

THE FUTURE OF CLINICAL RESEARCH IN CERVICAL CANCER TREATMENT

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NOTHING TO DISCLOSE

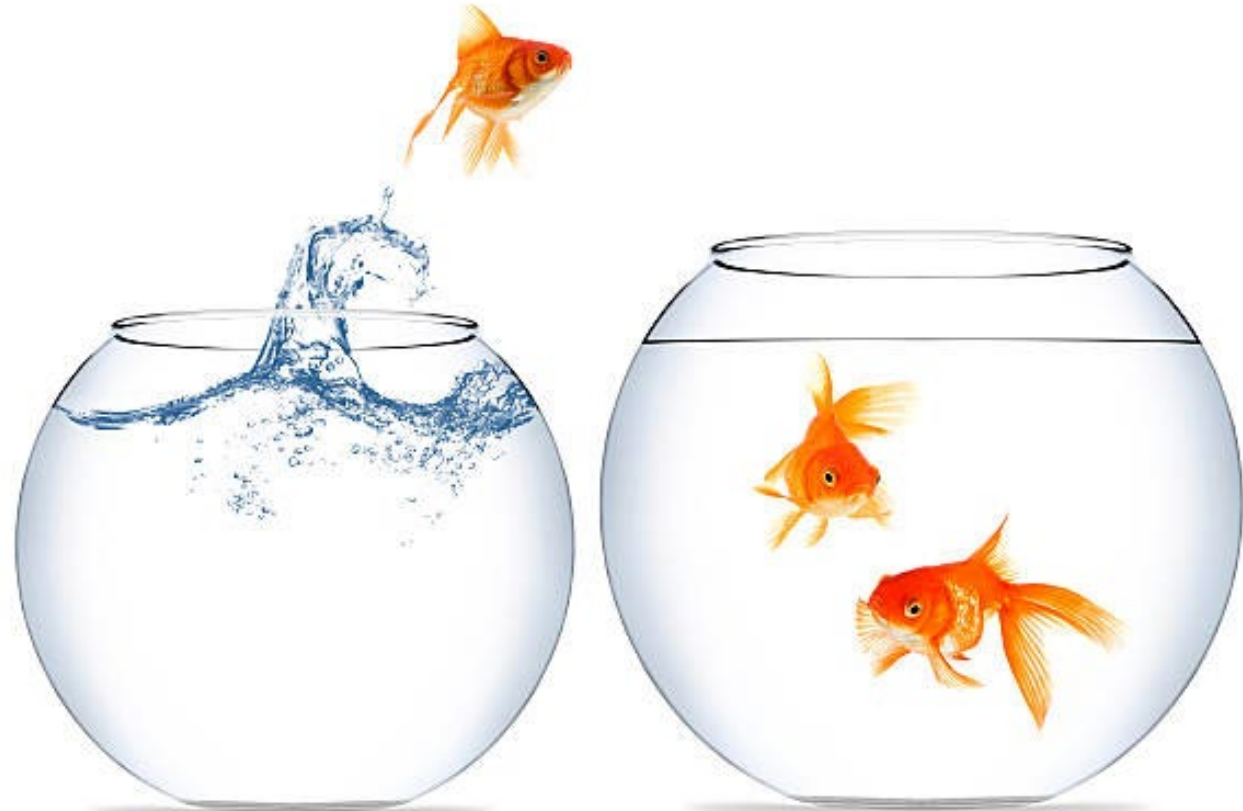
20 October 2021



THE VIEWS EXPRESSED ARE MY OWN AS A FORMER K12-TRAINED SCHOLAR AND NOT THOSE OF THE UNIVERSITY OF KENTUCKY OR THE US FEDERAL GOVERNMENT. LINKS OR DISCUSSION OF SPECIFIC DRUG PRODUCTS DO NOT CONSTITUTE ENDORSEMENT.

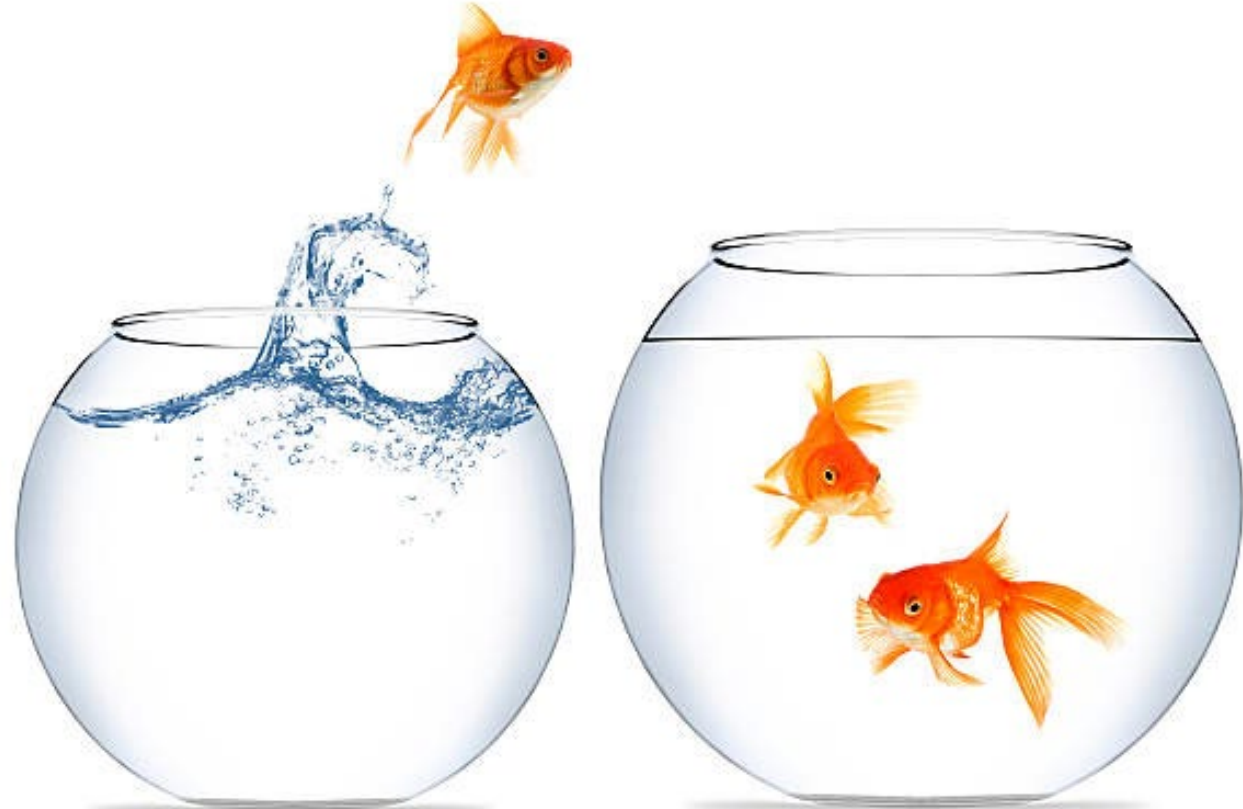
UTERINE CERVIX CANCER TREATMENT AS A NATIONAL PRIORITY

- (1) ADVANCED-STAGE UTERINE CERVIX CANCER SURVIVAL RATE **HAS NOT RISEN** IN TWO DECADES
- (2) **RADIOTHERAPY** UTILIZATION DRIVES SURVIVAL FOR ADVANCED-STAGE DISEASE
- (3) INTENSIFYING **REGIONAL TREATMENT** IMPROVES SURVIVAL
- (4) IDENTIFYING WOMEN **AT-RISK FOR DISTANT DISEASE RELAPSE** IMPACTS SURVIVAL OUTCOME



