Alcohol and Cancer: The NCI/BRP Perspective

William Klein, Ph.D.
Associate Director, Behavioral Research Program
Division of Cancer Control and Population Sciences
kleinwm@mail.nih.gov

April 11, 2018
As required by the Alcohol Policy 18 Conference, I/we have signed a disclosure statement and note the following conflict(s) of interest:

Nothing to disclose.
Outline

- Background
- Current State of Public Awareness
- NCI Behavioral Research Program Priorities
- NCI Funding Opportunities
- Other Resources
Alcohol drinking is an established risk factor for several malignancies, and it is a potentially modifiable risk factor for cancer.
FEW AMERICANS AWARE OF ESTABLISHED CANCER RISKS

50% OR FEWER OF AMERICANS ARE UNAWARE OF THESE ESTABLISHED CANCER RISKS

ESTABLISHED CANCER RISKS

- ALCOHOL 39% awareness
- RED AND PROCESSED MEATS 35% awareness 40% awareness
- DIETS LOW IN FRUITS AND VEGETABLES 45% awareness
- OBESITY 50% awareness
- INACTIVITY 39% awareness

3 WAYS TO LOWER RISK

- eat well
- move more
- stay lean

Nearly 1 in 3 cancers could be prevented by eating well, moving more, and staying lean

@NCIBehaviors
“In general, although awareness appears to be increasing in many countries, at least half or more of the population does not consider alcohol to be a risk factor for cancer.”
Alcohol and Policy Conference 2018

POSTER
Awareness of the Link Between Alcohol Consumption and Cancer Across the World: A Review

Thursday, April 12 7:30 - 9:00 a.m.

Jennifer Scheideler
HINTS V, Cycle 1

- HINTS collects nationally representative data routinely about the American public's use of cancer-related information.

- Surveillance of awareness/behavior items about alcohol included in 2003, 2017, and 2019 collections

H4. Which of the following health conditions do you think can result from drinking too much alcohol?

- Cancer
- Heart Disease
- Diabetes
- High cholesterol
- Liver disease
- Being overweight or obese
Wiseman KP, Klein WMP. Evaluating predictors of awareness of the association between drinking too much alcohol and cancer risk in the US population. *In preparation*
Learn More

Concurrent Session C-9

Evaluating predictors of awareness of the association between drinking too much alcohol and cancer in the US population

Wednesday, April 11
4:30-6:00 p.m.
Studio D

KARA WISEMAN, PH.D.
NATIONAL CANCER INSTITUTE
Relevant Behavioral Research Program Scientific Priorities

- Behavioral risk factors
- Survivorship
- Health disparities
- Methodological advances
- Decision making
BRP Grants by FOA Status for Active FY2017

- Investigator Initiated (Parent R01, Omnibus R21, R03)
- Targeted FOAs (R01, R03, R21, U01)
- Other NIH Mechanisms (e.g. R13, P01, P50, R35)

- Investigator Initiated: 44%
- Targeted FOAs: 11%
- Other NIH Mechanisms: 45%
Selected Research Needs – Alcohol and Cancer

- Understanding and addressing alcohol use in cancer survivors and individuals at high cancer risk
- Assessing cancer risk in high alcohol consumption populations (e.g., veterans, LGBTQ, AIAN)
- Effects of alcohol marketing on cancer-related beliefs and behaviors (e.g., pinkwashing)
- Risk communication regarding link between alcohol and cancer (e.g., warning labels, messaging)
- Use of alcohol in contexts involving other cancer-related behaviors (e.g., virus exposure, sun exposure, tobacco use)
- Effects of alcohol policies on cancer burden
- Consideration of alcohol use as part of state cancer control plans
- Leveraging lessons learned from tobacco regulation, including “best buys”
ALCOHOL CAN CAUSE 7 TYPES OF CANCER
INCLUDING BREAST CANCER.

The more you drink, the more you increase your risk. Reduce your risk of developing breast cancer.

