

## Newsletter

Vol. VI, No. 2, October 2023



# FROM THE SCIENTIFIC DIRECTOR

Dear members of the SMRC community,

October is Breast Cancer Awareness Month. In this edition of the newsletter, we highlight the work that St. Mary's researchers are doing to improve the breast cancer patients' experience with care. Every year, an estimated 27,900 Canadians are diagnosed with breast cancer and thousands more are living with the disease. Our researchers are exploring how new technologies can help bridge the gap between best practice and real-world cancer care delivery, how patients can learn from each other through storytelling and social media and of course how clinical trials continue to help us achieve major gains in survival and quality of life. In addition to reading about this work, we encourage you to join us for the October 23rd special showcase event. As part of its commitment to strengthen its engagement towards the community, the SRMC will host its second lecture open to the general public, to discuss findings from St. Mary's researchers working in the field of breast cancer.

This edition of the newsletter also highlights results of our strategic planning process. On October 2nd we unveiled the Research Centre strategy. This presentation was the culmination of a collaborative effort that engaged various stakeholders over the past nine months. The event was well attended, and positively received. Our research matrix, mission, and vision statement will provide a solid framework on which our community can now continue to grow.

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As always, we are proud to share with you our accomplishments and academic output through the newsletter. Our community continues to publish and present its work, our researchers continue to receive prestigious grants and awards. Our team is ever expanding: we have partnered with the McGill Division of Geriatric Medicine to open a position for a researcher in the field of Older Adult Care, with a specific focus on the use of digital technology in the older adult population. By strategically recruiting a scientist specializing in this field, SMRC positions itself to lead the way in pioneering new standards for patient care, research excellence, and institutional innovation.

You will notice a new section in this edition: news from our colleagues at the DAUER. As we continue to work more closely with partners and experts in the CIUSSS, we are happy to be able to share with our community important news and updates that concern researchers and their teams.

I hope you will enjoy this new edition; I look forward to seeing you on October 23rd!

Ari N. Meguerditchian, MD Scientific Director



## Highlight: Strategic plan



#### **Reveal of the SMRC Research Strategy**

On October 2nd, the SMRC presented its research strategy for the upcoming years. We want to express our sincere gratitude to everyone who attended in person and took part in this significant event for our research centre.

The strategy unveiled was the culmination of a collaborative effort that engaged various stakeholders and encompassed multiple phases over the past nine months. This initiative started with a survey sent to 80 members of our community. The survey results underwent analysis and were further discussed during mini-workshops that brought together researchers, research professionals, as well as internal and external stakeholders.



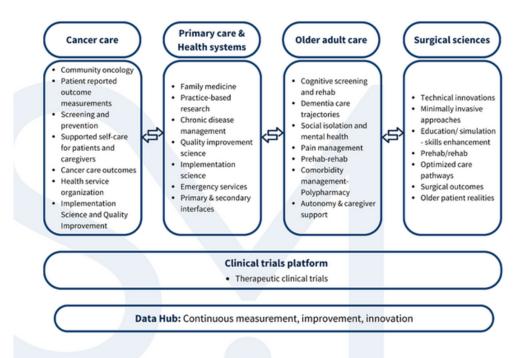


On May 1st, we organized a mini retreat with the primary objective of refining our research ambitions. Throughout the summer months, we diligently worked on defining the choices, capabilities, and priorities of the RC, conducting a total of 25 working sessions. October 2nd marked the culmination of this extensive exercise. SMRC is immensely thankful to all participants for their valuable contributions and the productive, candid discussions that guided us to this point.

## Highlight: Strategic plan



It's essential to recognize that a research plan is an evolving document that continues to develop through structured discussions. We take great pride in presenting our research matrix, mission, and vision statement, which reflect the collective efforts and dedication of our research community.



#### **Mission**

St.Mary's Research Centre is dedicated to advancing healthcare through pioneering research and patient-centric practices.

With a focus on patient proximity, innovation, and care accessibility, we're shaping a healthier future that embraces diversity, minority groups, and women's health.

