanced Palliative Medicine Update in 2014.

Dr. Sara Pawlik is our palliative medicine residency program director and successfully guided the residency program through the 2015 accreditation process.

Dr. Jessica Simon sat on the National Advance Care Planning Task Group of the Canadian Hospice and Palliative Care Association and the board of the Canadian Society of Palliative Care Physicians. She co-authored the Choosing Wisely Canada palliative care recommendations.

DIVISION OF PALLIATIVE MEDICINE

Dr. Aynharan Sinnarajah sits on the Alberta Scientific Assembly Planning Committee and Nominations/Awards Committee of the Alberta College of Family Physicians. He's also a member of the Clinical Informatics Team for AHS Calgary and co-chairs the Electronic Laboratory and Diagnostic Imaging Advisory Committee. He also completed a Masters in Public Health degree at Harvard University in 2014.

Dr. Eric Wasylenko is the Medical Advisor of the AHS Provincial Advance Care Planning/Goals of Care Designation Initiative, Ethics and End of Life Care Consultant for Health Quality Council of Alberta, Chair of the Public Health Ethics Consultative Group of Public Health Agency of Canada. He's made numerous presentations over the year to various groups on ethics, advance care planning, and physician assisted suicide and euthanasia.

AWARDS

- Abdul-Razzak, A. Runner-up, Residency Research Competition, Canadian Society of Palliative Care Physicians, Purdue Pharma Resident Research Award Competition, 2014.
- Labrie, M. Humanitarian of the Year Award, Canadian Society of Palliative Care Physicians, 2015.
- Sinclair, S. CancerCare Research Professorship, Faculty of Nursing, University of Calgary (\$300,000), 2013-2016.
- Wasylenko, E. Long-Service Award, Alberta Medical Association, 2014.
- Wasylenko, E. Dr. William Marsden Award for Medical Ethics, Canadian Medical Association, 2014.

DIVISION OF PEDIATRIC ONCOLOGY

DIVISION HEAD

Douglas Strother, MD

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

DIVISION OF PREVENTIVE ONCOLOGY

DIVISION HEAD

Christine Friedenreich, PhD

DIVISION HIGHLIGHTS:

Dr. Darren Brenner was hired as a Research Scientist in the Department of Cancer Epidemiology and Prevention Research (CEPR) in January 2015 and was appointed as an Adjunct Assistant Professor in the Departments of Oncology and Community Health Sciences, Cumming School of Medicine. Dr. Brenner had previously completed one year of postdoctoral training at the International Agency for Research on Cancer and just over one year in the Department of CEPR under the supervision of Dr. Friedenreich. He is a molecular cancer epidemiologist with research interests in lifestyle factors and inflammation for cancer risk and survival. Dr. Brenner held an Alberta Innovates Health Solutions Postdoctoral Fellowship during his second year of postdoctoral training.

Xanthoula Kostaras joined the Division of Preventive Oncology as an Adjunct Lecturer in November 2014. Ms. Kostaras leads the Guideline Resource Unit (GURU) in Alberta Health Services-CancerControl Alberta. GURU supports the Alberta Provincial Tumour Teams in the development and maintenance of clinical practice guidelines for cancer treatment, diagnostic work-up/staging, and follow-up. GURU also promotes the implementation and uptake of cancer clinical practice guidelines across Alberta while working to identify, promote, and contribute to cancer care quality improvement initiatives.

Melissa Shea-Budgell joined the Division of Preventive Oncology as an Adjunct Lecturer in September, 2014. She received her Master of Science degree in nutrition and health promotion from Simmons College (Boston, USA) and is currently a doctoral candidate in human nutrition at the University of British Columbia. In her role as the Assistant Scientific Director for the Cancer Strategic Clinical Network, Alberta Health Services, she is working to increase capacity for clinician and patient-driven clinical effectiveness research. Her research interests include systematic reviews across the spectrum of oncology, strategies for the implementation of evidence-based care, and quality improvement research.

CURRENT ISSUES

The Division of Preventive Oncology has experienced another successful year despite many challenges that occurred because of the floods in June 2013 in Calgary. Members of the division undertake a range of cancer epidemiology and prevention research with a focus on understanding the role of modifiable risk factors in reducing cancer burden and improving survival. Their success is clearly evident in the number of grants held (28), publications (59), and presentations (46).

DIVISION OF PREVENTIVE ONCOLOGY

One of the strengths of the division is the capacity for statistical and epidemiologic research as well as the conduct of complex research studies requiring the collection and management of large samples of epidemiologic and biologic data. Our department members continue to be centrally involved in the Alberta Cancer Research Biorepository and the Bioprocessing Facility.

In January 2015 the Department of Cancer Epidemiology and Prevention Research was relocated back to the Holy Cross Centre after 18 months and three moves caused by the flooding of June 2013. We continued with our weekly seminars, rounds, journal clubs and research forums and have now settled back into a better workplace. We are continuing to try to overcome some of the challenges in conducting our research programs in the complex and constantly changing AHS and University of Calgary environments. We have made some progress in this past year and are hopeful that more of these issues can be resolved in the upcoming year.

We are now seeking to recruit one senior research scientist to replace Dr. McGregor who retired in late 2013. Thus far, our recruitment efforts have not been successful and the recruitment is now on hold because of the hiring freeze in AHS.

STRATEGIC PLANNING

The division members have been working closely with Dr. Paula Robson, Scientific Director for the Alberta Tomorrow Project®, and the Medical Director and Scientific Lead for the Alberta Cancer Prevention Legacy Fund, Dr. Laura McDougall, in strategic discussions for how the three departments could interact and work together more collaboratively and strategically.

To this end, we developed a proposal for the Alberta Centre for Cancer Prevention Research (ACCPR) that was reviewed by CancerControl Alberta senior leadership. It has now been incorporated into the Refreshed Strategic Framework of the Alberta Cancer Prevention Legacy Fund by Alberta Innovates Health Solutions. Strategic planning and discussions will be on-going over the next year to establish the ACCPR. Meanwhile, our Scientists are members of national Cancer Prevention Research Network established by the Canadian Cancer Society Research Institute (CCSRI). Dr. Friedenreich continues as a member of the End 1 Development Committee for the CCSRI whose mandate is to enhance capacity in as well as quantity and quality of cancer prevention research in Canada.

These are the vision, mission and goals for the ACCPR developed by our division.

Vision: To establish a centre with a comprehensive and integrated cancer prevention research focus that will accelerate progress on cancer prevention research in Alberta and the translation of knowledge into action.

Mission: To align provincial resources in cancer epidemiology and prevention research to generate knowledge that makes a significant impact on reducing cancer burden.

DIVISION OF PREVENTIVE ONCOLOGY

- Goal 1: To establish a Centre in Alberta that leverages capacity, infrastructure, and knowledge in cancer prevention research to permit rapid knowledge translation and exchange at the provincial and national level.
- Goal 2: To inform evidence-based strategic directions and priorities for cancer prevention and control activities at multiple governmental and organizational levels.
- Goal 3: To provide a collaborative and multidisciplinary environment that will enable transformative research in cancer epidemiology and prevention.
- Goal 4: To increase the productivity, profile, relevance and impact of the cancer prevention research work conducted within the Centre.
- Goal 5: To train highly qualified personnel to increase capacity in cancer epidemiology and prevention research.
- Goal 6: To have an impact on decreasing cancer incidence and improving survival through modifiable lifestyle risk factors and environmental factors.

RESEARCH HIGHLIGHTS

The Division of Preventive Oncology has nine members who are involved to varying degrees in research. The core members are those based in the Department of Cancer Epidemiology and Prevention Research including: Drs. Darren Brenner, Nigel Brockton, Ilona Csizmadi, Christine Friedenreich and Karen Kopciuk. Other members include Dr. Fred Ashbury currently based in Toronto; Dr. Heather Bryant, currently Vice-President for the Canadian Partnership Against Cancer in Toronto; Dr. Lorraine Shack, Director of Cancer Surveillance of CancerControl Alberta, AHS; Dr. Jeff Vallance, Athabasca University based in Medicine Hat; Ms. Xanthoula Kostaras, Manager for the Guidelines Utilization Resource Unit of CancerControl Alberta and Ms. Melissa Shea-Budgell, Assistant Scientific Director, Cancer Strategic Clinical Network. Our division also had two postdoctoral fellows actively involved in research during this year who both trained with Dr. Friedenreich. Dr. Darren Brenner completed his PhD in January 2015 and Dr. Anne Grundy worked on the Alberta Population Attributable Risk project from April 2014-July 2015 and is now employed with the Alberta Cancer Prevention Legacy Fund of AHS. Ms. Megan Farris began her MSc program in Epidemiology in September 2015 and is supervised by Dr. Friedenreich. Dr. Kopciuk is a mentor and supervisor for the Emerging Leaders Program at the University of Calgary, and is also co-supervisor of Ji Ruan, MSc Statistics and Longlong Huang, a PhD candidate at the University of Calgary.

DIVISION OF PREVENTIVE ONCOLOGY

The division scientists have been successful in securing new funding during this past year from the Canadian Cancer Society Research Institute (Drs. Friedenreich and Brenner) for a large scale Canadian population attributable risk project for cancer incidence. Drs. Friedenreich, Brockton and Brenner were also co-investigators on a large scale project funded by the Canadian Breast Cancer Foundation and CIHR for a program of research in breast cancer in women under 40 years that is being led by Drs. Steven Narod (Women's College Hospital) and May Lynn Quan (AHS). This Pan-Canadian cohort study will recruit 1200 newly diagnosed breast cancer patients from 29 centers across Canada.

The division scientists' research continues to be focused on a range of topics in cancer epidemiology and prevention with a major emphasis on lifestyle factors, molecular and genetic mechanisms of cancer etiology and survival.

PROGRAM

N/A

U of C PROFESSORSHIP/ENDOWED CHAIRS

2012-2017 Christine Friedenreich, PhD – ACF Weekend to End Women's Cancers Breast Cancer Chair.

2011-2016 Hans Vogel, PhD – Lance Armstrong Chair in Molecular Cancer Epidemiology.

AWARDS

Friedenreich, C. Alberta Cancer Foundation Weekend to End Women's Cancers Breast Cancer Chair, Faculty of Medicine, University of Calgary. 2012-2017.

Health Research Senior Scholar Award, Alberta Heritage Foundation for Medical Research. 2008-2015.

Vallance, J. Tier II Canada Research Chair in Health Promotion and Chronic Disease Management. 2013-2018.

AIHS Population Health Investigator Award. 2009-2016.

Brenner, D. Alberta Innovates-Health Solutions Postdoctoral Fellowship. 2014-2016.

DIVISION OF PSYCHOSOCIAL ONCOLOGY

DIVISION HEAD

Barry D. Bultz, PhD

DIVISION HIGHLIGHTS:

The Division of Psychosocial Oncology has had another very successful academic year with ongoing involvement in research activity to almost \$18 million dollars. This includes \$8.8 million in primary investigator (PI) grant funding with a further \$9.1 million in projects where members have a co-investigator role. All members of the division are involved in academic psychosocial oncology: research and publication, clinical program development and educational activities including teaching (MDSC 535/635) training and mentorship of students and interns.

Dr. Barry Bultz completed his term as President of the International Psycho-Oncology Society (IPOS) in 2014. IPOS is a member of the International Union for Cancer Care (UICC) and as an NGO, IPOS is in “official relations” with the World Health Organization (WHO). Dr. Bultz, continues to serve as Chair of IPOS’s liaison committee with WHO. As well, he continues to advocate and speak on the global initiative to see Screening for Distress endorsed, implemented and symptoms managed in all cancer care internationally. Today, more than 75 international societies and cancer programs have endorsed Screening for Distress, as the 6th Vital Sign as a clinical standard of care for cancer patients. Since 2009, Accreditation Canada has been requiring Screening and Distress and management of symptoms as a cancer care standard.

Dr. Linda Carlson (Research Lead) took a six month sabbatical and continues to work on her new initiative under the Enbridge Research Chair in Psychosocial Oncology- investigating Complementary and Alternate Medicine (<http://tbccintegrative.com/>). For the academic year of July 2014-June 2015, Dr. Carlson and her team published 14 journal articles. Dr. Carlson presented her team's work at seven invited speaker events around the world. Two of her graduate students, Jill Johnson and Kristin Zernicke, have passed their candidacy exam and PhD defense, respectively, and she currently has one U of C "Eyes High" postdoctoral fellow, Greg Levin from Australia.

Dr. Janine Giese-Davis continues to lead the province-wide CancerBRIDGES survivorship research program in Alberta. Highlights include the development of a website with more than 64,000 visits to date, accessed by survivors in 60 Alberta communities, with visitors throughout Canada and worldwide. Over 500 survivors have been signed up to the survivor network, and Dr. Giese-Davis and her team have delivered educational sessions and symposia on survivorship in several locations in Alberta. Her research team also continues to explore the importance of emotional expression in the cancer journey.

Dr. Lauren Walker continues her clinical fellowship in Sexuality and Oncology. She also received the Rising Star Independent Investigator award from Prostate Cancer Canada for three years of funding (\$450,000). Dr. Walker now holds an Research Assistant Professor title in the

DIVISION OF PSYCHOSOCIAL ONCOLOGY

department which allows her to be PI on this grant to further her research in sexuality and intimacy in cancer as well as hire a postdoctoral fellow. Dr. Joanne Stephen is now the second clinical fellow in the Department of Oncology working specifically with research areas related to psychosocial aspects of breast cancer, young adults, psychological interventions, cancer support groups, internet interventions, and supported self-management.

Dr. Tavis Campbell had 19 peer-reviewed publication publications in the area of behavioral medicine. This work was supported, in part, by a Canadian Cancer Society Innovation Grant. He also served on the CBCF Ontario operating grant peer review panel B. Dr. Nicole Culos-Reed is now a Professor in the Faculty of Kinesiology. Dr. Culos-Reed had over 15 peer reviewed publications and book chapters this academic year.

Drs. Steve Simpson and Norman Monkman (psychiatrists) continue to provide an essential consultation psychiatry service for our cancer patients and their families. They now provide Telehealth consults to remote locations in Alberta.

Mr. Navdeep Mahendru, the Drug Access Coordinator, and Resource Social Workers Ms. Bernie Dunlop and Ms. Joan Furtney continue to support the functional needs of cancer patients. The Drug Access Coordinator's position was operationalized late 2014.

Mr. Wilson Miranda, the Spiritual Care Coordinator for TBCC, was integrated into the Psychosocial and Rehabilitation Oncology team this year. He meets with cancer patients/families in their spiritual and emotional coping, connecting them with community resources as needed. He conducted the first Annual Celebration of Life event at TBCC as a way to remember and honour and celebrate our colleagues who had died in the previous years. Healing Arts, Spiritual Care and Volunteer Resources, have developed a music programme for patients and families at TBCC with volunteer musicians since May 2015.

CURRENT ISSUES

The main challenges for this academic year have included:

The Division of Psychosocial Oncology had been spread over several sites in two geographic locations, and a third for some of the group therapy programs. For efficiency and greater ease of support for patients and academic collaboration, there is a strong need to consolidate in one location.

Rehabilitation Oncology (occupational therapy, physiotherapy, and speech language pathology) unit has now amalgamated with the division under AHS CancerControl Alberta and is now the Department of Psychosocial and Rehabilitation Oncology. Under this merger, the Spiritual Care Coordinator is integrated into Psychosocial Oncology.

DIVISION OF PSYCHOSOCIAL ONCOLOGY

STRATEGIC PLANNING

The division has begun to focus more on the process of improving patient communication. This includes everything from Web presence (both AHS and the UofC department website), improving pamphlets and written content (health literacy principles), and seeking to champion the uptake of Screening for Distress referrals.

The division has just begun working in collaboration with the Alberta Cancer Legacy Fund (ACPLF) to operationalize a smoking cessation clinic for cancer patients (on active treatment), family members and staff. Dr. Rebecca Malhi has been hired into a research consultant position to help plan the scope of the cessation clinic and its evaluation. The smoking program is expected to become active in Alberta in October 2015. Smoking cessation is becoming a new focus for the Canadian Partnership Against Cancer.

RESEARCH HIGHLIGHTS

Members of the division are involved in ongoing research. The main areas of focus are: mind-body interactions, survivorship, clinical care, Screening for Distress - the 6th Vital Sign, health service delivery, health literacy and program evaluations. Total external peer-reviewed competition grant funding (from local, provincial and national granting agencies) available to faculty and staff of the division is \$18 million. That is \$3.8 million in new PI grants and \$1.5 million in new co-investigator grants for 2014-2015. The department also published 42 peer-reviewed manuscripts, six books, 12 book chapters, and 16 published abstracts this academic year. The members of the department were invited presenters 34 times, conducted two symposiums, and presented on 40 occasions at conferences. This enables the division to continue to excel in clinically based research which aims to influence and enhance patient care locally, provincially, nationally and globally.

PROGRAM

- **MINDSET** is a research embedded study that offers patients at the TBCC and the BC Cancer Agency in Vancouver three psychosocial therapies. Participants are randomly assigned to one of three treatment groups: Mindfulness-Based Stress Reduction, Supportive Expressive Group Therapy or Stress Management Seminar.
- The **Best Group** is an ongoing weekly group offered to patients with metastatic breast cancer.
- The **Brief Supportive Expressive Therapy (SET)** is offered to women in the first year of their cancer experience with stage 1-3 non-metastatic breast cancer in a group format.
- **Women with Ovarian Cancer** is a weekly supportive expressive therapy group for patients with ovarian cancer.
- **eCalm** offers an online version of our Mindfulness-Based Stress Reduction program to cancer patients in Alberta who are unable to attend in-person groups (e.g. those with physical limitations, or live in rural areas or are too ill).