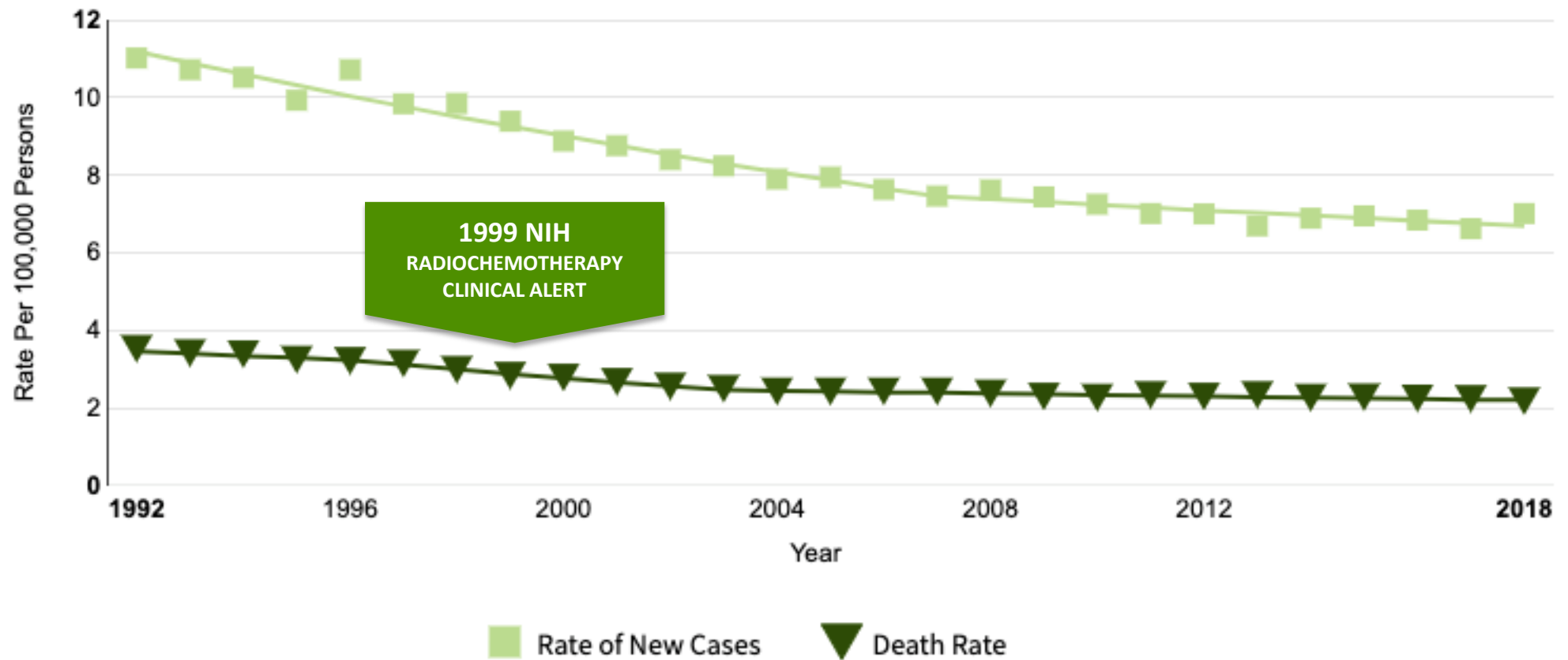
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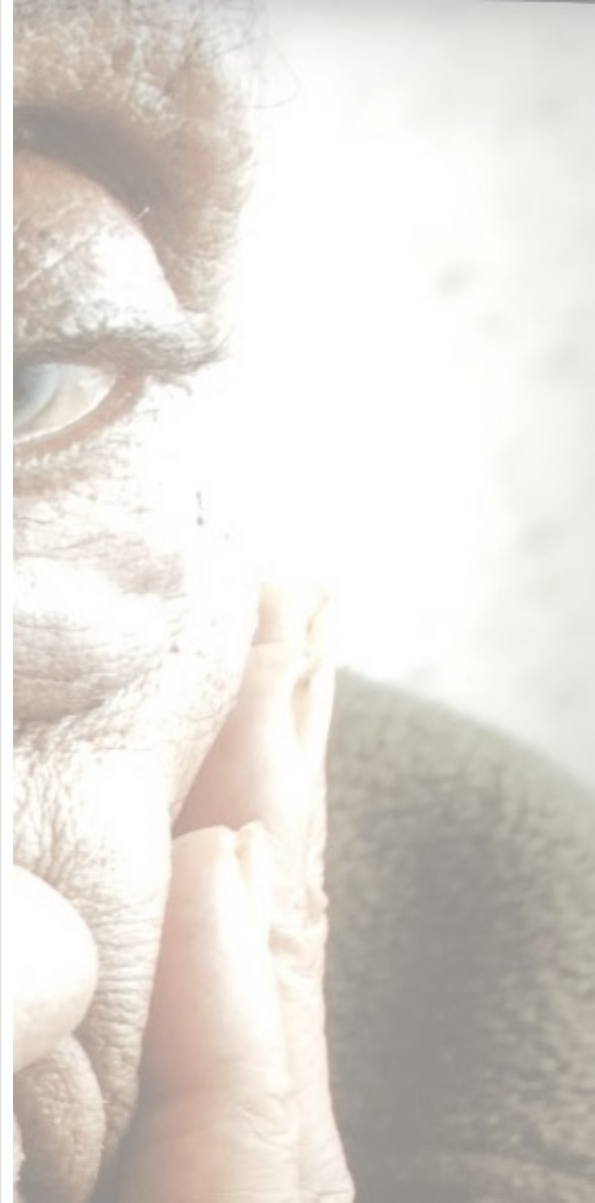


SURVIVORSHIP

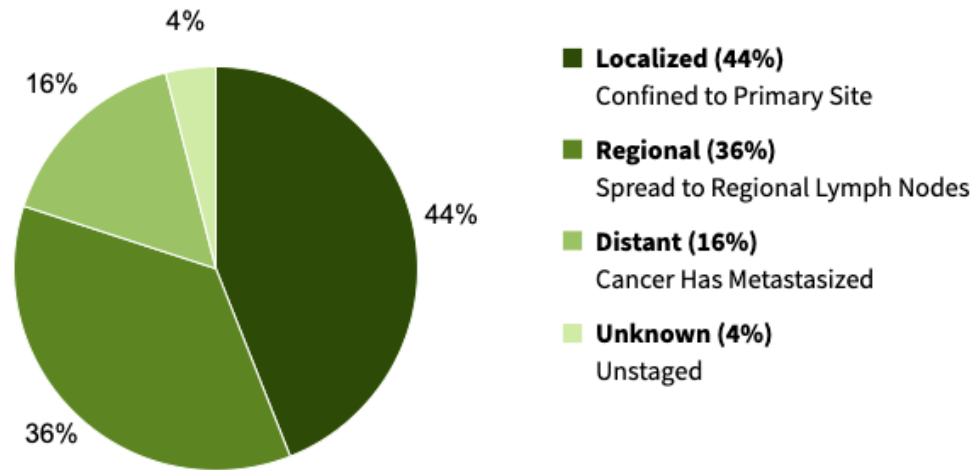


New cases come from SEER 13. Deaths come from U.S. Mortality.
All Races, Females. Rates are Age-Adjusted.