Our commitment to inclusivity drives us to create solutions that cater to the needs of every individual in our vibrant community.

#### Vision

To be an officially recognized institution within Quebec's clinical and university research network.

By focusing on academic excellence and scientific progress, the SMRC seeks to make significant contributions in its domains of expertise, for the benefit of the St. Mary's Hospital Centre community and beyond.

## Highlight: Strategic plan



On October 2nd, representatives from our research domains also presented their ambitions and priorities for the coming year. Based on the priorities of the domains, the RC presented a concrete action plan to support research. Our actions will be organized under five key priorities: Process, Stakeholders, Technology, Culture and People, Visibility, and Knowledge Transfer.

#### **Initial Calendar of Priorities**



Actions	Short-Term	Mid-Term	Long-Term
Process	Scientific Productivity Office (8)  Efficient Process (1)  Sustain Core Ops. (2)		Efficient Process (3)
Stakeholders	Community Engagement (4)		
Technology	IT Strategy (1)	>	
Culture &	Collaborative Environment (1)		
People	Researchers Recruitment (3)		
Visibility & Knowledge T.	Seminars, Conferences, Worksho Online Visibility (4)	ps (4) Nentorship - Knowledge	Transfer (1)

In conclusion, we are excited about the path ahead and remain committed to advancing research excellence and innovation. We look forward to working together to achieve our shared goals and make a positive impact on the future of our research centre and the broader community.



## Breast Cancer Awareness Month



#### Breast cancer research at SMRC: a broad range of contributions

October is Breast Cancer Awareness Month. SMRC scientists continue to ensure that this important field is covered from multiple perspectives. From cutting-edge clinical trials to implementation of innovative patient-centered technologies, patients' priorities are the driving force of the work we are doing.

#### How patients use and share information online

Patients are turning to the internet to learn about breast cancer, to hear from other patients about their experiences and to build support networks. PhD candidate Nina Morena's work assesses the quality of YouTube videos targeted to young women with metastatic breast cancer. She has found that while these sources of information are appealing and understandable to the target audience, they demonstrate low reliability and quality scores and often demonstrate a commercial bias. She encourages physicians to acknowledge their patients' media habits, so they may engage in open and honest discussions of online information seeking behaviours and resources.





While many online materials do have limitations, Ilja Ormel, research administrator for the SMRC based Health Experiences project, explains that curated collections of first-hand accounts from people who are living with breast cancer can prove to be a source of reliable information and support for patients, families, friends, and healthcare professionals. The storytelling format can help educate health and research professionals about patients' experiences of illness. The <u>Breast Cancer module of the Health Experiences</u> website offers videos and transcripts of in-depth interviews with Canadians experiencing breast cancer; all based on rigorous qualitative research led by experts at St. Mary's and McGill University.

## Breast Cancer Awareness Month



#### Health technologies help patients get the best care

Dr. Sylvie Lambert, principal investigator of the <a href="elMPAQc research program">elMPAQc research program</a>, is working closely with patients and caregivers experiencing breast cancer in order to co-design an electronic patient-reported symptom screening and management program for better-tailored treatment and care for this target population. The program offers people with breast cancer questionnaires which they can confidentially complete online, prior to their medical visit, to identify the severity of their symptoms. A report is then transferred to the treating clinician to help inform treatment and care decisions. Patients also receive a report to facilitate symptom management, which is supported by educational materials tailored to their needs.



The systematic screening of patients' symptoms and the challenges they face, also referred to as patient-reported outcomes or PROs, is a cornerstone of high-quality cancer care and can serve as a tool to improve patients' lives. These, and other technologies, including heath informatics, can help bridge the gap between best practice and real-world health care delivery in cancer care.

#### Clinical trials offer patients additional options

Clinical trials are one of the biggest reasons we have seen such major gains in breast cancer survival over the past 30 years. Quality of life for people living with cancer has also improved as trials have helped identify more targeted treatments that can limit some of the side effects of cancer therapies. Several breast cancer trials are currently underway at St. Mary's Hospital (see listings on p. 11). St. Mary's continues to offer its patients access to large international trials at all stages of the treatment trajectory.



