Division of Cancer Control and Population Sciences

http://cancercontrol.cancer.gov

Cancer Care Outcomes Research & Surveillance Consortium (CanCORS)

Applied Research Program

Overview

The National Cancer Institute (NCI), in collaboration with the U.S. Department of Veterans Affairs, is supporting a research consortium of eight grantees to measure the quality of cancer care and associated health outcomes in the United States. The Cancer Care Outcomes Research and Surveillance Consortium (CanCORS) supports prospective research in a cohort of approximately 10,000 patients with newly diagnosed lung cancer or colorectal cancer. Participants were recruited from geographically diverse populations and health care systems.

Research Aims

The CanCORS Consortium has three primary research aims:

- 1. assess the quality of care received by cancer patients and survivors
- 2. explore the relationship between quality of care and patient health outcomes
- evaluate how characteristics of patients, providers, caregivers, and delivery systems affect quality of care and outcomes

Although many studies have documented disparities in care, few have explored the reasons for these disparities. Few data are available about relationships between quality of care and outcomes among patients who would not meet criteria for enrollment in many clinical trials; these include elderly patients and patients with substantial co-morbidity. For these reasons, it is important to generate scientifically rigorous insights that can improve the care and outcomes among patients with lung cancer and colorectal cancer, the two leading causes of cancer incidence and mortality in the U.S.

Research Questions

To achieve these aims, CanCORS investigators are examining questions including the following:

- Are there racial, ethnic, and socioeconomic differences in use of effective therapies for colorectal cancer and lung cancer?
- Are there racial, ethnic, and socioeconomic differences in patients' assessments of the quality of cancer care?
- How do patients and physicians decide about therapies for colorectal cancer and lung cancer?
- Why do outcomes of lung cancer surgery and colorectal cancer surgery vary by hospital and surgeon volume?
- What factors explain participation in clinical trials for lung cancer and colorectal cancer?
- Are patients' symptoms recognized and treated effectively at different stages of illness?

Research Progress

The CanCORS Consortium consists of seven Primary Data Collection and Research (PDCR) sites and a Statistical Coordinating Center (SCC).

Each PDCR site identifies patients with newly diagnosed lung cancer or colorectal cancer. The SCC assists the PDCR sites in developing the survey instruments and collecting the standardized core data across the individual research sites. It also serves as the central repository for the analysis of pooled data.

During the initial funding period, the CanCORS Consortium collected standardized data from two population-based cohorts

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES of approximately 5,000 patients each. Extensive information was collected about medical care received by the patients over the initial acute treatment phase along with information on the clinical and patientreported outcomes experienced by the patients during this phase. Baseline and follow-up patient surveys were conducted at approximately 4 and 12 months postdiagnosis, respectively. In addition, standardized data from 4.400 health care providers and 1,600 informal caregivers, as well as salient clinical data from medical records, were collected.

During the second funding period, the Consortium is conducting a detailed assessment of the quality of follow-up care and health outcomes among longer-term survivors of lung cancer and colorectal cancer. Dissemination of CanCORS data and data collection instruments is also a distinct objective.

CanCORS Sites

Statistical Coordinating Center Dana-Farber Cancer Institute

PDCR Sites

- 1) Dana-Farber Cancer Institute (HMOs in Seattle, Portland, Hawaii, Detroit, and
- 2) Harvard Medical School (8 counties in Northern California: Bay Area and Sacramento region)
- RAND-UCLA
- 4) University of Alabama, Birmingham
- University of Iowa, Iowa City
- University of North Carolina, Chapel Hill
- Veterans Administration (Durham, NC and Minneapolis, MN - includes 10 VA Medical Centers)

For more information about the organization and aims of CanCORS, see: Ayanian JZ, Chrischilles EA, Wallace RB, et al. Understanding cancer treatment and outcomes: The Cancer Care Outcomes Research and Surveillance Consortium. J Clin Oncol 2004;22(15):2992-6. View full text at:

http://jco.ascopubs.org/cgi/content/full/22/15/2992

CONTACT INFORMATION

Anita Ambs, MPH

NCI Program Director Applied Research Program Division of Cancer Control and **Population** Sciences **National Cancer Institute** Executive Plaza North, Room 4106

6130 Executive Blvd MSC 7344 Bethesda, MD 20892-7344 Telephone: 301-451-6051

E-mail: ambsa@mail.nih.gov

Neerai Arora, PhD

NCI Program Scientist Applied Research Program Division of Cancer Control and **Population Sciences National Cancer Institute** Executive Plaza North, Room 4092 6130 Executive Blvd MSC 7344 Bethesda, MD 20892-7344 Telephone: 301-594-6653 E-mail: aroran@mail.nih.gov