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Quick News & Links:

[A blog from Facing Our Risk of Cancer Empowered \(FORCE\) addresses the connection between vaccines and protecting people with cancer who may be immune suppressed](#)

[Having an event? Send us the details to post on the MCC Calendar of Events page!](#)

[Proud of something that you or your organization has done? Let us know and we will put it under Members in Action on the MCC homepage!](#)

[MCC Calendar of Events](#)

2019 MCC Award Nominations Are Now Being Accepted

Each year at the Annual Meeting, the MCC is pleased to recognize exceptional collaborations and people. The nomination process for MCC awards is now open. The information about each award and the criteria for nomination is available below and on the [MCC website](#). **Nominations will be accepted until August 2019**; however, earlier submission is encouraged.

The [MCC Champion Award](#) honors an individual who has demonstrated leadership, excellence, success, and impact in the fight against cancer. This individual has, through their proven efforts, reduced the burden of cancer, championed initiatives to prevent and control cancer, and has improved the lives of those living with cancer. The MCC Champion will be a person who has been looked up to as a leader in cancer prevention and control.

The [MCC Spirit of Collaboration Award](#) recognizes member organizations that have done outstanding collaborative work to significantly move comprehensive cancer control activities forward in our state.

Courageous, determined, resolute, faithful; these are the faces of cancer survivors. [The MCC Inspiration Award \(for survivors\)](#) is given to someone who exemplifies these words and lifts up others in the face of their own diagnosis.

For more information about the awards and the nomination process please visit:

- [MCC Champion Award - criteria](#)
- [MCC Spirit of Collaboration Award - 2019 criteria](#)
- [MCC Inspiration Award - criteria \(for survivors only\)](#)

If you have any questions, please contact Beth Trierweiler at trierweilerb@michigan.gov or 517-373-1296.



Recent Advances in Lynch Syndrome

Submitted by the Michigan Cancer Genetics Alliance

A recent article by Biller et al (2019) reviews progress in the field of Lynch syndrome (LS), including research, epidemiology, treatment, and prevention. Below are some highlights and key findings from the past five years.

Epidemiology. The prevalence of LS is estimated to be 1:279. Population prevalence of pathogenic LS variants from most prevalent to least are *PMS2*, *MSH6*, *MLH1* and finally, *MSH2*. This can be very different in certain populations. Though less prevalent in the general population, *MLH1* and *MSH2* are the two most frequent LS genes identified among colorectal cancer (CRC) patients, which reflects the variable penetrance among the different LS genes.

Molecular Pathogenesis. A novel pathway for LS-associated colorectal neoplasia completely bypassing the adenomatous precursor was proposed. Mismatch repair (MMR) deficient crypt foci may be acquiring *TP53* or *CTNNB1* mutations that could lead to immediate invasive cancer growth. This could explain interval colorectal cancers that develop between short-interval screening colonoscopies.

Universal Tumor Testing. Universal LS screening has been a huge help in identifying at risk families. But one study suggests that as many as half of all microsatellite instability (MSI)-high/MMR-deficient cancers in patients with germline MMR gene variants were non-colorectal and non-endometrial cancer primaries, and of those people, 54.5% would not have met testing clinical criteria.

Screening. Cumulative CRC incidence between countries with varying screening interval recommendations doesn't seem to differ. However, prospective data from a large multinational registry of LS patients found that 25% of all incident colorectal cancers developed in individuals who were 12-23 months out from their last colonoscopy.

Therapies. Recent advances in the use of immune checkpoint inhibitors have had profound implications for LS. Aspirin chemoprevention and BMI reduction was found to be preventative in CAPP2 trials. Current studies on immunoprevention are being looked at after it was found that even cancer-free LS patients harbor circulating cytotoxic T-cells targeted against MSI-induced frameshift neoantigens.

