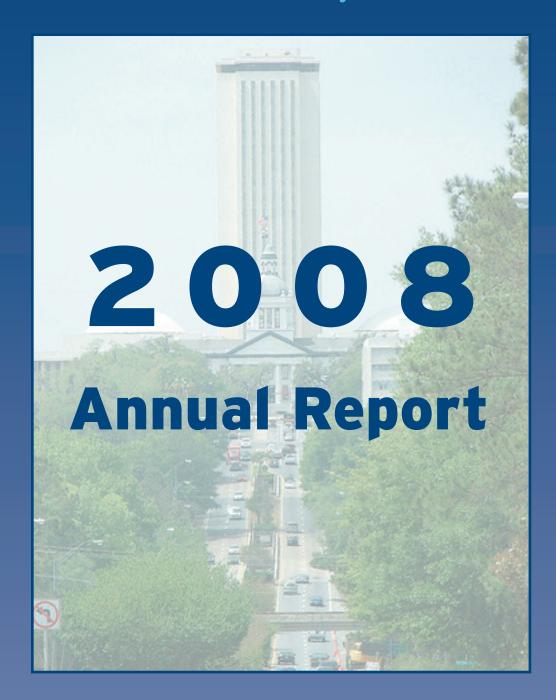
Florida Cancer Control and Research Advisory Council



Submitted to the Governor, Legislature and Surgeon General Pursuant to Section 1004.435, Florida Statute

February 15, 2009



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Eric S. Sandler, MD

Organization Represented

Association of Pediatric Tumor

Programs

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State of Florida House of Representatives General Public Consumer Advocate

Florida Pediatric Society

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Message from the Cancer Control and Research Advisory Council

The Florida Cancer Control and Research Advisory Council, also known as CCRAB, is the state council responsible for advising the legislature, Governor and Surgeon General on how to reduce the cancer burden in Florida. We monitor cancer data, trends and disparities, and evaluate and promote effective interventions to help in cancer prevention, screening and treatment. We also develop position papers on cancer-related legislation and state policy issues.

CCRAB was established in state statute in 1979, and is currently governed by Florida Statute 1004.435. The Council is housed and funded by the H. Lee Moffitt Cancer Center but operates as an independent group. Our 35 members are leaders in health care, education, cancer research and treatment and Florida government, and many are themselves cancer survivors. The Council meets at least twice a year, and is governed by a Chair, appointed by the Governor, and an Executive Committee.

Despite very difficult budgetary times, there are still opportunities to continue progress in decreasing cancer rates in Florida. In particular, opportunities exist to decrease the cancer burden without seeking additional funds from the Florida Legislature.

It is with pleasure that the CCRAB submits this 2008 Annual Report. The most recent data on the cancer burden in Florida mirrors the nation, showing a gradual decline in the incidence of cancer. Our report outlines improvements while also highlighting areas of opportunity.

We greatly appreciate H. Lee Moffitt Cancer Center for continuing to fund the Council's operations and allowing the Council to function as an independent advisory board. Full CCRAB minutes and updated information can be obtained online at our website www.ccrab.org. For additional copies of this report, or any additional information about CCRAB and its activities, please contact the Council office.

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Respectfully submitted, Eric S. Sandler, MD Chairman Cancer Control and Research Advisory Council

Florida Cancer Control and Research Advisory Council 2008 Annual Report Highlights



