

IMPACT REPORT 2023



# **OUR CORE VALUES**



We put people living with and at risk for lung cancer at the core of everything we do. Our values reflect what we stand for and hold ourselves accountable each and every day.

**People first. Equitable.** Inclusive. Authentic. **Synergistic.** Trailblazing. **Relentless.** 







Five years ago, when we merged like-minded organizations to form GO2 for Lung Cancer, we envisioned creating the premier resource for millions affected by lung cancer. Thanks to your generous contributions, we've exceeded our wildest expectations.

At GO2, we offer vital community support, spearhead cutting-edge research, advocate for equitable healthcare, secure increased federal funding, and facilitate crucial connections to screening and care, positively impacting tens of thousands of lives.

I'm thrilled to announce a historic milestone: for the first time ever, we've reached over one billion individuals through our website, social media, earned media, and our latest public service campaign featuring actor and director Tony Goldwyn. This achievement means millions more now recognize GO2 as the go-to source for free support services, lifesaving information, and groundbreaking research opportunities.

In essence, GO2 has become our community's beacon of hope, all thanks to your unwavering support.

Thank you for entrusting us with your faith. With your continued partnership, we will tirelessly confront lung cancer on every front, every day, striving to transform survival for everyone.

Sincerely,

Laurie Fenton Ambrose President and CEO



Tony Goldwyn, who lost his mother to the disease, is featured in GO2's national education campaign.

#### **STRATEGIC FOCUS TO TRANSFORM**

## SURVIVAL

#### Vision:

A world without lung cancer.

#### **Mission:**

To relentlessly confront lung cancer on every front, every day, for everyone. Founded by patients and survivors, we are dedicated to increasing survival for those at risk, diagnosed, and living with lung cancer.



Serve as the recognized community leader

Increase organizational capacity and financial resources



## OUR IMPACT

Thanks to your support, we are poised to witness significant lifesaving transformations in the coming years. Through GO2's strategic emphasis on expediting progress across the entire continuum – from risk assessment and early diagnosis to treatment, research, and fostering long-term, high-quality survivorship – we are set on a trajectory of profound impact.

As most healthcare is provided at the community level, it's crucial for us to take local action while sharing insights globally to effectively extend the benefits of these advancements to individuals in their local communities. This approach serves as our roadmap for success in revolutionizing survival rates and realizing our vision of a world free from lung cancer.

With your help, we delivered on our four core strategic goals:

#### **INCREASING THE RATE OF LUNG CANCERS DIAGNOSED AT AN EARLY CURABLE STAGE.**

We've broadened our Centers of Excellence (COE) network, a leading national standard for top-notch lung cancer screening and care delivery. This extensive network spans over 925 local community hospitals, clinics, academic institutions, and seven Veterans medical centers across 45 states and Washington, DC. By extending this network, we aim to diminish health disparities by offering exceptional screening and care in proximity to where 80% of Americans seek medical attention - in their local communities.

#### We continued to collect key data from the COE network to demonstrate its impact:

53%

the network (versus 18% national average across all US medical facilities)

## 53%

of COEs have incidental pulmonary nodule (IPN) programs

- 16% lung cancer detection rate
- 50% of IPN-detected lung cancers were stage I

The COE program is organized by designations informed by evidence and critical components of care known to improve health outcomes, quality of life, and survival. A facility must first earn one of the foundational designations, Lung Cancer Screening or Cancer Care, to become a Center of Excellence. Once that is achieved, a facility may apply for additional designations.

- Lung Cancer Screening
- Cancer Care
- Biomarker Testing and Precision Medi
- Community Engagement
- Equity

These new designations will roll out in 2024 and they will require collection of and annual reporting of key performance indicators and program outcomes data.





early detection rate within

average increase in number of individuals screened each year



increase in total number of lung cancers diagnosed

	<ul> <li>Incidental Pulmonary Nodules</li> </ul>
	<ul> <li>Multidisciplinary Team</li> </ul>
icine	Patient Centric Research
	<ul> <li>Smoking Cessation</li> </ul>
	Survivorship

#### **INCREASING THE RATE OF LUNG CANCERS DIAGNOSED AT AN EARLY CURABLE STAGE.**

#### **Mobilizing patient-driven** research innovation to find cures

GO2's research programs help find lifesaving treatments and cures. Our studies are designed to focus on all aspects of lung cancer care including early detection, treatment, and survivorship.

2023 saw us advance our Origins Research Initiative in collaboration with our medical consortium, the Addario Lung Cancer Medical Institute (ALCMI) to understand the earliest "origins" of disease to accelerate cures.



In addition, GO2:

Enrolled an additional 25 people (with 130 total enrolled to date) in the Epigenomics of Young Lung Cancer (EoYL) Study to identify common risk factors among younger lung cancer patients to help crack the code on a young lung cancer diagnosis.

Published initial findings from the Investigating Hereditary Risk in Thoracic Cancers (INHERIT) Study with ALCMI and the Dana-Farber Cancer Institute that identified an inherited gene mutation (EGFR T790M) in lung cancer https://ascopubs.org/doi/10.1200/JC0.23.01372.

"In these rare families with germline EGFR mutations, we see a clear disposition toward developing a distinct and more treatable type of lung cancer," said Geoff Oxnard, M.D., the primary investigator of the INHERIT study, thoracic oncologist at Boston Medical Center and prior chair of GO2 for Lung Cancer's Scientific Leadership Board. "Such inherited disposition toward lung cancer is poorly understood, yet it shines a light on the potential power of understanding lung cancer risk to enable early detection and effective treatment."

Completed plans to launch the next phase of INHERIT to further understand why and how lung cancer starts. This ongoing collaborative research with ALCMI and the Dana-Farber Cancer Institute aims to identify other inherited risk mutations and address whether people with inherited family syndromes should be eligible for lung cancer screening that can detect early curable disease as well as improve treatment and overall survival.

Published "Influences on Lung Cancer Screening Initiation and Retention in Rural Alabama in the Journal of Primary Care & Community Health" bit.ly/lcscreeningalabama.

This five-year study furthers our understanding of the facilitators of lung cancer screening initiation and retention among Black and rural communities experiencing additional disparities.

Established relationships with 16 faith-based organizations in communities of color to educate their Health Ministries and prepare them to advocate and improve the uptake of lung cancer screening through access to GO2 Centers of Excellence and mobile screening.