DIVISION OF PSYCHOSOCIAL ONCOLOGY

- The **Metastatic group** is a professionally led therapeutic monthly group for patients with advanced breast cancer.
- The **GI Men's Support group** is for male patients within the gastro-intestinal tumor group and is therapist-led.
- The **I Can Sleep** program was expanded from a research program and offers cognitive behavioral therapy for post-treatment cancer patients who are experiencing difficulty sleeping - fatigue and sleep problems are the most frequently reported concern of cancer patients.
- The professionally led drop-in **Lung Cancer Support group** is offered to reducing isolation, building hope, and living well with the disease.
- As part of a research initiative we also offer several **Online Support groups (OSG)** for breast cancer patients (including a young breast cancer survivors group) whose access to support is limited due to their rural location, disability or other impediments.
- The **Mindfulness Based Stress Reduction (MBSR)** programs (group and drop-in format) are offered to cancer patients who wish to learn meditation for personal growth, coping strategies, relaxation and stress reduction.
- **Screening for Distress, 6th Vital Sign** continues to be offered as part of CancerCare standard of care which aims to screen and address all cancer patients for emotional, physical and practical distress. Screening for Distress as the 6th Vital Sign has been designated an Accreditation Canada Standard since 2009.
- The monthly **Prostate Cancer and Sexuality** information session address how treatments for prostate cancer will influence sexuality addresses measures to help overcome these effects. The **Prostate Cancer Information Session** offers new prostate cancer patients information about a range of treatment options, as well as diagnostic services, counseling and therapeutic support.
- **CancerBRIDGES** addresses use of survivorship care plans to assist in the transition from the care of the oncology centre to the family physician.

NON-CLINICAL EDUCATION/ACCESS PROGRAMS

The division's resource counselors offer the Resource Class at TBCC to address financial burdens for cancer patients and their families. Some people may experience a change in their lifestyle because of a lower income. The Drug Access Coordinator (DAC) is a brand new program that assists in addressing drug coverage needs that patients may have (drugs not covered on the Cancer Care Drug Benefit List).

U OF C PROFESSORSHIP/ENDOWED CHAIRS

Dr. Linda Carlson holds the **Enbridge Research Chair in Psychosocial Oncology**. The focus areas currently are 1) Integrative Oncology and 2) Survivorship. Significant strides have been made in each of these areas.

1) Integrative oncology:

DIVISION OF PSYCHOSOCIAL ONCOLOGY

Dr. Carlson and her team are working towards establishing a 4-pronged approach to integrative oncology education, research and program implementation, which involves:

A. Patient and provider education programs: Designed to optimize knowledge and improve communication around evidence-based CT use modules will be available for both patients and providers.

B. Patient consultation service: Personalized individual consultation, decision-support and recommendations for integrative oncology care from trained specialists.

C. Complementary therapy provision: Provision and/or referral to of a full range of evidence-based CTs.

D. CT clinical trials program: Development of an integrative oncology clinical trials program (within the existing clinical trials unit) for promising CTs.

Dr. Carlson chairs the Scientific Advisory Committee to the Provincial Integrated Cancer Survivorship Program, with membership from across Canada and internationally. This committee advises the implementation team on matters of evidence-based program development and evaluation for survivor education and transitions in care programs.

2) Survivorship:

New program money brought in totaled \$2,912,415, through the ASAP Prostate Cancer Canada Network, Alberta Cancer Foundation, and Alberta Cancer Prevention Legacy Fund. During this reporting period, Dr. Giese-Davis had ten peer-reviewed papers published or in press, four published abstracts, and three papers under review (including an R&R to JCO). She presented 22 invited talks/editorials, and along with her collaborators ten conference presentations,. She also provided interviews or her work was discussed in nine media interviews for newspaper, magazine, and TV presentations on survivorship, and our paper on group therapy and mindfulness impacting telomeres was featured in Scientific American, The Huffington Post, the Wall Street Journal and many other media sources. Her team continues to provide links to community-based agencies through the website and actively collaborate with a number of these agencies as well as AHS CancerControl Alberta and chronic disease programs to post supportive and educational events to a province-wide live calendar so that survivors can quickly access information on daily events, and quickly see the times, locations, and maps to attend these. They continue to support the innovative translational video library called the Myths of Survivorship, and send out a monthly email and print CancerBridges newsletter to the survivor network and interested professionals. She also served on seven Alberta committees; one national committee; and five international committees including co-chairing The IOM Alliance on Quality Psychosocial Care Research and Policy Committee in the USA.

DIVISION OF PSYCHOSOCIAL ONCOLOGY

AWARDS

- Rouleau, C. American Psychosomatic Society (APS) Young Scholars Award for her paper “Less angry wife, more happy life: Results of a randomized controlled trial of brief supportive expressive therapy for partners of early stage prostate cancer patients”, 2015 Annual Meeting in Savannah, Georgia. USD \$500 + Media Release.
- Levin, G. Young Investigator of the Year Award – Multinational Association of Supportive Care in Cancer, MASCC/ISOO Conference 2015, US 1,500 + € 350.

DIVISION OF RADIATION ONCOLOGY

DIVISION HEAD

Ivo Olivotto BSc, MD, FRCPC

DIVISION HIGHLIGHTS:

The division had stable membership over the year with no departures or additions.

The Royal College on site accreditation survey was completed in February 2015, and 'Fully Accredited' status was awarded. This is effective for the next eight years.

Faculty at the Jack Ady Cancer Centre (JACC) in Lethbridge and Central Alberta Cancer Centre (CACC) in Red Deer, working with colleagues in other disciplines, brought a new treatment technique, Stereotactic Body Radiotherapy (SBRT) for patients with lung cancer, to their communities. SBRT is a highly-conformal, technically challenging, image-guided radiation therapy technique used in selected sites of the body. For patients with stage I lung cancer who are medically inoperable, SBRT can provide well-tolerated, non-invasive, curative-intent, treatment with high rates of long term local control as compared to a palliative or a no treatment approach used previously. Until available locally, patients had to travel to Calgary or Edmonton or, if not well enough to travel, received only palliative care. This innovation was facilitated by support through faculty and staff at the Tom Baker Cancer Centre (TBCC) in Calgary and colleagues in Edmonton and by a provincial SBRT initiative launched in August 2014.

Another outgrowth of the provincial SBRT initiative, led by University of Calgary faculty, is expansion of liver SBRT at the TBCC including through grant-funded, investigator-initiated trials.

CURRENT ISSUES

Divisional members are distributed across three cancer centers: the JACC in Lethbridge (n=2); the TBCC in Calgary (n=20; 17.5FTE); and the CACC in Red Deer (n=1). The JACC (opened 2010) and CACC (opened 2013) are equipped with 'modern' linear accelerators but the majority of linear accelerators (RT treatment units) at the TBCC are more than ten years old. Treatment units that old are rare to non-existent in BC and Ontario. Approximately 50% of Albertans with cancer require a course of RT. A detailed document setting out the needs, benefits and resource requirements for a prospective RT capital replacement plan to ensure that Albertans with cancer have access to safe, effective and precise radiotherapy when they need it, was presented in the spring of 2014. It has yet to receive action.

Considerable effort is being expended by radiation oncologists, radiation therapists and medical physicists to modernize current treatment techniques at the TBCC. Examples include the use of arc therapy for patients receiving IMRT (greater comfort for patients and efficiency for the system due to shorter treatment times) and as part of conditioning prior to bone marrow transplant. There is an expanding role for the use of SBRT for patients with liver and lung

DIVISION OF RADIATION ONCOLOGY

cancer and with oligo-metastases. Interstitial brachytherapy for patients with gynecologic cancers is being developed and there is greater emphasis on the use of localized, Stereotactic Radio-Surgery (SRS) to specific lesions as compared to whole brain RT for patients with brain metastases. Over the past year, we have implemented practice changes so that all patients receiving adjuvant RT for breast cancer are now treated with a field-in-field technique which has been shown to decrease acute toxicity and improve quality of life. These and other innovations have increased referrals to the Division of Radiation Oncology and the complexity of the work being done. Concurrently, teaching, research and knowledge generation are continuously incorporated into the process of care.

STRATEGIC PLANNING

The division has several key priorities which include:

- Prospective data collection and outcomes evaluation – D. Skarsgard leader
- Centre of Excellence in Brachytherapy – R. Banerjee leader
- Centre of Excellence in Stereotactic Radiation Therapy – G. Lim (CNS) and R. Sinha (Body) leaders
- Transition to a fully electronic RT environment – A. Balogh, R. Sinha, D. Skarsgard, C. Doll as prime leaders

RESEARCH HIGHLIGHTS

Radiation therapy is used to cure or relieve suffering for patients with cancer. Divisional members and trainees believe that research is about improving care and have been active in evaluating the care we provide to improve care for future patients. Research productivity as lead or senior authors by faculty members was seen across the spectrum of cancer control research including basic science, clinical innovations, large-scale clinical trials, and the evaluation of health service and quality of life outcomes. Highlights include:

Five of seven PGY2-5 residents and 13 of 23 faculty collaborated to present 34 posters or oral presentations at national or international Radiation Oncology scientific meetings and 29 peer-reviewed manuscripts. Thirteen of the 29 peer-reviewed manuscripts had division faculty as the first or senior author.

Divisional members held \$740,113 in active research funding as principal investigators in 2014-2015 including an AHS CRIO grant (C. Doll), and Investigator Initiated Trial (IIT) Grants including a new IIT award to R. Sinha and colleagues (2014) to investigate the integration of SBRT into the management of patients with liver metastases from colo-rectal cancer.

Two clinical research fellows were successful supported (Dr. Joanna MacKenzie from the University of Edinburgh and Dr. William Hunter from University of Manitoba).

DIVISION OF RADIATION ONCOLOGY

PROGRAM

Radiation therapy (RT) may be used as (1) the primary curative cancer treatment (e.g. for patients with cervix or head and neck cancer); (2) organ conservation (e.g. lumpectomy plus radiation therapy instead of mastectomy or a single brachytherapy outpatient procedure instead of radical prostatectomy); or the palliation of symptoms from cancer spread (e.g. to relieve pain from bone metastases, or neurologic symptoms from brain metastases or spinal cord compression). Radiation therapy is also beneficial for some non-malignant conditions such as painful fibromatosis, heterotopic ossification following hip surgery, recurrent keloid and Graves' ophthalmopathy.

Division members provide oncologic consultations, and for those patients with indications for radiation therapy, the prescription and supervision of treatment through the three cancer centers providing care to patients across Southern Alberta. In addition, TBCC is a provincial resource for patients requiring total body irradiation as a conditioning regimen prior to bone marrow transplant, RT services for about 25-30 pediatric patients with cancer per year and stereotactic radiosurgery through the Alberta Radiosurgery Centre serving patients with benign (AV malformations, some functional disorders, or benign tumors such as acoustic neuromas) or malignant CNS lesions. In 2014-2015 there were 410 courses of radiation therapy provided at the JACC and 3323 courses provided at the TBCC including 178 patients treated solely with brachytherapy.

Appropriate patient selection, treatment planning and treatment delivery is highly dependent upon close communication and collaboration with colleagues in the Division of Medical Physics, the Department of Radiation Therapy, nursing and clerical staff.

Innovations and practice changes in the past year have included:

First delivery of curative-intent SBRT for patients with lung cancer at the CACC and JACC. Expansion of SBRT for patients with oligo-metastatic and primary liver cancer including hosting a two day, hands-on, interdisciplinary teaching seminar to assist colleagues at the University of Alberta/Cross Cancer Institute to adopt liver SBRT into practice.

Adoption of field-in-field RT techniques for all patients receiving adjuvant RT for breast cancer. This improves dose homogeneity and as a result, reduces side-effects and improves quality of life after RT.

Expansion, standardization and improved documentation of regular peer-review of RT treatment plans as a consequence of a project lead by Clinical Research Fellow Dr. J MacKenzie.

Knowledge translation by supporting colleagues from the University of Manitoba/Cancer Care Manitoba to adopt the TBCC visually-monitored Deep Inspiration Breath Hold technique. This is a pragmatic approach that significantly reduces heart exposure during RT for patients with left-sided breast cancer.

DIVISION OF RADIATION ONCOLOGY

AWARDS

- Doll, C. Preceptor of the Year Award, from the Radiation Oncology Residents, July 2014.
- Husain, S. Department of Oncology Innovation Award, 2014. For work to implement the permanent breast seed implant program. This was a joint award with colleagues in Medical Physics and Radiation Therapy.
- MacKinnon, J. Quality of Life Award, June 2015. Awarded by the Radiation Oncology Residents to the faculty member whose efforts in teaching or service most improved the quality of the residents' experience.
- Olivotto, I. Preceptor of the Year Award, from the Radiation Oncology Residents, June 2015.
- Phan, T. Quality of Life Award, July 2014. Awarded by the Radiation Oncology Residents to the faculty member whose efforts in teaching or service most improved the quality of the residents' experience.

DIVISION OF SURGICAL ONCOLOGY

DIVISION HEAD

J. Gregory McKinnon, MD, FRCSC

DIVISION HIGHLIGHTS

The division is pleased to report the successful recruitment of Dr. Antoine Bouchard-Fortier as a full time surgical oncologist. His role will be clinical and academic with an emphasis on breast and advanced gastrointestinal cancer. Although Dr. Bouchard-Fortier will be located in the Foothills Hospital we hope and expect to eventually attract full participation in the Department of Oncology. In addition, the Department of Surgery recruited Dr. Michael Monument, a researcher and expert in soft tissue sarcoma. Dr. Monument is expected to move to a full time position and is also building a research program. Three other members of the Department of Surgery who have a strong role in cancer treatment will be expected to be cross-appointed to Oncology in the near future. More recruitment is now possible because of an important investment in resources for operative treatment of cancer patients in the Calgary Zone. This important upgrade of OR time is leading to improved wait times, extra recruitment and concomitant program development.

CURRENT ISSUES

The section has struggled to engage the provincial plan for comprehensive cancer care, particularly with the uncertainty of the building of a new Calgary cancer center. In the meantime, program building is ongoing with progress made in a number of areas. Going forward, the resurrection of building plans at the Foothills campus appears to be an encouraging development. One of the main challenges in the near future will be protection of new recruits' time to ensure appropriate academic engagement.

STRATEGIC PLANNING

The workforce plan includes new recruitment in colorectal oncologic surgery, endocrine and plastic/oncologic reconstruction.

Cancer Surgery Alberta continues to provide high quality analysable data in several areas of cancer surgery. The advent of ACATS data on wait times for cancer surgery became available in 2014. It has proven to be a valuable tool in monitoring the impact of the uplift in available OR time in Calgary.

The division plans to move forward with the development of multidisciplinary pathway driven clinical and research initiatives. Some of these will be based in the cancer center infrastructure, others not. This will require further recruitment of academic surgeons and more engagement in both provincial and zonal organization and planning.

DIVISION OF SURGICAL ONCOLOGY

RESEARCH HIGHLIGHTS

Highlights of the research year include Dr. Quan's award of a 5.7 million dollar grant from CIHR to study breast cancer in young women (the RUBY study). The RUBY study has begun to accrue patients as of July 2015. Members of the division continue to be highly active and have published over ninety peer-reviewed manuscripts in 2014 and 2015.

PROGRAM

Members of the division continue to lead the sarcoma and cutaneous tumor groups and both clinics remain the tertiary referral site in western Canada for these diseases. Dr. Quan leads the breast program in Calgary and has upgraded all of its functions by improving access, quality of outcomes and multidisciplinary engagement. Dr. Buie has spearheaded the provincial rectal cancer initiative, a PRIHS grant supported project to improve outcomes across the province. Dr. Dort continues the expansion of the head and neck cancer pathway development across the province and demonstrated significant improvement in efficiency and improved clinical outcome. He has also assumed leadership of the Alberta Cancer Strategic Clinical Network and intends to expand these improvements across many areas. Dr. Temple-Oberle has assumed provincial leadership of a breast cancer reconstruction project and is making gains in improving access to this important modality. Dr. Temple-Oberle's clinical innovation in treatment of in transit melanoma has now been approved as standard treatment in Canada (pCODR) and has been enthusiastically embraced by every melanoma centre in the country.

DIVISION OF TRANSLATIONAL RESEARCH & LABORATOIRES

DIVISION HEAD

Dr. Don Morris, Acting Scientific Director

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

EDUCATIONAL PROGRAMS

FUNDAMENTAL RESEARCH

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

GYNECOLOGIC ONCOLOGY

TRAINING PROGRAMS

UNDERGRADUATE

The gynecologic oncology service contributes to undergraduate lectures and small group sessions in the reproduction course as well as Physicianship and The Well Physician courses and provides clinical sessions for the University of Calgary clinical clerks. This year we started preceptoring every clinical clerk in the University of Calgary third year class for a “day in gynecologic oncology”.

We provided electives for 22 undergraduate medical students from across the country for two to four week electives on our clinical service.

GRADUATE

Fourth year residents from obstetrics and gynecology do three to four month blocks of clinical service on gynecologic oncology. Our service has consistently received excellent ratings from the residents. In addition, we provided gynecologic oncology electives for three visiting residents and one international medical graduate as well as preceptoring oncology experiences at the PGY1 level for residents from radiology, pathology, radiation oncology and PGY 4/5 level for medical oncology. PGY2 residents in obstetrics and gynecology joined our service and each do a one month rotation as an introduction to gynecologic oncology and colposcopy.

POSTGRADUATE

Our fellowship program is accredited by the Royal College of Physicians and Surgeons of Canada. We had six fellows in 2013/2014 and received full accreditation for our program in this reporting year during the external review by the Royal College of Physicians and Surgeons of Canada.

CONTINUING PROFESSIONAL DEVELOPMENT

All five gynecologic oncologists participated in the Royal College Maintenance of Competence Program.

EDUCATIONAL PROGRAMS

HEMATOLOGIC MALIGNANCIES & BMT (AHS PROPOSED)

TRAINING PROGRAMS

UNDERGRADUATE

Dr. Dawn Goodyear takes over from Dr. Lynn Savoie as chair of the blood course at the Cumming School of Medicine.

The members of the Division of Hematology are once again showing great support for undergraduate medical education through their commitment to providing education during Course one by their participation as lecturers, clinical core preceptors and/or small group tutors.

