

**The University of Texas M.D. Anderson Cancer Center  
Tobacco Fund Planned Expenditures for FY 2020**

In 1999, Texas began receiving payments as a result of a lawsuit against tobacco manufacturers. Several endowments were established by the Seventy-sixth Legislature with proceeds from the settlement.

MD Anderson received a permanent \$100 million endowment from the Legislature in 1999 in support of research and other programs that benefit the public health. Funding for this strategy is derived from annual distributions of Permanent Health Funds established in Section 63.101 of the Texas Education Code, providing \$6.4 million to MD Anderson in FY 2020 for tobacco related research programs.

A separate endowment was created by the Legislature called the Permanent Health Fund (PHF). Funds appropriated out of the PHF are distributed to institutions of higher education for the purpose of medical research, health education or treatment programs in accordance with Education Code 63.003, as determined by the Legislative Budget Board. MD Anderson's FY 2020 allocation is \$2.4 million.

In support of MD Anderson's mission areas – patient care, research, education, and prevention – the following programs received settlement funds in FY 2020: \$6.0 million for Cancer Prevention, including: Tobacco Outreach Education Program; Tobacco Faculty Support; Tobacco Trainee and Junior Faculty Program, and Tobacco Disparities and Fellows Program; Tobacco Treatment Program; Mexican American Cohort; Patient History Database; Population Sciences Laboratory Resource Center. It also provides \$0.6 million for Molecular Mechanisms Tobacco Carcinogenesis and \$2.2 million for Research Equipment.

**CANCER PREVENTION: BEHAVIORAL SCIENCE**

**Tobacco Outreach Education Program (Division of Cancer Prevention and Population Sciences)**

The mission of the Tobacco Outreach Education Program (TOEP) is to deliver the highest quality education and training in tobacco control principles and practices to health care professionals and the public. In FY20, TOEP will begin its twenty-first year of disseminating tobacco prevention and cessation tools among youth, health care providers and the community at large. TOEP combats tobacco use in Texas, nationally, and internationally using multilevel educational components focused on tobacco prevention and cessation tools among youth, postdoctoral training, and continuing education for health care providers in smoking cessation counseling and treatment of their patients. In FY20, TOEP will mature new partnerships and continue promoting tobacco control across the state, nation and globally through six TOEP initiatives:

- 1) Renewed ASPIRE 2.0 curriculum for high school and middle school students;
- 2) Revised and upgraded continuing medical education (CME) series for health care providers with its related research study;
- 3) Local, national and international presentations and training seminars for scientific and lay communities;
- 4) MD Anderson Cancer Center institutional and external partnerships;
- 5) Postdoctoral fellowship training; and
- 6) Comprehensive research projects and initiatives.

### **Tobacco Faculty Support (Division of Cancer Prevention and Population Sciences)**

Since 1998, MD Anderson has committed to maintaining a critical mass of investigators with expertise in multiple aspects of tobacco use disorders and prevention as a component of the infrastructure within the Department of Behavioral Science. This investment allows for extended opportunities for research, education, and outreach through their efforts. In FY20, only one position remains in the budget request. The supported faculty member will continue to contribute expertise to initiatives such as the Tobacco ECHO training program, as well as the MD Anderson Certified Tobacco Treatment Training Program. Additionally, the supported faculty member will serve as the Principal Investigator of a CPRIT cancer prevention grant focused on provision of evidence-based smoking cessation and smoke free home services to low-income pregnant women in Northeast Texas.

### **Tobacco Trainee and Junior Faculty Program, and Tobacco Disparities and Fellows Program (Division of Cancer Prevention and Population Sciences)**

Since the inception of the trainee program in 2000, which includes the Tobacco Disparities Training Program in the Department of Health Disparities Research, more than 50 Post-doctoral fellows and graduate students have worked under the supervision of highly recognized and experienced principal investigators in MD Anderson research departments, laboratories, clinics and field sites to enhance their knowledge and skills in tobacco prevention and cessation research and interventions. The overall goal of the program is to prepare behavioral and social scientists to develop expertise and experience in the clinical, laboratory, community outreach and academic components of tobacco control and cancer prevention, in addition to the in-depth focus on their specialty. In FY20, seven training opportunities are proposed, each assigned to a faculty mentor in Tobacco, including positions for Graduate Research Assistants, Post-doctoral Fellows and junior faculty members.