Secured an extended formal partnership with the Department of Veterans Affairs to support the estimated 900,000 veterans at higher risk for lung cancer. Key activities included:

- Awarding a COE designation to the Luke Weathers Jr. VA Medical Center
- from across the country.
- Updating our veteran's webpage to include a Spotlight on Veterans blog coverage, and opportunities for advocacy.
- Providing technical assistance and information on the Community Cares community setting when distance or other limitations prevent access through their local VAMC.

Veterans have a higher risk of developing lung cancer

(VAMC) in Memphis, joining the other VAMCs in our network: Hunter Holmes McGuire VAMC in Richmond; Robert J. Dole VAMC in Wichita; Birmingham VA Health Care System; Kansas City VAMC; and VA San Diego Healthcare System.

• Engaging VAMC healthcare professionals and researchers as expert panelists during the 2023 COE Summit, an event that drew more than 200 providers

highlighting veterans' stories along with the latest information on screening,

Network, the VA's program to ensure that veterans can receive care in a



than the general population.

#### Heightening awareness with campaigns to fight stigma and promote the importance of early detection and precision medicine

We conducted social media campaigns on risk and the importance of screening. These campaigns reached more than 106,000 followers.

Our Lung Cancer Living Room Expert Speaker Series, a virtual and in-person monthly event reached 43,000 patients, survivors, and caregivers in 61 countries

GO2 was instrumental in:

Advocating for Securing a Centers for Medicare and Medicaid National Coverage Determination to make 60,000 more people eligible for screening by lowering the initial screening age from 55 to 50 and changing the smoking history requirement from 30 pack years to 20 pack years.

Advocating for the Multi-Cancer Early Detection Screening Coverage Act, which would expand lung cancer screening,

Increasing access to multi-cancer early detection (MCED) tests has the potential to dramatically increase the lung cancer survival rate by catching the disease earlier when it is more treatable and even curable.

Reintroducing the historic Women and Lung Cancer Research and Preventive Services Act to increase the research focus on lung cancer's unique impact on women, to improve access to lung cancer screening services, and to elevate national awareness on the disease.

#### In addition:

We joined other leading health groups in an amicus brief supporting the U.S. Department of Justice's request for the Fifth Circuit Court of Appeals to issue a stay in Braidwood v. Becerra. This litigation threatens coverage of preventive services without cost sharing as required under the Affordable Care Act (ACA).

We submitted proposed Congressional report language to the Centers for Disease Control and Prevention regarding the importance of an education and awareness campaign to promote the benefits of lung cancer screening and to increase the percentage of high-risk individuals who are screened.

Developed a state-level strategy to further expand access to high quality care across the screening and care continuum, including examining Medicaid states that currently do not cover screening and contacting public health agencies to understand their position and frame appropriate strategies for adoption.

# <section-header><section-header><section-header><text>

## THE IMPORTANCE OF **EARLY DETECTION**

#### **BARNEY'S STORY**

By Barney Brinkmann, lung cancer survivor and advocate

The bright yellow card stock mailer caught my eye amidst my stack of daily mail. It had a compelling message: "If you're over 50 and an ex-smoker, you should get a low dose CT scan." I fit both of those gualifiers. The postcard floated around our home and then my office for several weeks. One day, the card fell out of my work calendar. "I need to call for a physician's referral," I remember telling myself.

I did. Within a week, I had an appointment for my first low dose CT scan. It was May 2016.

#### My first scan

I sat in my Dallas healthcare provider's muted pastel waiting room, having no idea what a low dose CT scan entailed. I learned that I was to undergo a non-contrasting CT scan. At the time, I had no idea there were two types of low dose CT scans. The other type is a contrasting low dose CT scan. A contrasting scan involves the introduction of a contrasting fluid to help with the scan. (I will get back to that later!)

I was called back into the radiology area. With no change of clothes needed, I was instructed to lay faceup on the sliding "bed" and to stretch my arms parallel to each other over my head. I was expecting a long narrow tube with inches between your face and the walls of the tube. Instead, it was more like a large donut through which the bed you're lying on slides in and out a few times.

The procedure was so simple. "Breathe in" and "breathe out" were the only instructions from the scanner as my bed effortlessly repositioned itself a few times. That was it. Easy, quick, and even more brief than the time I had spent sitting in the waiting room.

#### **Receiving a lung cancer diagnosis**

At the time of this first scan, I wasn't worried and had never thought about a lung cancer diagnosis. I was there as a preventative measure. I jogged 10-12 miles weekly and walked 56 flights of stairs each weekday in my downtown office building. I had never felt better.

Within a week of my first test, I was told about a suspicious one-inch spot on the upper right lobe of my lungs. I soon learned that the diagnosis was lung cancer and by mid-June my upper right lung lobe was removed. I had non-small cell lung cancer, stage 1B.

#### **Getting regular scans**

Since that first scan. I have become familiar with the second type of low dose CT scan, the contrasting type. The main difference is that contrasting fluid is injected while the scan is underway. This helps the radiologist and others do their job. Dealing with the needle and the feeling of warmth when the fluid is injected is something I have grown used to. When you have a contrasting low dose CT scan, they will ask you to be well hydrated before the scan to help flush out the contrasting fluid after the test. You should always check with your healthcare team when undergoing these tests about expectations and possible issues. In my case, I haven't had a problem.

After my surgery, my contrasting low dose CT scans were every three months for the first year, then switching to every six months. Now, after seven years, I still have a scan every six to eight months because of my health history.

You would think that seven years in I wouldn't get run/walks. "CT anxiety" (sometimes called "scanxiety") anymore. Well, you would be wrong. The first couple of years my "CT anxiety" was worse than it is now. Luckily, the passage of time between my diagnosis and today seems to have helped ease some of this anxiety but I still feel it every time I have to be scanned.

#### **Becoming an advocate**

As someone who benefited greatly from a low dose CT scan, I have become an advocate for all who are eligible for this test. Only 5.8% of eligible Americans have been screened. In some states that percentage is as low as 1%. In all cancers, early detection is the key. A low dose CT scan is an excellent tool to help identify lung cancer. I urge you to become an advocate for yourself and your family. Talk to your healthcare team to see if you are eligible for this important diagnostic tool.

In all cancers, early detection is the key. It could save your life. It did mine.