Two innovative exercises will be introduced to Course one for the incoming Class of 2018.

First, the benign hematology content, including hemostasis, thrombosis and thrombocytosis, will be delivered in the Flipped Classroom format. The idea is that lectures no longer happen in the classroom (as hour long didactic lessons), but rather are viewed at home via brief 10-15 minute podcasts. After viewing these podcasts, students will come to classroom to work together on problems and clinical cases. Therefore, lectures are done at home and homework is done at school, ie. "The Flipped Classroom".

Second, a reflective writing exercise will be introduced to Clinical Core, which requires students to review a clinical experience in the context of personal philosophies and experiences as well as concepts taught during the Course one curriculum. Reflective writing allows medical learners to critically analyze clinical experiences in the context of self knowledge and awareness, and has been shown to foster the development of interpersonal skills and professionalism which are essential elements of becoming a 'good' physician.

GRADUATE

POSTGRADUATE

The hematology training program received full accreditation from the Royal College of Physicians and Surgeons of Canada in February 2015.

CONTINUING PROFESSIONAL DEVELOPMENT:

Division members contribute regularly to local CME events. On the national setting, Drs. Savoie and Geddes who were members of the planning committee for the 2014 Canadian Conference of Myelodysplastic Syndromes, Dr. Savoie was member of the planning committee for the 2014 Annual Meeting of the Canadian Blood and Marrow Transplant Group. Dr. Neri was chair and organizer of the 5th Annual Myeloma Canada Scientific Meeting, October 2014, Montreal.

EDUCATIONAL PROGRAMS

A new weekly provincial myeloma education, research, and case rounds initiated in 2014, and is now video conferenced to the CCI.

MEDICAL ONCOLOGY

TRAINING PROGRAMS:

Medical Oncology Residency Training Program Report – Dr. Scot Dowden

The Medical Oncology Residency Training Program had another very successful year. The highlight of this year was the external review of the program by the Royal College of Physicians and Surgeons of Canada. We received full accreditation of the program with a glowing review. The program graduated six residents and two clinical fellows. Two of the residents have gone on to pursue fellowships, but more noteworthy is that six of the trainees have gone on to get jobs in relatively under serviced areas for which medical oncologists have been hard to recruit. Dr. Amal Imbulgouda has taken a position in Lethbridge, Dr. Hatim Karachiwala has joined Red Deer, Dr. Tehmina Asif has started in Saskatoon, Dr. Jenny Ko has joined Abbotsford, B.C. and Dr. Renee Lester has taken a position in St. John's NL. Dr. Soundous Raissouni will soon be starting in Medicine Hat. We now have six residents in the R4 and R5 years, and three fellows in clinical fellowship positions. Clinical fellowships have been established in lung, breast, sarcoma, and gastrointestinal cancers as well as a research fellowship in genitourinary tumours.

MEDICAL PHYSICS

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

PALLIATIVE MEDICINE

TRAINING PROGRAMS

UNDERGRADUATE

We supervised nine University of Calgary medical students this past year. These experiences included a first year medical student on elective, second year medical students completing Med 440 (evidence based clinical medicine course) and third year clerks taking two week electives with us.

Our palliative medicine division also accepted visiting elective medical students and we supervised a total of nine students from other universities (from across the country, University of British Columbia to University of Toronto). Each student completed a two week elective which included experiences with a hospital based consult team, as well as community experiences in hospice and long term care.

Members of our division also continue to act as preceptors in Course five small group teaching on the topics of pain and palliative care.

EDUCATIONAL PROGRAMS

GRADUATE

The Division of Palliative Medicine educates a large number of residents from different disciplines, building community capacity for palliative care delivery in primary and specialist care. In 2014-2015, the division will have trained 121 rotating residents, 74 of which hail from the Department of Family Medicine. Other trainees include residents in internal medicine, oncology, neurology, anesthesia, and physical medicine and rehabilitation. Residents are exposed to palliative care environments such as the Intensive Palliative Care Unit, Inpatient Hospital Consult Services, as well as Home Care and Hospice. Residents also receive academic teaching through weekly seminars, journal club, and rounds presentations. Through these experiences, residents gain greater confidence and ability to provide competent and compassionate palliative care to patients and families in the community as well as in hospital. In addition division members teach several academic half-days on palliative topics to residents of other disciplines.

POSTGRADUATE

The University of Calgary Palliative Medicine Residency Program currently had two trainees who completed training in the 2014-2015 academic year, one from the Department of Family Medicine and one from the Department of Critical Care Medicine. Under Dr. Pawlik's direction, the program successfully passed accreditation in 2015, from both the CFPC and RCPSC.

CONTINUING PROFESSIONAL DEVELOPMENT

The Calgary palliative care group has many opportunities to fulfill their CME requirements, which are approved by both the CCFP and RCPSC. The palliative care fellows present at the advanced practice rounds every month with review of topics, such as existential suffering, bowel obstruction and depression. On the first Friday of each month we hold journal rounds for the palliative physician group. M&M rounds are held on the last Friday of the month, which allows for detailed case learning from all of the various programs (i.e. hospice, homecare, consulting teams, Intensive Palliative Care Unit).

We also contribute to CME by teaching on palliative medicine topic, in several CME events to other disciplines and professions each year.

PEDIATRIC ONCOLOGY

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

EDUCATIONAL PROGRAMS

PREVENTIVE ONCOLOGY

TRAINING PROGRAMS

UNDERGRADUATE

Our faculty members are involved in teaching in the medical undergraduate program at the University of Calgary as well as cancer biology undergraduate courses in the Faculty of Science. Dr. Kopciuk is a lecturer in statistical genetics (CMMB 413 Statistical Genetics: How useful is CMMB without the Math?).

GRADUATE

Our faculty members participate in the teaching of the epidemiology courses in the Department of Community Health Sciences, Cumming School of Medicine. Dr. Kopciuk is a co-instructor for a Longitudinal Data Analysis course in the Faculty of Math and Statistics. Dr. Vallance is a course instructor for the Master of Health Studies program at Athabasca University. Dr. Ashbury teaches a Qualitative Research Methods course at Henley Business School/Rotman School of Business.

PSYCHOSOCIAL ONCOLOGY

TRAINING PROGRAMS

UNDERGRADUATE

Four Honours students, five summer students; three preceptor/mentoring

GRADUATE

One MSW clinical intern, one psychology (PhD) resident, seven students in masters and seven in PhD programs

POSTGRADUATE

Three postdoctoral fellows, two clinical fellows

MEDICAL STUDENTS

Ten Clerks on a psychiatry (chronic disease) setting

CONTINUING PROFESSIONAL DEVELOPMENT

The Department of Psychosocial Resources has developed a comprehensive internal program of educational activity which includes Psychosocial Oncology Rounds - Clinical Case Presentations, Oncology Research Seminars and a Journal Club. The meetings, organized and led by Dr. Chee-Ping Tsai and Dr. Laura Labelle, are held on Monday afternoons and all

EDUCATIONAL PROGRAMS

members of the team are encouraged to attend and present. In addition, invited guest speakers external to our department, have presented on topics relevant to our work. Between July 2014 and June 2015, we have hosted: Dr. Stewart Longman, Rehabilitation Psychologist, Alberta Health Services; Janet Hettler, RN, MN, Manager, Crisis Nursery, Children's Cottage Society; John Brosz, Visualization Research Coordinator, Taylor Family Digital Library, University of Calgary; Dr. Jessa Landmann, Naturopathic doctor; and Dr. Guillaume Millet, Professor, Human Performance Lab, University of Calgary.

Department members also continued to present their research at relevant events over the year. A summary of this educational activity is provided further below (presentations, published abstracts)

RADIATION ONCOLOGY

UNDERGRADUATE

Medical undergraduate students can elect one to four week rotations within the division. In 2014-2015, a change was made to the oncology elective at the University of Calgary. Students electing two weeks in oncology spend one week in radiation oncology and one in medical oncology. This led to an increase of students in the division from six in the prior year to 18 rotating students in the current year.

GRADUATE

Twelve faculty members supported eight MSc and eight PhD candidates as a member of their thesis committee or as supervisor of projects.

POSTGRADUATE

The division supported eight residents working through a five-year, fully-accredited, Royal College of Physicians and Surgeons training program in radiation oncology. The Program Director is Dr. Michael Sia. University of Calgary candidates presenting to their final examinations have had a 100% pass rate since the training program's inception in 2001. Divisional members were pleased to welcome Dr. Rosanna Yeung as a professional peer following her success at the June 2015 examinations. Faculty at the JACC welcomed a rotating resident in 2014-2015 with an expansion to the numbers rotating in 2015-2016. For residents starting training as of July 2014, the Royal College mandates a formal rotation within a smaller RT centre to expand the residents' clinical experience and to provide insights about the benefits, challenges and differences of practicing in a smaller centre as compared to the primary training centre in Calgary.

EDUCATIONAL PROGRAMS

In addition, division members provided training in the Division of Radiation Oncology for 16 learners undertaking palliative medicine, medical oncology, gynecologic oncology and surgical oncology resident or fellow training through the University of Calgary.

The division has supported a Clinical Research Fellowship Program since 2007. In 2014-2015, two fellows worked within the division, Dr. Joanna MacKenzie and Dr. William Hunter.

SURGICAL ONCOLOGY

TRAINING PROGRAMS

GRADUATE

Dr. Lloyd Mack continues as Program Director for the Section of General Surgery.

POSTGRADUATE

Dr. Temple continues his role of Program Director for the Section of Surgical Oncology. The Surgical Oncology Program was successfully certified by the Royal College in 2015 with reciprocal recognition by the American Board of Surgery and the ACGME. One fellow graduated in 2015 and has taken a position here at the University of Calgary. The program remains in the international match for approved programs and continues to receive large numbers of Canadian and international applicants.

Dr. Temple-Oberle continues to oversee the fellowship in oncologic reconstruction and successfully graduated Dr. M. Baretto in June 2015. Dr. Baretto plans to stay on for another year of extra fellowship.

TRANSLATIONAL RESEARCH & LABORATORIES

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

FUTURE INITIATIVES

The most significant future initiative that will take place in 2015-2016 will be a new department head that will also function as a medical director and the medical lead for the new cancer centre project. As I am writing this report a letter of offer will be signed so that an appointment is completed for these roles.

The second initiative that will be front and centre for the clinical zone department in 2015-2016 is the planning and design for a new cancer centre on lot 7 of the Foothills site. With the announcement of the new government supporting the building of the new cancer centre on the Foothills site a lot of planning has gone into preparing for this to be done at the Foothills site. Significant input is still required from medical leaders concerning the clinical service delivery model, the interaction between the zone and the cancer centre so that this is seen to be fully integrated, and the operational readiness as well as impact of the cancer centre on our budgets.

Other future initiatives that will need to be addressed by the new department head include the hiring of a translational laboratory scientific director, continued development of leaders so that we are stable and have a succession of individuals available for roles, and the momentum that is necessary to drive clinical performance with targets that are pragmatic and reasonable. The continued struggle that the department has had to address its clinical targets with space and resource constraints is the focus of the five year capacity plan that was put forward to Dr. Francois Belanger in August 2015.

Peter S. Craighead, MBChB, FFRadT, FRCPC

Professor and Head, Department of Oncology

Cumming School of Medicine, University of Calgary

Department Head, Clinical Department of Oncology, Calgary Zone

Medical Director, Tom Baker Cancer Centre

CancerControl Alberta, Alberta Health Services

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
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FUNDAMENTAL RESEARCH

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

GYNECOLOGIC ONCOLOGY

Banerjee, R.	Glaze, S.	2014-2015	TBCC	Urogenital symptoms related to treatment of cervical carcinoma: Short and long term toxicities of survivors.	\$10,000
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	AMGEN	AMG 386 (1129): A phase 3, randomized, double-blind trial of weekly Paclitaxel plus AMG 386 or placebo in women with recurrent partially platinum sensitive or resistant epithelial ovarian, primary peritoneal or fallopian tube cancers.	\$17,366.67
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	NCIC	IND 206: A phase II study of sunitinib or temsirolimus in patients with advanced rare tumours.	\$750
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	NCIC	NCIC OV 19/ICON 7: A randomized, two arm, multicentre gynecologic cancer intergroup trial adding bevacizumab to standard chemotherapy (carboplatin and paclitaxel) in patients with epithelial ovarian cancers.	\$4,505.55

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	NCIC	NCIC CX 5: A randomized trial comparing radical hysterectomy and pelvic node dissection vs simple hysterectomy and pelvic node dissection in patients with low risk early stage cervical cancer.	\$3,500
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	NCIC	NCIC OV 18: A randomized trial of concurrent cediranib (AZD 2171) with platinum based chemotherapy and maintenance cediranib in women with platinum sensitive relapsed ovarian cancer.	\$5,429.83
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	NCIC	PHL 085/NCIC 9209: A phase II study of ipilimumab in women with recurrent or metastatic HPV related cervical carcinoma of either squamous or adenocarcinoma histologies.	\$5,008.50
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Endocyte	Protocol EC-FV-06: A randomized double-blind phase 3 trial comparing EC145 and pegylated liposomal doxorubicin (PLD/DOXIL/CAELYX) in combination versus pld in participants with platinum-resistant ovarian cancer.	\$150,300

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Incyte	Incyte – INCB 24360-210: A randomized, open-label, phase 2 study of the IDO inhibitor INCB024360 versus tamoxifen for subjects with biochemical – recurrent – only epithelial ovarian cancer, primary peritoneal carcinoma, or fallopian tube cancer following complete remission with first-line chemotherapy.	\$20,129.37
Ghatage, P.	Doll, C. Koebel, M. Lees-Miller, S.	2014-2015	HIS-CRIO	PIK3CA: Mutation and associated pathway activation status and survival in patients with cervical cancer: Quantifying the risk and testing the solution.	\$0.00
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Amgen	AMGEN 508: A phase 3, randomized, double-blind trial of weekly paclitaxel plus AMF 386 or placebo in women with recurrent partially platinum sensitive or resistant epithelial ovarian, primary peritoneal or fallopian tube cancers.	\$3,033.75
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Tesaro	Tesaro: A phase 3 randomized double-blind trial of maintenance with niraparib versus placebo in patients with platinum sensitive ovarian cancer.	\$3,950

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Clovis	Clovis Ariel 2 CO-338-017: A phase 2, open-label study of rucaparib in patients with platinum-sensitive, relapsed, high-grade epithelial ovarian, fallopian tube, or primary peritoneal cancer.	\$5,000
Ghatage, P.	Nation, J. Chu, P. Nelson, G. Glaze, S.	2014-2015	Clovis	Clovis Ariel 3 CO-338-014: A multicentre, randomized, double-blind, placebo-controlled phase 3 study of rucaparib as switch maintenance following platinum-based chemotherapy in patients with platinum-sensitive, high-grade serous or endometrioid epithelial ovarian, primary peritoneal or fallopian tube cancer.	\$8,000
Nelson, G.	Nation, J. Duggan, M.	2014-2015	Gyne Onc Division / Dept of Pathology	Post colposcopy management of ASCUS and LSIL pap tests (PALS) randomized controlled trial: A pilot study of 100 women.	\$0.00
Nelson, G.	Gramlich L. (University of Alberta)	2014-2015	AIHS- PRIHS	Enhancing Patients' Recovery After Surgery (ERAS): Strategy to transform care and maximize the expected value.	\$150,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
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HEMATOLOGIC MALIGNANCIES & BMT (AHS PROPOSED)

Bahlis, N.		2013-2017	CIHR	Bortezomib mediated BRCAness in Myeloma cells: novel therapeutic approach combining PARP1-2 and 26S proteasome inhibitors.	\$180,000
Daly, A.		2014	Calgary Health Trust Division of Hematology	Mechanisms of NK cell activation in haploidentical hematopoietic cell transplantation. Division of Hematology.	\$10,000
Jiminez-Zepeda, V.	Venner, C. Jiminez-Zepeda, V.	2014-2016	ACF	Provincial database for plasma cell dyscrasias.	\$50,000
Lee, A.	Lee, A. Poon, M.C.	2014-2016	Canadian Hemophilia Society	HR-pQCT: a novel imaging technology detects microarchitectural skeletal pathology in hemophilia patients.	\$14,300
Lee, A.	Lee, A. Poon, M.C.	2013-2015	Calgary Laboratory Services	Potential role of thromboelastography (TEG) in DDAVP response monitoring for von Willebrand disease and mild hemophilia A	\$3,080
Lee, A.	Lee, A. Poon, M.C.	2012-2014	Canadian Hemophilia Society	In vivo assessment of bone microarchitecture using HR-pQCT in hemophilia patients: Insight into etiology of decreased BMD in this patient population	\$25,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Owen, C.		2014	Calgary Health Trust Division of Hematology	Molecular analysis of light-chain switch and transformation to aggressive lymphoma from follicular lymphoma.	\$10,800
Poon, M.C. Skeith, L.		2014	Calgary Health Trust Division of Hematology	Pregnancy loss in von Willebrand disease: A multi-centre cohort study.	\$14,558
Rydz, N. Goodyear, D.		2014-2015	Calgary Health Trust Division of Hematology	Canadian VWD (von Willebrand Disease) and Angiodysplasia Survey.	\$14,351
Shafey, M.		2014	ACF	Infusional Gemcitabine and High-dose Melphalan Conditioning Prior to Autologous Stem Cell Transplantation for Patients with Relapsed/Refractory Lymphoma	\$194,000
Storek, J.		2014-2019	Buckley Family Foundation	Predictors of GVHD	\$13,600
Storek, J.		2014-2019	ACF	Preemptive Therapy of GVHD	\$2,120
Storek, J.		2014-2017	Calgary Health Trust Division of Hematology	Identification of patients at high risk of developing posttransplant lymphoproliferative disorder (PTLD) and leukemia relapse using Epstein-Barr virus-specific T cells and NK cells	\$11,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Storek, J.		2013-2016	AIHS	Toward Improved Outcomes of ATG-Conditioned Hematopoietic Cell Transplantation	\$125,000
Storek, J.		2012-2015	CIHR	Biomarkers of Chronic Graft-vs-Host Disease	\$12,500
Street, L.	Meatherall, B.	2014	Department of Medicine	Department of Medicine-Research Development Fund Award	\$4,500
MEDICAL ONCOLOGY					
Bonni, S.	Morris, D.	2014 – 2016	Breast Cancer Society of Canada	Clinical pathological determinants of neo-adjuvant treatment response in breast cancer	\$30,000 (\$15,000/yr.)
Cheng, T.		2012 - Present	ACF	An Alberta-wide Database and Registry of Patients Diagnosed with Melanoma in Alberta.	\$98,400 (\$32,000/yr.)
Easaw, J.		2013 - 2016	ACF	Alyson Woloshyn Fellowship Award Metabolomic analysis to predict recurrence and pseudoprogression in high grade glioma	\$80,000 (\$26,000/yr.)
Easaw, J.		2012 – 2015	ACF	Enhanced Surveillance Project	\$123,906 (\$41,302/yr.)
Friedenreich, C.	Morris, D.	2013 – 2016	CIHR	Alberta physical activity and breast cancer prevention trial: ancillary study examining the effect of exercise on oxidative stress, telomere length and	\$202,830 (\$67,610/yr.)