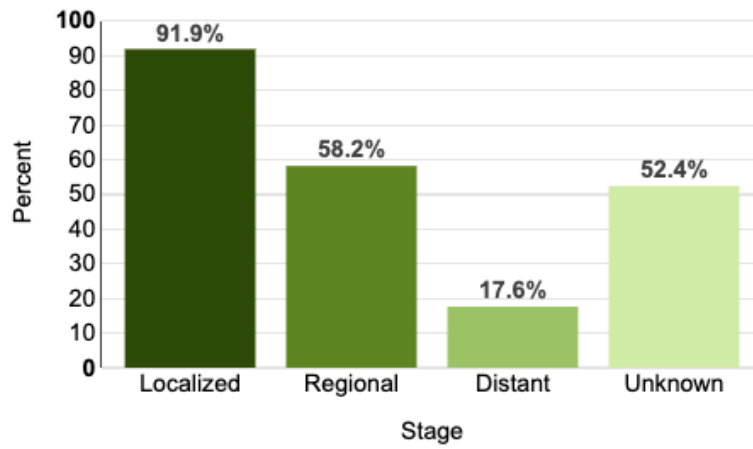
SURVIVORSHIP: MORTALITY RATE 1992-2018



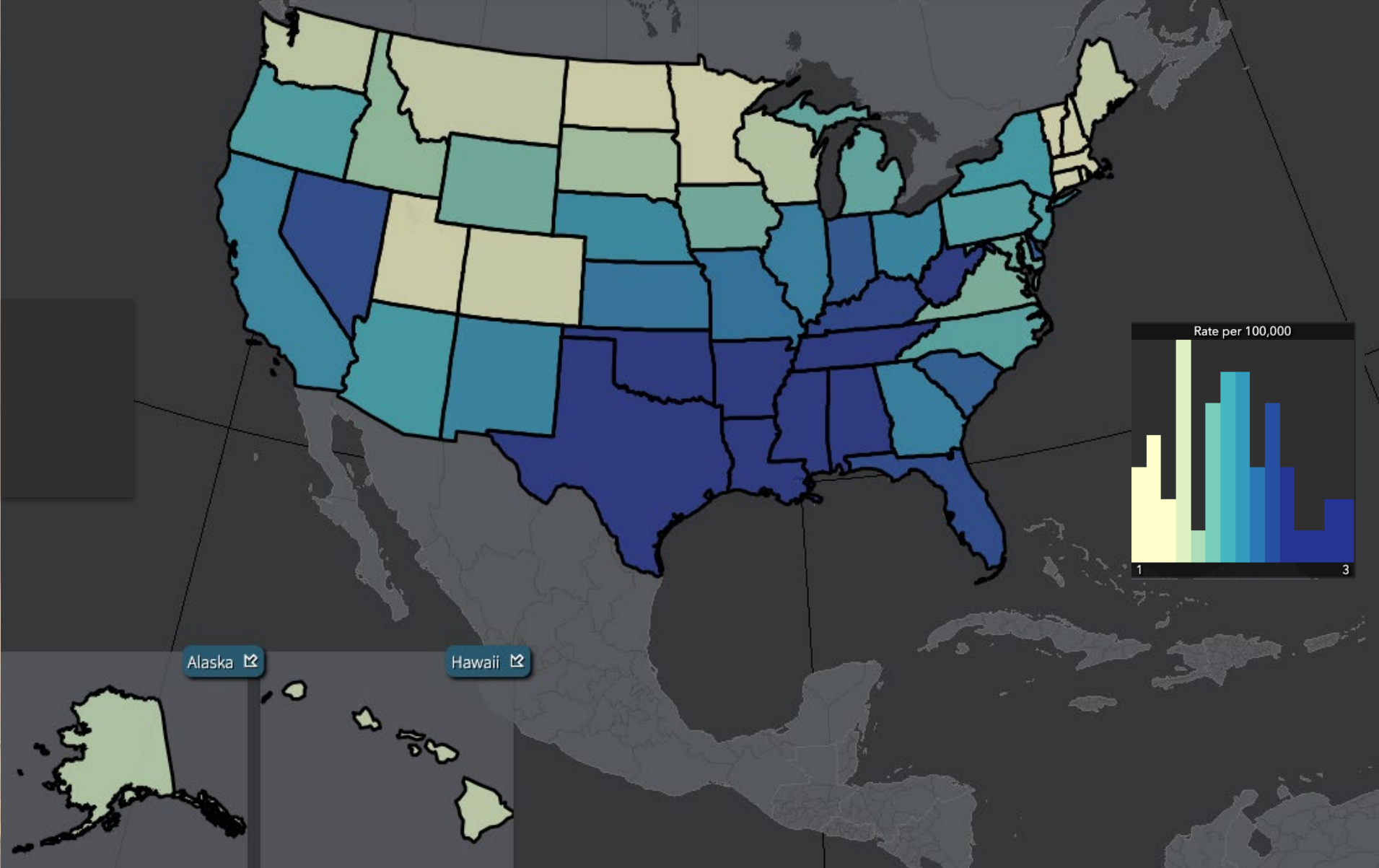
Percent of Cases by Stage



5-Year Relative Survival

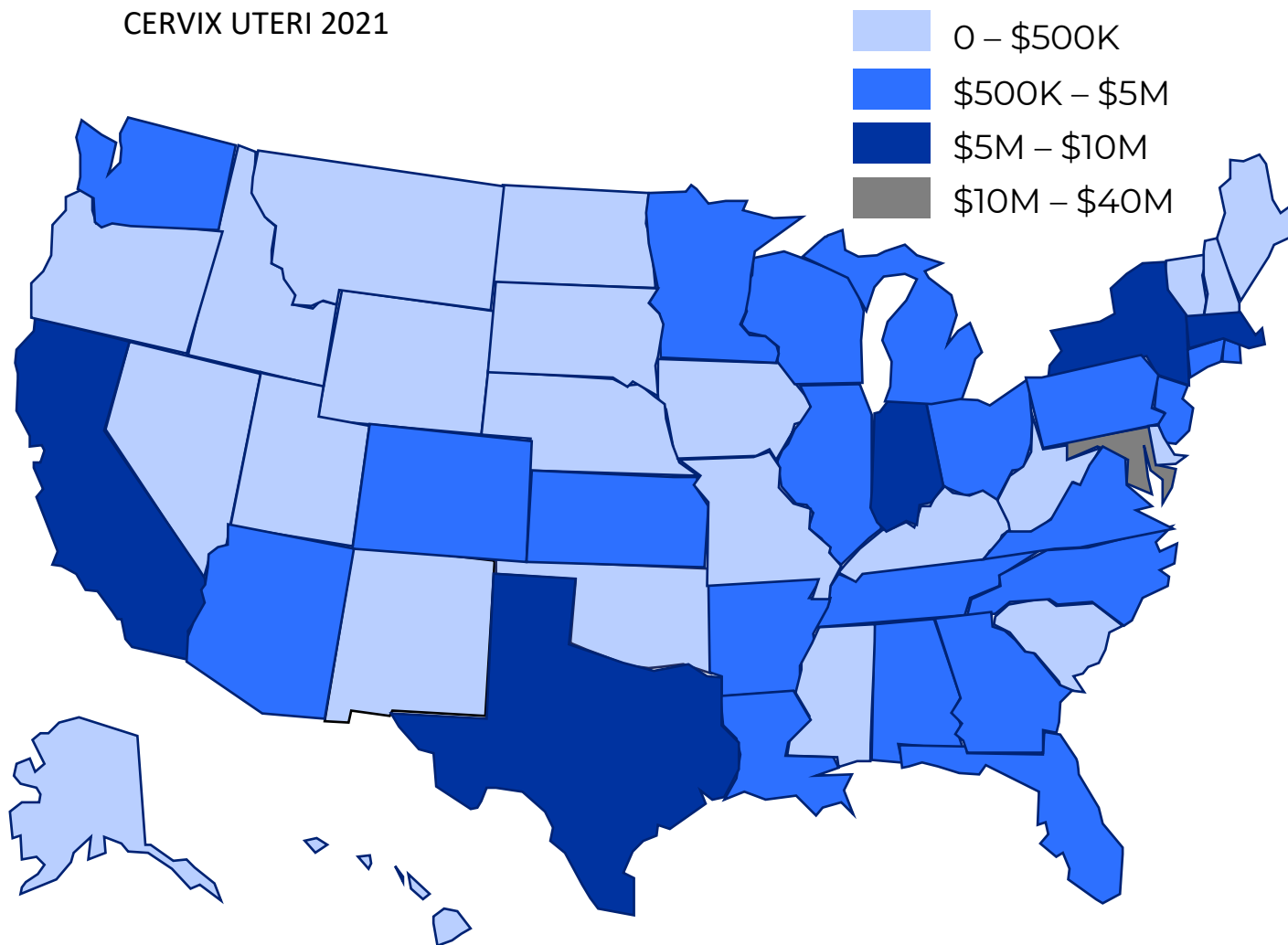