Contact GO2's HelpLine at support@go2.org or 1-800-298-2436 to find out if you are at risk and to get referrals to a Screening Center of Excellence near you.



Barney remains an active advocate for lung cancer screening and routinely volunteers at GO2's annual

#### INCREASING THE RATE OF COMPREHENSIVE BIOMARKER TESTING AND PRECISION MEDICINE.

The Centers of Excellence (COE) network includes designations in lung cancer multidisciplinary care, biomarker precision medicine, and a new designation for patientcentric research. These designated centers increase access to biomarker testing and precision medicine for lung cancer patients in their local area, where, previously, it was primarily only available in large, research-based medical institutions.

GO2 is working with COEs to establish research capabilities that meet the needs and goals of the community.

In 2023, OVER COEs and other clinical sites participated in six active GO2 research studies with

more

than

people with lung cancer participating. We supported 393 individuals via LungMATCH, our on-demand, personalized treatment navigation and clinical trial matching program. GO2's experienced navigators explained the results of comprehensive biomarker testing, and followed-up with them after their treatment began.

We initiated planning with ALCMI on a biomarker turn-around time study to evaluate how offering in-house processing to reduce specimen testing time could improve and increase adoption of biomarker testing—and thus improve patient outcomes.

We secured an additional <sup>\$</sup>25 million for the Lung Cancer Research Program within the Department of Defense Congressional Directed Medical Research Program. This brought the total investment from Congress to <sup>\$</sup>225.5 million since the program's inception in 2009, making it the largest lung cancer research program – public or private – outside of the National Cancer Institute at the National Institute of Health. Areas of research included biomarkers of disease recurrence, cutting-edge immunotherapies, targeted tests, and treatments (with added emphasis on under-researched small cell lung cancer).

We joined the American Cancer Society Cancer Action Network and other health advocacy groups to reduce health disparities by working to ensure equitable access to comprehensive biomarker testing. Our collective efforts secured legislation that provided coverage for comprehensive biomarker testing in 13 states.

We advocated for the Cancer Drug Parity Act to reduce out-of-pocket cost disparities for oral chemotherapy medications that have traditionally resulted in higher cost-sharing requirements compared to chemotherapy medications delivered intravenously.



## SURVIVER SPOTLIGHT

## LORI W.

#### I was diagnosed in June 2021 with stage 4 NSCLC.

I did not have any real symptoms until a few days before I went to the emergency room in distress. It took more than a month for my cancer to be typed and staged. I had Non-Small Cell Lung Cancer at stage 4! How had it been that Just two weeks prior to my trip to the emergency room, I had raced my then 16 year old son home from a long bike ride, and won? As a non-smoker, I was blown away that I had lung cancer at all, let alone stage 4.

After being diagnosed I had biomarker testing that came back with encouraging news – I have an EGFR mutation that allowed me to try a targeted therapy. Knowing I could avoid chemo and radiation (for now) was a huge relief. In researching my cancer, I learned that it is critical for patients to understand their diagnosis and treatment plan, as well as actively advocating for yourself. I feel that I am a partner in my own treatment and cancer journey.

I have decided to take a new path after my diagnosis. I spend time with my family and things I'm passionate about. Every day is a gift and I intend to enjoy every one of them. I also wanted to find a way to channel my energy into helping myself and others. Through the years I have raised a great deal of money for the Foundation Fighting Blindness and started initially with their walk. Once I digested all of what I learned after my diagnosis, I looked to find an organization that I could align with and help raise awareness and money. I did my research and found GO2. This will be my second year attending the Hollywood, FL Walk/Run and Kite Fly. I also was able to advocate for more federal research funding last year with GO2 at the Lung Cancer Voices Summit.

My advice for people who are newly diagnosed is do not panic. Find your doctors from people and organizations that you trust. Don't rely on the statistics. You are an individual with your own health circumstances. There is real hope and a community of people waiting to support you.

For assistance with comprehensive biomarker testing and understanding treatment and clinical trial options, call our HelpLine at 1-800-298-2436 or email support@go2.org to connect with our LungMATCH team.

#### ORI'S CANCER SADERS

nentech M Memorial m U

HOLLY

GO FOI



#### INCREASING REACH AND IMPACT OF COMMUNITY ENGAGEMENT TO YIELD BETTER OUTCOMES.

#### **Engaging People at Risk or Living with Lung Cancer**

GO2's primary focus revolves around aiding individuals vulnerable to or coping with lung cancer. Our commitment lies in guaranteeing that no one faces their diagnosis alone or navigates treatment options without support. Furthermore, we are committed to broadening access to screening, ensuring that an increasing number of people can benefit from early detection. Lung cancer, once considered dire, now offers more avenues than ever for prolonging and preserving lives. In 2023, significant strides were made toward achieving these objectives.

GO2's dedicated team provided tailored education, navigation, and supportive services to **116,700 people** affected by lung cancer.

Our monthly Lung Cancer Living Room Expert Speaker Series garnered **43,700 views** across **38 countries**, fostering education and support worldwide.

#### 4,031 members

of our Online Lung Cancer Support Community received up-to-date information and peer-to-peer support, enhancing their journey through the disease.

**16%** of HelpLine interactions focused on small-cell lung cancer, an underserved community. GO2 strategically prioritized outreach to offer vital support to this group.

A new survey module was launched in the Lung Cancer Registry, aimed at improving treatment decision-making and access to care, particularly for small cell lung cancer patients.

**70,286 informative publications** were distributed, offering the latest insights with **32 unique education materials** addressing all facets of the disease in an accessible format.

G02's comprehensive video educational library received **755,000 views** offering invaluable resources to those seeking information on lung cancer.

**2,328 HelpLine calls**, support tickets, and emails provided personalized one-on-one assistance, with a **95% satisfaction rate**, serving both repeat and new callers.

**133 matches** were made through our Phone Buddy program, connecting patients and caregivers for mutual support and resource sharing.

#### INCREASING REACH AND IMPACT OF COMMUNITY ENGAGEMENT TO YIELD BETTER OUTCOMES.

We established the Nuestra Gente library, a collection of Spanish-language audiovisual resources, with the aim of addressing health disparities among those impacted by lung cancer in the Hispanic and LatinX (HL) communities. Our pioneering efforts were recognized with the 2023 Sanofi Health Equity Accelerator Award, honoring our patient awareness and navigation program designed to empower Hispanic/LatinX lung cancer patients in Miami, Florida.