### **Tobacco Treatment Program (Division of Cancer Prevention and Population Sciences)**

The Tobacco Treatment Program (TTP) was formed in 2006 with the primary mission to directly address the sequelae associated with continued smoking after a cancer diagnosis and to expand the empirical basis for advancing the treatment of tobacco dependence more broadly. The TTP operates as a center of clinical excellence serving patients, employees, and their family members while conducting extramurally funded clinical research with both cancer patients and community volunteers. From May 1, 2018 to April 30, 2019, the TTP offered cessation assistance to 4,821 new patients and completed 11,412 appointments during this timeframe across multiple treatment options. In September of 2018, the Tobacco Treatment Program initiated the creation of its own tobacco cessation Quitline and subsequently partnered with Health Disparities to take over the care of the Ask-Advise-Connect patients (previously served through the Texas Quitline) referred for tobacco cessation services from 14 Federally Qualified Health Centers in the Houston metropolitan area. These efforts will continue into FY20, as this enhanced service is a more cost efficient model for tobacco cessation that can be expanded to provide effective, evidence-based services to the larger community. In FY20, the TTP will continue to deliver exceptional clinical care while extending the availability of high-quality tobacco cessation resources across the state through projects such as the training program for certified tobacco treatment specialists, a weekly remote ECHO mentoring program, two unique smoking cessation apps that incorporate evidence-based cessation strategies into mobile health technology, and a cessation program for patients undergoing low-dose CT (LDCT) screening for lung cancer.

## **CANCER PREVENTION: EPIDEMIOLOGY**

### **Mexican American Cohort (Division of Cancer Prevention and Population Sciences)**

Since 2001, MD Anderson has been conducting a long-term health study of individuals of Mexican origin living in the Greater Houston Area through the *Mano a Mano: Mexican American Health Study Cohort* (MAC). Through this study, scientists will be able to provide unique data characterizing this population's specific exposures (i.e., chemicals, tobacco, alcohol, etc.) and health-affecting behaviors (i.e., weight change, physical activity, nutritional habits, etc.). To date, MAC enrolled nearly 27,000 participants from almost 19,000 households, making it the largest, longest running and most comprehensive study of its kind with participants either born in Mexico or from Mexican descent. In FY20, efforts will concentrate on an engagement campaign including a series of activities that build towards a significant 20<sup>th</sup> anniversary event for the MAC study. Activities will include educational and other promotional activities in the communities where many of our study participants live.

### **Patient History Database (Division of Cancer Prevention and Population Sciences)**

Since December 1999, standardized epidemiological information — demographics, tobacco, exposures, co-morbidities, family history, prior medical history and quality of life — has been systematically collected and archived on all newly registered patients through the Patient History Database (PHDB). The PHDB serves as an electronic core institutional resource to facilitate clinical, translational and population-based research. The value of this integrated system is enhanced by the large and unique patient population that MD Anderson serves, and the extensive patient follow-up and clinical information available. Biological samples are collected and stored on a subset of these patients for future genetic and medical research. Since its inception, the PHDB has collected data on over 350,000 patients. Biological samples are collected and stored on a subset of these patients for future genetic and medical research. In FY20, the PHDB will continue to collect, maintain, and share these data with investigators around the campus to support the institution's research. FY20 efforts will improve transparency, data quality, and enable broader access by faculty across the institution to patient-related data and comprehensive prospective biospecimen collections.

### **Population Sciences Laboratory Resource Center (Division of Cancer Prevention and Population Sciences)**

The Population Sciences Laboratory (PSL) is an archiving laboratory for long-term storage and tracking of samples utilizing sophisticated technologies for epidemiologic research. Since inception in 2000, the PSL has processed 81,959 human specimens for 35 projects led by MD Anderson Principal Investigators. The goal of this resource is to provide well-characterized, readily tracked, long-term stabilized biological samples (blood, serum, plasma, DNA, lymphocytes) for use in research efforts that extend years into the future. In FY20, the PSL will continue to serve as an institutional resource in the processing, storage, and analysis of biological samples.

## **CANCER PREVENTION: HEALTH DISPARITIES RESEARCH**

### **TOBACCO DISPARITIES AND FELLOWS PROGRAM**

See Tobacco Trainee and Junior Faculty Program, and Tobacco Disparities and Fellows Program (Division of Cancer Prevention and Population Sciences).

## **CANCER PREVENTION: HEALTH SERVICES RESEARCH**

### **The MD Anderson Lung Cancer Screening Resource Center and Lung Cancer Screening Fellows Program (Division of Cancer Prevention and Population Sciences)**

Primary care clinicians are at the center of new clinical policy about lung cancer screening with low-dose computed tomography (LDCT). They are being asked to provide their eligible patients with high-quality smoking cessation services, engage their patients in shared decision making (SDM) about screening, ensure interested patients adhere to screening intervals, and manage other health problems that may be discovered by LDCT scans while continuing to provide care for comorbid health problems in this high risk population. Our previous research has demonstrated that primary care clinicians are not aware of current screening guidelines and eligibility criteria, need access to accredited screening facilities, and want tools and training to support implementation of lung cancer screening within their practice settings. The Lung Cancer Screening Resource Center will be a publicly available, MD Anderson sponsored online resource for primary care clinicians. Additionally, the overall goal of the lung cancer screening fellows program is to provide training opportunities for researchers to develop expertise and experience in the clinical, laboratory, outreach and academic components of lung cancer screening research.