- ♦ CCRAB members authored sections and aided in the development of the new *Florida Cancer Plan*, 2009-2012, working in conjunction with the Florida Department of Health Comprehensive Cancer Program and the Florida Cancer Data System.
- ◆ Developed a partnership between the Moffitt Cancer Center's Donald A. Adam Comprehensive Melanoma Research Center and the Florida Keys Advanced Health Education Center (AHEC) to educate Monroe County 3rd graders on sun awareness.
- ♦ Supported the continuation of the Bankhead-Coley Research Initiative, which provides peer-reviewed research dollars to Florida cancer researchers.
- ♦ Developed recommendations on tobacco control, including: support for a \$1/pack tobacco tax, increased taxation on all tobacco products, and a formal review of the effectiveness of the subcontracts of the \$59 million allocated to tobacco control.
- Sponsored an educational program on breast cancer and outcomes in African American women, evaluating why African Americans have worse outcomes despite high screening rates.
- Developed strategies with state cancer experts and recommendations in the areas of cancer prevention, screening and survivorship, and worked collaboratively with the Surgeon General and House and Senate health care committees' staff to communicate our cancer control recommendations
- ♦ Continued ongoing communication with members of the Florida House and Senate in an effort to increase Council visibility while increasing the legislators' exposure to cancer control issues in Florida.
- Initiated bill development for education of middle school age females on human papilloma virus (HPV), in partnership with various health care organizations and the Junior Leagues of Florida.
- Supported legislation to increase coverage within the Florida Breast and Cervical Cancer Early Detection Program to those under age 65, while recommending a limit to the number of years a woman can remain in the program to less than five.
- ◆ Initiated and supported legislation to limit the use of tanning beds to ages 16 and over and require parental consent for those ages 16 and 17. The bills are sponsored by Senator Eleanor Sobel (D-District 31) and Representative Yolly Roberson (D-District 104).
- ♦ Convened two full Council meetings and one Executive Committee meeting in 2008. Full meeting minutes available at www.ccrab.org.

SUMMARY OF ACTIVITIES AND OPPORTUNITES

Legislative Initiatives 2008

The CCRAB membership supported specific legislative efforts in the area of Cancer Control in the 2008 legislative session.

Funding Allocations for Cancer Control

Total Florida legislative funding allocations for cancer control, research and treatment programs reached \$110,000,000 in the 2008 legislative session. As part of this grand total, the James and Esther King Biomedical Research Program received \$9.9 million, the Mary Brogan Breast and Cervical Cancer Early Detection and Treatment Program received \$6.7 million, and the Closing the Gap - Reducing Racial and Ethnic Health Disparities Grant Program received \$5.185 million. The Bankhead-Coley Cancer Research Program received \$9 million. Tobacco control received \$59.34 million.

Other legislative allocations included funds for H. Lee Moffitt Cancer Center, University of Miami Sylvester Comprehensive Cancer Center, the League Against Cancer, and the Haitian Americans Association Against Cancer.

CCRAB Position: CCRAB commends the Florida Legislature for its fiscal commitment to cancer control and research and tobacco control.

James and Ester King and Bankhead-Coley Research Funds

The Council actively supported the continued funding of the Bankhead-Coley Cancer Research Program and the James and Esther King Research Program managed by the Department of Health. The James and Esther King Program's grants, which have been in place since 2002, have focused on a broad range of tobacco-related diseases as well as nicotine addiction. They have commissioned individual scientists and teams of investigators at all experience levels to pursue basic science, translational research and clinical studies. Research produced by Program grantees has already brought an additional \$90.4 million in funding to Florida. Bankhead-Coley funds, in place for only three years, are also showing positive returns to the state of Florida in the form of increased extramural funding, increased publications in peer-reviewed journals and national exposure. These programs continue to serve as incubator funds for young investigators and clinician scientists around the state which allow them to compete nationally for NIH and other national research funds.

CCRAB Position: Despite the very difficult economic times, the Council believes it is critical to continue to support cancer research funding in both the James and Esther King and the Bankhead Coley research programs.

Training Florida's Health Care Providers

CCRAB recommends that health care organizations and cancer control stakeholders develop and disburse Continuing Medical Education (CME) material on cancer prevention, screening, treatment and survivorship to be used as optional CME training courses for MD's, DO's, DDM's and other health care providers. CCRAB identified a

need for up-to-date information on prevention, screening, treatment and survivorship to health care providers.

Vaccination to Prevent HPV Infection and Cervical Cancer

In 2006, a major cancer prevention breakthrough occurred in the form of a vaccine to prevent Human Papilloma Virus (HPV) Infection, which is linked to most cases of cervical cancer. This was a major advance in cancer prevention and the first approved vaccination to prevent cancer since the hepatitis B vaccination, which decreases the occurrence of cirrhosis and liver cancer. The HPV vaccine is approved for females 9-26 but recommended at the earliest ages due to better immune responses generated at earlier ages and in order to reach girls prior to their becoming sexually active. It is clear now that HPV also causes a significant percentage of head and neck cancers, and may play a role in other cancers.