We obtained the Eugene Washington PCORI Engagement Award from the Patient-Centered Outcomes Research Institute (PCORI) for the project titled "Building Capacity and Patient Engagement Within a Stigmatized Lung Cancer Community." This award is instrumental in enhancing capacity and fostering engagement within the stigmatized lung cancer community, with a focus on addressing screening disparities, promoting evidence-based care, improving survival rates, and encouraging participation in research.



GO2 Navigator, Treatment and Trials, Renee Botello, is pictured center holding the award along with Sanofi staff

In collaboration with ALCMI, we initiated the inaugural phase of the Small Cell Lung Cancer Community Engagement to Eliminate Research Disparities (SUCCEED) Project. This pilot study aims to evaluate a direct-to-patient, remote blood collection approach to identify best practices and barriers to clinical research engagement among individuals with small cell lung cancer (SCLC). Concurrently, it assesses the feasibility of establishing a biobanking resource for SCLC researchers.

We launched the Connect, Organize, and Navigate, Necessary Equitable Care for Those at Risk for or Diagnosed with Lung Cancer (CONNECT) Program to enhance lung cancer education, resources, and services in marginalized communities. This initiative involves training and deploying community health personnel to identify, connect, and provide ongoing support for individuals at risk of or diagnosed with lung cancer.

Additionally, we forged **14** new community partnerships for the READY-Lung project, which aims to bolster awareness, treatment, and supportive care for economically disadvantaged African Americans affected by lung cancer.

In the realm of lung cancer advocacy, we hosted our annual Voices Summit in Washington, DC, bringing together **120** advocates from **27** states. This event generated over **56,000** social media impressions and nearly **2,000** social media engagements. Advocates received updates on the latest research and treatment breakthroughs, underwent professional advocacy training, and engaged with elected officials to advocate for increased federal research funding and improved healthcare policies benefiting our community.

"Advocating on Capitol Hill made me feel a part of something big, something very important. I felt stronger and more empowered. It also allowed me to meet other survivors and advocates, an experience like no other. We build community and work together for the cause."

– Alisa Brenes



#### 2023 Voices Summit Award Winners

An awards presentation at the Summit recognizes and celebrates the amazing work of a few particularly impactful members of the lung cancer community. Congratulations to these impressive 2023 award winners:

**Larry Gershon** received the Rays of Hope Award, which recognizes extraordinary individuals who demonstrate tremendous leadership and dedication to inspire hope in the lung cancer community.

**Heidi Nafman-Onda** received the event's signature award, the Lung Cancer Voices Summit Volunteer Advocacy Award, which recognizes individuals who make profound advocacy advances for our community.

Sarah Bechard, LSCSW and Michelle Hills, LCSW (ret) were the National Support Group Facilitator Award recipients. This award honors those who have shown uncommon dedication in leading and maintaining lung cancer support groups in their communities and online.

#### **INCREASING REACH AND IMPACT OF COMMUNITY ENGAGEMENT TO YIELD BETTER OUTCOMES.**

Lung Cancer Awareness Month commenced with a Presidential Proclamation recognizing the contributions of the lung cancer community.

We introduced the Lung Cancer Advocacy Toolkit, a comprehensive resource empowering advocates with actionable tips, social media tools, shareable graphics, and more to champion the cause.

We launched the initial phase of the Women's Care Coordination Initiative. This initiative is designed to leverage lung cancer screening to develop a broader national strategy addressing preventive and equitable health for women, focusing on early detection and management of lung cancer and heart disease, which collectively contribute to over 50% of women's deaths.

#### **Engaging Healthcare Providers**

The 2023 Centers of Excellence (COE) Summit convened over **190** healthcare professionals nationwide, fostering discussions on advancements in lung cancer early detection and treatment to enhance patient outcomes locally. An overwhelming 88% of attendees reported the summit exceeding their expectations.

We conducted the inaugural Lung Cancer Navigator Workshop, utilizing GO2's Lung Cancer Navigator Core Curriculum to equip **70** navigators with foundational knowledge to navigate the complexities of the lung cancer journey and enhance quality of care for individuals at risk or living with lung cancer.

We expanded the GO2 Global Knowledge Center for Lung Cancer (gkc.go2.org) to:

- Facilitate and support the implementation of high-quality lung cancer screening and care across the continuum.
- Provide high-quality education for licensed healthcare providers and non-licensed individuals who serve the lung cancer community.
- Serve as a comprehensive resource center for COEs and the lung cancer community.

The Global Knowledge Center has already reached **49** states and **25** countries, attracting nearly 900 learners with over 1,900 course enrollments.



#### **Raising Community Awareness and Funding**

## TOGETHER

#### **Engaging Communities**

Thank you for your participation and support in 2023. From stepping out at 5K walk/run events and marathons to designing your own fundraising campaign or attending one of our other signature events, YOU joined the global lung cancer community and helped us transform survival.



#### to Confront Lung Cancer





#### IN 2023:







steps taken to increase lung cancer awareness

## FIND HOPE, HELP, AND A HOME

#### **AMITA'S STORY**

## Shortly after Amita Jain was diagnosed with stage 4 (IV) lung cancer in January 2019,

her then-teenage daughter went looking for information and found GO2 for Lung Cancer. She and her father were taking care of Amita and started attending the monthly Lung Cancer Living Room Expert Speaker Series.

The caregivers had found a community of hope and caring. A few months later, they persuaded Amita to join them—and she was glad she did.

"As a physician," said Amita, a San Francisco Bay area pediatrician, "I did not want to dive into the medical literature, or into the latest studies and all the data. I wanted to go down the patient path. And the Lung Cancer Living Room meetings are patient-centric. There was a lot of support and a lot of education, and we learned a lot."

#### Finding hope, help, and a home

The Living Room episodes were extremely helpful emotionally and tied a lot of pieces together for Amita. They also provided a gateway for Amita to get more connected to GO2 for Lung Cancer and more involved. Soon, she and her family were participating in GO2's walk/runs.

"All my friends would come," said Jain. "I had some really memorable walks and felt humbled by the number of people who came out to support me." She's since joined GO2's Phone Buddy program, helping others navigate their way through a diagnosis and treatment. And she and her daughter have participated in GO2's Voices Summit, telling their story to her elected officials and advocating for more research funding.