SURVIVORSHIP: CERVIX UTERI STAGE AND 5-YEAR RELATIVE SURVIVAL



SURVIVORSHIP: CERVIX UTERI INCIDENCE /
PER 100,000 BY STATE

SUM OF PROJECT DOLLARS PER STATE CERVIX UTERI 2021

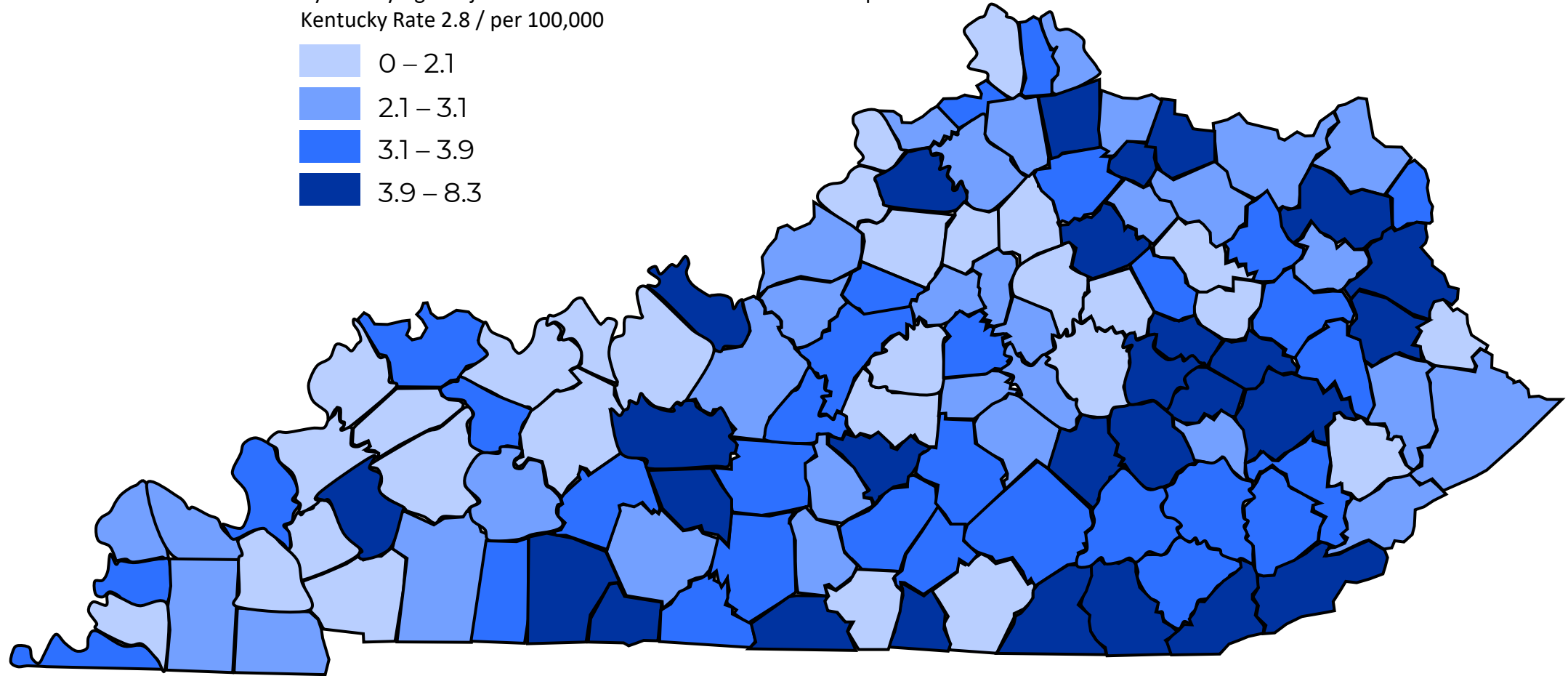
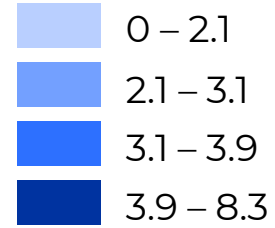