Florida's rate of cervical cancer incidence of 9.0 per 100,000, is higher than the national rate of 6.7 per 100,000. The HPV vaccination is an opportunity for Florida to reduce health disparities and to decrease our state's cancer burden. CCRAB initiated legislation that would have provided educational materials on the HPV vaccine to parents of middle school age girls. The bill was sponsored by Representative Kelly Skidmore (D-District 90) and Senator Nan Rich (D-District 34). Budget analysis determined the bill created no additional cost to either the DOH or DOE and was budget neutral.

CCRAB Position: The Florida Department of Health and the Florida Department of Education should work together to provide educational material developed by the federal Centers for Disease Control and Prevention (CDC) to parents of middle school age girls throughout Florida. We still strongly recommend that the Department of Education provide CDC educational material to parents of all middle school girls to allow parents to make an informed choice for their children. We believe this should occur without legislation.

Florida Cancer Data System

Florida researchers, government agencies, program planners and policy makers are very fortunate to have access to the Florida Cancer Data System (FCDS), which is the single largest population-based cancer incidence registry in the nation. The Florida Cancer Data System represents an ongoing success for our state. It has been collecting data on new cancer cases since 1981. Over 160,000 cases are collected from patient medical records annually. Information about newly diagnosed cancer cases are submitted by hospitals, freestanding ambulatory surgical facilities, radiation therapy facilities, private physicians and pathology laboratories. The FCDS database contains approximately 3.8 million cancer records, 6 million discharge records from the Florida Agency for Health Care Administration and 3.5 million mortality records from Florida's Office of Vital Statistics.

The FCDS is part of the Centers for Disease Control and Prevention's National Program of Cancer Registries (CDC-NPCR) and is nationally certified by the North American Association of Central Cancer Registries (NAACCR) at its highest level, Gold certification. Gold certification is conferred on central cancer registries that exceed all standards for quality, completeness and timeliness. FCDS is funded by CDC and the

State of Florida, and operated by the University of Miami Sylvester Comprehensive Cancer Center under contract from the Florida Department of Health.

CCRAB Position: CCRAB recommends continued support for and funding of the FCDS and exploration of the transition of the data base from an incidence data base to a functional outcomes research data base, which will track outcomes on some or all cancer patients in the state. Additional funding will be required for the latter.

Veterans' Cancer Data Not Reported in Florida

The U.S. Centers for Disease Control and Prevention estimated that 40,000 to 70,000 cancer cases are potentially missed nationally each year because the Veterans Administration (VA) hospitals do not report cancer cases treated within the VA system of hospitals. The American Cancer Society estimates that there are up to 5,000 cases of cancer each year that are diagnosed in Florida VA hospitals that are not report to our state cancer registry, FCDS. As a result, the National Cancer Institute (NCI) and other national surveillance organizations report that total US rates for prostate, lung, bronchus and colorectal cancers as well as melanoma may be significantly underestimated. Surveillance, geographic or cluster information, and other research, are all affected. Such discrepancies can have resource utilization and health care disparities impact on the state's cancer health care system as many veterans move between the VA and civilian health care systems.

CCRAB Position: The state legislature, cancer control organizations and the Florida Department of Health should continue to work with the Veterans Administration to foster reporting of cancer cases diagnosed at VA hospitals to the Florida Cancer Data System.

Breast and Cervical Cancer Program

Women between the ages of 50 and 65 who meet financial eligibility requirements are able to be screened and treated for cervical and breast cancer in Florida. Once a woman is accepted into the program, she is eligible for medical care coverage as long as she is being treated for cancer or is on preventative medications such as tamoxifen.

CCRAB Position: The state should evaluate the option of limiting the number of years women may remain on the program to 2 years. This change would allow more women to be screened, diagnosed and treated.