There's one more way that Amita has connected with GO2: to support her mother. Six months before Amita was diagnosed with lung cancer, the family had received a similar diagnosis for her mother. When Amita reached out to GO2's LungMATCH program, her mother was completing chemotherapy and it was unclear what she should do next. "The navigators were able to review her genetic profile and give me some feedback on trials and other options. I sent them everything, and 24 hours later I had a comprehensive idea of what was out there," said Amita. Amita added that she feels supported every time her life intersects with GO2. "I've recommended the organization to so many friends of friends with a lung cancer diagnosis. I don't know how many of them have availed themselves of resources because I know I was hesitant to do so." If you or someone you love has been diagnosed with lung cancer, we're here for you. Contact our HelpLine at 1-800-298-2436 or support@go2.org.

#### Giving back to support GO2 in its work

Amita is very glad she attended her first Living room meeting at GO2. Now she and her husband donate to GO2 through a donor-advised fund to help the organization continue its work.

"GO2 helped me, and I want it to flourish so it can help others too," said Jain. "It's an incredible organization and a place of comfort that provides valuable information and, above all, a community."

She concluded, "For me, GO2 is personal."



## 4

#### IMPROVING SURVIVORS' QUALITY OF LIFE AS OUR COMMUNITY LIVES LONGER.

The Centers of Excellence (COE) network added a new designation in survivorship this year. This designation is guided by evidence and best practices to facilitate the development and implementation of survivorship care plans and resources to improve the quality of life for all people living with lung cancer.

We advocated for increased funding for the U.S. Preventive Services Task Force (USPSTF) to speed up the task force's ability to review and recommend adoption of critical new preventive technologies to improve primary care, advance greater equity, and increase access to screening.

As a member of the Patient Quality of Life Coalition, we advocated for the Palliative Care and Hospice Education and Training Act to support efforts to improve patients' quality of life.

We advocated for the Comprehensive Cancer Survivorship Act to address the health of cancer survivors and the unmet needs that survivors face throughout their cancer journey, from diagnosis through active treatment, post treatment, and beyond.



### **ASCO 2023**

#### **Surviving and Thriving with Lung Cancer**

By Brittney Nichols, MPH, RN-BSN, Science and Research Specialist, GO2 for Lung Cancer

New treatments, developments, and scientific breakthroughs are always one of the most exciting aspects of the annual American Society of Clinical Oncology (ASCO) conference, but this year they weren't the only highlight. People with lung cancer, survivors, and dedicated providers took the stage to share both stories and studies, with the aim of improving life. Not just extending it-but improving the quality of it to make life with and after cancer better and brighter.

#### Accessibility of care

We live in an era of non-stop innovation. But these innovations will not benefit people with lung cancer if they're unable to access them. This issue was addressed in multiple ways at ASCO this year.

Several presentations covered the concept of Social Determinants of Health (SDOHs), which is how factors such as residence, finances, and education (among others), combined with racial and identity demographics, affect our health and the care we receive. Healthcare research teams are starting to search for new ways to confront this by using technology.

A recurrent theme throughout these discussions was trust. A person who is in a safe and trusted environment will be able to share with their oncologist what their specific needs are, and providers who create and engage in these safe spaces with their patients will then be able to address their unique situation in the best way possible.

#### Affordability of care

A recent buzzword that's used to describe the impact of the costs of care is "financial toxicity." At ASCO, both patients and professionals weighed in on how to navigate this growing area of need. Financial toxicity is more likely to affect people with cancer than with other conditions and can have negative health and guality of life outcomes.

One study presented found that 64% of people with cancer were concerned about being able to pay their bills. Fortunately, the perspective is changing, with providers and health researchers recognizing that A) financial toxicity needs to be regarded as a negative side effect of cancer care and B) that financial toxicity is not limited to just the price of medications, but the impact that it has on the other aspects of a person's life.

Hospitals have started looking into solutions to fight financial toxicity. New resources include patient navigators trained to help people understand available resources and transportation related assistance to ensure they can make it to their clinic visits. Price transparency has also been advocated for, giving people the ability to identify what the best option for their medical and financial situation will be. Several studies like this are taking place all over the country to help reduce the burden of financial toxicity.

A key takeaway is that providers and their patients should engage in shared decision making, a model that allows for both parties to discuss the potential benefits, harms, and real word implications of any treatment options, and together decide what the best option is to match each person's lifestyle, values, and goals.

#### **Tolerability of care**

A key goal for many people living with lung cancer is to maintain a high quality of life while undergoing treatment. There are many side effects from cancer and treatments, but one of the most highly damaging is cancer-therapy associated hair loss. In fact, a presentation on scalp cooling and hair loss found that up to 50% of people reported that hair loss was the most traumatic side effect from their treatment journey. Fortunately, this study also showed that scalp cooling (wearing a hat filled with cool gel) is an effective means of reducing hair loss and maintaining or improving a person's feelings about their image. The downsides noted in this study include limited efficacy in people of color and a lack of coverage by insurance, prompting both further studies and advocacy efforts.

Integrative medicine was another subject discussed to improve quality of life during treatment. Integrative medicine encourages the provider to focus on the whole person within the treatment relationship and discuss all appropriate, evidence-based options that may be of benefit. This may include nutrition, psychology, mind-body approaches, and others. Some of these interventions have even been incorporated into national palliative care guidelines for cancer. Mind-body modalities have been increasing in popularity due to lack of medication induced side effects. Yoga and meditation have been studied closely and have been recognized to have significant impacts upon stress, depression, and anxiety.

If you find yourself struggling with symptoms and side effects, make sure to address these with your care team, as the options available are expanding, and through open communication you can work to find which one will best fit your needs and your life.

#### **Quality of care**

Goal concordant care focuses on meeting a person's values and priorities in life during their treatment. This is just one of the many building blocks comprising high quality cancer care. Care that is culturally appropriate and understandable is also key.

Studies show that people who receive care in a language they have difficulty understanding have overall poorer health outcomes compared to those who receive care in their native language. Researchers are working to make sure that their education surrounding care, treatment options, and clinical trials meets the literacy and linguistic needs of those served. They're also working to engage bilingual and/ or bicultural staff so that people with lung cancer in these centers can interact with someone who they perceive as being like them, helping to build sustainable trusting relationships.