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
				DNA methylation	
Friedenreich, C.	Morris, D.	2013 – 2015	Canadian Cancer Society	Alberta physical activity (ALPHA) and breast cancer prevention trial: An ancillary study examining anti-inflammatory markers and oxidative stress	\$166,351 (\$83,175/yr.)
Heng, D.		2014 – 2015	Kidney Cancer Association	International mRCC Database Consortium Tissue Core: the next generation of studies,	\$100,000 (\$50,000/yr.)
Heng, D.		2012 - 2015	CIHR	Personalized Medicine Lead, Kidney Cancer Research Network of Canada	\$600,000 (\$200,000/yr.)
Hyndman, M.E.	Morris, D.	2014 - 2016	AIHS	Innovative diagnostics to improve the management of urothelial carcinoma,	\$750,000 (\$250,000/yr.)
Lau, H.	McIntyre, J.B. Hao, D.	2014-2015	ACF	Identification of MYB-NFIB fusion gene in adenoid cystic carcinoma FFPE tissue from patients treated in Alberta.	\$38,216
Morris, D.	Stewart, D.	2013 – 2015	Cancer Research Society Operating Grant	Reovirus as a viable therapeutic option to target therapy resistance of multiple myeloma.	\$120,000 (\$60,000/yr.)
Morris, D.		2010 – 2014	Breast Cancer Society of Canada	A proposal to develop a molecular classification algorithm for Calgary breast cancer patients.	\$47,350 (\$11,837/yr.)

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Morris, D.		2015	ACF Summer Studentship a Rahul Arora	A novel strategy for the treatment of lung cancer: oncolytic viruses augmented by immune check point inhibition.	\$5,200
Morris, D.		2014 – 2016	Breast Cancer Society of Canada	Oncolytic viral therapy augmented by immune check point inhibition as a novel treatment strategy for breast cancer.	\$40,000 (\$20,000/yr.)
Morris, D.		2013 – 2015	Cancer Research Society	Reovirus as a viable therapeutic option to target therapy resistance of multiple myeloma.	\$120,000 (\$40,000/yr.)
Morris, D.		2013 – 2016	AIHS CRIO grant.	Immunotherapy for cancer – repurposing targeted therapies with oncolytic viruses.	\$750,000 (\$250,000/yr.)
Morris, D.	Bebb, G.	2012 – 2015	University of Calgary	Strategic initiative for the treatment of lung cancer in Alberta	\$1,200,000 (\$400,000/yr.)
Morris, D.		2011 – 2014	Canadian Breast Cancer Foundation	Oncolytic viral immunotherapy for breast cancer.	\$375,000 (\$125,000/yr.)
Riabowol, K.	Morris, D.	2014 – 2016	AIHS	Developing and testing a new treatment for oral squamous cell carcinoma	\$750,000 (\$375,000/yr.)
Robbins, S.	Morris, D.	2013 – 2015	ACF Transition Funding Opportunity	Applied precision cancer medicine	\$195,500 (\$97,750/yr.)

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Stewart, D.		2007-2014	Hoffman La Roche	FDG-PET-Stratified R-DICEP and R-BEAM/ASCT for Diffuse Large B-Cell Lymphoma	\$652,154 (\$93164.85 over 2007 - 2014)
Stewart, D.		2012 – 2015	ACF	Establishment of a Lymphoma Clinical Outcomes Unit	\$300,000 (\$100,000/yr.)
Stewart, D.		2014 – 2015	AIHS	Metabolomic profiling of follicular lymphoma	\$15,000
Stewart, D		2014 – 2015	Division of Hematology and Hematologic Malignancies Calgary Health Trust	Follicular lymphoma: Identifying a “Proliferative Molecular Signature” as a predictor of aggressive clinical disease and its validation through routine immune-Histochemistry techniques	\$15,000
Storek, J.	Morris, D.	2013 – 2015	AIHS	Toward improved outcomes of ATG-conditioned (Albertan) hematopoietic cell transplantation	\$790,000 (\$395,000/yr.)
Tam, V.		2012 – 2014	University of Calgary Starter Grant	Development of Canadian Core Competencies in Oncology for Undergraduate and Postgraduate Medical Education: A survey of existing oncology curricula used by Canadian medical schools and residency programs.	\$5,000 (\$2,500/yr.)
Tang, P.		2013 - 2015	ACF	Assessment of Clinical Trial Endpoints in Cancer Patients	\$5,250 (\$2,625 over 2 years)

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
White, J.	Stewart, D.	2014 – 2015	ACF	Cardiotoxicity Prevention Research Investigator (CAPRI) Group	\$20,000
PALLIATIVE MEDICINE					
Bremault-Phillips, S.	Borneman, T. Brett-Maclean, P. Ferrell, B. Magnus, R. Olson, J. Oneschuk, D. Puchalski, C.M. Sinclair, S.	2014-2015	Covenant Health, Faith, Spirituality and Health Research Grant	Use of the FICA Tool: Integrating Spirituality as a Key Component of Care by Inter-professional Palliative and Geriatric Hospital-based Teams.	\$25,000
Cory, S.	Horst, G. Sinclair, S.	2014-2017	CPAC Cultural Tools Project with the Canadian Virtual Hospice (CVH).	Canadian Partnership against Cancer.	\$60,000
Hagen, N.	Fassbender, K. Simon, J.	2013-2018	AIHS-CRIO Program Grant	Advance Care Planning and Goals of Care Alberta: a population based knowledge translation intervention study.	\$500,000
Kaasalainen, S. Sussman, T	Brazil, K. Kelley, ML. Sinclair, S. Thompson, G. Venturato, L. Yu, J.	2015-2017	Network of Centers of Excellence, Technology Evaluation in the Elderly Network	Improving Palliative Care in Long Term Care Homes Using Participatory Action Research.	\$303,760

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Myers, J.	Downar, J. Gill, A. Hamstra, S. Herx, L. Jeney, C. Krueger, P. Oneschuk, D. Schroder, C. Seccareccia, D. Sirianni G. Taniguchi, A. Tucker, T. Webster, F.	2012-2014	Department of Family & Community Medicine Educational Development Fund Grant, University of Toronto	Developing and validating a set of entrustable professional activities for palliative medicine: Phase One in designing a summative postgraduate learner assessment.	\$14,928
Read, P.L. Spice, R.	Sinnarajah, A.	2015	Technology Evaluation in the Elderly Network	Web-Based Videoconferencing (WBVC) for Rural Palliative Care Consultation in the Home.	\$20,000
Simon, J	Abdul-Razzak, A.	2012-2014	Technology Evaluation in the Elderly Network	"Talk to Me": A Mixed Methods Study on Patients' Views on Physician Behaviors that Influence the Quality of Advance Care Planning Communication (project completed as part of requirements for MSc in Health Research Methodology).	\$11,610.57 * Amount carried over
Sinclair, S.	Civitella, M. Butler, M. Hall, O.	2013-2015	ACF	Implementing and Evaluating a Provincial Cancer Care Healing Arts Program.	\$540,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Sinclair, S.	Cupchik, J	2015 - 2017	Eyes High Postdoctoral Funding Competition	University of Calgary	\$50,000
You, J.	Simon, J	2014	Techvaluenet	Improving DECISION-making about goals of care for hospitalized, elderly patients: a “multi-incubator unit” study (iDECIDE).	\$12,569
PEDIATRIC ONCOLOGY					
<i>NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR</i>					
PREVENTATIVE ONCOLOGY					
Ashbury, F.	Evans, W. Smith, A. Pun, J.	2013-2014	Canada Health Infoway	Evaluation of the implementation of an oncology information system in four ambulatory cancer care practice settings.	\$77,000
Bell, R.	Csizmadi, I. Devolin, M. Venu, J. Johansen, S. Mayan, M. McInnis, A.M. Nerenberg, K. Rueda-Clausen, C. Sharma, A. Toth, E. Tyminske, S. Yuan, Y.	2013-2018	AIHS	Promoting appropriate maternal body weight in pregnancy and postpartum through healthy dietary intake.	\$500,000

GRANTS

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Briollais, L.	Choi, Y. H. (Co-Pi) Kopciuk, K. (Co-PI) McLaughlin, J. Cotterchio, M. Hoch, J. Green, R. Parfrey, P. Newcomb, P.	2013-2016	CIHR	Development, application and evaluation of multistate models for risk estimation and screening interventions in Lynch Syndrome families and familial colorectal cancer type X families.	\$79,111
Brockton, N.T.	Bathe, O. Kopciuk, K. Magliocco, A. Hanley, D.	2010-2015	ACF	The Role of Vitamin D and Inflammation in Colorectal Cancer Metastases (CR2L).	\$108,649
Brockton, N.T.	Friedenreich, C.M. Magliocco, A.M. Cook, L. Vogel, H. Shemanko, C. Hanley, D. Paterson, A.	2008-2019	ACF	Breast Cancer to Bone Metastases (B2B) Research Program: A multidisciplinary approach to the investigation of bone metastasis of breast cancer.	\$252,323
Brockton, N.T.	Friedenreich, C.M.	2009-2015	ACF	PHRU Priority Funding Request 2009-2012- Priority #4 - Research Biospecimen Processing Core Facility and Equipment.	\$214,046
Campbell, K.L.	Johnson, J.D. Little, J.P. Eaves, C.J. Kuusk, U. Van Laeken, N.Y. Csizmadi, I. Dinu, I.	2013-2015	CCSRI	The impact of lifestyle on the breast tissue environment.	\$100,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
	Kannan, N.				
Courneya, K.S.	Gill, S. Meyer, R. Friedenreich, C.M. Tu, D. Brundage, M. Au, H.J. Booth, C. O'Brien, P.	2007-2017	NCIC	A phase III study of the impact of a physical activity program on disease-free survival in patients with early stage colon cancer: A randomized controlled trial (CHALLENGE).	\$420,539
Friedenreich, C.M.	Courneya, K.S. (Co-PI) Coulos-Reed, N. Mackey, J. Bell, G. Yasui, Y. Vallance, J. McNeely, M. Yuan, Y. Lau, D.	2011-2016	CIHR	CIHR Team in physical activity: Alberta moving beyond breast cancer study. (AMBER).	\$420,539
Friedenreich, C.M.	Kopciuk, K.	2009-2015	ACF	PHRU Priority funding request 2009-2012-Priority #1 - Population Health Research Unit.	\$140,538
Friedenreich, C.M.	Kopciuk, K.	2009-2015	ACF	PHRU Priority funding request 2009-2012-Priority #2 - Data Support Unit Infrastructure and Equipment.	\$131,131
Friedenreich, C.M.		2008-2016	AIHS	Health Senior Scholar - physical activity in cancer control: from observational to	\$162,143

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
				intervention research.	
Friedenreich, C.M.	Courneya, K.S. (Co-PI) Stanczyk, F.Z. Bistriz, A. Yasui, Y. Lynch, B.M. Cameron, B.	2011-2015	CCSRI	Breast cancer and exercise trial in Alberta ancillary study: Long-term effects of a year-long exercise program in postmenopausal women.	\$79,178
Friedenreich, C.M.	Beattie, T. Lees-Miller, S. King, W. Courneya, K.S. Morris, D. McIntyre, J. Poulin, M. Pialoux, V. Conroy, S.	2013-2016	CIHR	ALPHA Trial ancillary study: Effect of exercise on oxidative stress, telomere length and DNA methylation.	\$202,830
Friedenreich, C.M.	Brockton, N.T. Kopciuk, K. Kelemen, L. Csizmadi, I. Robson, P. Morris, D.	2014-2016	ACF	Enhancing capacity for lifestyle and cancer epidemiology in Alberta. Alberta Cancer Foundation Foundational Infrastructure 2013.	\$195,792
Friedenreich, C.M.	Courneya, K.S. Morris, D. Poulin, M. Pialoux, V. Yasui, Y. Woolcott, C.	2013-2015	CCSRI	Alberta physical activity (ALPHA) and breast cancer prevention trial: An ancillary study examining anti-inflammatory markers and oxidative stress.	\$83,175

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Friedenreich, C.M.	Brenner, D. (Co-PI) Demers, P. King, W. Nutall, R. Villeneuve, P. Franco, E. Hystad, P. Walter, S. De, P.	2014-2018	CCSRI	Quantifying the cancer incidence burden due to lifestyle and environment in Canada- The Canadian population attributable risk of cancer project (ComPARE).	\$195,573
Kopciuk, K.	Friedenreich, C.M.	2008-2015	ACF	Division of Population Health and Information; Priority Funding I Request 2007 - Capacity building for high throughput data analysis	\$16,396
McCormack, G.	Friedenreich, C.M. Csizmadi, I. Nettel-Aguirre, A. Sandalack, B. McLaren, L. Potestio, M. Raya, A.	2013-2016	CIHR	Pathways to weight: The influence of neighborhood environments on the weight status of adults.	\$113,674
McGregor, S.E.	Hilsden, R. Yang, H. Rostom, A. Coderre, S. Dupre, M. Buie, D. Saunders, C. Shack, L.	2011-2014	Alberta's Health Research Innovation Strategy Emerging Team Grant Program University of Calgary and Alberta Health	Optimizing population-based Colorectal Cancer Screening Team.	\$134,785

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
			Services		
Morris, D.	Thirukkumarn, C. Kopciuk, K. (Collaborator)	2014- 2015	Breast Cancer Society of Canada	Oncolytic Viral Therapy Augmented By Immune Check Point Inhibition As A Novel Treatment Strategy For Breast Cancer	\$40,000
Narod, S.	Quan, M.L. Olivotto, I. Friedenreich, C.M. Baxter, N. Metcalf, K. Warner, E. Akbari, M.	2014- 2019	Canadian Breast Cancer Foundation- CIHR	Towards better outcomes for young women with breast cancer: A Pan-canadian collaborative.	\$1,139,060
Poulin, M.J.	Eskes, G.E. Friedenreich, C.M. Hill, M.D. Hogan, D.B. Longman, R. S.	2009- 2015	CIHR	Effects of exercise on cerebrovascular reserve in older adults: Role in the prevention of age-related cognitive decline.	\$112,320
Sabiston, C.M.	Vallance, J. (Co-PI) Ahmed, R. Brunet, J. Campbell, K. Courneya, K.S. Culos-Reed, S.N. Faulkner, G. Friedenreich, C.M. Gauvin, L. Jones, J. Karvinen, K. Keats, M. McGowan, E.	2015- 2020	Canadian Breast Cancer Foundation	Improving physical activity and reducing sedentary behaviour among breast cancer survivors: MOVING research into practice.	\$75,772

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
	Rennie, H. Santa Mina, D.				
Vallance, J.	McGrath, R. Winkler, E.	2013-2014	Athabasca University	Objectively assessed physical activity and sedentary time among adults living in Southeastern Alberta: Examining the rural and urban divide.	\$1,139,060
Vallance, J.	Friedenreich, C.M. Sabiston, C. Sauve, M.	2013-2014	CIHR	Cafe scientifique program. Cancer: what's physical activity got to do with it?	\$75,772
Vallance, J.		2013-2014	Cancer Foundation for Innovation	Examining distance-based health promotion in the chronic disease context.	\$65,000
Vallance, J.	Parliament, M. Yurick, J. Culos-Reed, N.	2014-2015	M.S.I Foundation	Partnering to develop an Alberta cancer exercise program: evaluation of impact indicators.	\$214,046
PSYCHOSOCIAL ONCOLOGY					
Alibhai, S.M.H.	Culos-Reed, S.N. Krahn, M. Matthew, A. Ritvo, P. Sabiston, C. Santa Mina, D. Segal R, Tomlinson, G. Warde, P.	2013 – 2015	Prostate Cancer Canada, Movember Discovery Grant	A Phase II RCT and economic analysis of three exercise delivery methods in men with prostate cancer on ADT	\$97,898
Alibhai S.M.H.	Culos-Reed, S.N. Krahn, M.	2013 – 2018	CIHR	An RCT and economic analysis of three exercise delivery methods in men	\$156,218