Disparities in Cancer Care and Outcomes

Information about cancer prevention and screening are reaching many population subgroups in Florida, which may help reduce disparities. However, some groups continue to experience disparities. For example, for some cancers Blacks are more likely to be diagnosed at more advanced stages than whites. In recent studies, it was found that whites were significantly more likely than Blacks to survive five years for tumor sites studied, while no cancer site had significantly greater survival among African

¹ Furlow B. Accuracy of US cancer surveillance under threat. Lancet Oncology 2007;8(9):762-3.

Americans.² Even for those cancer sites where Blacks were diagnosed at earlier stages, this did not translate into a survival advantage. Therefore, these survival differences cannot be explained by looking only at screening rates. Similar results are seen between whites and Hispanic survival rates. For those cancers that do not have screening available, the results are similar: whites are more likely to have better survival rates. These survival differences point to the need for broad-based strategies to remedy racial inequality in cancer treatment and survival.

CCRAB Position: The Florida Legislature should continue to promote programs, research and access to care to reduce cancer disparities. Medical school education should include cultural courses to help future providers understand and combat cultural, institutional and individual barriers to equitable health care.

Access to care

Lack of adequate health insurance is a major barrier to health services, preventative care and adequate treatment. Those without health insurance are much more likely to be diagnosed with advanced stage cancer. Early cancer detection through effective screening procedures can reduce overall treatment costs and increase survival chances. The majority of the uninsured come from working families. More than 70% are in families with at least one full-time worker.³ Two-thirds of the uninsured live in low income families, those below 200% of the federal poverty level. People who are members of racial and ethnic groups are more likely to be uninsured. In Florida, 13% of whites are uninsured compared to 36% of Hispanics and 22% of African Americans. Fewer employers are offering health coverage and of those that do, the costs for the employer and the employee are continuing to rise. In 2007, 60% of firms offered coverage to employees, down from 69% in 2000. Health insurance coverage is tied closely to the strength of the economy, resulting in a challenging environment.

"Cover Florida," a new insurance plan for uninsured citizens and business owners, is a move in the right direction. It is a lower-cost premium product that many currently uninsured individuals will be able to purchase for health care coverage. However, given the connection between low income and lack of coverage, this plan may still prove to be out of reach for many Floridians.

CCRAB Position: We commend the Governor and the Florida Legislature for passing 'Cover Florida' as a first step in addressing the uninsured in Florida. We recommend eliminating out-of-pocket costs for prevention and screening and standardizing coverage for preventive and screening services to improve Florida cancer rates, reduce cancer disparities and reduce overall healthcare costs.

Tobacco Use Prevention

Tobacco is the number one controllable risk factor in cancer deaths, and causes 30% of all cancer deaths in Florida. We support the current Federal and state legislative efforts, which will result in an increase in tobacco product cost. The Federal tobacco tax will

² Virnig BA, et al. A matter of race: early- versus late-stage cancer diagnosis. Health Affairs 2009;28(1):160-80.

The statistics and back story. Journal of Law, Medicine, and Ethics. Winter 2008, 618-628.

increase in March 2009 for all tobacco products, while the state is considering a bill that would increase the user fee an additional \$1 per pack. This Council recommends an increase in cost of all tobacco products to discourage young people from starting the habit and to help current smokers to decrease or discontinue smoking.

As seen in other states which have implemented similar legislation, an increase in tobacco product price will decrease the use of these products, and as use decreases the medical costs related to tobacco use, as well as the cost of the loss in worker productivity, will also decrease. Cost effectiveness is anticipated both in short and long-term outcomes.

CCRAB Position: The Florida legislature should significantly increase the price of all tobacco products. We also recommend evaluating implementation of a smoking ban in Florida's prison system consistent with the Clean Indoor Air Act.