Shared decision-making is yet another marker for quality care in cancer. This model can be especially beneficial to people with cancer when they are facing many different treatment options, when there is uncertainty surrounding the benefits vs. harms of a potential therapy, and when making high impact decisions. There are several decision aid tools available, with more being developed, that patients and physicians can use together when navigating care.

#### Advocacy for and engagement in care

Being active and engaged in care team decision making can feel intimidating but it is important to make sure that your care is best suited for you. Family members or caregivers are also often a part of this process and can help gather information, ask questions, and offer support.

While shared decision making is an important part of engaging in care, there are other ways to become more engaged as well. Participating in research gives people the chance to be part of new breakthroughs in treatment, diagnosis, and complementary therapies-to name a few. Deciding if you want to be in a research study is an important decision, and one that has many factors to consider. Despite the benefits, many people aren't fully educated by their providers on participation or aren't even asked if they're interested. Plus, trials aren't always designed to be accessible for older adults, making it harder for them to join a study.

Several speakers at this year's conference discussed the importance of inclusion and advocacy of older people with cancer, survivors, and caregivers in developing research for this age group. Advocates are an important part of the research process, and their stories and voices help to improve the care of people with cancer across the world.

The personal stories shared at 2023 ASCO conference were incredibly impactful and uplifting. While we continue to search for a cure for cancer, researchers at ASCO and here at GO2 are hard at work to ensure that people with cancer can live longer, better lives in the meantime.





#### FINANCIALS

#### Your Contributions at Work

Nearly 80% of every dollar donated in 2023 advanced our Patient Services, Research, Excellence in Healthcare Delivery, Advocacy & Policy, Education & Awareness, and Community Engagement programs. Thanks to you, we confront lung cancer on every front, every day, for everyone to transform survival.

#### YOUR CONTRIBUTIONS

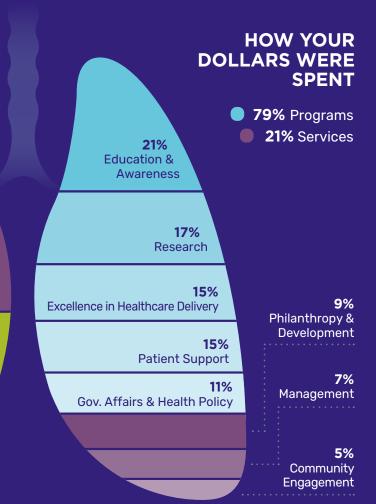
**55%** Corporations & Sponsorship

4% Investment Income 3% Special Events

Individuals & Foundations 4% Misc. & Donated

\$12,996,010 Total Revenue
 \$13,965,628 Total Expenses
 \$16,222,285 Net Assets

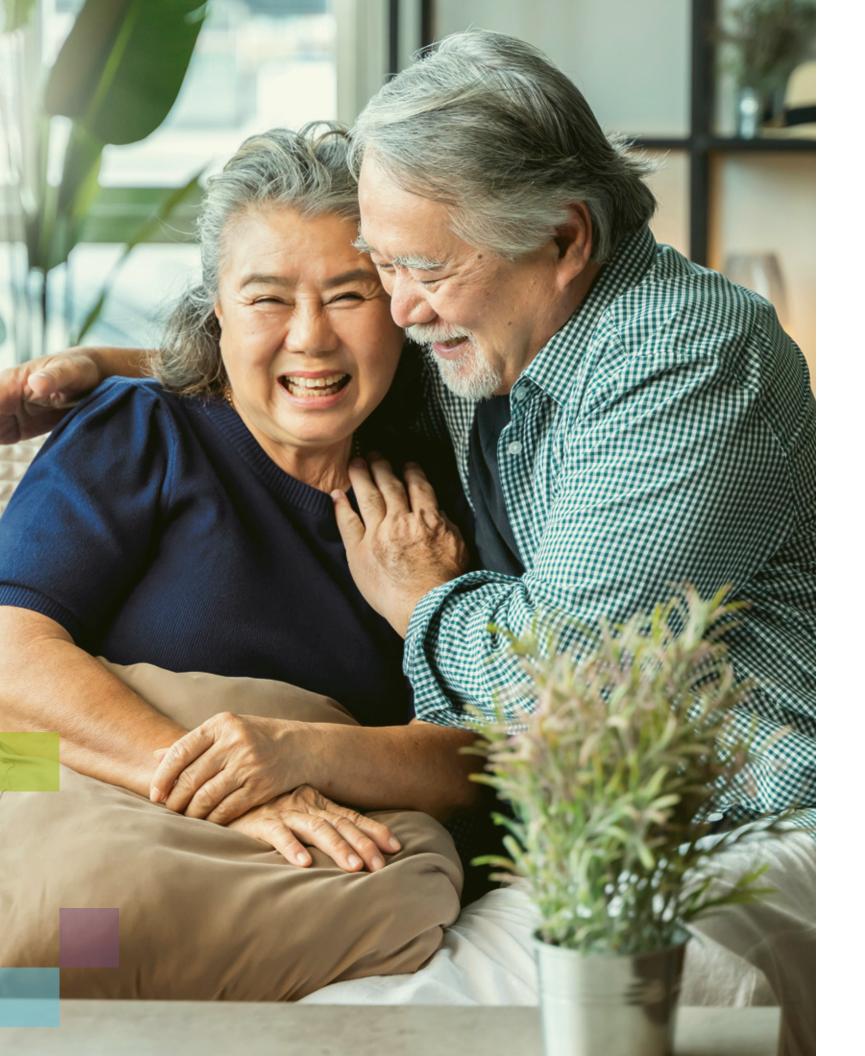
34%





#### Give with confidence

GO2 in 2023 marked eight consecutive years receiving the highest rating and is among the 10% of the most effective charities in the nation (as rated by Charity Navigator).



