

Motfitt Cancer Center
Sylvester Comprehensive Cancer Center
University of Florida Health Cancer Center

The Florida Academic Cancer Center Alliance Funded by the Casey DeSantis Cancer Research Program

John L. Cleveland, PhD, Center Director, Moffitt Cancer Center

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The Casey DeSantis Cancer Research Program

Created by Florida Statute 381.915 to:



- Enhance quality/competitiveness of cancer care at Florida based centers
- Further statewide biomedical research in cancer
- Capitalize on educational opportunities to create a robust talent pipeline

Noting additional economic benefits:



- Economic growth/return to Florida
- Jobs (high-paying physicians, researchers)
- Retain Floridians in-state for care and research.







Casey DeSantis Cancer Research Program Goals



Increase the number of NCI Designated Cancer Centers in Florida



Build **collaborations** between the centers to expedite innovations in cancer research throughout the State of Florida



Enhance the **quality** and national **competitiveness** of cancer care at Florida-based cancer centers



Maximize the return on the state's investments in biomedical research & technology



Translate innovation into impact at the point of patient care, prevention, and diagnosis







NCI Designation







A Cancer Center Designated by the National Cancer Institute

Primary goal of the Casey DeSantis Cancer Research Program was to provide support for UF Health and Sylvester to obtain an NCI designation and for Moffitt to sustain NCI Comprehensive designation



Moffitt obtained NCI-designated Comprehensive Cancer Center in 2001, successfully renewed in 2021, and will undergo competitive renewal again in 2026



Sylvester obtained NCI designation in July 2019, becoming the 71st designated Cancer Center, and will undergo competitive renewal in 2023



UF Health submitted its competitive Cancer Center Support Grant (CCSG) application to NCI in October 2022 and is awaiting a determination on funding







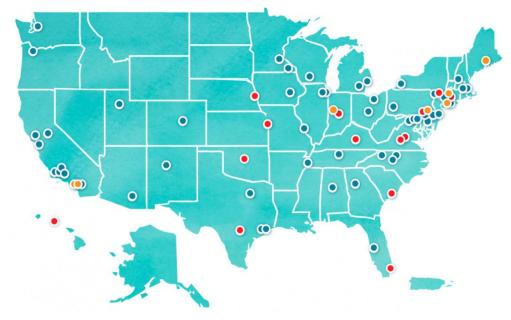
NCI Designation

PURPOSE

"...intended to foster excellence in research across a broad spectrum of scientific and medical concerns relevant to cancer." - NCI

WHY IT IS SO IMPORTANT

- Highest level of research recognition in cancer
 - Hard to attain
 - Challenging to keep
- Recruitment magnet (Scientists & Physicians)
- Provision of tomorrow's standard of care today
- Better patient outcomes at Designated Centers



Two Levels of NCI Designation

- 71 "Cancer Centers" (includes basic science)
- 53 "Comprehensive Cancer Centers"







Return on Investment Since 2015



Recognition of Sylvester as an NCI-designated Cancer Center



~200,000 newly diagnosed patients (reportable cases combined for FY17-FY22)
30,000+ patients accrued to Investigator-initiated Clinical Trials (Interventional)



\$822M+ in peer-reviewed grants awarded



~83,000 Training experiences for current and future clinicians and scientists



21,000+ Publications



770+ U.S. Patent filings







Research Faculty Recruitment at 3 FACCA Cancer Centers 2015 - 2022



352 Total faculty recruited to 3 Cancer Centers







FACCA Economic Impact

2022 FACCA Economic Report covering Fiscal Years 2016 - 2019









Our Mission

Since the beginning, our mission has been

To contribute to the prevention and cure of cancer



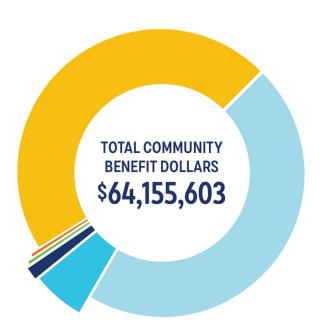


Community Benefit and Outreach

Community Benefit Financials

Fiscal Year 2022

Moffitt Cancer Center's Community Benefit initiative supports patients, families and clinicians through advancing cancer prevention, early detection, clinical care and research, especially for those at-risk populations disproportionately impacted by cancer.