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
	Lukka, A. Matthew, A. Ritvo, P. Sabiston, C. Santa Mina, D. Segal, R. Tomlinson, G. Warde, P.			with prostate cancer on ADT. *Delayed start until 2015 and completion of the Phase II study.	
Campbell, T.S.	Carlson, L.E. Simpson, J.S. Ancoli-Israel, S. Savard, J.	2012-2015	Canadian Cancer Society Research Institute Innovation Grant,	A randomized controlled trial of light therapy on biomarkers, sleep/wake activity and quality of life in individuals with post-treatment cancer-related fatigue.	\$97,529
Campbell, T.S.		2014 – 2015	Faculty of Arts, University of Calgary	Adherence to complex medical regimens.	\$20,000
Campbell, T.S. (Substudy PI)	Tonelli, M. Hemmelgarn, B. Manns, B.	2014-2017	AIHS	Improving the efficient and equitable care of patients with chronic medical conditions: Interdisciplinary Chronic Disease Collaboration (ICDC) (Principal Investigators) Title of substudy: A double-blind pilot RCT of the efficacy of education delivered using motivational counseling style intervention to improve statin adherence in a community sample of poorly adherent patients.	\$16,666
Carlson, L.E.		2008-2016	Alberta Heritage Foundation	Medical Research Health Scholar Award. Salary support and research allowance.	\$109,375
Carlson, L.E.		2012-2017 Endow	Enbridge Inc., Canadian	Enbridge Research Chair in Psychosocial Oncology.	\$150,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
		ment	Cancer Society (Alberta, NWT Division) and Alberta Cancer Foundation.		
Classen, C.	Barbera, L. Chivers, M. Robinson, J. et al.	2012-2016	Canadian Cancer Society Research Institute	A randomized controlled trial of an online support group for sexual distress due to gynecologic cancer.	-
Cory, S.	Horst, G. Sinclair, S. Thomas, B.C. et al.	2013-2017	Canadian Partnership Against Cancer – Palliative and End-of-Life Care Initiative	Knowledge tools to address national gaps: Cultural and religious perspectives tool.	-
Courneya, K.S.	Bell, G. Culos-Reed, S.N. Friedenreich, C. McNeely, M. Vallance, J. Yasui, Y.	2010-2015	Canadian Institute of Health Research, Team Grant	Cohort study of physical activity and health - related fitness in breast cancer survivors: The moving beyond breast cancer study.	-
Culos-Reed, S.N.		2015	Totem Charitable Foundation	Thrive Centre exercise equipment upgrades.	\$50,000
Culos-Reed, S.N.		2013-2015	Canadian Breast Cancer Foundation	Dissemination of an Exercise and Wellness Program for Women with Breast Cancer.	\$74,750
Culos-Reed, S.N.	McNeely, M.L. Yurick, J.	2015	Alberta Cancer Foundation (AHS), Enhanced Care	Alberta Cancer Exercise (ACE) Program.	\$400,000
Culos-Reed, S.N.		2014–2016	Wings of Hope Breast Cancer Foundation	Exercise and wellness program for women living with breast cancer.	\$50,000

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Culos-Reed, S.N.	Guilcher, G. Chamorro-Vina, C. Khan, F. Mazil, K.	2012– 2015	Alberta Children's Hospital Foundation: Childhood Care Collaborative.	Effect of a physical exercise program on the immune system recovery and quality of life in pediatric patients undergoing autologous stem cell transplantation	\$20,942
Culos-Reed, S.N.	Leach, H.	2014– 2016	Canadian Breast Cancer Foundation	12 - week Beauty Satellite Program at Saddletowne YWCA.	\$4,538
Culos-Reed, S.N.	Zahavich, A. Long, R. Santa Mina, D. Jones, J. Bender, J.	2014– 2017	Prostate Cancer Canada	Pan Canadian Prostate Cancer Collaborative: Lifestyle management solution for men with prostate cancer.	\$376,463
	Giese-Davis, J. Watson, L. LeTendre, A. McDougall, L. Bryant-Lukosius, D.	2013- 2016	Alberta Cancer Prevention Legacy Fund – Postdoctoral Fellow	Building CAPACITIES: Cancer Prevention And Collaborative Initiatives To Empower Survivors.	\$50,000
Giese-Davis, J.	Reynolds, K. Spavor, M.	2015- 2016	SCN Seed Grant Competition	Long-term follow-up of adult survivors of childhood cancer: Bridging the gap between oncology care and primary care.	\$10,000
Lambert, S. Duncan, L.	Robinson, J. Loiselle, C. Carli, F. Santa Mina, D. Saha, P. Peacock, S. Matthew, A. Goldenberg, L.	2015- 2020	Prostate Cancer Canada Movember True NTH Survivorship Research Grant	Reducing anxiety and enhancing quality of life among caregivers of prostate cancer survivors: Development and evaluation of a dyadic, tailored, web-based, psychosocial and physical activity self-management programme.	\$86,808

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Lambert, S.	Robinson, J. Loiselle, C. Yaffe, M. Duggleby, W.	2014-2015	CIHR Planning and Dissemination Grant– Institute Community Support	Priorities for caregiver research in cancer care: National and international perspectives using the Delphi procedure.	\$9,996.70
Lavoie, K.	Campbell, T.S.	2014–2016	Abbvie	Physician training in motivational communication skills: The impact of Derm Connect Canada.	\$30,193 USD
Lavoie, K.	Campbell, T.S.	2014–2019	Canadian Institutes of Health Research	Optimizing physician training in motivational communication (MC) skills for health behaviour change.	\$186,800
Loiselle, C.G.	Bultz, B.D. Bottorff, J.L. Hack, T. F. Carlson, L. E. Maunsell, E. Howell, D. Olfiffe, J. Grunfeld, E.	2009–2015	(STIHR) CIHR/ICR.	Psychosocial Oncology Research Training (PORT): A renewal application. Strategic Training Initiative in Health Research	\$325,000
McNeely, M.	Culos-Reed, S.N.	2014–2016	MSI Foundation	Partnering to develop an Alberta cancer exercise program: Evaluation of impact indicators.	\$32,500
Reynolds, K. Spavor, M.	Giese-Davis, J. Carlson, L.E. Schulte, F. Anderson, R Grundy, P.	2012-2015	Kids Cancer Care Foundation of Alberta Chair in Pediatric Oncology	A comparison of two models of follow-up care for adult survivors of childhood cancer.	\$8,333
Robinson, J.	Giese-Davis, J. Wallace, K. Ruether, D. North, S.	2014-2017	True NTH funded by Movember and Prostate Cancer	The Androgen Deprivation Therapy Education Program.	\$225,870

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
	Watson, L. Walker, L. Culos-Reed, N. Dunlop, B. Watson, L. North, S. Wallace, K. Donnelly, B. Thompson, L.		Canada		
Robinson, J. Matthew, A.	Giese-Davis, J. Wallace, K. Ruether, D. North, S. Watson, L. Walker, L. Culos-Reed, N. Dunlop, B. Watson, L. North, S. Wallace, K. Donnelly, B. Thompson, L.	2014- 2017	True NTH funded by Movember and Prostate Cancer Canada	Sexual Health Solution.	\$326,666
Robinson, J. Wiebe, E.,		2014- 2015	Alberta Cancer Foundation, Transformat ive Programs Seed Money	OASIS--Oncology And Sexuality, Intimacy and Survivorship.	\$20,000
Sigal, R.	Campbell, T.S.	2014- 2016	The Lawson Foundation	Evaluation of an improved home-based alternative to traditional weight training in people with type 2 diabetes.	\$50,000
Speckens, A.	Van Der Lee, M. Pet, A. Aukema, E.	2013- 2017	Stitching Pink Ribbon,	(Cost) effectiveness of Mindfulness Based Cognitive Therapy (MBCT) in breast cancer patients: a superiority trial	-

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
	Bronner, M. Remie, M. Witvoet, G. Ottevanger, N. Donders, R. Adang, E. Carlson, L. (Consultant)			of online and face-to-face treatment versus treatment as usual (TAU).	
Stephen, J.	Chia, S. Fergus, K. Fitch, M. Fillion, L. Giese-Davis, J. Keller-Olaman, S. Linden, W. Specia, M. Taylor-Brown	2009-2015	Canadian Breast Cancer Research Alliance	A Multi-site Randomized Controlled Trial Testing Efficacy of Professional and Peer-led Online Support Groups for Young Canadian Breast Cancer Survivors.	\$97,165
Stephen, J. Cil, T	Narod, S. Quan, M.L. Fergus, K. Giese-Davis, J.	2015-2016	AFP Innovation Fund, Women's College Hospital	An Online Enhanced Education Tool for Young Women Newly Diagnosed with Breast Cancer	\$29,985
Thomas, B.C.	Specia, M.	2013-2015	Canadian Breast Cancer Foundation (CBCF) Community	Investigating health literacy of South Asian women in Calgary and piloting a community resource to increase breast cancer awareness and improve health care access/utilization.	\$72,278
Tomfohr, L.	Schulte, F. Culos-Reed, N. Giese-Davis, J. (Co-I).	2015-2017	ARC Award in Family Centered Care	Everything will look better in the morning? Examining sleep disruption in survivors of pediatric cancer and their families.	\$18,750

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Tomfohr, L.	Campbell, T.S.	2014–2015	Norlien Foundation and Alberta Family Wellness Initiative (AFWI) and the Alberta Centre for Child, Family and Community Research (The Centre).	Mindfulness based cognitive therapy for psychological distress in pregnancy.	\$14,958
Walker, L.		2015-2017	Prostate Cancer Canada.	Sexual recovery after prostate cancer.	\$136,401
RADIATION ONCOLOGY					
Doll, C.M.			AIHS CRIO Cancer Care	PIK3CA mutational status and pathway activation in patients with cervical cancer: Quantifying the risk and testing the solution.	\$750,000 2014 funding: \$250,000
Doll, C.M.			CARO RAZCER	Expression of non-homologous end-joining pathway markers in cervical cancer and stromal tissue: Implications for chemoradiation response and targeted therapy.	\$22,700 2014 Funding: \$7,566
Doll, C.M.			Alberta Cancer Foundation	The Identification of Predictive Factors of Response to Chemoradiation Therapy in Patients with Carcinoma of the Cervix.	\$22,100 2014 Funding: \$7,366

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
Husain, S.		2014-2016	Alberta Cancer Foundation	Prostate HDR	\$200,000 (2 yr. renewal)
Husain, S.		2014-2017	Alberta Cancer Foundation	Breast Brachytherapy	\$250,000 (over 3 years)
	Kerba, M.	2014-2015	Alberta Cancer Foundation	TBCC Cancer Research Seed Funding	\$10,000
Lau, H.		2014	Alberta Cancer Foundation	Identification of the MYB-NFIB fusion gene in adenoid cystic carcinoma archival formalin-fixed paraffin-embedded tissue from patients treated in Alberta: an exploratory study	\$38,216 2014 Funding: \$19,100
Lau, H.		2014	Alberta Cancer Foundation	Identification of the MYB-NFIB fusion gene in adenoid cystic carcinoma archival formalin-fixed paraffin-embedded tissue from patients treated in Alberta: an exploratory study	\$38,216 2014 Funding: \$19,100
Olivotto, I.A.	Phan, T.		Cancer SCN/AHS	SCN Cancer Network: Risk and Severity of brachial plexopathy with standard compared to hypofractionated radiation therapy for node-positive breast cancer	\$9,288
Olivotto, I.A.	Sinha, R.		Alberta Cancer Foundation	Enhanced Care Grant (equipment): Abdominal compression device to expand Liver SBRT at TBCC	\$43,500
Olivotto, I.A.			Cancer Control Alberta –	Enhanced Care Grant: Toward a provincial SBRT program	\$250,688 2014 Funding:

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
			Community Oncology		\$125,344
Phan, T.		2014	Alberta Cancer Foundation	Donation from pt. family for research funding. Gyne Patient Family – Ronald Baczuk	\$25,000
Sinha, R.		2014-2015	Colon Cancer Canada	Philanthropy from Sanofi - for development of Website	\$16,000 (over 2 yrs.)
Sinha, R.		2014-2019	Alberta Cancer Foundation	Stereotactic Body Radiotherapy (SBRT) for Oligo-metastatic Colorectal Cancer with biomarker evaluation for early progression	\$150,000 (\$30,000/yr.)
Sinha, R.		2013 -2015	Private donor	Rectal Cancer Website/ patient portal	\$25,000 over 2 years
	Sinha, R.	2013 -2018	Alberta Cancer Foundation	Phase 2 Trial of Rosuvastatin Combined with Standard Chemoradiation Therapy in the Treatment of High-Risk Locally Advanced Rectal Cancer	\$150,000 2014 Funding: \$30,000/yr.

GRANTS

PI: local	Co-PI	Year(s)	Granting Agency	Title	Award
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SURGICAL ONCOLOGY

<i>NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR</i>
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TRANSLATIONAL RESEARCH & LABORATORIES
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<i>NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR</i>
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PUBLICATIONS

FUNDAMENTAL RESEARCH

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

GYNECOLOGIC ONCOLOGY

- 1) Ball, A., **Chu, P., Ghatage, P., Nation, J. G., & Nelson, G. S.** (2014). The importance of surgical staging in women with uterine serous carcinoma: Experience in a single institution reveals a survival benefit. *Journal of Gynecologic and Obstetrics of Canada*, 36(12), p 1085-1092.
- 2) King, N., Balneaves, L. G., Levin, G. T., Nguyen, T., **Nation, J. G.**, Card, C., Truant, T., & Carlson, L. E. (2015). Surveys of cancer patients and cancer health care providers regarding complementary therapy use, communication, and information needs. *Integrated Cancer Therapies*.
- 3) Kobel, M., Madore, J., Ramus, S. J., Clarke, B. A., Pharoah, P. D., Deen, S., ... **Nelson, G. S., Ghatage, P.**, ... Keleman, L. E. (2015). Evidence for a time-dependent association between FOLR1 expression and survival from ovarian carcinoma: Implications for clinical testing. An ovarian tumour tissue analysis consortium study. *British Journal of Cancer*, 111(12), 2297-2307.
- 4) Lee, S., Sabourin, J., Gage, J., Frank, A., **Nation, J. G.**, Duggan, M. A. (2014). Squamous intraepithelial lesions in cervical tissue samples of limited adequacy and insufficient grading as low or high grade: Outcome clinico-pathological correlates, and predictive role of p16ink4a and Ki67 biomarker staining. *Journal of Lower Genital Tract Disease*, 19(19.1)
- 5) Lee, S., Sabourin, J., Gage, J., Franko, A., **Nation, J. G.**, Duggan, M. A. (2015). Squamous intraepithelial lesions in cervical tissue samples of limited adequacy and insufficient for grading as low or high grade: Outcome clinic-pathological correlates, and predictive role of p16ink4a and Ki67 biomarker staining. *Journal of Lower Genital Tract Disease*; 19(1), 35-45.
- 6) Meng, B., Hoang, L. N., McIntyre, J. B., Duggan, M. A., **Nelson, G. S.**, Lee, C. H., & Kobel, M. (2014). POLE exonuclease domain mutation predicts long progression-free survival in grade 3 endometrioid carcinoma of the endometrium. *Gynecologic Oncology*, 134(1), 15-19.

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- 7) Tsoref, D., Welch, S., Lau, S., Biagi, J., Tonkin, K., Martin, L. A., ... **Ghatage, P.**, ... Oza, A. M. (2014). Phase II study of oral ridaforolimus in women with recurrent or metastatic endometrial cancer. *Gynecologic Oncology*, 135(2), 184-189.
- 8) Vair, B., Altman, A. D., & **Nelson, G. S.** (2015). Time to surgery and the risk of cancer progression in patients with gynecologic cancers of the lower genital tract. *Journal of Obstetrics & Gynecology, Canada*, 37(4), 338-344.
- 9) Warfa, K., Koebel, M., **Ghatage, P.**, **Nelson, G. S.** (2015). Low grade serous carcinoma – the clinical challenge. *Gynecologic Obstetrical Res Open Journal.*, 1(1), 35-40.

ABSTRACTS (Presented)

- 1) Lee, S., Sabourin, J., Gage, J., Franko, A., **Nation, J. G.**, & Duggan, M. A. (2014). *Squamous intraepithelial lesions in cervical tissue samples of limited adequacy* [Abstract]. Presented at the USCAP Annual Meeting, San Diego, USA.
- 2) Temple, W., Mack, L., **Chu, P.**, **Glaze, S.**, **Nation, J. G.**, **Nelson, G. S.**, & **Ghatage, P.** (2014). *Interactive patient portal for real time quality of life (QOL) measurements for gynecologic oncology patients* [Abstract]. Presented at The Society of Pelvic Surgeons Annual Meeting, Tampa, USA.
- 3) Sabourin, J., Lee, S., Gage, J., Franko, A., **Nation, J. G.**, & Duggan, M. A. (2014). *Characteristics associated with HSIL, AIS or carcinoma after initial diagnosis of SILQ and colposcopic follow-up* [Abstract]. Presented at the 29th International Papillomavirus Meeting, Seattle, USA.

ABSTRACTS (Published)

- 1) Martin, L., Atkins, M., Basualdo-Hammond, C., Kiyang, L., **Nelson, G. S.**, & Gramlich, L. (2015). Implementation of enhanced recovery after surgery in colorectal patients: The impact on nutritional care [Abstract]. *Canadian Journal of Anesthesia*. 61(6), 707.
- 2) **Nelson, G. S.**, Crumley, E. T., Kiyang, L., & Gramlich, L. (2015). Implementation of an ERAS protocol across a large healthcare system: The Alberta ERAS colorectal surgery experience [Abstract]. *Canadian Journal of Anesthesia*, 62(6), 697.

PUBLICATIONS

POSTERS

- 1) Sabourin, J., Woolsey, A., Ball, A., & **Nelson, G. S.** (2015). *Treatment and outcomes of stage I uterine serous carcinomas in Alberta*. Presented to the 36th Annual General Meeting of the Society of Gynecologic Oncology of Canada, Quebec City, Quebec.
- 2) Comeau, R., **Chu, P., Glaze, S., Nation, J. G., Nelson, G. S.,** Rosen, B., Narod, S., & **Ghatage, P.** (2015). *Timing of surgery and chemotherapy for advanced stage high grade serous cancers of the ovary: What is the best approach?* Presented to the 36th Annual General Meeting of the Society of Gynecologic Oncology of Canada, Quebec City, Quebec.
- 3) **Glaze, S., Chu, P., Ghatage, P., Nation, J. G., Nelson, G. S.** (2015). *Dose-dense versus intraperitoneal chemotherapy for the treatment of advanced ovarian cancer: Is there a clear winner?* Presented to the 36th Annual General Meeting of the Society of Gynecologic Oncology of Canada, Quebec City, Quebec.

