Project Aims to Improve International Opioid Availability for Cancer Pain

The National Cancer Institute (NCI) has awarded nearly $300,000 to UW Carbone Cancer Center researchers to make opioid pain medications more available to cancer patients in Africa. In 2014, we launched the NCI-funded Pain Policy Studies Group at the UW Carbone Cancer Center to work with the African Palliative Care Association (APCA) to distribute the medications to patients and their caregivers.

"We have found that the NCI award, palliative care, and cancer pain relief are recognized as part of global cancer care," said study investigator Dr. John Cleary, associate professor of radiology at UW School of Medicine and Public Health. "The NCI funded this program to help 15 centers receive awards to conduct research and fill gaps in opioid availability in the region.

Cleary and the Pain Policy Studies Group at the UW Carbone Cancer Center will collaborate with the African Palliative Care Association (APCA) to distribute the medications across 15 African countries. The group will conduct research to improve access to opioid pain medications in Africa.

"This is the fourth program that has supported research in countries to improve access to opioids," said Dr. John Cleary, associate professor of radiology at UW School of Medicine and Public Health.

The program will support research in African countries to improve access to opioids. The program will focus on the following objectives:

- Identify the barriers to opioid availability in Africa
- Develop a strategy to improve access to opioids in African countries
- Conduct research to improve opioid availability in Africa
- Develop a plan to distribute opioids to African countries
HPV Vaccine: A Tool for Cancer Prevention

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riting with the U.S. Centers for Disease Control’s (CDC) Healthy People 2020 campaign, the Wisconsin Comprehensive Cancer Control Program has made increasing human papillomavirus (HPV) vaccine utilization and surveillance in Wisconsin a priority.

What's the link between HPV and cancer?
HPV infection is very common, especially among young adults. The Centers for Disease Control and Prevention estimate that 79 million Americans are currently infected with HPV, with 14 million newly infected annually. While most HPV infections clear within 1 to 2 years, persistent infections, get pre-cancer or cancer. Almost all cervical and anal cancers and the majority of back of the throat cancers are caused by two types of HPV known as 16 and 18. According to the CDC, the U.S. 0.1 percent of cervical and anal cancers, 75 percent of vaginal, 72 percent of breast, 69 percent of vulva and 63 percent of penile cancers were attributed to HPV infection. From 2005-2015, 2,229 newly diagnosed cancer cases were attributed to HPV infection in Wisconsin. During this time period, an estimated 536 cancer deaths were attributed to HPV infections.

How does the HPV vaccine work?
To be fully vaccinated against HPV infection, patients need to complete three doses of the vaccine, ideally over a six-month period. HPV vaccines offer the best protection to girls and boys who receive all three vaccine doses and have time to develop an immune response before becoming sexually active. Initiation of HPV vaccination is ideally recommended for girls and boys starting at 11–12 years of age, but is also recommended for girls, ages 13–26 and for boys, ages 11–26 who have not yet been vaccinated.

The first HPV vaccine was approved for use in females in 2006 and is used in males in 2010. Since then, vaccine coverage in Wisconsin is far less than that for other vaccines administered to adolescents. In December 2013, only 34 percent of Wisconsin females and 11 percent of Wisconsin males were completely vaccinated against HPV infections compared to 92 percent who received the school required Diphtheria/Tetanus/Pertussis vaccine.

New research shows that vaccinating against HPV can have multiple benefits.

- **Cervical cancer prevention:** more than 70% of cervical cancers are caused by HPV (this type of cancer is currently the second leading cause of cancer deaths in non-Hispanic black women).
- **Anal cancer prevention:** more than 90% of anal cancers are caused by HPV.
- **Genital warts prevention:** more than 90% of genital warts are caused by HPV.
- **Throat cancer prevention:** more than 90% of throat cancers are caused by HPV.
- **Penile cancer prevention:** more than 90% of penile cancers are caused by HPV.

By increasing the use of the HPV vaccine as a cancer prevention vaccine, Wisconsin citizens lower rates for some of the deadliest forms of this disease while promoting healthy choices for Wisconsin’s children.

**How is this research being conducted?**
This research is being conducted among three populations who are under-insured, not insured, Medicaid eligible or American Indian/Alaska Native.

**How might this research change the way we treat cancer patients?**
HPV-related cancers are highly responsive to treatment with immunotherapy. This research will have profound implications for developing more effective immunotherapies to treat HPV-related cancers.

**What are the next steps in this research?**
Next steps include further research to understand the immune response to HPV and to develop more effective treatments for HPV-related cancers.

For more information about these and other clinical trials at the UW Carbone Cancer Center, contact Cancer Connections (608-263-0252) or uwhealth.org/sparkle.

**Updates in Clinical Trials**

**What are clinical trials?**
Clinical trials are research studies conducted to find better ways to prevent, diagnose and treat cancer. Clinical trials involve people who volunteer to participate.

Patients at the UW Carbone Cancer Center are often among the first in the world to have access to promising new treatments through clinical trials. The UW Carbone Cancer Center typically has more than 250 clinical trials available for participation.

As more people participate in clinical trials at the UWCCC, cancer researchers can more rapidly answer critical questions that will lead to better treatment and prevention options.

**Lung Cancer**
Stimulating the body’s own anti-cancer immune defenses is an innovative approach. A novel trial being conducted at UWCCC is testing a novel form of immunotherapy in conjunction with current standard of care therapy in the treatment of metastatic NSCLC.

**Pancreatic Cancer**
Pancreatic cancer is the sixth leading cause of cancer because of its rapidly progressing nature and ability to grow without causing symptoms.

**Clinical Trials**
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