SURVIVORSHIP: RESEARCH DOLLARS – CERVIX UTERI
SUM OF PROJECT DOLLARS PER STATE

Age-Adjusted Cancer Mortality Rates in Kentucky, Cervix Uteri 1999-2018

By County Age-Adjusted to the 2000 US Standard Million Population

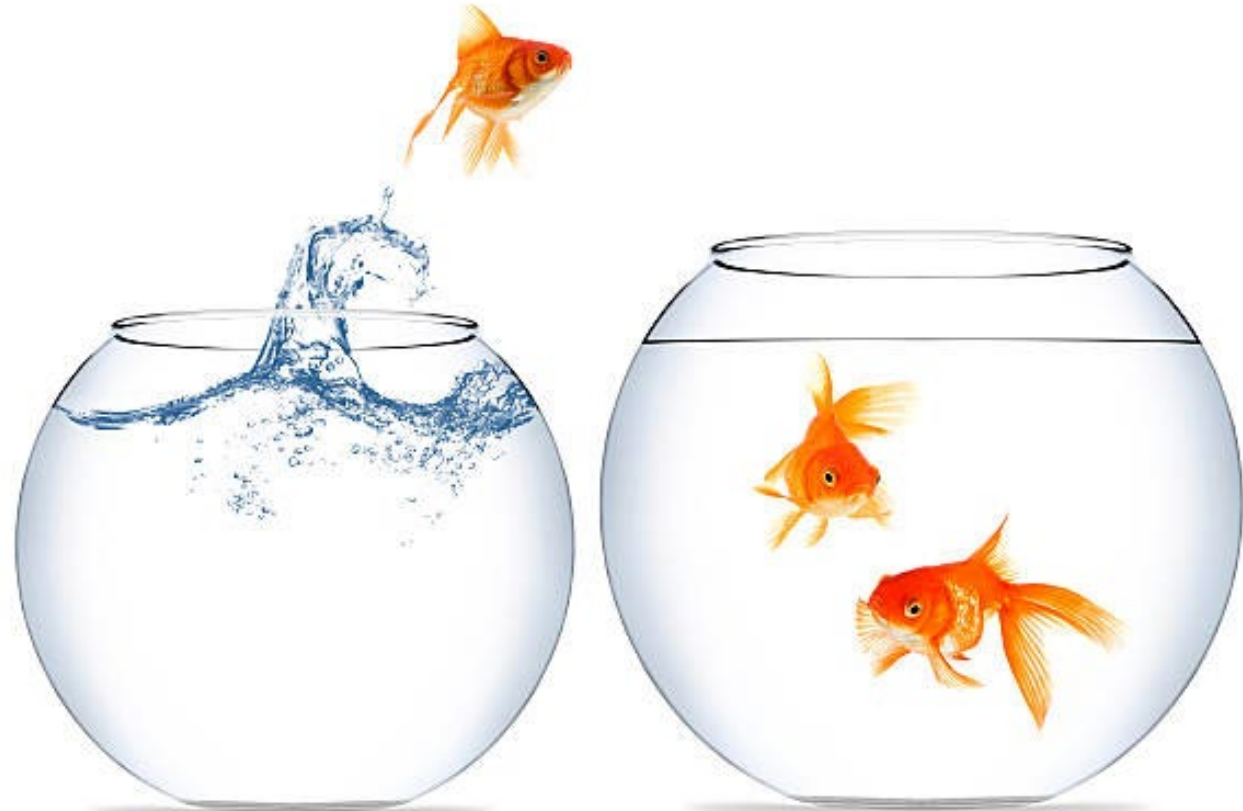
Kentucky Rate 2.8 / per 100,000

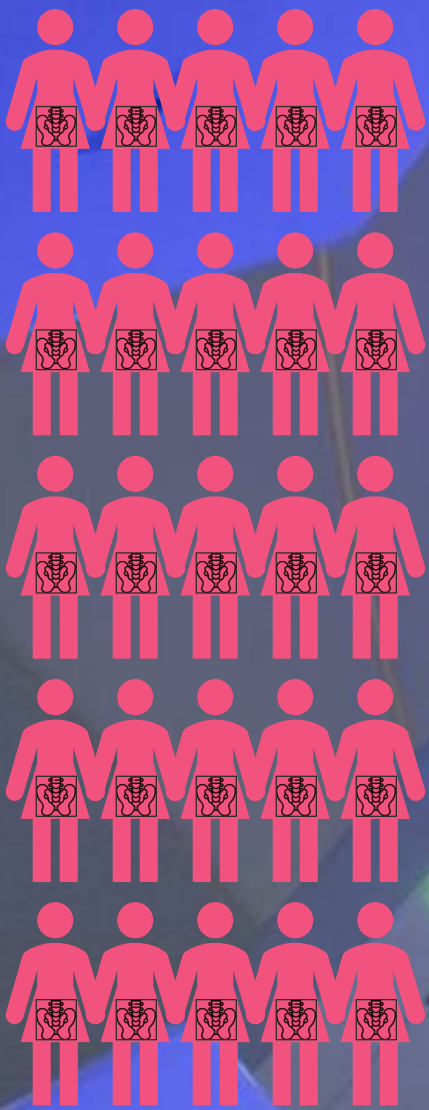


SURVIVORSHIP: HIGHEST MORTALITY - CERVIX UTERI

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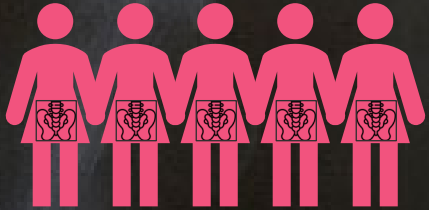




25 TREATMENTS

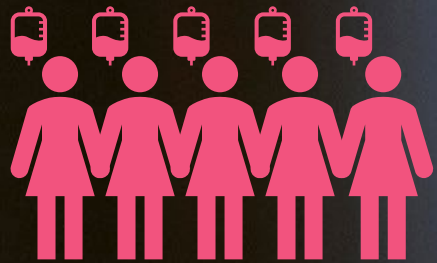


DAILY TELETHERAPY - CERVIX UTERI



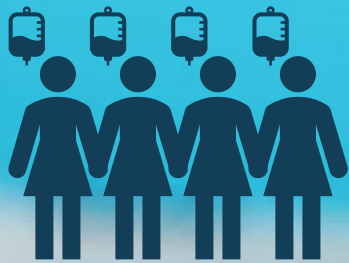
5 HIGH-DOSE-RATE
TREATMENTS

TWICE WEEKLY BRACHYTHERAPY - CERVIX UTERI



5+ WEEKLY CHEMOTHERAPY TREATMENTS

WEEKLY CISPLATIN CHEMOTHERAPY - CERVIX UTERI
[1999 NATIONAL INSTITUTES OF HEALTH CLINICAL ALERT]

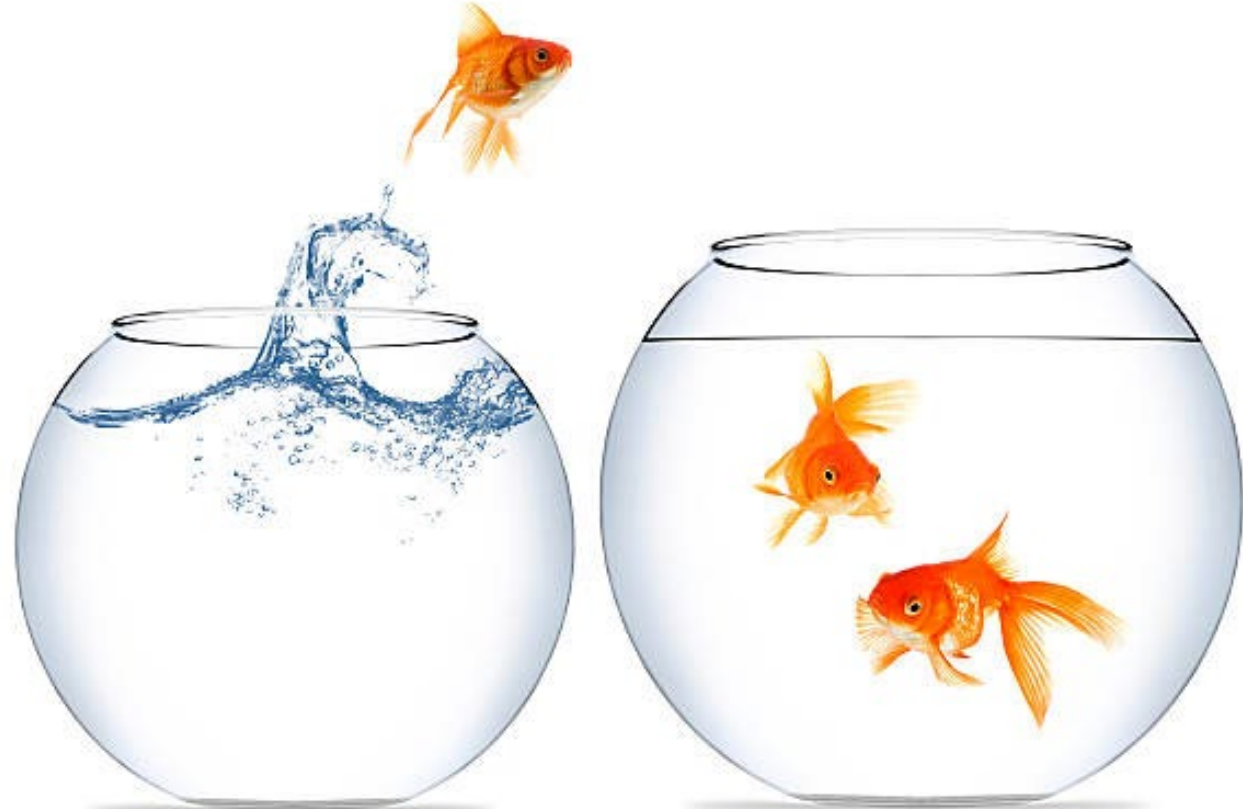


4 MONTHLY INFUSION TREATMENTS

MONTHLY RADIOPHARMACEUTICAL THERAPY – HIGH AT-RISK CERVIX UTERI
[UNDER FUTURE CLINICAL INVESTIGATION AS POST-RADIOTHERAPY TREATMENT]