HEMATOLOGIC MALIGNANCIES & BMT

- 1) Advani, R.H., Hong, F., Fisher, R.I., Bartlett, N.L., Robinson, K.S., **Stewart, D.A.,** ... & Horning, S.J. (2015, June). Randomized Phase III Trial Comparing ABVD Plus Radiotherapy With the Stanford V Regimen in Patients With Stages I or II Locally Extensive, Bulky Mediastinal Hodgkin Lymphoma: A Subset Analysis of the North American Intergroup E2496 Trial. *J Clin Oncol.* 10;33(17):1936-42.
- 2) Akhter, A., Mahe, E., **Street, L.,** Pournazari, P., Perizzolo, M., Shabani-Rad, M.T., **Stewart, D.A.,** Mansoor, A., (2015, June). CD10-positive mantle cell lymphoma: biologically distinct entity or an aberrant immunophenotype? Insight, through gene expression profile in a unique case series. *J Clin Pathol.* pii: jclinpath-2015-202955. doi: 10.1136/jclinpath-2015-202955. [Epub ahead of print]
- 3) Akhter, A., Masir, N., Elyamany, G., Phang, K.C., Mahe, E., Al-Zahrani, A.M., Shabani-Rad, M.T., **Stewart, D.A.,** Mansoor, A., (2015, January). Differential expression of Toll-like receptor (TLR) and B cell receptor (BCR) signaling molecules in primary diffuse large B-cell lymphoma of the central nervous system. *J Neurooncol;*121(2):289-96

PUBLICATIONS

- 4) Areethamsirikul, N., Masih-Khan, E., Chu, C.M., **Jimenez-Zepeda, V.**, Reece, D.E., Trudel, S., Kukreti, V., Tiedemann, R., Chen, C., CyBOR, D., (2015, March). Introduction therapy in clinical practice. *Bone Marrow Transplant*;50(3):375-9.
- 5) Benboubker, L., Dimopoulos, M.A., Dispenzieri, A., Catalano, J., Belch, A.R., Cavo, M., Pinto, A., Weisel, K., Ludwig, H., **Bahlis, N.**, ... Facon, T. (2014, September). FIRST Trial Team. Lenalidomide and dexamethasone in transplant-ineligible patients with myeloma. *N Engl J Med.* 4;371(10):906-17.
- 6) Betschel, S., Badiou, J., Binkley, K., Hebert, J., Kanani, A., Keith, P., ... **Poon, M.C.**, ... Wasserman, S., (2014, October). Canadian hereditary angioedema guideline. *Allergy, Asthma, & Clinical Immunology*, 10(1)50 DOI: 10.1186/1710-1492-10-50.
- 7) Binding, A., **Valentine, K., Poon, M.C.**, Sayani, F., (2014). Adult sickle cell disease epidemiology and the potential role of a multidisciplinary comprehensive care centre in a city with low prevalence. *Hemoglobin*, 38(5):312-315.
- 8) Boise, L.H., Kaufman, J.L., **Bahlis, N.J.**, Lonial, S., Lee, K.P., (2014, September). The Tao of myeloma. *Blood.* 18;124(12):1873-9.
- 9) Chawla, S., Dharmani-Khan, P., Liu, Y., Prokopishyn, N., Munir, M.A., Griffiths, C., Khan, F.M., **Stewart, D, A., Russell, J.A., Daly, A., Storek, J.**, (2014, August). High serum level of antithymocyte globulin immediately before graft infusion is associated with a low likelihood of chronic but not acute graft-vs-host disease. *Biol Blood Marrow Transplant* 20:1156-1162.
- 10) DeAngelo, D.J., Stevenson, K.E., Dahlberg, S.E., Silverman, L.B., Couban, S., **Savoie, L.**, ... Stone, R.M., (2015, March) Long-term outcome of a pediatric-inspired regimen used for adults aged 18-50 years with newly diagnosed acute lymphoblastic leukemia. *Leukemia.* 29(3):526-34.
- 11) Delforge, M., Minuk, L., Eisenmann, J.C., Arnulf, B., Canepa, L., Fragasso, A., ... **Bahlis, N.J.**, Guo, S., Monzini, M.S., Ervin-Haynes, A., Houck, V., Facon, T., (2015, June). Health-related quality-of-life in patients with newly diagnosed multiple myeloma in the FIRST trial: lenalidomide plus low-dose dexamethasone versus melphalan, prednisone, thalidomide. *Haematologica.*;100(6):826-33.
- 12) Di Minno, G., Zotz, R.B., d'Oiron, R., Bindslev, N., Di Minno, M.N., **Poon, M.C.**, (2015, May). The international prospective Glanzmann Thrombasthenia Registry: treatment

PUBLICATIONS

- modalities and outcomes in non-surgical bleeding episodes in Glanzmann thrombasthenia patients. *Haematologica*. 22. pii: haematol.2014.121475. [Epub ahead of print]
- 13) Engels, E.A., Landgren, O., Costello, R., Burton, D., Mailankody, S., **Storek, J.**, (2015, January). Serum immunoglobulin free light chains and post-transplant lymphoproliferative disorder among allogeneic hematopoietic stem cell transplant recipients. *Bone Marrow Transplant*.50(1):146-7.
- 14) **Grossman, J.**, Cuellar-Rodriguez, J., Gea-Banacloche, J., et al. (2014, December). Non-Mteloablative Allogeneic Stem Cell Transplantation for GATA2 Deficiency. *Biol Blood Marrow Transplant*;20(12):1940-8
- 15) Hua B, Li K, Lee A, **Poon MC**, Zhao Y. (2015, May). Coexisting congenital dysfibrinogenemia with a novel mutation in fibrinogen γ chain (γ 322 Phe→Ile, Fibrinogen Beijing) and haemophilia B in a family. *Haemophilia*.. doi: 10.1111/hae.12712. [Epub ahead of print]
- 16) Jackson, S.C., Yang, M., Minuk, L., Sholzberg, M., St-Louis, J., Iorio, A., Card, R., **Poon, M.C.**, (2015, February). Prophylaxis in older Canadian adults with hemophilia A: lessons and more questions. *BMC Hematol*.15:4. doi: 10.1186/s12878-015-0022-8. eCollection 2015.
- 17) Jamani, K., **Duggan, P.**, **Neri, P.**, **Bahlis, N.**, **Jimenez-Zepeda, V.H.**, (2015, June). Coexistent B-cell and plasma cell neoplasms: a case series providing novel clinical insight. *Leuk Lymphoma*. 12:1-17. [Epub ahead of print]
- 18) **Jimenez-Zepeda, V.H.**, **Bahlis, N.J.**, Gilbertson, J., Rendell, N., Porcari, R., Lachmann, H.J., Gillmore, J.D., Hawkins, P.N., Rowczenio, D.M., (2015, March). A novel transthyretin variant p.H110D (H90D) as a cause of familial amyloid polyneuropathy in a large Irish kindred. *Amyloid*. 22(1):26-30.
- 19) **Jimenez-Zepeda, V.H.**, Reece, D.E., Trudel, S., Chen, C., Franke, N., Winter, A., Tiedemann, R., Kukreti, V.. (2015, February). Absolute lymphocyte count as predictor of overall survival for patients with multiple myeloma treated with single autologous stem cell transplant. *Leuk Lymphoma*. 24:1-6. [Epub ahead of print]
- 20) **Jimenez-Zepeda, V.H.**, Reece, D.E., Trudel, S., Chen, C., Tiedemann, R., Kukreti, V., (2015, February) Early relapse after single auto-SCT for multiple myeloma is a major predictor of survival in the era of novel agents. *Bone Marrow Transplant*;50(2):204-8.

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- 21) **Jimenez-Zepeda, V.H.**, Reece, D.E., Trudel, S., Chen, C., Tiedemann, R., Kukreti, V., (2015, January). Lenalidomide (Revlimid), bortezomib (Velcade) and dexamethasone for the treatment of secondary plasma cell leukemia. *Leuk Lymphoma*. 56(1):232-5.
- 22) Kortuem, K. M., Zidich, K., Steven, R., Schuster, Khan, M., **Jimenez-Zepeda, V.**, Mikhael, J., Fonseca, R., Stewart, K., (2014, August). Activity of 129 single agent drugs in 228 Phase I and II clinical trials in Multiple Myeloma. *Clin Lymphoma Myeloma Leuk*. 14(4):284-290
- 23) Kovacs, M.J., Davies, G.A., Chapman, J.A., **Bahlis, N.**, Voralia, M., Roy, J., Kouroukis, C.T., Chen, C., Belch, A., Reece, D., Zhu, L., Meyer, R.M., Shepherd, L., Stewart, K.A., (2015, February). Thalidomide-prednisone maintenance following autologous stem cell transplant for multiple myeloma: effect on thrombin generation and procoagulant markers in NCIC CTG MY.10. *Br J Haematol*;168(4):511-7.
- 24) Lane, S., Walker, I., Chan, A., Heddle, N., **Poon, M.C.**, Minuk, L., Jardine, L., Arnaold, E., Sholapur, N., Webert, K., (2015, March) Treatment decision-making among Canadian youth with severe haemophilia: a qualitative approach. *Haemophilia*.;21(2):180-9.
- 25) Langley, A.R., Stain, A.M., Chan, A., McLimont, M., Chait, S., Wu, J., **Poon, M.C.**, ..., Blanchette, V., (2015, July). Experience with central venous access devices (CVADs) in the Canadian hemophilia primary prophylaxis study (CHPS). *Haemophilia*. 21(4):469-76.
- 26) Lee, A., Sinclair, G.D., **Valentine, K.A.**, James, P., **Poon, M.C.**, (2014, July) Acquired von Willebrand syndrome: von Willebrand factor propeptide to von Willebrand factor antigen ratio predicts remission status. *Blood*;124(5):e1-3.
- 27) Lee, A., Boyd, S.K., Kline, G., **Poon, M.C.**, (2015, March) Premature changes in trabecular and cortical microarchitecture result in decreased bone strength in hemophilia. Lee A, Boyd SK, Kline G, Poon MC. *Blood* 26;125(13):2160-3
- 28) Lim, A.B., **Storek, J.**, Beligaswatte, A., Collins, M., Tacey, M., Williamson, T., Mason, K., Li, E., **Chaudhry, M. A.**, **Russell, J.A.**, **Daly, A.**, Szer, J., Lewis, I., Ritchie, D., (2015, April) Older recipient age is paradoxically associated with a lower incidence of chronic GVHD in thymoglobulin recipients: a retrospective study exploring risk factors for GVHD in allogeneic transplantation with thymoglobulin GVHD prophylaxis. *Bone Marrow Transplant*. 50(4):566-72.

PUBLICATIONS

- 29) Mahe, E., Akhter, A., Le, A., **Street, L.**, Pournaziri, P., Kosari, F., Shabani-Rad, M.T., **Stewart, D.**, Mansoor, A., (2014, August). PARP1 expression in mantle cell lymphoma: the utility of PARP1 immunohistochemistry and its relationship with markers of DNA damage. *Hematol Oncol.* 20. doi: 10.1002/hon.2160. [Epub ahead of print]
- 30) Oh, D.H., Ghosh, S., Chua, N., Kostaras, X., Tilley, D., Chu, M., **Owen, C.J., Stewart, D.A.**, (2014, November). Comparative effectiveness analysis of different salvage therapy intensities used for diffuse large B-cell lymphoma in Northern or Southern Alberta: an instrumental variable analysis. *Leuk Lymphoma* 3: 1-14.
- 31) Oh, D.H., Chua, N., **Street, L., Stewart, D.A.**, (2015, March). Treatment of patients with secondary central nervous system lymphoma with high-dose busulfan/thiotepa-based conditioning and autologous stem cell transplant. *Leuk Lymphoma.* 27:1-6.
- 32) Olney, H.J., Freeman, M.A., **Stewart, D.A.**, Mangel, J.E., White, D.J., Elia-Pacitti, J.O., (2014, December). Prolonged progression-free survival and preserved quality of life in the Canadian prospective study of tositumomab and iodine(131)-tositumomab for previously treated, rituximab-exposed, indolent non-Hodgkin lymphoma. *Leuk Lymphoma*;55(12):2754-60.
- 33) **Owen, C. & Stewart, D.A** (2014, August). Obinutuzumab for B cell malignancies. *Expert Opinion on Biological Therapy*;14(8):1197-205.
- 34) **Owen, C.**, Bence-Bruckler, I., Chamakhi, I., Toze, C., Assaily, W., Christofides, A., Robinson, S., (2015, June). A canadian perspective on the first-line treatment of chronic lymphocytic leukemia. *Clin Lymphoma Myeloma Leuk.*;15(6):303-13
- 35) Pidala, J., Lee, S., Ahn, K.W., Spellman, S., Wang, H.L., Aljurf, M., ... **Storek, J.**, Wood, W.A., Woolfrey, A., & Anasetti, C., (2014, October). Non-permissive -DPB1 mismatch among otherwise HLA-matched donor-recipient pairs results in increased overall mortality after unrelated allogeneic hematopoietic cell transplantation. *Blood.*;124(16):2596-606.
- 36) **Poon, M.C.**, (2014). Novel stem cell based hemophilia A gene therapy. *The International Monitor on hemophilia.* 22: 22-23,
- 37) **Poon, M.C.**, D' Oiron, R., Zotz, R.B., Bindlslev, N., Di Minno, M.N., Di Minno, G.,(2015, May). The international prospective Glanzmann Thrombasthenia Registry:

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- 58) Singla, A., Downey, C., **Bebb, D. G.**, & Jirik, F. R. (2015). Characterization of a murine model of metastatic human non-small cell lung cancer and effect of CXCR4 inhibition on the growth of metastases. *Oncoscience*, 2(3) 263-271.
- 59) **Stewart, D.A.**, Kloiber, R., Owen, C., Bahlis, N.J., Duggan, P., Mansoor, A., & Bence-Bruckler, I. (2014). Results of a prospective phase II trial evaluating interim positron emission tomography-guided high dose therapy for poor prognosis diffuse large B-cell lymphoma. *Leukemia and Lymphoma* 55(9), 2064-70.
- 60) **Tam, V.C.**, Berry, S., Hsu, T., North, S., Neville, A., Chan, K., & Verma, S. Oncology education in Canadian undergraduate and postgraduate medical programs: A survey of educators and learners. *Current Oncology* 21(1):e75-88. 2014.
- 61) **Tang, P.A.**, Pond, G.R., Welch, S., & Chen, E. X. (2014). Factors associated with publication of randomized phase III cancer trial in journals with a high impact factor. *Curr Oncol* 2014. doi.org/10.3747/co.21.1937
- 62) Villa, D., George, A., Seymour, J.F., Toze, C.L., Crump, M., Lee, C., Buckstein, R., **Stewart, D.A.**, ... & Kuruvilla, J. (2014). Favorable outcomes from allogeneic and autologous stem cell transplantation for patients with transformed nonfollicular indolent lymphoma. *Biol Blood Marrow Transplant* 20(11), 1813-8.

PUBLICATIONS

PRESENTATIONS / INVITED ADDRESSES / SYMPOSIUMS

1. **Alghamdi, M.**, Li, H., Kelly, J., **Easaw, J.**, Nordal, R., Lim, G. (2015, October), *Benign and Intermediate Risk CNS Tumors, Controversies in High Grade Glioma* [Abstract]. Presented at American Society for Radiation Oncologists Conference, San Antonio, Texas, USA.
2. **Alghamdi, M.**, Li, H., Kelly, J., **Easaw, J.**, Nordal, R., Lim, G. (2015, September), *Referral patterns and outcomes of atypical meningioma patients treated with surgery with or without radiation therapy* [Abstract]. Presented at Canadian Association of Radiation Oncologists Annual Scientific Meeting, Kelowna, BC, Canada.
3. **Alimohamed, N.** (2015, February). *Change in Neutrophil to Lymphocyte Ratio as a Prognostic and Predictive Marker in Response to Targeted Therapy for Metastatic Renal Cell Carcinoma*. Invited Speaker. Orlando, Florida, United States.
4. **Alimohamed, N.** (2015, January). *Advances in Urologic Cancer: Extending Overall Survival and Examining our Outcomes*. Invited Speaker. Calgary, Alberta, Canada.
5. Barnes, M., Srinivas, C., Xu, C., Dean, S., Singh, S., Wick, N., **Morris, D.**, Magliocco, A., & LaFleur B. (2015, June) *Early stage breast cancer prognostication using whole tumor or Ki67 heterogeneity-based digital imaging*. [Abstract]. Presented at ASCO 2015, Chicago, Ill, USA.
6. **Bebb, G.**, (2015, March) *ATMicty and genomic instability in solid tumors*. Alberta Epigenetics Network Annual Summit 2015, Banff, Alberta Canada.
7. **Bebb, G.**, (2015, March) *Identifying ATMic non-small cell lung cancer cell lines: Implications for designing clinical trials Targeted Anticancer Treatment Annual Meeting 2015*. Paris, France.
8. **Bebb, G.**, (2014, November) *Predictive markers in NSCLC*. Calgary Lung Cancer Educational Update. University of Calgary, Calgary, Alberta Canada.
9. **Bebb, G.**, (2014, October) *Breathing Life into Lung Cancer*, Tom Baker Cancer Centre, Calgary, Alberta Canada
10. **Bebb G.**, (2014/10) *Phase I clinical trials activity at the Tom Baker Cancer Centre*, Bayer Global Phase I Team, Madrid, Spain.