Sun Awareness Education for Florida's Youth

Skin cancer is the fastest growing cancer in the United States and in the State of Florida, and current statistics show Florida ranks second in the nation for melanoma occurrence. This disease is largely preventable by limiting direct ultraviolet and sun exposure during formative years of childhood and adolescence. CCRAB developed a partnership between the Donald A. Adam Comprehensive Melanoma Research Center at Moffitt Cancer Center and the Florida Keys Advanced Health Education Center (AHEC) to provide education to Florida's elementarty school children on sun awareness. Moffitt-funded education will be provided by the Florida Keys AHEC for all third graders in Monroe County schools. The material used is free material from the US Environmental Protection Agency (EPA) called "SunWise," and is tied to the Florida Sunshine standards in grades K-8 for education. The EPA curriculum is currently in 15,000 schools nationwide. Our goal is to have all 67 Florida school districts adopt this free program to be used by the teachers in each school. Alternatively this could be a requirement of a wellness bill for Florida schools.





EPA SunWise Educational material

CCRAB Position: Our Council supports changes in the current tanning bed law to allow only those over the age of 16 to use tanning beds and to require parental signature for 16 and 17 year olds using tanning beds. We also strongly recommend that sun awareness education be added to Florida's K-8 curriculum using the free EPA product SunWise.

Cancer Plan 2008-2012 Implementation

CCRAB is charged, by Statute, to approve the state cancer plan. This year, we continued to work with the Florida Department of Health and the Florida Cancer Plan Council on the development of an updated state cancer plan. Council members reviewed and commented on all sections of the new plan. The state cancer plan will serve as a guide with recommended goals for our cancer control community across the state.

ADMINISTRATIVE UPDATE

CCRAB STATUTE

No changes were made to the Council statute (Section 1004.435).

MEMBERSHIP

There were six appointments made by the Governor's appointment office in the year 2008, to fill vacant Council positions. Reappointments include Joanne Bujnoski, DO, representing the Florida Society of Osteopathic Medicine, Dorothy Parker, MPH, representing the Sylvester Cancer Center at the University of Miami, and Eric Sandler, MD, representing the Florida Society of Pediatric Tumor Boards. New appointments included Susan Fleming, RN, representing the Florida Department of Health, Paul Gordon representing Nemours Children's Clinic and Naushira Pandya, MD, representing Nova Southeastern College of Osteopathic Medicine.

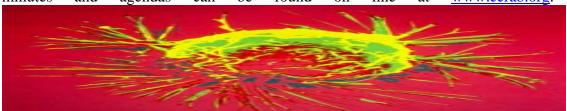
OFFICERS

Michael E. Kasper, MD of Boca Raton representing the American Cancer Society completed his third year as Chairman in October 2008. Eric S. Sandler, MD succeeded Dr. Kasper as Chair. The appointed Executive Committee consists of Eric Sandler, MD, Chairman; Robert Cassell, MD, PhD, Dorothy Parker, MHS; Lance Grenvicki, DDS, MD, Anna Giuliano, PhD, Thomas J. George, Jr, MD, Michael E. Kasper, MD, and Susan Fleming RN. The Executive Committee, led by the Chairman, provides guidance, authors position statements and sets the overall agenda for the Council.

A Membership Committee was developed to review member applications and make recommendations to the Executive Committee and the Governor's appointment office. The membership consists of Joanne Bujnoski, DO, representing the Society of Osteopathic Medicine, Rose Marie Cossick, a community representative and Helen Lewis representing the cancer registrars.

MEETINGS

The Council met on May 12, 2008, and November 3, 2008. Full CCRAB meeting minutes and agendas can be found on line at www.ccrab.org.



CANCER INCIDENCE AND MORTALITY IN FLORIDA

According to the most recent Florida Cancer Data System report,⁴ which incorporates data from 2005, 99,745 Floridians were diagnosed with cancer in that year. The cancer rate for males and females combined is 380 per 100,000. These numbers do not show a significant change in cancer rates from the previous year. In our state, 65% of all cancers occur in people over age 65. The combination of tobacco-related cancers and those cancers detectable through screening represent nearly 60% of all cancers. This statistic demonstrates that we can significantly decrease cancer rates in Florida by taking action to decrease tobacco use and increase cancer screening rates.

Lung cancer was the most commonly diagnosed cancer in Florida, with 16,531 diagnosed cases in 2005. Prostate cancer was the second most frequently diagnosed, with 13,253 cases, followed by breast cancer with 12,428 cases and colon cancer with 10, 336 cases diagnosed in 2005.

