TuSalud

Senator Patty Murray Talks Women's Health During Visit to Fred Hutch Cancer Center

When it comes to health care, health equity and cancer research, women truly are "part of the answer."

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[On June 27] a tenacious "mom in tennis shoes" who went on to become Chair of the U.S. Senate's powerful Appropriations Committee stopped by Fred Hutch Cancer Center for an update on its women's health research.

Sen. Patty Murray, senior Democratic senator from Washington state, toured labs and clinics, met scientists young and old, and learned about a new experimental therapy designed to prevent metastatic breast cancer. She also visited and spoke with a patient and dedicated clinical trial participant.

"It was great to see the impressive new treatment and lab facilities at Fred Hutch and talk with so many doctors and scientists who are at the cutting edge of eliminating cancer and making important discoveries in the field of women's health," Murray said after the visit. "Fred Hutch is on the cutting edge of ending cancer and improving cancer outcomes for women. It's exciting to see them continue to play a critical role in President Biden's Cancer Moonshot, which I am going to keep working to support as we negotiate and write our government funding bills."

Murray has been a longtime champion of women and women's health, from her early advocacy on behalf of kids, schools and families, to her dedicated support for STEM education for girls to her recent sponsorship of the bipartisan Advancing Menopause Care and Mid-Life Women's Health Act, designed to boost an area of research long overlooked and underfunded.

She's also a huge believer in research for cancer prevention and treatment, especially for those who've been consistently underserved.

This year, she secured $235.5 million for the Centers for Disease Control and Prevention to support breast cancer screening and diagnostic services to uninsured and underinsured women, as well as an additional $22.4 million for the CDC's cancer prevention, early detection and treatment, survivor support and health equity activities within the Cancer Moonshot Initiative. Murray was

also the lead Democratic negotiator of the bipartisan 21st Century Cures Act, which provided funding to tackle the opioid crisis, strengthen mental health care, and boost National Institutes of Health research, among other initiatives.

The Women's Health Initiative at Fred Hutch

The only National Cancer Institute-Designated Comprehensive Cancer Center in Washington state, Fred Hutch is home to the clinical coordinating center for the Women's Health Initiative, which has provided crucial data for more than 30 years on the prevention of cancer and other chronic diseases.

Launched in 1993 by the first female director of the NIH, Bernadine Healy, MD, and led by Fred Hutch scientists, the WHI was designed to study the effects of specific prevention strategies on major causes of death and disability in women after menopause, as well as fill large gaps in public health knowledge about women, who up until that point had been excluded from clinical trials. Trials were designed to answer key questions about heart disease, cancer and osteoporosis in aging women: Did the use of hormone therapy, dietary supplements like calcium and vitamin D, and a low-fat diet pattern with vegetables, fruits and grains help or hinder?

The WHI is still providing answers today, Marian Neuhouser, PhD, RD, told Murray before a framed quilt featuring the embroidered signatures of Seattle Clinical Center's first WHI participants under the catchphrase, "I am part of the answer." (WHI's original recruitment materials encouraged women to 'Be part of the answer!')

"We're so grateful for the participation and dedication of these women," Neuhouser said, adding that around 50,000 of the original 161,808 participants are still regularly providing data for researchers even though they're in their 80s and 90s. "In addition to the initial WHI clinical trials and observational study, over 336 ancillary studies have been funded. WHI has amassed a treasure trove of data on many aspects of women's health, including aging, cognition and cancer survivorship."

Neuhouser, head of Fred Hutch's Cancer Prevention Program, added that the WHI has also been a tremendous engine for women's scientific career development, with many of the researchers involved going on to receive large NIH grants and assume major leadership positions at Fred Hutch and elsewhere.

Glaring disparities in women's cancers

Gynecologic oncologist and clinical researcher Elizabeth Swisher, MD, who serves as deputy director of the Fred Hutch/University of Washington/Seattle Children's Cancer Consortium discussed "below the belt" cancers with Murray.

"We're working on preventing and treating female cancers better," Swisher said, going on to

discuss her EDGE study, aimed at boosting access to genetic testing in both rural and urban primary care clinics.

Funded by the White House Cancer Moonshot Initiative, EDGE compared two methods of screening individuals for familial cancer risk and offering genetic testing in primary care clinics in two different health care systems. Genetic tests are blood tests used to determine if someone has a germline (or inherited) mutation that could potentially drive a cancer, such as a BRCA1/2 mutation that can cause breast, ovarian, prostate and pancreatic cancers. By getting genetic testing for cancer risk into primary care clinics, high risk individuals can be identified, and lives saved though personalized prevention plans. Genetic tests are also used to determine treatment, particularly targeted treatments like a PARP inhibitor, some of which gained approval based on Swisher's research.

"Liz's EDGE study is huge because it means it's possible to take these tests which have been centralized and disseminate them into the community," explained Nancy Davidson, MD, holder of the Raisbeck Endowed Chair for Collaborative Research and Fred Hutch's executive vice president of clinical affairs. "So now everyone has access to these genetic tests which they can use to better their health and maybe even to make treatment decisions."