## **MOLECULAR MECHANISMS TOBACCO CARCINOGENESIS**

In order to better combat the devastating human cost of tobacco use, we need to better understand the molecular mechanisms of carcinogenesis. To this end, several innovative research initiatives are planned or are continuing in FY2020. These are interwoven around four themes: 1) Development of new animal models and other tools for tobacco-related cancer studies; 2) Definition of genes and signaling pathways involved in tobacco carcinogenesis; 3) Chemoprevention/Intervention studies focusing on tobacco-related cancer; 4) Development of novel therapeutic strategies for tobacco-related cancer. Funds also support critical shared resources (Core Services) that enable state-of-the-art studies in cell biology, 'omic' analyses, and support the development, care, and use of animal models. Collectively, these projects will enhance our understanding of tobacco-related cancers and eventually will enable the development of new treatment strategies for improving patient outcomes.

## **RESEARCH EQUIPMENT**

**The Technology Task Force (TTF) Committee** is charged with review, approval, and distribution of Research Capital Equipment funds across the research enterprise at MD Anderson. The committee includes: 12 members and a chair; 2 funding cycles per fiscal year; and requests for capital equipment are received and reviewed twice annually. This committee funds all capital equipment for the entire research organization and is crucial in advancing research at the institution. The equipment typically funded with tobacco proceeds include cutting edge new technologies and innovations that significantly impact research efforts and contribute to the mission.

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Tobacco Funds Planned Expenditures for FY 2020**

	<u>FY 2020</u>	<u>FTE</u>	<u>Carryforward</u>	<u>Total FY 2020</u>
<b>Cancer Prevention</b>				
Faculty Salaries	\$ 1,111,143	5.18	-	\$ 1,111,143
Other Salaries	4,324,209	55.07	-	4,324,209
Equipment, Supplies, Start-up Costs	575,598		180,171	755,769
	<u>\$ 6,010,950</u>	<u>60.25</u>	<u>180,171</u>	<u>\$ 6,191,121</u>
<b>Molecular Carcinogenesis &amp; Epigenetics</b>				
Faculty Salaries	\$ -	-	-	\$ -
Other Salaries	-	-	-	-
Equipment, Supplies, start-up costs	609,792		336,496	946,288
	<u>\$ 609,792</u>	<u>-</u>	<u>\$ 336,496</u>	<u>\$ 946,288</u>
<b>Research Equipment = 25% of FY 2020 Distribution</b>	<u>\$ 2,206,914</u>	<u>-</u>	<u>\$ 2,946,584</u>	<u>\$ 5,153,498</u>
<b>Research Special Projects (Equipment, Supplies, Start-up Costs)</b>				
Pediatrics	-		71,698	71,698
Thoracic & Cardio Surgery	-		376,479	376,479
Unallocated	-		999,472	999,472
	<u>\$ -</u>	<u>-</u>	<u>\$ 1,447,649</u>	<u>\$ 1,447,649</u>
<b>TOTAL TOBACCO PLANNED EXPENDITURES</b>				
Faculty Salaries	\$ 1,111,143	5.18	-	\$ 1,111,143
Other Salaries	4,324,209	55.07	-	4,324,209
Equipment, Supplies, start-up costs	3,392,304		4,910,900	8,303,204
<b>TOTAL TOBACCO PLANNED EXPENDITURES</b>	<u>\$ 8,827,656</u>	<u>60.25</u>	<u>\$ 4,910,900</u>	<u>\$ 13,738,556</u>
<b>METHOD OF FUNDING</b>				
<b>FY 2020 Distribution:</b>				
Permanent Health Fund for Higher Education	\$ 2,417,656		-	\$ 2,417,656
Permanent Health Fund, UT MD Anderson	6,410,000		-	6,410,000
Interest Earned on funds not previously budgeted	-		\$ -	-
<b>Carryforward:</b>				
Permanent Health Fund for Higher Education	-		-	-
Permanent Health Fund, UT MD Anderson	-		4,910,900	4,910,900
<b>TOTAL</b>	<u>\$ 8,827,656</u>		<u>\$ 4,910,900</u>	<u>\$ 13,738,556</u>