## SMRC News



## Recruitment of an Assistant Professor (Research) (CAS-R) in Older Adult Care:

In a healthcare landscape where institutions are actively redefining older adult care and harnessing the potential of virtual reality, St. Mary's Research Centre finds itself in a unique position to emerge as a pioneer in this transformative field. By strategically recruiting a scientist specializing in older adult care and virtual reality, St. Mary's Research Centre, in collaboration with St. Mary's Hospital, can lead the way in pioneering cutting-edge advancements that establish new standards for patient care, research excellence, and institutional innovation.

This strategic move will enhance the institution's credibility and demonstrate its unwavering commitment to innovation and patient-centered care. While other healthcare institutions may still be exploring the potential of these interventions, St. Mary's Research Centre and St. Mary's Hospital will be at the forefront of implementing evidence-based practices that result in tangible improvements in patient outcomes.

We are excited to announce that, in partnership with the McGill Department of Medicine, the position is now officially posted online on the <u>McGill Website</u>, <u>University Affairs</u>, and <u>the Canadian Geriatrics</u>
Society.

Furthermore the selection committee has been established and we thank all the selection committee members to have accepted this mandate:

- 1. Mme Hashimi Iddrissi, Associate CEO CIUSSSS Ouest de L'Ile
- 2. Dr. Jose A Morais, Professor and Director of Division of Geriatric Medicine, Department of Medicine McGill University
- 3. Dr. Ari Meguerditchian, Associate Professor, Division of General Surgery, Department of Surgery McGill University, Scientific Director of the St. Mary's Research Centre also serving as selection committee Chair
- 4. Dr. Julia Chabot, Assistant Professor, Division of Geriatric Medicine, Department of Medicine McGill University
- 5. Dr. Anthony Albers, Associate Professor, Division of Orthoipaedic Surgery, Department of Medicine McGill University
- 6. Dr. Sofia Nene, Director of Division of Geriatric Medicine, Department of Medicine McGill University

### **SMRC News**



#### **CIHR Grant Announcement**

Congratulations to Dr. Talía Malagón and her team who have recently received over \$420,000 from the Canadian Institutes of Health Research for the 3 year project entitled Interactions between human papillomavirus infections, bacterial vaginosis, and genital microbiomes of sex partners.

Dr. Malagón and her co-Principal Investigator Dr. Edouardo Franco (Director, Division of Cancer Epidemiology, and Chairman, Department of Oncology, McGill University) will lead a study using next generation sequencing methods in order to characterize which bacteria, present in the genital microbiomes of study participants, may be linked to human papillomaviruses (HPV) transmission between partners. Because certain HPVs can cause several types of cancer, this work is significant in that it could help identify novel interventions for treating the genital microbiome to reduce the risk associated with HPV.



#### 2023 McGill Department of Medicine's Leadership Award



Congratulations to Dr. Julia Chabot who was awarded the 2023 McGill Department of Medicine's Leadership Award Recognizing outstanding leadership contributions by a Faculty member! Dr. Chabot also received a special mention in the McGill Department of Medicine's Annual Report, which includes an article highlighting her many accomplishments in the fields of Medicine and Music. More information here.

## Academic Output



#### **Scientific Publications**

Morena, N., Ahisar, Y., Wang, X., Nguyen, D., Rentschler, C. A., & Meguerditchian, A. N. (2023). Content Quality of YouTube Videos about Metastatic Breast Cancer in Young Women: A Systematic Assessment. *JMIR Cancer*. https://doi.org/10.2196/45101

#### **Posters**

#### **Canadian Cancer Research Conference**

Morena, N., Ahisar, Y., Wang, X., Nguyen, D., Rentschler, C. A. & Meguerditchian, A. N. (2023, November 12-14). *Are YouTube videos a reliable information source for young women with metastatic breast cancer?* [Poster]. Canadian Cancer Research Conference. Halifax, Canada.

