

# British Columbia Cancer Agency Centre for Lymphoid Cancer *Newsletter* *Lymphoma ♦ Leukemia ♦ Myeloma*

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*dedicated to curing the lymphoid cancers*

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### Measuring Patient Preferences for Genomic-Guided Care

Clinical researchers working on the [Lymphoid Cancer Project](#) are discovering new ways to personalize the way we diagnose and treat patients with lymphoid cancers.

By using different genomic tests and techniques, researchers can now analyze the molecular characteristics of cancer cells much better than they have been able to in the past.

The hope is that one day, these genomic tests – like gene expression profiling ([GEP](#)) – will become part of standard diagnostic testing and lead to more effective treatment options.

### The role of decision-makers

There are different aspects that need to be considered before a new genomic technique can become part of routine clinical practice.

Decision-makers who work in cancer care consult with experts like clinicians, researchers, health economists, patients and members of the public, to gain advice about that new test.

They consider aspects like:

- how well the new test or technique performs;
- whether the new test is good for patients; and
- how it fits in to the overall cancer budget.

### Hearing from you

Health economists who work at the BC Cancer Agency help decision-makers understand what is important to patients when it comes to these genomic tests, like GEP. For the Lymphoid

Cancer Project, they are doing this through the use of a surveys called discrete choice experiments, or DCE.

Using DCEs, patients are asked to make a choice between different options for genomic testing. Each of the presented options has different factors associated with it, which will help when making your decision.

For an example of a DCE, imagine that you are buying a car. There are two options that you can choose between: Car A, and Car B. There are different factors to consider in your decision, such as the colour of the car, whether the car is new or used, and the price of the car.

Your choice, expressed through a DCE, might look something like this:

Factors to consider	Car A	Car B
Colour of the car	Red	Blue
Is the car new, or used	New car (less than 1 years old)	Used car (5 years old)
Purchase price	\$20,000	\$15,000

Given these different factors, which car would you prefer to buy?



There are no right or wrong answers in a DCE. Whichever option is selected simply reflects your preference for that particular set of factors.

### So, what does this mean for you?

Over the coming months, we will be sending out an email invitation to our CLC newsletter subscribers to complete a DCE survey about genomic tests, similar to the one described above. Take a look through the survey

information to find out if it's something that you would be interested in participating in.

Completing the survey would be entirely voluntary, and you would be under absolutely no obligation to do so.

If you have any questions about what you've read here, or would like to know more about the survey itself, send us an email at [clc@bccancer.bc.ca](mailto:clc@bccancer.bc.ca). We'd love to hear from you. For more information about some of the work that our health economists do with the BC Cancer Agency, check out the links below:

- The return of incidental findings ([Healthy Debate](#))
- Public deliberation event in cancer drug funding ([CanEngage](#))
- Dr. Stuart Peacock's guest blogger feature ([BC Cancer Foundation](#))

### Dr Randy Gascoyne's Retirement



It is hard to believe Dr. Gascoyne is retiring from the Centre for Lymphoid Cancer at the BC Cancer Agency. For the past 28 years he has been a tireless and passionate voice for excellence in lymphoma pathology and research in British Columbia.

Dr. Gascoyne was born in a small community on Vancouver Island but spent most of his early years in Ontario. He was hired by the BC Cancer Agency in 1988 and in 1990 was a visiting professor in the Department of Hematopathology at Stanford University. It was at this time that he discovered his passion for lymphoma pathology. Working long hours he applied for grants, wrote publications and established a provincial lymphoma pathology service, second to none in the world. He is the recipient of more than one hundred academic and professional awards, including Doctor Honoris Causa from University Paul Sabatier in Toulouse France, The David Hardwick Lifetime Achievement Award from the UBC Department of Pathology and most recently

the Aubrey J. Pringle Prize from the Michael Smith Foundation. He has been on the Thomson-Reuters ISI list of the 1% Most Influential Scientific Minds in both 2014 and 2015 in the category of Clinical Medicine.

During an extremely productive career Randy has authored and co-authored more than 400 peer reviewed articles, 21 book chapters, delivered more than 400 abstracts and more than 300 invited lectures. He has trained a generation of pathology trainees in lymphoma pathology and supervised MSc and PhD students as well as clinical and research fellows. As a member of the BCCA's Centre for Lymphoid Cancers research group, Randy has successfully applied for and received over \$ 90 million dollars in research funding over the span of his career.

Please join us in wishing Dr. Gascoyne the very best for a well deserved, healthy and happy retirement.

### Hope Couture 2016

Over the past two years, [Hope Couture](#) has raised an incredible \$2 million for the BC Cancer Foundation to support cancer research. This year's elegant luncheon for 400 guests will take place Wednesday, September 14<sup>th</sup> in the Hyatt Regency, Vancouver. It will include a reception, silent and live auctions, raffle, gourmet lunch and fashion show by Vancouver's leading boutique retailers, Bacci's and Boboli.

2016 Hope Couture will be raising funds in support of the BC Cancer Foundation's \$5 million commitment to the Personalized Treatment of Lymphoid Cancer Project. The funding will lead to improved therapies for patients by helping to make personalized treatments for lymphoma the standard of care in B.C.

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