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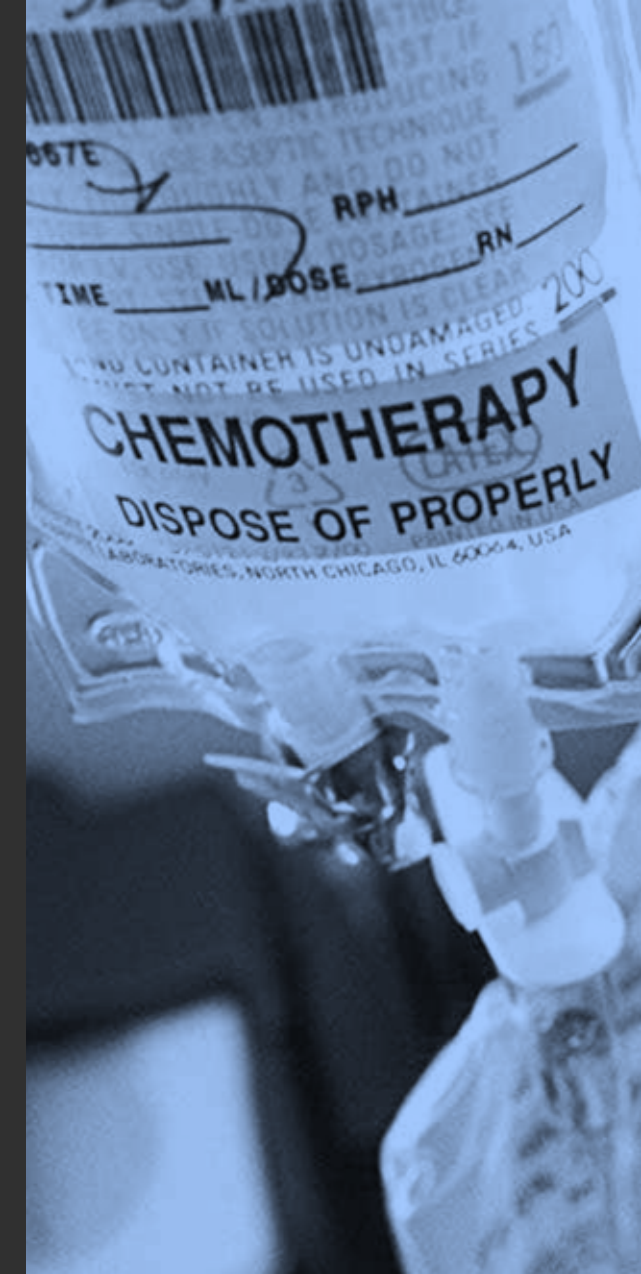
VACCINE