Morena, N., Ben-Zvi, L., Hayman, V., Hou, M., Nguyen, D., Rentschler, C. A. & Meguerditchian, A. N. (2023, November 12-14). *How reliable are post-mastectomy breast reconstruction videos on YouTube?* [Poster]. Canadian Cancer Research Conference. Halifax, Canada.

Morena, N., Zelt, N., Nguyen, D., Dionne, E., Rentschler, C. A., Greyson, D. & Meguerditchian, A. N. (2023, November 12-14). *The Use of Web-Based Patient Reviews to Assess Medical Oncologists' Competency: Mixed Methods Sequential Explanatory Study.* [Poster]. Canadian Cancer Research Conference. Halifax, Canada.

#### **International Continence Society Annual Meeting**

Bentaleb, J., Reuveni-Salzman, A., Auger-Morin, C., Belzile, E., Melon, J. & Larouche, M. (2023, September 27-29). *Sacrohysteropexy Technique Variations: Description and Outcomes, A Systematic Review.* [E-poster]. International Continence Society Annual Meeting. Toronto, ON, Canada.

Wissa, C., Savarimuthu, V., Gerard, M., Lavoie, M., Bouchard, J., Mo, S., Walter, J., Merovitz, L., Bentaleb, J., Légaré, F., Nadeau, G. & Larouche, M. (2023, September 27-29). *Needs Assessment Regarding Management Decision-Making for Women with Stress Urinary Incontinence: A patient and health professional perspective*. [E-poster]. International Continence Society Annual Meeting. Toronto, ON, Canada.

## Academic Output

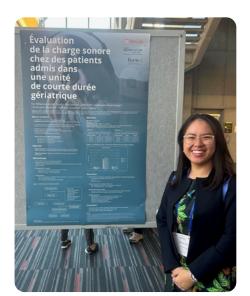


#### Congrès International Francophone de Gérontologie et Gériatrie

Leung, M., Mondestin, S., Roth, J., Hintermayer, M., Moderie, C., Gosselin, N. & Chabot, J. (2023, September 20-23). Évaluation de la charge sonore chez les patients admis dans une unité de courte durée gériatrique. [Poster]. Congrès International Francophone de Gérontologie et Gériatrie. Montréal, Canada.

Ilali, M., Laliberté, M., Chabot, J., Vedel, I., Ruchon, C. & Boulanger, É. (2023, September 20-23). *L'expérience des membres de la communauté de pratique des médecins en CHSLD.* [Poster]. Congrès International Francophone de Gérontologie et Gériatrie. Montréal, Canada.

Trottier, M., Hallot, S., Nasreddine Z. & Chabot, J. (2023, September 20-23). Online training and certification prior to using the MoCA Test – Impact on healthcare professionals' knowledge. [Poster]. Congrès International Francophone de Gérontologie et Gériatrie. Montréal, Canada.



#### **McGill Women's Health Symposium**

Wissa, C., Gérard, M., Savarimuthu, V., Nadeau, G. & Larouche, M. (2023, September 7). *Bulking agents for the management of stress urinary incontinence: A review of systematic reviews.* [Oral presentation]. McGill Women's Health Symposium. Montreal, QC, Canada

# Roster of Oncology Clinical Trials



#### **Bladder cancer**

A Phase 3, randomized, study of neoadjuvant chemotherapy alone versus neoadjuvant, chemotherapy plus Nivolumab or Nivolumab and BMS-986205, followed by continued post- surgery therapy with Nivolumab and BMS-986205 in participants with muscle-invasive bladder cancer. [CA017-078]

#### **Breast cancer**

"A Clinical Trial to Determine the Efficacy of Five Years of Letroxole Compared to Placebo in Patients Completing Five Years of Hormonal Therapy Consisting of an Aromatase Inhibitor (AI) or Tamoxifen Followed by an AI in Prolonging Disease-Free Survival in Postmenopausal Woman with Hormone Receptor Positive Breast Cancer" [NSABP-42]