PUBLICATIONS

11. **Dowden, S.** (2015, June). *Overview of Colorectal Cancer*. Invited Speaker. Calgary, Alberta, Canada.
12. **Dowden, S.** (2015, May). *Update on the Management of Pancreatic Cancer*. Invited Speaker. Lethbridge, Alberta Canada.
13. **Dowden, S.** (2015, April). *Update of Management of Advanced Pancreatic Malignancies*. Invited Speaker. Toronto, Ontario, Canada.
14. **Dowden, S.** (2015, April). *Evolve: Evolving Management of Metastatic Colorectal Cancer, Integrated approaches for individualized Patient Care*. Invited Speaker. Lethbridge, Alberta, Canada.
15. **Dowden, S.** (2015, February). *Navigating the Lines of Therapy in Advanced Colorectal Cancers*. Invited Speaker, webinar.
16. **Dowden, S.** (2014, December). *Update on the Management of Metastatic Pancreas Cancer*. Invited Speaker. Moncton, New Brunswick, Canada.
17. **Dowden, S.** (2014, October). *Update on WC5*. Invited Speaker. Montreal, Québec, Canada.
18. **Dowden, S.** (2014, September). *Best of ASCO – GI Update*. Invited Speaker. Jeddah, Saudi Arabia.
19. **Dowden, S.** (2014, September). *Current Management of Colorectal Cancer*. Invited Speaker. Damman, Saudi Arabia.
20. **Easaw, J.** (2015, March). *Practical management of blood clots in cancer patients*. Invited Speaker. Canadian Society of Hospital Pharmacists Conference, Banff, AB, Canada.
21. **Easaw, J.** (2015, February). *Blood clots in cancer: Easy to manage, right?* Invited Speaker. Best of Oncology West Annual Conference, Vancouver, BC, Canada.
22. **Easaw, J.** (2015, February). *Alberta venous thromboembolism guidelines, blood clots and cancer*. Invited Speaker. Patients Dinner, Calgary, AB, Canada.
23. **Easaw, J.** (2015, January). *Management of recurrent glioblastoma*. Invited Speaker. Manitoba Cancer Centre, Winnipeg, MB, Canada.
24. **Easaw, J.** (2015, January). *Practical management of blood clots in cancer patients*. Invited Speaker. Tom Baker Cancer Centre Oncology Speaker Series, Calgary, AB, Canada.

PUBLICATIONS

25. **Easaw, J.** (2014, October). *Improving survival in patients with glioblastoma multiforme: the Calgary experience.* Invited Speaker. Brain Tumor Foundation of Canada Breakfast Symposium, London, ON, Canada.
26. **Easaw, J.** (2014, October). *Improving care delivery for patients with GBM.* Invited Speaker. Brain Tumor Foundation of Canada Health Care Conference, London, ON, Canada.
27. **Easaw, J.** (2014, September). *Incorporating rehabilitation into the care of patients with cancer.* Invited Speaker. Oncology Grand Rounds, Tom Baker Cancer Centre, Calgary, AB, Canada.
28. **Easaw, J.** (2014, September). *Practical management of blood clots in cancer.* Invited Speaker. Saskatoon Cancer Centre Hematology Grand Rounds, Saskatoon, SK, Canada.
29. **Easaw, J.** (2014, September). *Prophylaxis and treatment of hypercoagulable states in cancer patients.* Invited Speaker. Resident Teaching Rounds, Saskatoon Cancer Centre, Saskatoon, SK, Canada.
30. **Easaw, J.** (2014, September). *Clinical and preclinical data for the treatment of VTE in patients with solid tumors.* Invited Speaker. Saskatoon Cancer Centre Medical Oncology Grand Rounds, Saskatoon Cancer Centre, Saskatchewan, SK, Canada.
31. **Easaw, J.** (2014, September). *Alberta venous thromboembolism guidelines.* Invited Speaker. Oncology Grand Rounds, Cross Cancer Institute, Edmonton, AB, Canada.
32. **Easaw, J.** (2014, September). *Improving survival in glioblastoma multiforme.* Invited Speaker. Canadian Association of Medical Oncology Meeting, Edmonton, AB, Canada.
33. **Heng, D.** (2015, May). *The International mRCC Database Consortium Experience.* Presented at CIPOMO mRCC Conference, Riva Del Garda, Italy.
34. **Heng, D.** (2015, April). *Prognostic factors in mRCC and using them in current clinical practice.* Presented at Japanese Urological Association, Kanazawa City, Japan.
35. **Heng, D.** (2015, April). *Treatment sequencing for metastatic cancer – International mRCC Consortium standard.* Presented at Kidney Cancer Canada Patient Education Conference, Calgary, Alberta Canada.
36. **Heng, D.** (2014, November). *Prognostic factors in mRCC,* Presented to Expert Dialogues, London, United Kingdom.

PUBLICATIONS

37. **Heng, D.** (2014, November). *First and second line therapy in mRCC and Cytoreductive nephrectomy in mRCC*. Presented at Emirates Oncology Conference, Abu Dhabi, United Arab Emirates.
38. **Heng, D.** (2014, October). *Master Class: Statistics and starting research in residency and fellowship and Systemic therapy in metastatic RCC and Cases from the International mRCC Database Consortium*. Presented at Urology Society of Australia and New Zealand Annual Meeting 2014, Healesville, Australia.
39. **Heng, D.** (2014, October). *Cytoreductive nephrectomy in mRCC*. Presented to World Top Communications, Arezzo, Italy.
40. **Morris, D.** (2015, May). *Which chemotherapy regimen for stage III NSCLC should be combined with radiotherapy – cisplatin/etoposide or cisplatin/vinorelbine?* Invited Speaker. Provincial Lung Tumor Team Meeting, Calgary, Alberta, Canada.
41. **Morris, D.** (2015, May). *IND 211 – Phase II trial update*. Invited Speaker. NCIC Spring Meeting, Toronto, Ontario, Canada.
42. **Morris, D.** (2015, March). *Reovirus: Bench to Bedside*. Invited Speaker. Cumming School of Medicine, Calgary, Alberta, Canada.
43. **Morris, D.** (2015, February). *Reovirus and GU Malignancies*. Invited Speaker. Annual Prairie Urologic Association Meeting, Lake Louise, Alberta, Canada.
44. **Morris, D.** (2014, November). *Calgary Lung Cancer Update*. Invited Speaker. Calgary Lung Cancer Educational Event Calgary, Alberta, Canada.
45. **Morris, D.** (2014, October). *Oncolytic viruses as an immune adjuvant: a novel cancer therapeutic strategy*. Invited Speaker. SACRI seminar, Calgary, Alberta, Canada.
46. **Morris, D.** (2014, October). *Oncolytic viruses and immune checkpoint blockade: a novel therapeutic strategy*. Invited Speaker. Metastatic Breast Cancer Awareness Day Educational Evening, Calgary, Alberta, Canada.
47. **Morris, D.** (2014, October). *Understanding Lung Cancer*. Invited Speaker. Lung Cancer Patient Education Day. Tom Baker Cancer Centre, Calgary, Alberta.
48. **Ruether, D.** (2015, April). *Follow up of prostate cancer patients*. Invited Speaker. Presented to the Family Physicians and CancerControl Strengthening Linkages Workshop, Calgary, AB, Canada.

PUBLICATIONS

49. **Ruether, D.** (2015, March). *Living your best life with cancer and beyond event: late & long-term effects of cancer treatment.* Invited Speaker. Presented at Living Your Best Life – With Cancer and Beyond Education Day, Calgary, AB, Canada.
50. **Ruether, D.** (2014, November). *The Role of the Somatostatin analogues in the management of neuroendocrine tumors.* Invited Speaker. Presented to the Western Canadian Endocrine Cancer Care Conference, Edmonton, AB, Canada.
51. **Ruether, D.** (2014, October). *Bone health in cancer care, Prostate cancer, A review of Alberta guidelines, Management of bone health in cancer patients.* Invited Speaker. Presented to Alberta Community Cancer Physicians Update, Edmonton, AB, Canada.
52. **Stewart, D.** (2014, September). *Transplant Update in Lymphoma.* Invited Speaker. Presented to Saskatoon Hematology Group, Saskatoon, Saskatchewan, Canada.
53. **Stewart, D.** (2015, March). *Clinical conundrums in NHL: case-based discussion.* Invited Speaker. Canadian Conference on Lymphoproliferative Disorders, Banff, Alberta, Canada.
54. **Stewart, D.** (2015, March). *Update on Hodgkin's, follicular lymphoma and diffuse large B cell lymphoma.* Invited Speaker. Canadian Conference on Lymphoproliferative Disorders, Banff, Alberta, Canada.
55. **Stewart, D.** (2015, April). *Clinical Data Integration for Breast Cancer.* Invited Speaker. Provincial Breast Cancer Meeting Calgary, Alberta, Canada.
56. **Stewart, D.** (2015, May). *Clinical Data Integration.* Invited Speaker. Glans Look Day, Calgary, Alberta, Canada.
57. **Tam, V.** (2014, November). *Medical Oncology Residency Training – Competence by Design.* Invited Speaker. Department of Oncology Education Retreat, Calgary, Alberta, Canada
58. **Tam, V.** (2014, October). *Celestial Trial: A phase 3, randomized, double-blind, controlled study of cabozantinib (XL184) vs placebo in subjects with hepatocellular carcinoma who have received prior sorafenib.* Invited Speaker. Provincial Gastrointestinal Tumor Group Meeting, Calgary, Alberta, Canada.
59. **Tang, P.** (2015, February). *Cost Avoidance in NCIC Clinical Trials, N2 conference.* Invited Speaker. Toronto, Ontario, Canada.

PUBLICATIONS

ABSTRACTS

- 1) **Alimohamed, N.**, Templeton, A.J., Knox, J.J., Lin, X., Simantov, R., Xie, W., ... Heng, D.Y.C. (2015). Change in neutrophil to lymphocyte ratio as a prognostic and predictive marker in response to targeted therapy for metastatic renal cell carcinoma (mRCC) [Abstract]. *Journal of Clinical Oncology*, 33, 404.
- 2) Bosee, D., Mercer, J., Raissouni, S., Dennis, K., Goodwin, R., Jiang, M., Powell, E., Kumar, A., Lee-Ying, R., Hiller, J., **Heng, D.**, **Tang, P.A.**, MacLean, A., Cheung, W. & Vickers, M. (2015) Prospect eligibility and clinical outcomes. Pan-Canadian rectal cancer consortium. [Abstract]. *Journal of Clinical Oncology* 33.
- 3) **Ezeife, D.**, Truong, T., Lim, H., Cho, S., Cheung, W., & **Tang, P.** (2015, May). *Assessment of Clinical Trial Endpoints in Medical Oncologists*. [Abstract]. Presented at the 2015 Canadian Association of Medical Oncology. Toronto, ON, Canada.
- 4) Graczyk, J., Ghosh, S., Chua, N., **Stewart, D.**, & Owen, C. (2014). Population based analysis of outcomes of primary central nervous system lymphoma (PNSL) suggests a treatment strategy including intensive chemotherapy with autologous stem cell transplantations provides a survival advantage for patients <64 years of age. [Abstract]. *Presented at the American Society of Hematology Annual Meeting 2014. Blood*, 124.
- 5) Khan, O., **Tam, V.**, **Nixon, N.**, **Tang, P.A.**, **Dowden, S.**, & **Monzon, J.** (2015, May). *New drug development for breast, colorectal and non-small cell lung cancers since 1980*. [Abstract]. Presented at the 2015 Canadian Association of Medical Oncology. Toronto, ON.
- 6) Khan, O., Raissouni, S., Haeseker, J., **Ko, J.**, **Kumar, A.**, **Vickers, M.**, & **Tang, P.A.** (2015, May). *Immediate-term Cognitive Impairment after Administration of Intravenous Chemotherapy*. [Abstract]. Presented at the 2015 Canadian Association of Medical Oncology. Toronto, ON.
- 7) Knowles, D., Ho, S., Nguyen, K., **Morris, D.**, Magliocco, A., Sarkar, A., Koller, D., Chukka, S., & Barnes, M. (2014, December). *Machine learning-based prognostication of breast cancer recurrence using tissue slide features from H&E and immunohistochemically stained digital slides*. [Abstract]. Presented at the San Antonio Breast Symposium 2014. San Antonio, TX, USA.

PUBLICATIONS

- 8) Kornaga, E., McIntyre, J.B., Klimowicz, A., Guggisberg, N., **Morris, D.**, & Magliocco, A. (2014, December). *Evaluation of RT-qPCR and luminex-based methodologies in HER2 breast cancer testing*. [Abstract]. Presented at the San Antonio Breast Cancer Symposium December 2014 (abstr 809). Cancer Research 05/2015 75(9 Supplement) P5-10-16-P5-10-16. San Antonio, TX, USA.
- 9) Lam, W., Storek, J., Bahlis, N., Brown, C., Duggan, P., Geddes, M., Savoie, M.L., Shafey, M, **Stewart, D.**, & **Daly, A.** (2014). BK virus hemorrhagic cystitis is associated with graft versus host disease and increased health care resource utilization in patients undergoing allogeneic stem cell transplantation [Abstract]. *Blood* 2014, 124 (21).
- 10) Lebel, M., Guo, Y., Lingala, S., Frayne, R., Anderson, L., **Easaw, J.**, & Nayak, K. (2015, May). *The comprehensive contrast-enhanced neuro exam* [Abstract]. Presented at ISMRM, Conference, Toronto, ON, Canada.
- 11) **Lupichuk, S.**, Lester, R., Tilley, D., Kostaras, X., Anil, J., & **Henning, J.W.** (2015, April). *Comparison of adjuvant TAC vs. FEC-D chemotherapy in women < 50 with node positive, HER2 negative breast cancer: a retrospective cohort study* (Presentation). Presented in Toronto, Ontario.
- 12) Mahe, E., Le, A., Street, L., Akhtar, A., Pournaziri, P., Kosar, F., Shabani-Rad, M.T., **Stewart, D.**, & Mansoor, A. (2014). DNA damage repair protein (PARP1, ATM & p53) expression and its association with proliferation index (Ki67) and overall survival in mantle cell lymphoma. [Abstract]. *Modern Pathology Vol 27(2)*, 360A.
- 13) Melosky, B., Anderson, H., Burkes, R., Chu, Q., **Hao, D.**, Ho, V., ... Laskin, J.J. (2014, December) *Pan-Canadian rash trial with EGFR inhibitors. Prophylactic treatment for rash induced by EGFR inhibitor improves rash without compromising on efficacy The PanCanadian Rash Trial: A randomized Phase III trial in NSCLC*. [Poster Abstract] ESMO, Madrid
- 14) Nixon, N.A., Khan, O.F., **Tang, P.A.**, **Monzon, J.G.**, Li, H., Imam, H., Ezeife, D., Parimi, S., **Dowden, S.D.**, & **Tam, V.C.** *Drug development for breast (BC), colorectal (CRC), and non-small cell lung cancers (NSCLC) over the past 34 years*. [Abstract]. Proceedings of the 2015 American Society of Clinical Oncology (ASCO) Annual Meeting, Chicago, IL. *J Clin Oncol* 33:5s, 2015.

PUBLICATIONS

- 15) Oh, D., Duan, Q., Peters, A., Chua, N., & **Stewart, D.** (2014). Autologous stem cell transplantation improves survival for patients with follicular lymphoma in first or second relapse: results of a comparative effectiveness instrumental variable analysis. [Abstract]. *American Society of Hematology Annual Meeting 2014. Blood 124*, 3972.
- 16) Parimi, S., **Karachiwala, H.**, Linm, Y., **Monzon, J.G.**, **Tam, V.C.**, Chen, E.X., Dancey, J., & **Tang, P.A.**. Critical assessment of phase 0 (Ph0) and window of opportunity (WOO) trials: Definitions and reporting. [Abstract]. *Proceedings of the 2015 American Society of Clinical Oncology (ASCO) Annual Meeting, Chicago, IL. J Clin Oncol 33:5s*, Presented at the 2015 Canadian Association of Medical Oncology, Toronto, Ontario, Canada
- 17) **Parimi, S., Raissouni, S.**, Lin, Y., **Tang, P.A.**, **Monzon, J.G.**, Li, H., & **Tam, V.C.** (2015) *Trends in the design and interpretation of metastatic colorectal cancer phase III clinical trials.* [Abstract]. Proceedings of the 2015 Gastrointestinal Cancer Symposium, San Francisco, CA.
- 18) **Parimi, S., Raissouni, S.**, Lin, Y., **Monzon, J.G.**, **Tang, P.A.**, & **Tam, V.C.** (2015). *Trends in the design and interpretation of metastatic colorectal cancer phase III clinical trials.* [Abstract]. Proceedings of the 2015 Gastrointestinal Cancer Symposium, San Francisco, CA, USA.
- 19) Pitz, M., **Easaw, J.** (2014) Glioblastoma pattern of practice from two regional cancer centres in Canada. [Abstract]. *Canadian Journal of Neurological Sciences. 30;41* (supplement 2):S9- S10.
- 20) Qureshi, A., Akhter, A., Farooq, F., Luider, J., **Stewart, D.**, & Mansoor, A. (2014). Distinct B-cell receptor (BCR) isotype in diffuse large B-cell lymphoma (DLBCL) relates with ABC and GCB genetic signatures and may associate with signaling molecules of clinical significance. [Abstract]. *American Society of Hematology Annual Meeting 2014. Blood 2014 124.*
- 21) **Raissouni, S.**, Mercer, J., Gresham, G., **Kumar, A.**, Goodwin, R., Jiang, M., Leung, A., **Heng, D.**, **Tang, P.**, ... **Monzon, J.**, Cheung, W., & **Vickers, M.M.** (2014). *External validation of the Neoadjuvant Rectal (NAR) Score and Valentini Prediction Nomogram (VPN): A Multi-Centre study.* [Abstract]. Presented at the 2014 ASCO Annual Meeting Proceedings. Chicago, Ill, USA.