#### **GO2 2023 BOARD OF DIRECTORS**

#### **Board Chair**

#### **Adrienne Halper**

Former Managing Director of Private Equity Funds New York, NY

#### **President and Chief Executive Officer**

**Laurie Fenton Ambrose** Co-Founder Washington, DC

#### **Vice Chair**

**David Lefkowitz** Retired Partner, Weil, Gotshal & Manges LLP New York, NY

#### Secretary

#### Carol Rattray

Private investor, former investment banker, and president, Rattray Kimura Foundation New York, NY

#### **Treasurer**

**Lisa Poulin** Principal, Deloitte CRG, Retired Chesapeake Beach, MD

#### **Audit Chair**

#### **Richard Sherlock**

Major General, United States Army, Retired President & CEO, The Association of Air Medical Services Alexandria, VA

#### Bonnie J. Addario

Co-Founder, Board Chair Emeritus San Carlos, CA

#### Fern Halper, PhD

VP, Research and Sr. Research Director for Advanced Analytics, TDWI New York, NY

#### Marsha B. Henderson

Retired, Associate Commissioner for Women's Health at the Food and Drug Administration Washington, DC

#### Vincent A. Miller, MD

Thoracic Oncology West Orange, NJ

#### Andrea Parks

Managing Partner, Addario Family Limited Partnership San Francisco, CA

#### Johanna Ralston

Chief Executive, World Obesity Federation London, United New York, NY

#### **GO2 2023 SCIENTIFIC LEADERSHIP BOARD**

The Scientific Leadership Board is comprised of leaders in lung cancer research and across the care continuum who provide recommendations for leadership and staff to guide program and project development in support of GO2's mission.

#### Chair

**Christine M. Lovly, MD, PhD** Associate Professor of Medicine, Vanderbilt University Medical Center

#### **Vice Chair**

**William R. Mayfield, MD, FACS** Thoracic Surgeon, Chief Surgical Officer, WellStar Health System

#### **Early Detection Committee**

**Debra S. Dyer, MD, FACR** Professor and Chair, Department of Radiology, National Jewish Health

**William R. Mayfield, MD, FACS** Thoracic Surgeon; Chief Surgical Officer, WellStar Health System

**Peter Mazzone, MD, MPH, FCCP** Director, Lung Cancer Program, Respiratory Institute, Cleveland Clinic

**Jacob Sands, MD** Physician, Instructor, Dana-Farber Cancer Institute, Harvard Medical School

#### Douglas E. Wood, MD, FACS, FRCSEd

The Henry N. Harkins Professor and Chair, Department of Surgery, University of Washington

#### Biomarker Testing and Precision Medicine Committee

**Trever Bivona, MD, PhD** Professor, University of California, San Francisco

**Hossein Borghaei, DO, MS** Professor and Chief, Thoracic Oncology, Fox Chase Cancer Center

**Karen Kelly, MD** Chief Executive Officer, International Association for the Study of Lung Cancer

#### Christine Lovly, MD, PhD

Associate Professor of Medicine (Hematology/ Oncology), Ingram Associate Professor of Cancer Research, and Co-Leader, Translational Research and Interventional Oncology Research Program; Vanderbilt University Medical Center

Kathryn F. Mileham, MD, FACP Chief, Section of Thoracic Oncology, Atrium Health – Levine Cancer Institute

#### Luis E. Raez, MD, FACP, FCCP

Medical Director & Chief Scientific Officer; Memorial Cancer Institute, Memorial Health Care System; Clinical Professor of Medicine; Herbert Wertheim College of Medicine, Florida International University

#### Natasha Rekhtman, MD, PhD

Attending Pathologist, Thoracic Pathology & Cytopathology, Memorial Sloan Kettering Cancer Center

#### **Community Engagement Committee**

#### Jan M. Eberth, PhD, FACE

Associate Professor of Epidemiology and Director, Rural and Minority Health Research Center, University of South Carolina Arnold School of Public Health

#### Jhanelle E. Gray, MD

Department Chair, Program Leader & Senior Member, Thoracic Oncology; Co-Leader Molecular Medicine Program, Moffitt Cancer Center

#### Drew Moghanaki, MD, MPH

Professor of Radiation Oncology, David Geffen School of Medicine at UCLA, Chief of Thoracic Oncology Section; UCLA Department of Radiation Oncology; Staff Physician, Veterans Affairs Greater Los Angeles Healthcare System

#### Jamie S. Ostroff, PhD

Chief, Behavioral Sciences Service, Memorial Sloan Kettering Cancer Center

#### Ray U. Osarogiagbon, MBBS, FACP

Chief Scientist; Director, Baptist Memorial Healthcare Corporation; Multidisciplinary Thoracic Oncology Program, Baptist Cancer Center

#### Alison Mayer Sachs, MSW, LSW, CSW, OSW-C, FAOSW

Director, Community Outreach & Cancer Support Services, Eisenhower Lucy Curci Cancer Center

#### **GO2 2023 NATIONAL AMBASSADOR COUNCIL**

The National Ambassador Council is composed of lung cancer survivors, patients, caregivers, and advocates who provide input on GO2's strategies to effectively advance GO2's mission.

**Barney Brinkmann** Carmichael, CA

Anne Charity-Hudley, PhD Stanford, CA

**Denise Cutlip** Ypsilanti, Ml

**Terri Ann DiJulio** West Chester, PA **Jim Pantelas** Howell, MI

#### **Quality of Life Committee**

#### Pamela Samson, MD, MPHS

Assistant Professor, Department of Radiation Oncology, Washington University in Saint Louis

#### Jamie L. Studts, PhD

Professor, Division of Medical Oncology; Scientific Director, Behavioral Oncology, University of Colorado School of Medicine

#### Kerri B. Susko, LISW-CP, OSW-C

Counselor, Center for Integrative Oncology and Survivorship & Director, Cancer Support Community, Prisma Health Cancer

#### Jennifer Temel, MD

Professor of Medicine, Harvard Medical School; Director, Cancer Outcomes Research and Education Program, Massachusetts General Hospital

**Shelly Engfer-Triebenbach** Osakis, MN

Larry Gershon Palo Alto, CA

**Bob Nicklas** Takoma Park, MD **Evy Schiffman** Foster City, CA

**Juanita Segura** Chicago, IL

Karen Withrow Sunnyvale, CA

#### **SUPPORTERS**

Thank you to our donors who make possible our work confronting lung cancer on every front, every day for everyone. We are proud to recognize the following donors whose generosity exceeded \$2,500.