SURGERY



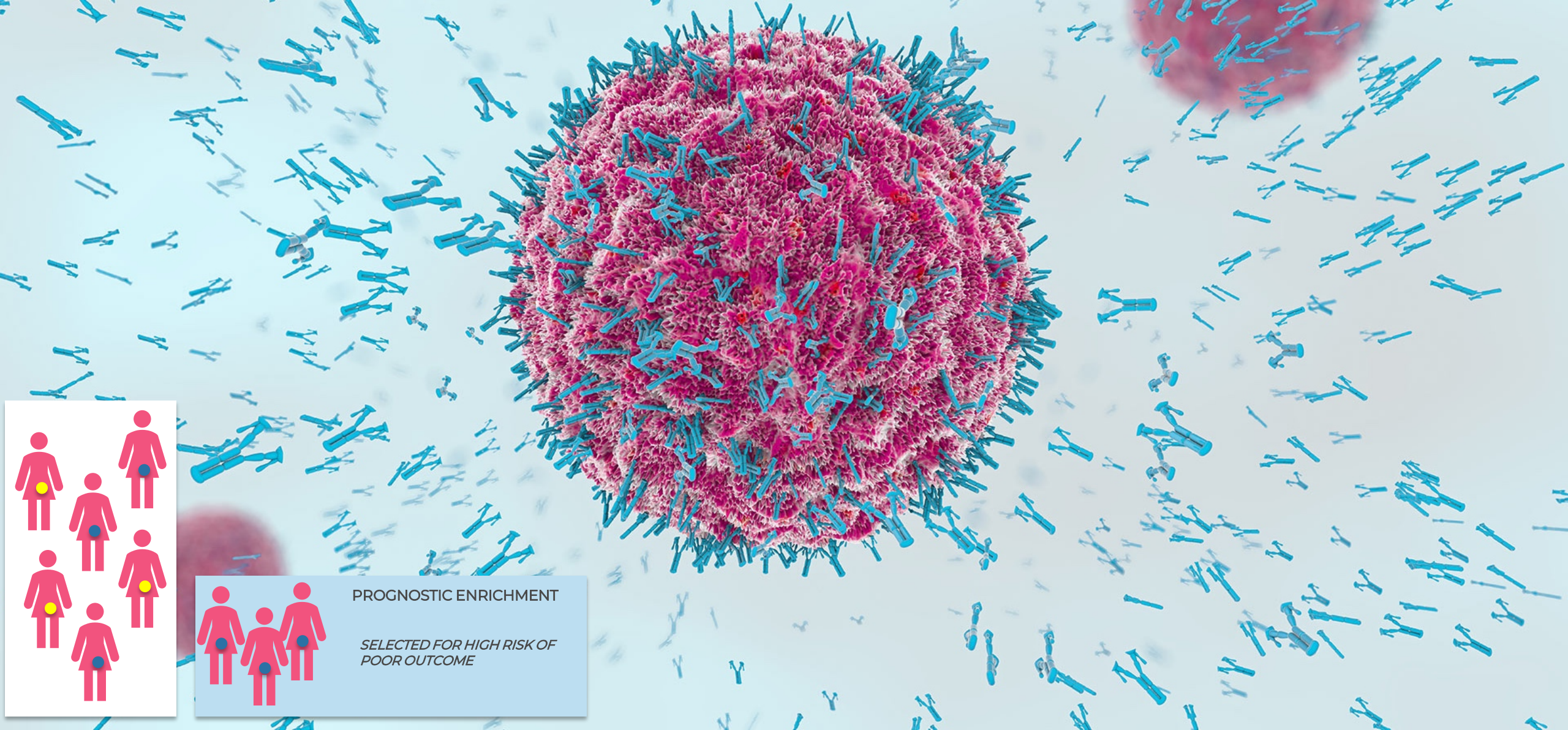
RADIOTHERAPY



DRUG THERAPY



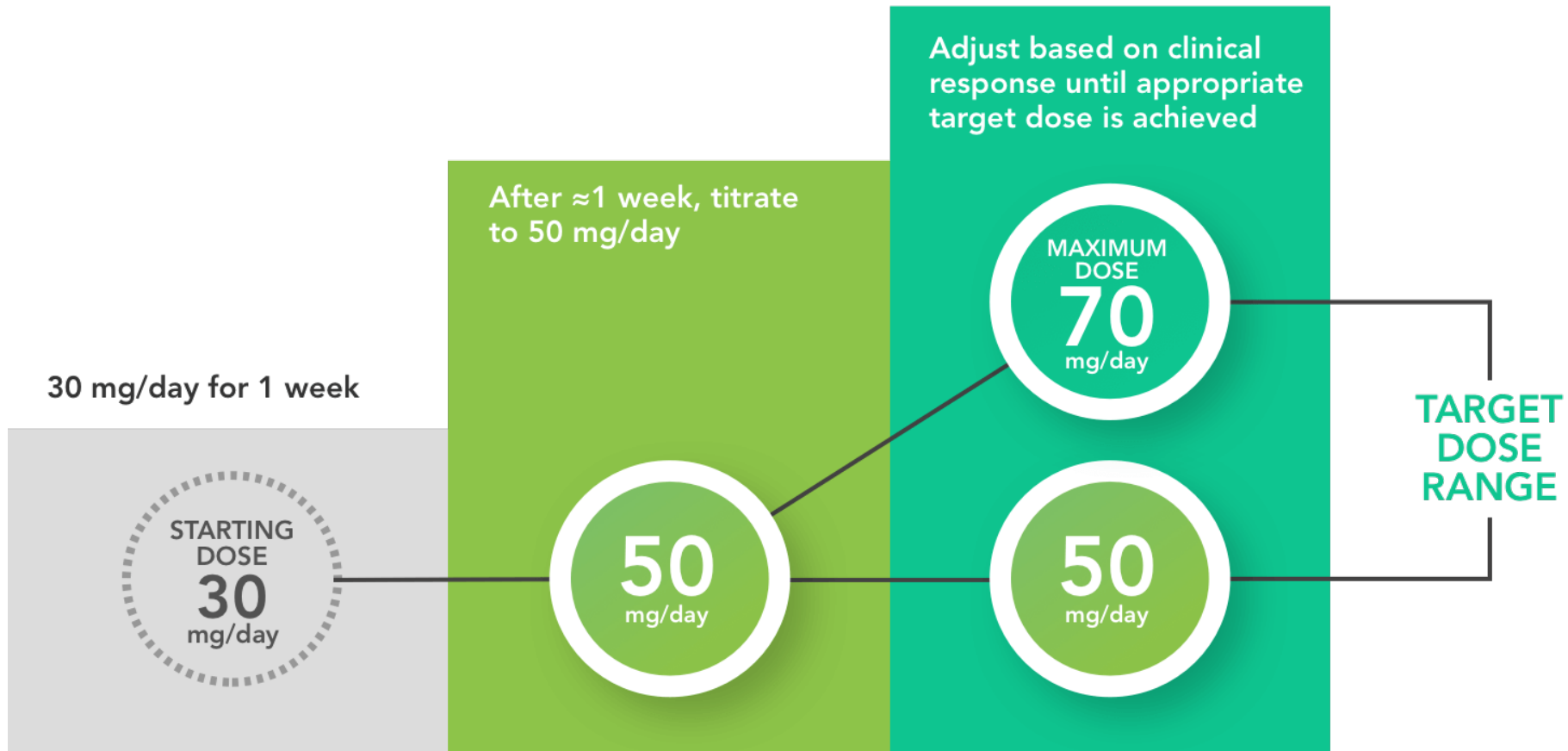
ANTIBODY-DRUG CONJUGATE THERAPY – METASTATIC CERVIX UTERI



PROGNOSTIC ENRICHMENT

SELECTED FOR HIGH RISK OF POOR OUTCOME

RADIOPHARMACEUTICAL THERAPY – NODE-POSITIVE CERVIX UTERI



PERSONALIZED DOSE INTENSIFICATION – CERVIX UTERI

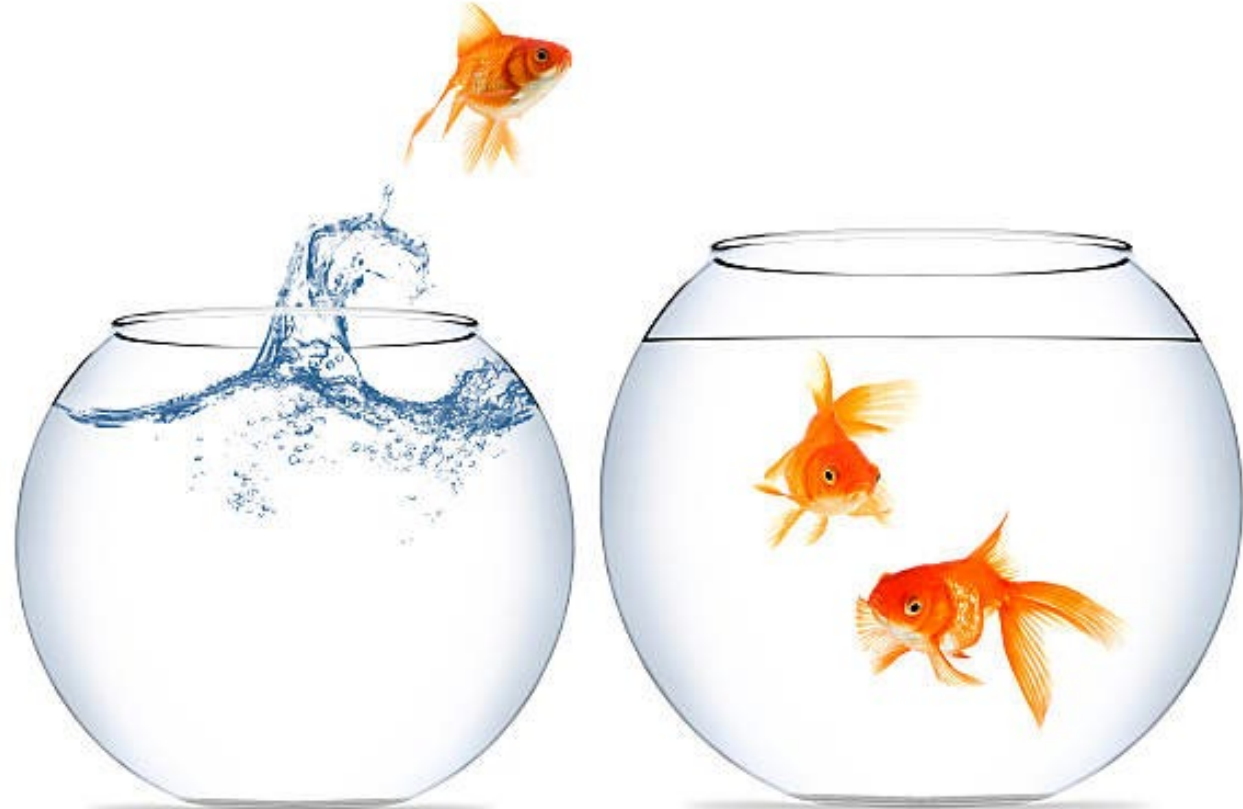




PERSONALIZED SCHEDULE INTENSIFICATION – CERVIX UTERI