A Phase III Study of Trastuzumab Deruxtecan (T-DXd) with or without Pertuzumab vs Taxane, Trastuzumab and pertuzumab in HERs-Positive, first-line Metastatic Breast Cancer [Destiny]

A Phase III, Randomized Open-Label Multicenter Study Evaluating the Efficacy and Safety of Adjuvant Giredestrant compared with Physicians Choice of Adjuvant Endocrine Monotherapy in patients with Estrogen Receptor-Positive HER-Negative Early Breast Cancer [TRIO045]

Identification and evaluation of patients at risk of developing cardiotoxicity after receiving chemotherapy for breast cancer, leukemia or lymphoma [CarChem]

#### **Lung cancer**

A Phase 3 Study of Pembrolizumab in Combination with Pemetrexed/Platinum (Carboplatin or Cisplatin) Followed by Pembrolizumab and Maintenance Olaparib vs Maintenance Pemetrexed in the First-Line Treatment of Participants with Metastatic Non squamous Non-Small-Cell Lung Cancer [MK7339-006]

A Phase 3 Study of Pembrolizumab in Combination with Carboplatin/Taxane (Paclitaxel or Nab-paclitaxel) Followed by Pembrolizumab with or without Maintenance Olaparib in the First-line Treatment of Metastatic Squamous Non-small Cell Lung Cancer (NSCLC) [MK7339-008]

A Phase 3 Randomized, Placebo-controlled Study to Evaluate the Safety and Efficacy of Pemetrexed + Platinum Chemotherapy + Pembrolizumab (MK-3475) with or without Lenvatinib (E7080/MK-7902) as First-line Intervention in Participants with Metastatic Non squamous Non-small Cell Lung Cancer [MK7902-006]

A Phase III, Randomised, Open-Label Study of Savolitinib in Combination With Osimertinib Versus Platinum-Based Doublet Chemotherapy in Participants With EGFR Mutated MET-Overexpressed and/or Amplified, Locally Advanced or Metastatic Non-Small Cell Lung Cancer Who Have Progressed on Treatment With Osimertinib [SAFFRON]

# Roster of Oncology Clinical Trials



#### **Lung cancer - continued**

A Phase 3, Multicenter, randomized, open-label trial to compare the efficacy and safety of pembrolizumab (MK-3475) in combination with Lenvatinib (E7080/MK-7902) versus docetaxel in previously treated participants with metastatic Non-small cell lung cancer (NSCLC) and progressive disease (PD) after platinum doublet chemotherapy and immunotherapy [MK7902-008]

An Open-label, Multicenter, Phase 3 Randomized, Active-Comparator-Controlled Clinical Study of Pembrolizumab (MK-3475) in Combination With Sacituzumab Govitecan Versus MK-3475 Monotherapy as First-line Treatment in Participants With PD L1 TPS Greater than or Equal to 50% Metastatic Non-small Cell Lung Cancer [KEYNOTE D46/EVOKE-03]

A phase 3 study of Pembrolizumab (MK-3475) in combination with concurrent chemoradiation therapy followed by Pembrolizumab with or without Olaparib vs concurrent chemoradiation therapy followed by Durvalumab in participants with unresectable, locally advanced, stage III non-small cell lung cancer (NSCLC). [MK 7339-012]

A randomized, double-blind, placebo-controlled phase 3 study of Pembrolizumab (MK-3475) in combination with concurrent chemoradiation therapy followed by Pembrolizumab with or without Olaparib (MK-7339), compared to concurrent chemoradiation therapy alone in participants with newly diagnosed treatment-naïve limited-stage small cell lung cancer (LS-SCLC). [MK 7339-013]

A Phase 1b/2 Study to evaluate the efficacy and safety of Pembrolizumab in Combination with Investigational Agents for the treatment of Participants With PD-1/L1-refractory Extension-Stage Small Cell Lung Cancer in need of Secondary-Line Therapy [MK3475-B98]

A Phase 2 Study to Evaluate the Efficacy and Safety of Pembrolizumab plus Investigational Agents in Combination with Etoposide and Cisplatin or Carboplatin for the first line Treatment of Participants with Extensive Stage Small Cell Lung Cancer [MK3475-B99]

A Randomized Open Label Phase 3 Study of SAR408701 vs Docetaxel in Previously treated Metastatic Non-Squamous Non-Small Cell Lung Cancer patients with CEACAM5 Positive Tumors [EFC15858]



Information:
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## St. Mary's Research Centre Scientific Series





#### **Scientific Series recap: October 5th 2023**

Accès aux services de première ligne : un défi toujours contemporain Mylaine Breton, MBA, Ph.D.



