PROGRESS REPORT 2022–2023



1972-2023

50+ Years of Service to East Bay Cancer Patients through Clinical Research, Professional Education, and Consultation



Thoughts from Lisa Bailey, м.д., ғ. А.с. s.

For as long as I have been in practice in the East Bay (more than forty years), the Bay Area Tumor Institute (BATI) has been the most responsive, important, and successful contributor to the never-ending efforts of East Bay physicians, oncology nurses, and hospitals to cope with the ever-changing challenges of providing the best possible care to our patients. I cannot imagine how different this community would be without BATI.

The Bay Area Tumor Institute first brought clinical trials research in cancer to our community in 1979, enabling East Bay patients and their physicians to participate in the development of every new treatment for pediatric cancer, breast cancer, and many other malignant diseases of children and adults. Our participation in this complex and difficult research has significantly improved treatments nationwide, extended the lives of many, and cured others who would have been lost.

Especially noteworthy are the Institute's achievements as a national leader in the recruitment of minority, pediatric, and underserved populations to landmark cancer therapy and prevention studies. More than 50 percent of our research patients are members of historically underserved minority groups.

The Bay Area Tumor Institute has brought university and comprehensive cancer center level clinical research opportunities to patients in the East Bay community. For many, there is no longer a need to cross bridges and struggle through endless traffic to obtain these most advanced forms of investigational cancer therapy.

The Bay Area Tumor Institute has created extraordinary opportunities for community-based cancer patients. We will continue to offer the most advanced therapeutic options to our patients while always seeking to find more effective, more durable, and less toxic treatments.

Kind regards,

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Lisa Bailey, M.D., F.A.C.S.

Principal Investigator, Bay Area Tumor Institute NCI-Community Oncology Research Program (NCORP)

BAY AREA TUMOR INSTITUTE The Mission

Since its founding in 1972, the mission of the Bay Area Tumor Institute (BATI) has been to improve the rates of cure or disease-free survival for cancer patients, via the scientific discovery of more effective and humane ways to deliver cancer care through participation in the nation's most advanced, community-based, NCI-approved research efforts to cure and control cancer.

BATI has been a member of the clinical research program of the National Cancer Institute for the past 43 consecutive years. Beginning in 1979 and continuing through 2026, BATI has been awarded long-term research grants to participate in the "NCI-Community Oncology Research Program" (NCORP). Via the NCORP designation, BATI has the rare opportunity to provide pediatric and adult cancer patients in the East Bay with access to the most advanced forms of genetic and immuno-therapy currently being tested in the United States.

With the award of the NCORP grants, the Bay Area Tumor Institute has reached a watershed moment, providing an opportunity to work as a full partner with the top cancer researchers, universities, and comprehensive cancer centers across the nation. With NCORP, we are making the dream of receiving optimal care while remaining in the East Bay for treatment a life-giving reality for those cancer patients who need access to the most advanced forms of investigational cancer treatment.

NCI AWARDS TO BATI CLINICAL RESEARCH PROGRAMS

Since 2009, the BATI-NCORP has received seventeen awards from the National Cancer Institute. Each award acknowledged superior levels of patient participation in our nation's most advanced community-based clinical oncology research program. Of very special note, in the years between 2013 and 2017, BATI pediatric oncologists were annually recognized for achieving the *Highest Nationwide Enrollment of Treatment Clinical Trials*.

2009 SILVER CERTIFICATE OF EXCELLENCE in Patient Enrollments to Treatment and Cancer Control Trials

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2011 GOLD CERTIFICATE OF EXCELLENCE

in Patient Enrollments to Treatment and Cancer Control Trials

2012 GOLD CERTIFICATE OF EXCELLENCE

in Patient Enrollments to Treatment and Cancer Control Trials Recognizing Dr. James Feusner

2012 GOLD CERTIFICATE OF EXCELLENCE

in Patient Enrollments to Treatment and Cancer Control Trials Recognizing Dr. Lili Wang

2012 SILVER CERTIFICATE OF EXCELLENCE

in Patient Enrollments to Treatment and Cancer Control Trials Recognizing Dr. Jon Greif

2013 HIGHEST NATIONWIDE ENROLLMENT OF TREATMENT CLINICAL TRIALS

Recognizing Bay Area Tumor Institute and Dr. James Feusner

2013 PLATINUM CERTIFICATE OF EXCELLENCE

Recognizing Bay Area Tumor Institute

2013 SILVER CERTIFICATE OF EXCELLENCE

in Patient Enrollments to Treatment and Cancer Control Trials Recognizing Dr. Jon Greif