#### \$100,000+

Bonnie & Tony Addario Amgen Anonymous AstraZeneca Bristol Myers Squibb Bristol Myers Squibb Foundation Daiichi Sankyo The Geaton and JoAnn DeCesaris Family Foundation Dreams33 Foundation Eli Lilly and Company Janice and Bruce Ellig Ronnie and Stephanie Fong Genentech Gilead Sciences, Inc. Guardant Health Hackensack Meridian Health Jazz Pharmaceuticals Kokua Na Lani Merck Mirati Novartis Novocure Pankaj Patel Regeneron Sanofi Michael A. Smith Peter and Rita Thomas Van Auken Private Foundation

#### \$10,000+

Lynda Allera American Association for the Study of Liver Diseases Daniela Gasparini and Alyn Beals Paul R. Billings Blueprint Medicines Tuan Bui Leah Cabeceiras City of Hope National Medical Center Delfi Diagnostics Disabled Veterans National Foundation

#### \$50,000+

AbbVie Addario Family Limited Partnership Sam and Janet Bain Catalyst Pharmaceuticals Eisai Foundation Medicine, Inc. Mandie and James Hiznay Johnson & Johnson Pfizer Takeda Dan and Lynne Trump David L. Turner

#### \$25,000+

Arcus Biosciences Boehringer Ingelheim Michael S. Brown Costco Wholesale Corporation GRAIL Ralph A. Korpman David S. Lefkowitz John Letzelter Memorial Sloan-Kettering Cancer Center Mike and Melina Pellini Quality Chain Corp.

Donna and Harry B. McDonald Charitable Trust The Draper Foundation Mary Ellen & Andrea Geisser Gregg and Judy Gibson Reed Hilliard Nick and Linda Hoppe Victoria and Stephen Humphrey Jonathan and Rae Corr Family Foundation Sam Morgan Jonathan and Lynn Norton Nuvalent Maria E. Patterson Bob and Eleanor Preger Redwood Pulmonary Medical Associates RefleXion Rodgers Family Foundation The Rogers Foundation Mark Sawyer Evy Schiffman John and Junie Sullivan Thynk Health The WRG Foundation Diana D. Wu

#### \$5,000+

Apollomics Baylor Scott & White Health David and Sandy Berman Lisa Boohar, MD Kathryn Castricone Edmund Coyne Howard and Shirley DeLong The Estee Lauder Companies David and Ann Flinn Curt J. Groebner Groebner Family Foundation Adrienne Halper Shelley Heeder Jane and Reed Hilliard Icahn School of Medicine at Mount Sinai Immaculate Conception Church Ashok Krishnamurthi Lantern Pharma Lee and Carol Tager Family Foundation

#### \$2,500+

Anonymous Biotechnology Innovation Organization Adam and Adrienne Brown Thomas and Joyce Carl David Culhane Sven de Jong Ignacio and Silvia del Rio Ross Ellis Charles and Kori Faulkne Brad Foster Fox Chase Cancer Cente - Temple Health Bruce and Ellen Gellman Rev. Abdias Gonzalez Martin E. Harband



Thank you to these donors who committed an annual gift of \$1,200 or more to allow us to accelerate innovation in supportive services, advocacy, awareness and patientcentered research to transform survival.

Jane Abbott Lynda Allera Ina Bauman Clvde Beffa, Jr. Kav Beffa Braude Foundation Jana K. Brownell David P. Carbone, MD. PhD Debra Casillas Winston H. Chen, Ph.D. Sharon M. Corazzini Howard DeLong Shirley DeLong Barbara Eggert Ronnie L. Fong Jana W. Gandy Mary Ellen Geisser Gregg Harding

Audrey Heimler Susan Herzberg, MD Arthur N. Hoppe Sandy Houck Santosh K. Jain Sujatha Kalanithi Jimmy Lee John Letzelter Thomas J. Lopez. USN (Ret.) Garv Lorden Vincent Marsella Jacqueline Mc Namara Doris Mendoza Maynardo S. Mendoza Dee Dee Midgett Barbara Parkman

Lynn Pfadenhauer Aled Roberts Carole Robinow Evv Schiffman Jeff Schmidt Teresa J. Schrul Ashley Seidman Robert M. Shea. USMC (Ret.) Shervl Shea Colleen K. Sturdivant Alan Swenson Tonya Tedrick David L. Turner Linda M. Vincent Wells Whitney Victor Willits Diana D. Wu Marshall Ziock

Rick Lemos
Andy M. Lovit
Matthew Hill Foundation, Inc.
MD Anderson Cancer Center
Janice Minamoto
Justin and Andrea Mostes
Mike Nall
On Target Laboratories
Nancy Pape
Barbara Parkman
Niteen and Amita Patkar

William Piedemonte Whitney and Jeff Spagnola Alan Swenson Thunderbird Lodge Preservation Society University of California Davis University of Colorado Denver University of Southern California Sheila M. Von Driska Timothy Won Betsy Wong

	Anonymous
er	Jones Family Foundation
	Aaditya Landge
er	Tamara Lewis
	Melvin I. Mark
า	Lisa Molina
	Pepsi Co. Matching Gift
	Dennis & Jon Pettinelli

Julie Pollitz Dionne Ratekin Steve Russell Scott Sprague Jack Tuso Stephen and Catherine Vislocky Marshall Ziock



We are grateful to our Legacy Club members who have named GO2 in their will or estate plans to sustain our lifesaving work for years to come.

Jane Abbott Philip Ardell Ina & Steve Bauman Barbara Benedict Michael Bobier Jennifer Boyles Peggy Cameron Estee Coldwell Bruce Ellia Janice Ellia lleana Estrada Fr. Christopher Flesoras Elaine Gage Adrienne Halper Amalia Harper Brandy Hindersman David Hoffman Stacy Kaufman John Krahne

Lois Levin Deborah D. Loesel Andrew & Mary Naegeli Paula C. Perry Julie Pollitz Lisa Poulin Laura Rockwell Evy Schiffman Teresa J. Schrul Laurie Seligman Anthony Tai Jeremy Taylor Kevin & Lisa Tinsley David L. Turner Garv Wasden Nicole Westmore Stanley Zalewski

## **GO2** is at the forefront of everything that's happening in lung cancer.

## YEARS serving as the "go-to"

for our community

100% four-star rating from Charity 🛟 Navigátor

233,870 **"MEMBERS"** STRONG

Among of highest performing **U.S. charities** 

> PRINCIPAL **OFFICES** in San Franciso and Washington D.C.





National Board of Directors

**National Scientific Leadership Board** 

National **Ambassador Council** 

Learn more at go2.org



Confronting Lung Cancer Starts Here®

go2.org

© 2024 GO2 for Lung Cancer. All rights reserved.