On October 5, 2023, Dr. Mylène Breton, Canada Research Chair in Clinical Governance on Primary Health Care and Professor at the Faculty of Medicine and Health Sciences at the Université de Sherbrooke presented an overview of the challenges and potential solutions for primary care access in Canada, and more specifically Quebec. She outlined how this recurring question is connected to fundamental Canadian values and described contemporary, responsive strategies.

In particular, she spoke about how attachment to a primary care provider or group is fundamental to a performing system. The "guichet d'accès premiere ligne" or GAP is a uniquely Quebecois innovation helping patients without a primary care provider get connected. Dr. Breton highlighted how this model is ripe for evaluation and research to help further orient public policy.



Additionally, Dr. Breton spoke about how the Advanced Access model can help address the challenge of timely access. She presented a very promising series of reflective tools that use EMR and patient experience data to provide practices with indicators which allow physicians and clinic managers to identify critical issues and address them quickly.

\*This presentation can be credited to clinical staff (continuing medical education)

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Form: https://forms.office.com/r/G55ZuLS11Q

## **Upcoming Events**



Monday, October 23rd 2023



## SMRC BREAST CANCER RESEARCH: PUTTING PATIENTS FIRST

Special dicussion with St. Mary's researchers working to improve breast cancer patients' experience with care

#### **SPEAKERS:**

**SYLVIE LAMBERT,** RN, PhD Health technologies help patients get the best care

**ILJA ORMEL**, MSc PH, PhD Learning from each other: patient experience as knowledge

NINA MORENA, MA, PhD Candidate Social media: community or toxicity?

**NICHOLAS METI, MD, FRCPC**Bringing cutting-edge clinical trials into cancer care

Followed by a group discussion

#### **MODERATOR:**

ARI MEGUERDIT CHIAN, MD, MSc, FRCSC, FAC Surgical Oncologist, Associate Professor, Scientific Director of St. Mary's Research Centre



St. Mary's Research Centre



October 23rd @ 12pm

### From the DAUER

Centre intégré universitaire de santé et de services sociaux de l'Ouest-del'Île-de-Montréal





#### From the DAUER

Our colleagues at the Research Ethics Board have made changes to simplify the protocol submission process. They have asked us to share the following message:

The REB of CIUSSS ODIM is aware of the time burden on some research teams due to repeated uploading of normalized scales/tools which are used in multiple research projects.

We are seeking to simplify this process by keeping some of the most commonly used and standardized scales/tools in a library that the REB will consult when necessary. A list will be made available in Nagano from which you may simply select scales/tools that you wish to use for a project.

In order to facilitate the creation of this library, please submit commonly used tools by attaching them in the form below. Examples of appropriate tools are: COBRA, PSAT, QOL.BD, MoCA.

#### CLICK HERE FOR THE SUBMISSION FORM (only emails @douglas.mcgill.ca or @ssss.gouv.qc.ca)

#### Note that:

- The library will not include questionnaires created for a specific study or screening tools created by a research team.
- The scale/tool must be unaltered and submitted in its original format; keep in mind that the scale/tool in the library must be the same across all studies using it. If a scale/tool has been modified for its use in a specific study, the REB will exclude it from the library.
- Inclusion of scales/tools in the library is at the discretion of the REB.

The use of any tool(s) within a project remains subject to evaluation by the REB following project submission. The REB will review for appropriateness and grant approval for use of scale(s).

The library will only be made available to the REB members.

If you have any questions, please contact:

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Centre de recherche de St. Mary St. Mary's Research Centre









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