2014–2017 HIGHEST ACCRUING TREATMENT NCORP INVESTIGATOR FOR THE PERIOD 2014–2017 Recognizing Dr. Carla Golden

2018 A HIGHEST COG NCORP ENROLLING INSTITUTION

Recognizing Dr. Carla Golden and Children's Hospital Medical Center, Oakland

2019 SILVER CERTIFICATE OF EXCELLENCE Recognizing BATI-NCORP Network

2021 CERTIFICATE OF EXCELLENCE in Pediatric Cancer Care Delivery Recognizing Dr. Carla Golden UCSF Benioff Children's Hospital, Oakland

2021–2022 SILVER CERTIFICATE OF EXCELLENCE

for Exceptional Achievement in Patient Enrollments in NCI Treatment and Cancer Control and Screening Trials Recognizing Bay Area Tumor Institute NCORP

2022 GOLD CERTIFICATE OF EXCELLENCE in Patient Enrollments Recognizing Dr. Carla Golden UCSF Benioff Children's Hospital, Oakland

2022 HONORABLE MENTION CERTIFICATE OF EXCELLENCE

in Patient Enrollments Recognizing Dr. Jane McCormick Contra Costa Regional Medical Center

2022 HONORABLE MENTION CERTIFICATE OF EXCELLENCE

in Patient Enrollments Recognizing Dr. Robert Raphael UCSF Benioff Children's Hospital, Oakland

2022-2023 BAY AREA TUMOR INSTITUTE-NCORP CLINICAL TRIALS

The goal of the Bay Area Tumor Institute's clinical trials research is to provide cancer patients and high-risk populations in the East Bay with the most advanced and promising forms of cancer therapy and cancer prevention being offered in the United States and abroad.

Genetic Mutation Targeted Immunotherapy Treatment Trials" are at the forefront of the most advanced forms of cancer treatment and continuing research efforts. Recent advances in deciphering the cancer genome have enabled the development of personalized targeted therapies that have fundamentally changed our approach to cancer treatment. Drugs such as Pembrolizumab, Atezolizumab, Abemaciclib, GDC-0084, Entrectinib, Pertuzumab, Nivolumab, Ipilimumab, Tucatinib, Sacituzumab Govitecan, Olaparib, Avelumab, Cabozantinib, Crizotinib, Binimetinib, Encorafenib, Daratumumab, Relatlimab, and others inhibit molecular pathways that are critical to tumor growth and survival. The discovery of "genetic drivers" has led to a new molecular classification of tumors, distinct from the traditional histologic classification. This capability potentially allows the selection of patients who are most susceptible to a specific therapy, also known as "targeted therapy."

Examples of the types of cancers that BATI physicians can now treat utilizing NCI-approved "Genetic Mutation Targeted Immunotherapy Treatment Trials" include:

- · Triple-Negative Breast Cancer
- · HER2+ Breast Cancer
- · Stage III Colon-Rectal Cancer
- Multiple Myeloma
- · Non–Small Cell Lung Cancer
- · Molecular Analysis for Therapy Choice (MATCH)
- · Check Point Blockage for Specific Rare Tumors
- · Brain Metastasis
- Melanoma
- Skin Cancer

The BATI-NCORP also offers patients the opportunity to participate in major nationwide NCI-approved clinical trials of new ways to prevent, diagnose, and treat cancer utilizing surgery, radiation, gene therapy, and chemotherapy. Equally important are efforts to discover methods to improve



quality of life, reduce recurrence, optimize symptom reduction, eliminate over- and under-diagnosis, and manage precancerous lesions by utilizing advanced imaging and genetic tools.

Examples of a few of the multi-disciplinary cancer treatment, prevention, and symptom management research trials offered by BATI include:

- · Brain Protocols
- · Breast Protocols: Neoadjuvant
- · Breast Protocols: Stages I–IIIA
- Breast Protocols: Locally Advanced / Recurrent / Metastatic
- · Breast Protocols: Other Types / Stages
- · Cancer Care Delivery Research
- · Cancer Control / Symptom Management
- · Cutaneous Protocols
- · Germ Cell Protocols
- · GI Protocols: Colon-Rectal
- · GI Protocols: Pancreatic
- · GU Protocols: Prostate
- · GU Protocols: Multiple Sites
- Head and Neck Protocols
- · Hematologic Malignancy
- · Lung Protocols: Non–Small Cell
- Melanoma
- · Advanced Neuroendocrine Tumors

For the most up-to-date list and detailed description of NCI-approved clinical trials for use by BATI investigators, please visit www.bati.org and click on "clinical research."