*RESEARCH: Moffitt research continues to perform ongoing studies that benefit the surrounding communities now and into the future. However, that number has not currently been estimated for this fiscal year as Moffitt works intently on improving the integrity of reporting for community benefit.

PATIENT FINANCIAL ASSISTANCE PROGRAM

Total cost of services incurred by Moffitt to provide medical services to patients who are unable to pay:

\$29,546,230

MEDICAID SHORTFALLS

The Medicaid program pays Moffitt less than it costs the organization to provide care to its Medicaid patients:

\$29,807,110

COMMUNITY-BUILDING ACTIVITIES

Cost of developing communitybuilding programs and partnerships that address the root causes of health problems and offer the expertise and resources of the health care organization:

\$67,524

HEALTH PROFESSIONS EDUCATION

Cost associated with clinical education and training for physicians and medical students not including government funding:

\$3,706,864

COMMUNITY HEALTH IMPROVEMENT SERVICES

Cost of activities, events and in-kind donations carried out to improve the health of the community, beyond patient care:

\$919,858

COMMUNITY BENEFIT OPERATIONS

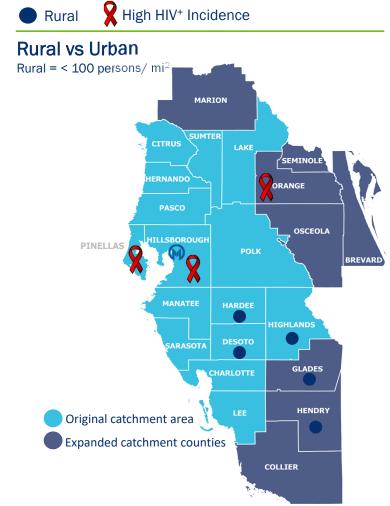
Costs associated with community benefit strategy and operations, including assigned staff and community health needs assessment costs:

\$108,017

Catchment Area Vulnerable Populations



Group	23 County Catchment Area	Florida	United States
Blacks	12.1%	16.1%	12.7%
Hispanics	21.4%	25.6%	18%
Seniors (≥age 65)	19.2%	17.3%	13%
Uninsured	12.1%	12.8%	8.8%
Rural Residents	8.3%	8.8%	19.3%
Same Sex Couple Households*	0.4%	0.4%	0.3%



 $_{11}$ Data Source: 2010 U.S. Census | ACS 2019 5yr | FDOH, HIV/AIDS Section, Epidemiologic Profile 2019

^{*}ACS 2018 5yr - Combined totals of unmarried "male householder with male partner" and "female householder with female partner"

Strategic Catchment Area Expansion through Partnership



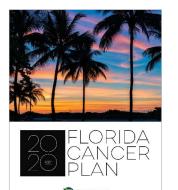




Clement Gwede, PhD CCRAB Chair Moffitt Cancer Center

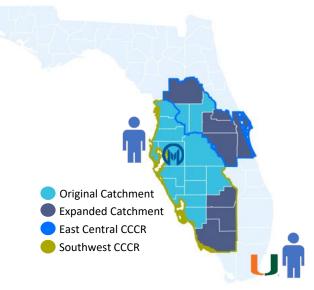


Erin Kobetz, PhD CCRAB Vice Chair Sylvester Cancer Center









Engaging the Community

Project CONTINUITY: Engaging Rural Farmers and Outdoor Workers to Address a Top 10 Cancer

IDENTIFYING HOTSPOTS

- Skin cancer prevention
- ► Tobacco prevention
- Pesticide safety





ENGAGING THE COMMUNITY

CONnec**TIN**g Yo**U** to Care in the commun**ITY**

- ► IFAS Extension Program
- ▶ Building trust in rural communities
- Engaging farm owners, farm workers, and outdoor workers



MAKING RESEARCH LINKAGES

- ► USDA telehealth grant (FL0719-A63)
- NCATS CTSI Pilot: 30 women with co-occurring conditions and cancer screening