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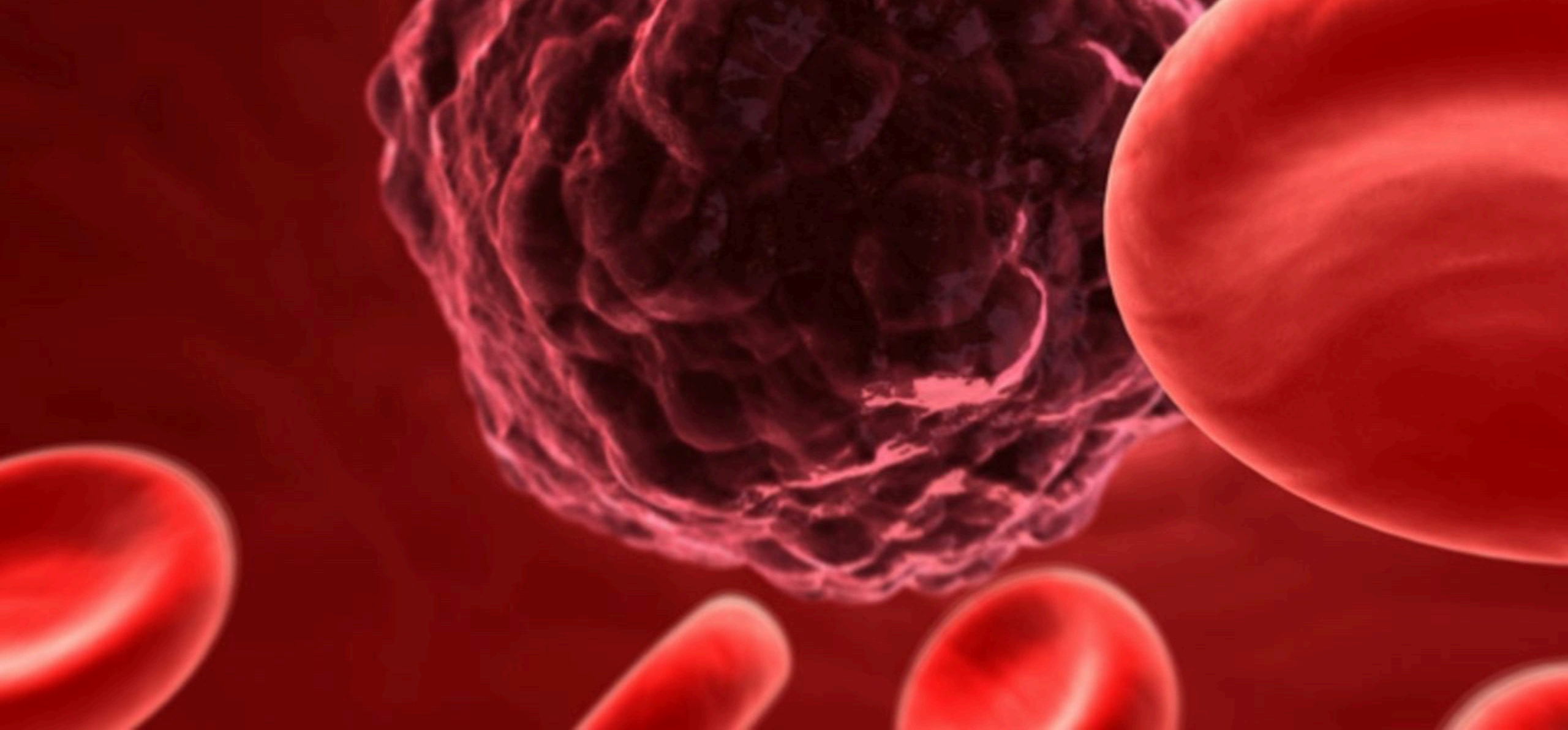




SHED PERIPHERAL BLOOD DEOXYRIBONUCLEOTIDES – CERVIX UTERI



SHED PERIPHERAL BLOOD CANCER CELL OR HUMAN PAPILOMAVIRUS DNA – CERVIX UTERI



SHED PERIPHERAL BLOOD CIRCULATING TUMOR CELLS – CERVIX UTERI



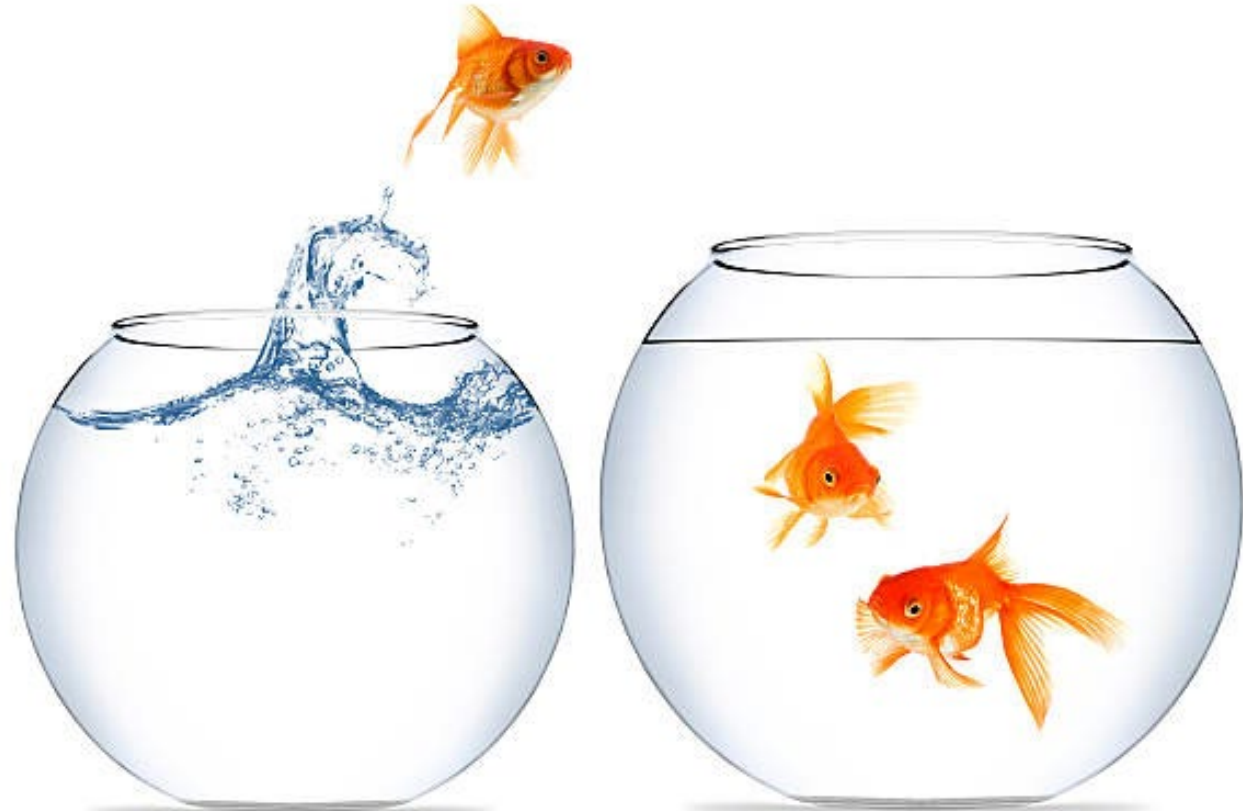
PRETHERAPY ^{18}F -FLUORODEOXYGLUCOSE POSITRON EMISSION TOMOGRAPHY – CERVIX UTERI



SOCIOECONOMIC FACTORS IMPACTING OUTCOME – CERVIX UTERI

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