66 Why I Joined a Clinical Trial ??

Each of the more than 6,000 people who have taken part in NCI clinical trials research conducted by the Bay Area Tumor Institute since 1979 has a personal reason for joining. The quotations that appear here exemplify responses from participants in screening, prevention, and therapeutic clinical trials.

"Knowing that these trials are approved by the National Cancer Institute and are being conducted at the nation's leading cancer centers gives me a great sense of confidence that my treatment will be best for me and will contribute to improved care for future patients."-в.s.

"I joined a cancer screening trial to help future generations of women learn about their cancers at the earliest possible moment." –A.L.

"I participated to help future patients and, hopefully, to prolong my life." -J.J.





"I wanted my encounter with cancer to generate the scientific knowledge so vital to the improvement of future patient care and improved rates of survival." – R.E.

"I participated in this trial because, as a science educator, I understand that clinical trials are vital to advance our knowledge and medical treatments."–s.к.

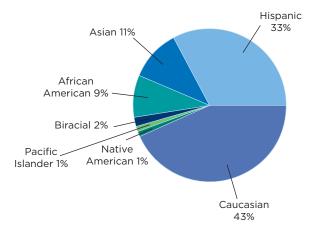
"When I was first diagnosed with breast cancer in 2005, I was focused on my own recovery. When I heard that I could participate in a trial for targeted radiation therapy, I jumped at the chance to help other women, and myself, benefit from the latest technology (but the additional layers of surveillance were also a comfort!)."–в.J.

"There are many ways we can create a legacy for our family. There are fewer opportunities to create a legacy for humanity. Participating in clinical trials gave me a chance to do both." –A.W.

SERVING OUR ENTIRE COMMUNITY

Cancer affects all population groups in the United States. Certain groups, however, may bear a disproportionate burden of cancer compared with other groups. Since its Oakland-based founding in 1972, the Bay Area Tumor Institute has engaged and served all members of our diverse East Bay community, including those who have been historically "medically underserved." Today, more than half of all participants in our research program are classified by the NCI as low-income, non-Englishspeaking at home, medically underserved, or children. These patients and "populations at high risk" are a substantial focus of our research that seeks to identify and address health disparities in patient cure, long-term survival, recurrence of disease, cancer prevention, and after-treatment quality of life measurements. The BATI-NCORP accelerates the adoption of new knowledge by oncology specialists and health care systems as a way to expand participation in lifesaving research, irrespective of barriers related to economics, race, education, or ethnicity.

The following graph describes the patients (as they have described themselves) served during the past five years. Simply stated, providing equal access to cancer prevention research opportunities and advanced clinical research treatments, at no financial cost to the participant or patient in the community setting, is at the core of our mission.



THE IMPORTANCE OF YOUR FINANCIAL SUPPORT

To fulfill its obligation to offer cancer patients every possible opportunity for long-term survival or cure, the Bay Area Tumor Institute depends upon the support of its many long-term and highly generous donors. No patient has ever received a bill from the Bay Area Tumor Institute. All services are provided to cancer patients, hospitals, and physicians without charge. Money is simply not part of the equation when cancer patients need our help.

Whether a patient participates in clinical research and receives the most expensive investigational medications; requests detailed information regarding their diagnosis or treatment; seeks help in decision-making; or asks for highly specific direction in navigating the complex cancer care system, BATI does not send a bill or ask for a donation. Our services are provided to anyone who needs and asks for our help to understand and find the best solution to their experience with cancer.

Although our services are free of charge, the work is not free of cost. Major expenses are incurred in operating a community-based clinical research program. Our out-of-pocket costs per patient can easily exceed \$15,000, in arranging for optimal cancer treatments, obtaining extraordinarily expensive investigational drugs, protecting patients from potential medical and financial harm, and ensuring lifetime follow-up.

Many newly diagnosed or recurrent cancer patients depend on our website as well as the personalized informational and navigational services that are provided without cost.

For a deeper insight into the value and services of the Institute, we invite you to meet with Barry Siegel, President of the Institute. Please call [510] 465-8571 for further information or to schedule an appointment.

DONORS

Loyal and generous friends make it possible to offer cancer patients access to the most advanced forms of investigational treatment. Deepest appreciation is offered to the following donors for their extraordinary generosity.

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Through the remarkable generosity and dedication of physicians, nurses, dentists, and social workers, cancer patients are never asked to pay for services provided by the Institute. Due to limitations of space, only a partial list of volunteers follows, although many others deserve our gratitude as well.

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