Go to reducemyrisk.tv for the facts.
Concerned about your drinking? Call Drinkline: 0300 123 1110

breast cancer now

BALANCE
Getting the measure of alcohol

@NCIBehaviors
Stimulating Innovations in Behavioral Intervention Research for Cancer Prevention and Control
(R21 Clinical Trial Optional) PA-18-018

“This FOA is expected to engage a diverse range of researchers who apply novel approaches to addressing cancer-related health behaviors focused on diet, obesity, physical activity and sedentary behavior, smoking, sleep and circadian dysfunction, alcohol use, and/or adherence to cancer-related medical regimens.”

Tanya Agurs-Collins
collinsta@mail.nih.gov
240-276-6956
Innovative Approaches to Studying Cancer Communication in the New Media Environment
(R21 Clinical Trial Optional/R01 Clinical Trial Optional)
PAR-18-638/PAR-18-639

“Applicants should apply communication science approaches to the investigation of behavioral targets related to cancer prevention and control. These include but are not limited to effectively communicating risks for cancer; affecting positive behavior change relevant to cancer control (e.g., tobacco use, diet, physical activity, alcohol use, sun protection); enabling effective utilization of cancer treatment and navigation of the health care system; offering informational, social, and psychological support for decision making in cancer screening and treatment; and maximizing quality of life for survivors and their caregivers, including the utilization of palliative care – all leveraging the participatory nature of new media.”

Kelly Blake
kelly.blake@nih.gov
240-281-5934
Population Health Interventions: Integrating Individual and Group Level Evidence
(R21/R01) PA-18-407/PA-18-385

“Develop and test innovative multi-level interventions targeting behavioral risk factors linked to cancer occurrence and outcomes, such as: sun exposure, dietary intake, sedentary behavior/lack of physical activity, obesity, sleep, alcohol use, adherence to cancer screening guidelines, adherence to chemopreventive or chemotherapeutic regimens, and the use of tobacco or its constituents. Studies of other behaviors are also encouraged insofar as they are related to cancer prevention and control.”

David Berrigan
berrigad@mail.nih.gov
240-276-6752
Multi-Site Studies for System-Level Implementation of Substance Use Prevention and Treatment Services
(R01 Clinical Trial Optional/ R01) PAR-18-222/PAR-16-455

CRAN currently supports FOAs that promote collaborative research on crosscutting topics relevant to alcohol, tobacco, and other drug (ATOD) use. Applications that address multiple substances of abuse are encouraged through this FOA.

Glen Morgan
gmorgan@mail.nih.gov
240-276-6787
Target Assessment, Engagement and Data Replicability to Improve Substance Use Disorders Treatment Outcomes
(R21/R33 Clinical Trial Optional) PAR-18-086/PAR-18-085

“Areas supported by this FOA include research to generate and conduct preliminary tests of targeted addiction treatment to address multiple substances, which may include alcohol, tobacco and other drug use (ATOD).”

Glen Morgan
gmorgan@mail.nih.gov
240-276-6787
Secondary Analyses of Alcohol and Chronic Disease
(R01/R03) PA-16-395/PA-16-394

“To conduct secondary analyses of alcohol as it relates to chronic disease etiology and epidemiology and facilitate innovative yet cost-effective research utilizing previously collected data.”

Somdat Mahabir
mahabir@mail.nih.gov
240-276-6941
Intervention Research to Improve Native American Health (R01 Clinical Trial Optional /R21 Clinical Trial Optional)
PAR-17-496/PAR-17-464

“To develop, adapt, and test the effectiveness of interventions to improve health outcomes in Native Americans (NA) populations. Interventions proposed should: be culturally appropriate and promote the adoption of healthy lifestyles; improve behaviors and social conditions and/or improve environmental conditions related to chronic disease; prevent or reduce the consumption of tobacco, alcohol, and other drugs; improve mental health outcomes; reduce risk of HIV infection; develop, test, and disseminate treatment interventions; and improve treatment adherence and/or health-care systems adopting standards of care to improve overall quality of life. The intervention should be designed so that it can be sustained within the entire community with existing resources, and, if successful, disseminated and/or implemented in other NA communities.