The future looks promising and exciting for hereditary cancer treatment and prevention, including LS. To continue to advance the field, the authors propose that unanswered questions related to LS involve gene-specific (perhaps even variant- or family-specific) risk assessment and management, continuing to identify LS in patients before they develop cancer, and targeted treatments.

For more information about LS, including who should be tested for the condition, visit the [MDHHS Lynch syndrome webpage](#).

Reference:

Biller LH, Syngal S, & Yurgelun MB. Recent Advances in Lynch Syndrome. *Familial Cancer*. 2019; 18:211-219
<https://doi.org/10.1007/s10689-018-00117-1>.



ACS CAN Update

June 2019, Andrew Schepers

ACS CAN held its annual Day at the Capitol last month where over 100 volunteers from around the state gathered. ACS CAN continues to work on:

- Oral chemotherapy parity
- Strategies that protect Michiganders, including youth, from e-cigarettes
- Raising the age of sale for all tobacco products to 21.

If you have questions regarding ACS CAN's work, please contact Andrew Schepers at Andrew.schepers@cancer.org.

Michigan's Tobacco Quitline

The Michigan Tobacco Quitline is offering new enrollees a choice of two weeks of free patches, gum, or lozenges now through June 15th. For more information call 1-800-QUIT-NOW or visit the [Michigan Tobacco Quitline Website](#).

The MCC Health Equity Committee Invites You to Participate in Its Upcoming Webinar: Public Data – How to Locate and Navigate through Selected Sites

This webinar will include an overview of publicly available cancer-related data with an emphasis on health equity data resources. Resources will focus on Michigan specific data along with National data. A demonstration on how to navigate through a few of these resources will be included in this presentation.

Tuesday, July 9, 2019, 11:00am – 12pm Eastern Time

Online Registration:

<http://events.constantcontact.com/register/event?llr=wo5eo7qab&oeidk=a07egctr8w8033ac27d>

2019 MCC Meetings

Board Meetings (12pm - 3pm):

Wednesday, June 26

Wednesday, September 25

2019 Annual Meeting:

Thursday, October 24

If you are interested in being a part of the Program Committee please contact Amy Stagg at StaggA@michigan.gov.

MCC Website

Be sure to visit the [MCC website](#) to find provider and patient resources



Health Equity Corner

Health Equity Speakers Bureau Highlight



Renee B. Canady, PhD, MPA
Chief Executive Officer
Michigan Public Health Institute (MPHI)

Area(s) of expertise:

Health Equity, Health Disparities, Social Justice

Bio/Description of expertise:

Renée Branch Canady, PhD, MPA serves as Chief Executive Officer (CEO) of MPHI, a Michigan-based and nationally engaged public health institute. Prior to joining MPHI in 2014, Canady served as Health Officer/Director of Ingham County Health Department, located in Lansing, Michigan. Canady has held faculty and leadership positions within the College of Nursing and the College of Medicine, Division of Public Health at Michigan State University where she currently teaches the course Health Equity for Public Health Practitioners.

Renee is a nationally recognized thought leader on health inequities, cultural competence, and social justice. She was instrumental in establishing the Healthy Heartlands initiative, a partnership of local public health professionals and community organizers partnering to impact the social determinants of health and the MI Power to Thrive, a statewide collaboration of organizers and public health practitioners.

Renee currently serves on numerous advisory boards including the Scientific Advisory Group for the RWJF County Health Rankings, the National Network of Public Health Institutes (NNPHI), and the National Health Equity Index Advisory Committee.

If you are interested in contacting Renee to speak at an educational session or conference please call 517-324-8300 or email info@mphi.org.

The MCC Health Equity Speaker's Bureau is a resource for individuals and organizations. This directory includes content experts accessible to MCC members for consideration in planning educational sessions/conferences. The Health Equity Speakers Bureau Highlights will showcase each member of the Speaker's Bureau. If you would like to be added to the MCC Speakers Bureau, please contact Beth Trierweiler at Trierweilerb@michigan.gov.