The percentage of cancers diagnosed at an early stage was 42% in 2004 while those cancers diagnosed at an advanced stage were 15%. The percentage of cancer diagnosed at a late stage varied greatly by cancer type. Over three-quarters of ovarian cancer and 65% of lung cancer cases are diagnosed at an advanced stage. Advanced cancers were found more often in the 40-64 age group than in those over age 65. Minorities are consistently more likely to have cancer diagnosed at an advanced stage.

Table 1. Number of New Cancer Cases by Sex and Race, Florida, 2005

	AII Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkin's (1)	Melanoma	Ovary	Cervix
Florida (2)	99,745	16,531	13,253	12,428	10,336	5,016	3,729	4,008	3,479	1,482	910
Female	46,575	7,414		12,428	5,018	1,152	987	1,817	1,404	1,482	910
Male	53,095	9,105	13,253		5,306	3,863	2,738	2,185	2,071		
Black	8,734	1,100	1,701	1,077	990	170	318	363		100	145
White	88,333	15,186	11,125	11,034	9,087	4,702	3,324	3,531	3,479	1,353	720
Black Female White	3,970	441		1,077	483	51	103	162		100	145
Female	41,370	6,857		11,034	4,407	1,076	858	1,597	1,404	1,353	720
Black Male	4,759	658	1,701		507	119	215	200			
White Male	46,905	8,319	11,125		4,671	3,625	2,462	1,931	2,071		

Source of data: Florida Cancer Data System

(2) Florida incidence totals include 1,140 new cancers in persons of "Other" races, 882 cases with unknown race, 44 cases with unknown or unspecified sex, and 2 cases with unknown age. Totals by sex include cases with unknown age and race, as well as cases with Other race. Totals by race include unknown sex and age

⁽¹⁾ Non-Hodgkin's refers to Non-Hodgkin's lymphoma.

⁴ Florida Annual Cancer Report. 2005 Incidence and Mortality. Florida Department of Health 2008

Other State Cancer Control Programs

Florida Breast and Cervical Cancer Early Detection Program: This program is funded by the federal Centers for Disease Control and Prevention, and is administered by the Florida Department of Health. It provides education, outreach, screening and diagnostic services to uninsured women in Florida.

American Cancer Society (ACS): ACS is dedicated to eliminating cancer as a major health problem. ACS uses voter education and issue campaigns to influence legislation. CCRAB works closely with the American Cancer Society, Florida Division, to better understand cancer issues within Florida. Our Council has a representative from ACS and regularly communicates on legislative and cancer control issues.

Florida Center for Universal Research to Eradicate Disease (FL CURED): The FL CURED is a program within the Department of Health and was created specifically to focus on cures for diseases via <u>FS 381.855</u>. The center serves the research needs of the biomedical and biotechnical community and oversees the Bankhead-Coley and James and Esther King Fund allocations.

Florida Cancer Council (FCC): This council coordinates with FL CURED and identifies ways to attract new research dollars into Florida, seeks to increase enrollment in clinical trials, and seeks to make the medical community more aware of clinical trials.

Florida Cancer Data System (FCDS): Florida's statewide cancer registry continues to be a valuable source of information about cancer incidence and mortality in Florida. The data have been used by CCRAB for preparation of the State Cancer Plan. The University of Miami School of Medicine, under contract with the Department of Health's Bureau of Epidemiology, runs FCDS. Data are available on the FCDS web site www.fcds.med.miami.edu.

Comprehensive Cancer Control (CCC): The Florida Department of Health's CCC Program is responsible for coordinating statewide cancer prevention and education activities with a focus on colorectal, lung, ovarian, prostate and skin cancers. The programmatic efforts are conducted through collaboration with public and private partners throughout Florida.

Florida Cancer Plan Council (FCPC): The Florida Cancer Plan Council was established to help in implementing the State Cancer Plan. The Florida Cancer Plan provides strategies and action points to guide these cancer control activities throughout the state. The FCPC is comprised of statewide volunteer representatives from the Department of Health, CCRAB, the American Cancer Society, Cancer Information Services, Florida's universities and colleges, cancer hospitals, survivors and other cancer stakeholders.