- 15 farm events with mobile outreach
- ➤ 383 farmworkers reached (100% Hispanic)

Distributed sun protection items 55 COVID-19 vaccines





Sylvester's New "Game Changer" Outreach Vehicle(s)

Address the cancer burden in our South Florida community

The following services are provided for FREE:

- Cervical cancer screening
- Colorectal cancer screening
- Prostate cancer screening
- Hepatitis C viral exposure screening
- Skin cancer screening (coming soon)
- HIV testing
- Sexually transmitted infections (STI) screening
- H. Pylori testing





Moffitt's Research Strengths



Innovative science focused on translation and addressing the 3 Ps = Paradigms, Practice & Policy

Practice: Changing the standard of care

The NEW ENGLAND
JOURNAL of MEDICINE

Axicabtagene Ciloleucel as Second-Line Therapy for Large B-Cell Lymphoma

F.L. Locke, D.B. Miklos, C.A. Jacobson, M.-A. Perales, M.-J. Kersten, O.O. Oluwole, A. Ghobadi, A.P. Rapoport, J. McGuirk, J.M. Pagel, J. Muñoz, U. Farooq, T. van Meerten, P.M. Reagan, A. Sureda, I.W. Flinn, P. Vandenberghe, K.W. Song, M. Dickinson, M.C. Minnema, P.A. Riedell, L.A. Leslie, S. Chaganti, Y. Yang, S. Filosto, J. Shah, M. Schupp, C. To, P. Cheng, L.I. Gordon, and J.R. Westin, for All ZUMA-7 Investigators and Contributing Kite Members*



Frederick Locke

- Led Phase 3 trial of axi-cel CAR T for refractory/relapsed DLBCL.
- Showed axi-cell is superior to standard of care in event-free survival & response, with the expected level of toxicities.

Paradigms:

Transforming our understanding of cancer

mature metabolism

Altered propionate metabolism contributes to tumour progression and aggressiveness

Ana P. Gomes \$\text{0}^{1,2,10} \otimes\$, Didem liter \$\text{0}^{1,2,10}\$, Vivien Low \$\text{0}^{1,2,30}\$, Stanislav Drapela?, Tanya Schild\text{1}^{1,28}\$, Edouard Mullarky\text{1}^{1,3}\$, Julie Han\text{1}^{2}\$, Ilaria Elia \$\text{0}^{4,5}\$, Dorien Broekaert\text{4}^{5}\$, Adam Rosenzweig\text{1}^{2}\$, Michal Nagiec\text{1}^{2}\$, Joana B. Nunes \$\text{0}^{1,2}\$, Bethany E. Schaffer\text{1}^{2}\$, Anders P. Mutvei\text{1}^{2,9}\$, John M. Asara\text{6}\$, Lewis C. Cantley \$\text{0}^{1}\$, Sarah-Maria Fendt\text{0}^{4,5}\$ and John Blenis \$\text{0}^{1,2} \otimes\$



Ana Gomes

- Led seminal study investigating contribution of propionate dysregulation to the metastatic potential of breast & lung cancer cells
- Found that cancer cells have increased levels of methylmalonic acid and that accumulation drives an aggressive cancer phenotype

Policy: New recommendations that become national policies





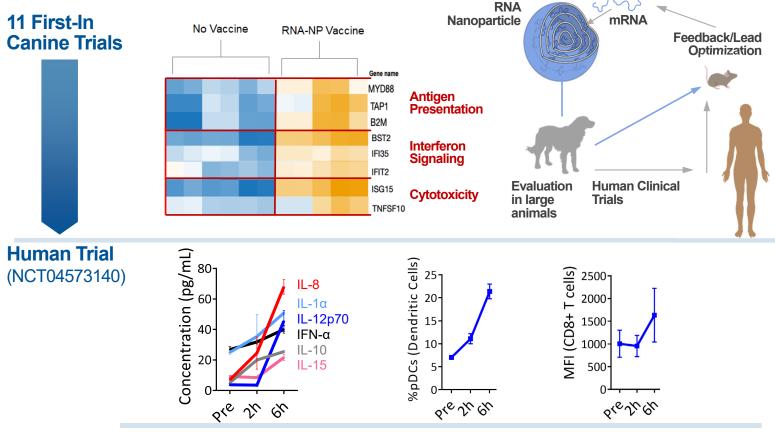
Tom Brandon & Vani Simmons



 Developed two smoking cessation interventions, "Stop Smoking for Good" and "Libre del Cigarrillo," adopted by the National Cancer Institute after rigorous review