PUBLICATIONS

- 22) Riu, J., & **Morris, D.** *Oncolytic viral therapy with immune modulation is an effective novel treatment strategy for non-small cell lung cancer.* [Abstract]. Presented at the AACR Annual Meeting 2015 (abstr 15-A-3257).
- 23) **Roldan-Urgoiti, G.**, Sinnarajah, A., Hussain, S., & **Hao, D.** (2015, April) *A case of paraneoplastic neuropsychiatric syndrome with atypical clinical and radiologic presentation.* [Abstract] Accepted to the 26th Annual Palliative Care Education and Research Days, Edmonton April 26th and the Canadian Palliative Care Conference, Calgary, Alberta, Canada.
- 24) Roldan-Urgoti, G., Lawn, S., Scott, J., **Easaw, J.**, Kenchappa, R., Taylor, J., Paleologos, N., Schiff, D., Chan, J., Forsyth, P. Evaluation of p75 expression and patterns of recurrence in patients with malignant gliomas treated with bevacizumab [Abstract]. *Proceedings of the 2015 American Society of Clinical Oncology (ASCO) Annual Meeting, Chicago, IL. J Clin Oncol 33:5s.*
- 25) **Tam, V.C.**, Ingledew, P.A., Berry, S.R., Verma, S., & Giuliani, M.E. (2015) Developing oncology goals and objectives for medical students: A national Delphi process. [Abstract]. Presented at the 2015 American Society of Clinical Oncology (ASCO) Annual Meeting, Chicago, IL. *J Clin Oncol 33:5s,*
- 26) Yokom, D.W., **Alimohamed, N.S.**, Winkvist, E.W., Berry, S., Hubay, S., Lattouf, J.B., Leonard, H., Girolametto, C., Saad, F., & Sridhar, S.S. (2015), A retrospective analysis of clinical factors influencing clinical response in patients with metastatic castration resistant prostate cancer treated with cabazitaxel, *Journal of Clinical Oncology*, 33, 281.
- 27) Yokom, D.W., **Alimohamed, N.S.**, Winkvist, E.W., Berry, S., Hubay, S., Lattouf, J.B., Sridhar, S.S. (2015) *A retrospective analysis of clinical factors influencing clinical response in patients with metastatic castration resistant prostate cancer treated with cabazitaxel* [Abstract]. Presented at the Genitourinary American Society of Clinical Oncology Annual Meeting, Orlando, USA.

PUBLICATIONS

BOOK CHAPTERS

- 1) Thirukkumaran, C., & **Morris, D.** (2015) Oncolytic viral therapy using reovirus. *Methods in Molecular Biology*. In Walther, Wolfgang, Stein, Ulrike (Eds.) *Gene Therapy of Solid Cancers Methods and Protocols* (pp.187-223). SpringerLink New York.
- 2) **Alimohamed, N.**, Choueiri, T.K., **Heng, D.Y.C.** (2015) Clinical prognostic factors in metastatic renal cell carcinoma. In R. Bukowski, R. Figli & R. Motzer (Eds.), *Renal cell carcinoma: molecular targets and clinical applications* (pp.555-567). Springer Science+Business Media New York.
- 3) Kroeger, N., **Heng, D.Y.**, Katten, M.W (2015). Independent predictors of clinical outcomes and prediction models for renal tumor pathology. *Genitourinary Pathology* (Chapter 28). Springer Science New York.
- 4) **Paterson, A.** (2014). Bone-targeted agents and skeletal-related events in breast cancer patients with bone metastases. D. Heymann (Eds.), *Bone Cancer* (pp: 665-676). Elsevier Inc. 2014.

MEDICAL PHYSICS

- 1) Liu, H.W., **Gräfe, J.**, **Khan, R.**, Olivotto, I., & **Villarreal-Barajas, J.E.** (2015). Role of in vivo dosimetry with radiochromic films for dose verification during cutaneous radiation therapy. *Radiation Oncology*, 10(12).
- 2) **Gräfe, J.**, **Poirier, Y.**, **Jacso, F.**, **Khan, R.**, Liu, H.W., & Villarreal-Barajas, J.E. (2014). Assessing the deviation from the inverse square law for orthovoltage beams with closed-ended applicators. *Journal of Applied Clinical Medical Physics*, 15(4), 356-366.
- 3) **Quirk, S.**, **Conroy, L.**, & **Smith, W.L.** (2014). When is respiratory management necessary for partial breast intensity modulated radiotherapy: A respiratory amplitude escalation treatment planning study. *Radiotherapy and Oncology* 112(3), 402-406.
- 4) **Chugh, B.P.**, **Quirk, S.**, **Conroy, L.**, & **Smith, W.L.** (2014). Measurement of time delays in gated radiotherapy for realistic respiratory motions. *Medical Physics* 41(9), 091702.
- 5) **Quirk, S.**, **Conroy, L.**, & **Smith, W.L.** (2014). Accounting for respiratory motion in partial breast intensity modulated radiotherapy during treatment planning: A new patient selection metric. *European Journal of Cancer*, 50(11), 1872-1879.

PUBLICATIONS

- 6) **Gräfe, J.**, McNeill, F.E., Noseworthy, M.D., & Chettle, D.R. (2014). Gadolinium detection via *in vivo* prompt gamma neutron activation analysis following gadolinium-based contrast agent injection: a pilot study in 10 human participants. *Physiological Measurement* 2014, 35, 1861-1872.
- 7) **Brown, D.**, Shulman, A., **Hudson, A.**, **Smith, W.L.**, Fisher, B., Hollon, J., Pipman, Y., Van Dyk, J., & Einck, J. (2014). A Framework for the Implementation of New Radiation Therapy Technologies and Treatment Techniques in Low-Income Countries. *Physica Medica: European Journal of Medical Physics* 30, 791-798.
- 8) Einck, J., **Hudson, A.**, Yashar, C., Dieng, M., Gaye, M., Diagne, M., Shulman, A., Fisher, B., Mundt, A., & **Brown, D.** (2014). Implementation of a novel high dose rate brachytherapy planning technique for carcinoma of the cervix in Senegal: A Model for the Developing World. *International Journal of Radiation Oncology, Biology, and Physics*, 89, 462-467.
- 9) Page, B., **Hudson, A.**, **Brown, D.**, Shulman, A., Abdel-Wahab, M., Fisher, B., & Patel, S. (2014). Cobalt, Linac, or Other: What is the Best Solution for Radiotherapy in Developing Countries? *International Journal of Radiation Oncology, Biology, and Physics*, 89, 476-480.
- 10) **Ploquin, N.**, Kertzsch, G., Vandervoort, E., Cygler, J.E., Andersen, C.E., & Francescon, P. (2015). Use of novel fibre-coupled radioluminescence and RADPOS dosimetry systems for total scatter factor measurements in small fields. *Physics in Medicine and Biology*, 7, 60(1):1-14.
- 11) **Kirkby, C.**, & **Ghasroddashti, E.** (2015). Targeting mitochondria in cancer cells using gold nanoparticle-enhanced radiotherapy: A Monte Carlo study. *Medical Physics*, 42(2), 1119-1128.
- 12) **Balderson, M.**, & **Kirkby, C.** (2015). Potential Implications of the bystander effect on TCP and EUD when considering target volume dose heterogeneity. *International Journal of Radiation Biology*, 91(1) 54-61.
- 13) **McGeachy, P.**, Madamesila, J., Beauchamp, A., & **Khan, R.** (2015). An open-source genetic algorithm for determining optimal seed distributions for low-dose-rate prostate brachytherapy. *Brachytherapy*. 2015 May 25. pii: S1538-4721(15)00468-7. doi: 10.1016/j.brachy.2015.04.007. [Epub ahead of print]

PUBLICATIONS

PALLIATIVE MEDICINE

- 1) **Abdul-Razzak, A.**, You, J., Sherifali, D., **Simon, J.**, & Brazil, K. (2014). “Conditional Candor” and “Knowing Me:” an interpretive description study on patient preferences for physician behaviors during end-of-life communication. *BMJ Open*, 10(4): doi 10.1136/bmjopen.2014.005653
- 2) **Abdul-Razzak, A.**, You, J., Sherifali, D., **Simon, J.**, & Brazil, K. (2015). “Talk to me:” a mixed methods study on preferred physician behaviors during end-of-life communication from the patient perspective. *Health Expectations (2015) in press*
- 3) Bremault-Phillips, S., Olson, J., Brett-Maclean, P., Oneschuk, D., **Sinclair, S.**, Magnus, R., Weis, J., ... & Puchalski, C. (2015) ntegrating Spirituality as a Key Component of Patient Care. *Religions. 2015* [In Press].
- 4) Clark, A.J., Taenzer, P., Drummond, N., Spanswick, C.C., Montgomery, L.S., Findlay, T., Pereira, J.X., Williamson, T., Palacios-Derflingher, L., & **Braun, T.** *Physician to Physician Telephone Consultations for Chronic Pain Patients: A Pragmatic Randomized Trial* [in press].
- 5) **Dharmawardene, M.**, Givens, J., Wachholtz, A., Makowski, S., & Tjia, J. (2015). A systematic review and meta-analysis of meditative interventions for informal caregivers and health professionals. *BMJ Support Palliat Care*. pii: bmjcare.2014.000819. doi: 10.1136/bmjcare.2014.000819 [Epub ahead of print]
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PEDIATRIC ONCOLOGY

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

2013-2014 ACADEMIC YEAR (*MISSING FROM THE 2013-2014 DEPARTMENT OF ONCOLOGY ANNUAL REPORT*)

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PSYCHOSOCIAL ONCOLOGY

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TRANSLATIONAL RESEARCH & LABORATORIES

NO REPORT WAS SUBMITTED FOR THE 2014-2015 ACADEMIC YEAR

ONCOLOGY GRAND ROUNDS

2014

July 2

Dataset Research in Breast Cancer: A Surgeon's Perspective

Antoine Bouchard-Fortier, MD

Surgical Oncology Fellow, University of Calgary

September 24

Building Bridges – Supporting Clinicians, Patients and Their Families When Cancer Advances

Bert Enns, MTS/BA

Project Lead, TBCC & Calgary Zone Palliative Care Collaborative
and

Dr. Marc Kerba

Radiation Oncologist / Clinical Assistant Professor, Department of Oncology, Cumming

School of

Medicine, University of Calgary

September 26

Incorporating Rehabilitation into the Care of Cancer Patients at the Tom Baker Cancer Centre

Dr. Chester Ho

Division Head, Division of Physical Medicine & Rehabilitation, Department of Clinical
Neurosciences

and

Deb Allatt

Director, Supportive Care and Patient Experience, Tom Baker Cancer Centre

October 1

Palliative Care in the Calgary Zone – Not Just Death & Dying

Dr. Lyle Galloway, MD, CCFP

Medical Director, Intensive Palliative Care Unit; Palliative Physician Consultant, TBCC
and

Barb Wheler, BScOT, MHS

Director, Palliative/End of Life Care, Calgary Zone

October 22

Esophageal Cancer: Are We at a Crossroad?

Dr. Syed Iftikhar, MBBS, FRCS, DM

Associate Professor & Consultant Surgeon, Department of Surgery, Royal Derby
Hospital & University of Nottingham

October 24

Multidisciplinary Consult for Painful Bone Metastases: Role of Surgical and Oncology Rehab Assessment in Symptom Management

ONCOLOGY GRAND ROUNDS

Dr. Jackson Wu, Department of Oncology
and
Dr. Brad Jacobs, Department of Clinical Neurosciences
and
Dr. Shannon Puloski, Department of Orthopedic Surgery
and
Dr. Jon-Paul Voroney, Department of Oncology
and
Lori Radke, TBCC Rehabilitation Coordinator
and
Hellen Jung, TBCC Clinical Nurse Specialist

November 5

Melanoma Treatment – A Whole New World

Dr. Caroline Robert, MD, PhD
Head, Dermatology Unit, Institut Gustave-Roussy, Paris, France

November 6

Lifestyle, Inflammation and Cancer: Research to Prevention. From Motion to Molecules and Back Again

Dr. Darren Brenner, PhD
Postdoctoral Fellow, Department of Cancer Epidemiology and Prevention Research, Tom Baker Cancer Centre

November 19

The Emerging Role of Immune Therapy in Breast Cancer

Dr. Heather McArthur, MD, MPH
Assistant Attending Physician, Breast Medicine Service, Memorial Sloan Kettering Cancer Center
and Assistant Professor, Weill Cornell Medical College

November 26

Colon Cancer: Adjuvant and Beyond

Dr. Barbara Melosky, MD, FRCP(C)
Medical Oncologist, British Columbia Cancer Agency

November 28

Patients Living with Advanced Cancer – Service Gaps, Utilization and Emerging Opportunities

Dr. Marc Kerba, BSc, MD, MPA, FRCP(C)
Radiation Oncologist, Tom Baker Cancer Centre & Clinical Assistant Professor,
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Bert Enns, MTS/BA
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and

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Dr. Aynharan Sinnarajah, MD, CCFP
Medical Director, Palliative & End of Life Care, Calgary Zone, Alberta Health Services

December 3

Sequencing Therapy in Metastatic Colorectal Cancer

Dr. Dirk Arnold, MD

Director, Tumor Biology Institute, Freiburg, Germany

2015

January 7

Practical Management of Blood Clots in Cancer Patients

Dr. Jay Easaw, MD, PhD, FRCP(C)

Clinical Associate Professor, Division of Medical Oncology, Department of Oncology, Cumming

School of Medicine, University of Calgary

January 14

Quality of End of Life Care in Cancer: Results of a 4 Province Study

Dr. Lisa Barbera, BSc, MD, MPA, FRCPC

Associate Professor, Department of Radiation Oncology, Odette Cancer Centre

January 21

Quality Improvement for CancerControl – “Working Smarter Not Harder”

Mona Udowicz, MA, BA, MRT(T)

Director, Quality Safety, and Patient Experience, Process Improvement Consultant, Provincial

Practices, CancerControl Alberta

and

Alex Schonberg, MHA, Bsc

Process Improvement Consultant, Provincial Practices, CancerControl Alberta

January 23

Advances in Urologic Cancers: Extending Overall Survival and Examining Our Outcomes

Dr. Daniel Heng, MD

GU Tumour Group Leader, Clinical Department of Oncology, Calgary Zone, CancerControl Alberta, AHS

and

Dr. Nimira Alimohamed, MD

Medical Oncologist, Clinical Department of Oncology, Calgary Zone, CancerControl Alberta, AHS

and

Dr. Xiaolan Feng, MD

Medical Oncologist, Clinical Department of Oncology, Calgary Zone, CancerControl Alberta, AHS

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ONCOLOGY GRAND ROUNDS

Dr. Jenny Ko, MD
Medical Oncology Resident, Clinical Department of Oncology, Calgary Zone,
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Alberta, AHS

January 26

‘My Children Don’t Have Sex, but Their Friends Do’ – HPV Vaccine, Sexual Health, and Cancer Prevention

Dr. Zeev Rosberger, PhD
Director, Psychology Division, Department of Psychiatry, Sir Mortimer B. Davis, Jewish General Hospital and Associate Professor, Departments of Psychology, Psychiatry and Oncology, McGill University

January 28

Striving to Live Well: Exploring the Family’s Journey through the World of Chronic Cancer

Linda Watson, RN, PhD, CON(c)
Lead, Person-Centered Care Integration, Provincial Practices, CancerControl Alberta, Alberta Health Services

February 27

From the Clinic to the Bedroom: What is the Role of the Oncologist in the Sex Lives of Patients?

Dr. John Robinson, PhD, R. Psych
Adjunct Associate Professor, Division of Psychosocial Oncology, Department of Oncology
and

Dr. Lauren Walker, PhD
Fellow, Division of Psychosocial Oncology, Department of Oncology
and

Dr. Sarah Glaze, MD, FRCSC
Assistant Professor, Division of Gynecologic Oncology, Departments of Oncology and Obstetrics and Gynecology
and

Reanne Booker, Nurse Practitioner
Tom Baker Cancer Centre

March 4

What the Heck is Clinical Ethics and Why Do We Need It?

Anna Zadunayski, LLB, MSc
Clinical Ethicist, Alberta Health Services

March 27

Improving Care through Technical Innovation at TBCC

Dr. Richie Sinha, BsC, MD, FRCPC
Radiation Oncologist, Department of Oncology

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and

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Dr. Colleen Schinkel, PhD DABR
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and

Dr. Rosanna Yeung, MD, BSc (Pharm)
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and

Leigh Conroy, MSc, PhD Candidate
Radiation Oncology Physics, Department of Physics and Astronomy, University of
Calgary

April 22

Journey through Colorectal Cancer – An Exploration of Health Outcomes Research

Dr. Richard Lee-Ying, MD
GI Medical Oncology Fellow, British Columbia Cancer Agency

April 24

TFRI: Therapeutic Targeting of GBMS

Dr. Greg Cairncross, PhD
Director, Southern Alberta Cancer Research Institute and Professor, Department of
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Flying Too Close to the Sun and Myeloma Treatment

Dr. Nizar Bahlis, MD
Associate Professor, Division of Hematology, Department of Medicine, Cumming School
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May 13

Bladder Cancer in 2015: A Rapidly Changing Treatment Landscape

Dr. Srikala Sridhar, MD, MSc, FRCPC
Medical Oncologist, Princess Margaret Cancer Centre
GU Medical Oncology Site Group Head
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May 27

Human Sex Response Cycle 2015 Guides a Therapeutic Assessment of Sexual Difficulties for the Patient with Cancer

Dr. Rosemary Basson, MD, FRCP(UK)
Director, UBC Sexual Medicine and Clinical Professor, Department of Psychiatry, UBC

May 20

Breast Cancer in Young Women

Dr. May Lynn Quan, MD, MSc, FRCSC

ONCOLOGY GRAND ROUNDS

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Update on Breast Reconstruction

Dr. Claire Temple-Oberle, MD, MSc, FRCSC

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Chemotherapy in First Line Colon Cancer – How much is too much?

Dr. Suneil Khanna, MD, FRCPC

Medical Oncologist, Sunnybrooke Odette Cancer Centre

June 10

Supreme Court of Canada Decision on “Physician Assisted Dying” – What Does It Mean for TBCC Staff?

Dr. Jessica Simon, MB, ChB, FRCPC

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