Shobha Srinivasan
ss688k@nih.gov
240-276-6938
### Other Alcohol-Related Funding Opportunities

| Dissemination and Implementation Research in Health (Domestic and International Funding Opportunity) | PAR-18-007; PAR-18-017; PAR-16-237 (R21/R01/R03) |
| Predicting Behavioral Responses to Population-Level Cancer Control Strategies | PAR-18-024 (R21 Clinical Trial Optional) |
| Cancer-related Behavioral Research through Integrating Existing Data | PAR-16-256; PAR-16-255 (R01/R21) |
| Mechanisms of Alcohol-associated Cancers | PA-17-220; PA-17-219 (R01/R21) |
| Fundamental Mechanisms of Affective and Decisional Processes in Cancer Control | PAR-18-681 (R01 Clinical Trial Optional) |
## Policy-Relevant NCI Grants through NCI Omnibus Funding Opportunity

<table>
<thead>
<tr>
<th>Grant Title</th>
<th>Principal Investigator and Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban Revitalization and Long-Term Effects on Diet, Economic, and Health Outcomes (R01CA149105)</td>
<td>Tamara Dubowitz Rand Corporation</td>
</tr>
<tr>
<td>Evaluating the Impact of Mandatory Nutrition Information on Menus (R01CA169045)</td>
<td>David Hammond University of Waterloo</td>
</tr>
<tr>
<td>Regulatory Impact on Vape Shops and Young Adults’ Use of ENDS (RO1CA215155)</td>
<td>Carla Berg Emory University</td>
</tr>
<tr>
<td>The Impact of Tobacco Control Policies on Health Equity in the United States (R01CA214787)</td>
<td>Nancy Fleischer University of Michigan</td>
</tr>
<tr>
<td>Sun Safe Workplaces: Assessment of Benefits and Costs of a Policy Intervention (R01CA187191)</td>
<td>David Buller et al. Klein Buendel, Inc.</td>
</tr>
</tbody>
</table>
Additional Funding Mechanisms

- Sandpit Workshops – 2017 Knowledge Integration Across Health Domains, Professions, and Nations to Advance Cancer Prevention
  - “RESET Sleep: Regulating Exercise, Substance Use, and Eating through Sleep” (Tapio Paljarvi)
  - “Advancing Cancer Prevention Pricing Interventions across the UK and US: Optimising Message Framing” (David Conway)

- Administrative Supplements
  - Multi-Level Communication Strategies to Promote HPV Vaccination Uptake SIP
  - Cancer Centers Cessation Initiative
NCI Cancer Center Cessation Initiative (P30 Supplement)

- Funded in part by the Cancer Moonshot, NCI awarded 22 NCI-designated cancer centers two-year administrative supplements in 2017 to build and implement sustainable tobacco cessation programs.

- Short-term goal is to enhance capacity of cancer centers to address tobacco cessation with cancer patients.

- Long-term goal is to build and implement a sustainable tobacco cessation treatment program.

- Round #2 applications due April 13, 2018 (to be funded with FY2018 monies)
Health behaviors often co-occur and have common determinants at multiple levels (e.g., individual, relational, environmental).
Behavioral Research Program Leadership Team

Bill Klein
Associate Director

Linda Nebeling
Deputy Assoc. Director

Jerry Suls
Senior Scientific Advisor

Richard Moser
Fellowship Training/Research Methods Coordinator

Paige Green
Basic Biobehavioral and Psychological Sciences Branch

Susan Czajkowski
Health Behaviors Research Branch

Brad Hesse
Health Communication and Informatics Research Branch

Michele Bloch
Tobacco Control Research Branch

View the complete BRP staff list with research areas and contact information at cancercontrol.cancer.gov/brpstaff
Relevant Research Tools
cancercontrol.cancer.gov/brp

1. Team Science Toolkit
teamscienctoolkit.cancer.gov

2. hints
hints.cancer.gov

3. GEM
cancercontrol.cancer.gov/gem

4. Adolescent Brain Cognitive Development®
addictionresearch.nih.gov/abcd-study
Stay Connected

Sign up for our Behavioral Research Program email updates at:

cancercontrol.cancer.gov/brpsubscribe