Casey DeSantis Cancer Research Program Impact

Comparative Immuno-oncology Support to Accelerate Clinical Translation











Sayour

r M

Mitchell Sawyer





Flores

Angelini

Publications Clin Can Res, 2020 Sci Adv, 2019 Nat Comm, 2019 ACS Nano, 2019

Funding R37 CA251978 R01 CA175517 FBRP 20L07

Shared Resource
Biostatistics
Flow Cytometry
Next Generation Sequencing



Immunotherapy for Lung Cancer

THE LANCET

Volume 358 - Number 10 318 - Pages 2202-2306 - December 18/25-31, 2021

www.thelancet.com

Pembrolizumab versus chemotherapy for previously untreated, PD-L1-expressing, locally advanced or metastatic non-small-cell lung cancer (KEYNOTE-042): a randomised, open-label, controlled, phase 3 trial

Tony S K Mok, Yi-Long Wu, Iveta Kudaba, Dariusz M Kowalski, Byoung Chul Cho, Hande Z Turna, Gilberto Castro Jr, Vichien Srimuninnimit, Konstantin K Laktionov, Igor Bondarenko, Kaoru Kubota, Gregory M Lubiniecki, Jin Zhang, Debra Kush, Gilberto Lopes, for the KEYNOTE-042 Investigators*



Gilberto de Lima Lopes Jr., M.D., M.B.A.

Sylvester's study contributed to FDA approval of the targeted therapy for lung cancer



Return on Investment of Center <u>Collaborations</u> Since 2015



24 inter-institutional pilot projects awarded through the program since 2015 (\$2.85M)

■ Led to ROI of \$32+ million in peer reviewed extramural funding & \$39M overall



Publications

- 75+ collaborative publications with members of at least 2 Centers in the past 3 years
- 39 publications directly related to pilot projects



Collaboration

- Annual scientific retreats
- Quarterly meetings of Center Directors
- Monthly Administrators conference calls
- Research collaborations through conferences and workshops







Florida Academic Cancer Center Alliance (FACCA)

Multi-Institutional Pilot Example

FACCA-2016-18: "Defining and Targeting the Epigenetic Landscape

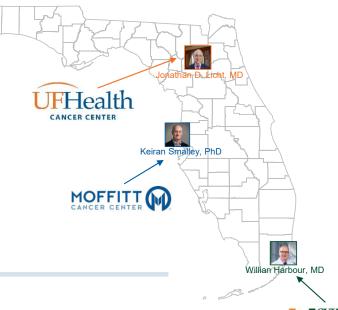
of Uveal Melanoma"

Co-Pls: Moffitt: Kerian Smalley, PhD

Miami: William Harbour, MD UF: Jonathan D. Licht, MD

Award Amount: \$150,000 Total (\$50,000 per Center)

Project Period: 9/1/2016 – 8/31/2017



Outcomes:

2017: FBRP 7BC05 "Defining and Targeting Epigenetic Deregulation in Uveal Melanoma"

2018: FBRP 8BC03 "Defining and Therapeutically Targeting HDAC8-Driven Reprogramming in

Melanoma Brain Metastasis Development"

2021 R01 CA256193 "Characterization and Targeting of the Epigenetic State Underlying Uveal Melanoma

Liver Metastasis"

\$7,548,918: Total Amount of Peer-Reviewed Funding Awarded, ROI: >50:1

5: Peer-Reviewed Publications



Florida Academic Cancer Center Alliance

Moffitt Cancer Center Sylvester Comprehensive Cancer Center University of Florida Health Cancer Center

Thank You