Swisher also talked about cancers caused by viral infections, such as human papillomavirus.

"Prevention is a huge part of cancer care," Swisher said, "but even in this country we are behind on HPV vaccination, which can pretty much eliminate cervical cancer altogether. There's a global push to eliminate it, but we can't even eliminate it in our own country."

Read about Fred Hutch research that laid the groundwork for the HPV vaccine.

Cervical cancer rates are actually increasing in states that refuse Medicaid expansion, Swisher said. And endometrial cancer rates are "skyrocketing," especially in Black women, even though other cancer mortality rates continue to drop.

"There are a lot of disparities in female cancers," she said. "Many women don't realize that no amount of bleeding after menopause is normal. We're trying to address awareness and education as well as design better diagnostics. All the endometrial studies were done in white women but we've found the tools used for diagnosing this disease have much lower sensitivity in Black women. It's very much a health equity issue."

These stark inequities led Swisher's colleague, gynecologic oncologist Kemi Doll, MD, to actually build a network in order to elevate both research and patient care and support.

"When Kemi realized there was no advocacy organization for Black women with endometrial cancer, she created one," Swisher said. "She started ECANA Women in order to research exactly why the cancer rates in this group continue to rise. We're trying close that gap."

Preventing metastatic breast cancer

Women have been directly responsible for moving the needle in a big way in breast cancer research, as well, per translational researcher Cyrus Ghajar, PhD, director of Fred Hutch's Center for Metastasis Research eXcellence (MET-X) and holder of the Peter S. Lefkarites Memorial Endowed Chair.

Murray toured Ghajar's lab, met an array of postdocs and learned about his research aimed at shutting down dormant disseminated tumor cells — sleeping cancer cells that can eventually "wake up" and create the metastatic tumors that kill patients — funded by a $25 million grant from the Department of Defense Breast Cancer Research Program, or BCRP.

"The DoD's Breast Cancer Research Program was created by breast cancer advocates, by women who've actually had breast cancer," Ghajar said, pointing out how BCRP funds high-risk, high-reward research designed to change the course of breast cancer care, diagnosis and treatment over the next five to 10 years. "These are people who are motivated to actually move the needle." The National Breast Cancer Coalition is composed of the patient advocates who started BCRP.

Ghajar said patient advocates grew tired of seeing others die of metastatic disease so they banded together and lobbied for more funding. Since that time, he said, advocates have gone on to create a whole ecosystem where they train other patients about epidemiology, immunology, genomics so they can work with researchers to better serve the cancer community.

"These advocates are on the BCRP panel along with scientists," he said, "but they have the perspective of 'I've been through treatment, I know what works and what doesn't work, and I know what other people in my position want.'"

Ghajar's research has also been funded by the National Cancer Institute, part of NIH. His research funded by NCI and BCRP both fall under Murray's domain as chair of the Senate Appropriations Committee.

"You've been a huge proponent of funding for the BCRP as well as the NIH and we really appreciate all that you've done," he said.

Translating clinical trials into better cancer care

At the treatment center, Murray toured one of the infusion floors, learned about the clinic's patient-centered care approach and met Ryan Leib, chief clinical operating officer, and new VP and chief nursing officer Denene Prophet-Williams, MBA, MLA, who recently came to Fred Hutch from Cedars-Sinai Medical Center in Los Angeles.

About two years ago, Fred Hutch Cancer Research Center and Seattle Cancer Care Alliance fully merged their research arm with its treatment center to better serve patients. As an NCI-

Designated Comprehensive Cancer Center, Fred Hutch specializes in cancer research, treatment and prevention, sees complex patients and operates at the forefront of technology and new therapies.

“We wanted to unify the experience for our patients so it’s more streamlined and seamless,” Davidson explained. “Two years in, we’re very excited about how it’s going and our patients seem to really like it, too.”

Murray met one such patient, Teresa Pierce of Renton, who was at Fred Hutch’s South Lake Union clinic to receive a blood transfusion as part of her follow-up cancer care.

“I’ve been coming here for 15 years,” Pierce told the senator. “I started with Dr. Stephen Petersdorf and now I’m with hematologist-oncologist Dr. Brian Till. I’ve had two stem cell transplants and CAR T-cell therapy.”

Pierce said her multiple cancers were most likely caused by exposure to radiation from working at the Hanford nuclear facility in Hanford, Washington. Environmental exposures that drive cancers (think radiation, radon, red meat and wildfire smoke) is another area of research at Fred Hutch.

This was not news to Pierce, of course, who said she’s long followed Fred Hutch’s research and treatment breakthroughs.

“There’s more going on here than you know,” she told Murray, after thanking her for all she’s done for Washington state and the country. “I’ve been involved in nine clinical trials at this point. I used to be a developmental toxicologist so I understand the importance of research. They do a great job here. Nobody does it like Fred Hutch.”

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