

## Major Funding Announcement for Research into Colorectal Cancer

### The PIPER Project - the largest study of colorectal cancer outcomes in NZ

Each year colorectal cancer (CRC) kills approximately 1200 New Zealanders – more than breast and prostate cancer combined. Maori are more than twice as likely to die once diagnosed with colorectal cancer than NZ Europeans. The incidence and death rates from CRC in New Zealand are amongst the highest in the developed world.

A research team lead by Cancer Trials New Zealand have secured funding from the Health Research Council of NZ (HRC) and Ministry of Health to conduct the largest and most comprehensive study of patient outcomes from colorectal cancer undertaken in New Zealand. The Presentation, Investigation, Pathways, Evaluation and Rx (PIPER) project will examine patients' characteristics, their cancers, the treatment they receive, and their outcomes to provide an assessment of patient management across New Zealand to International standards, allowing identification of differential management resulting in the reported inequalities.

CTNZ Medical Director Professor Michael Findlay said: "New Zealand has amongst the worst outcomes for colorectal cancer in the developed world. If we are going to turn this around, we have to understand what is happening at the individual patient level. Our project will examine patient characteristics, their cancers, the treatment they receive, and their outcomes. We hope this study will be a major step in helping improve the health care we deliver for people with colorectal cancer".

Professor Findlay said "This investment by the HRC and Ministry recognizes the importance of colorectal cancer in New Zealand and is a major step in the right direction".

Project clinical lead Dr Christopher Jackson, Senior Lecturer at the University of Otago said: "research often focuses on single elements of good cancer care, like choosing the best chemotherapy drug, or right radiation dose. Our project aims to join the dots, and look at how each of the components of care fits together to give us an holistic view of the treatments we deliver, with the patient at the centre of that".

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Although Maori are less likely to be diagnosed with CRC than other New Zealanders, Maori are more likely to die from CRC. Differences in survival have also been suggested to occur in people living in rural areas of New Zealand. Co-Investigator Associate Professor Papaarangi Reid, Tumuaki Maori at the University of Auckland said “this project is all about examining our health structures and systems so that everybody gets a fair deal.”

The project has the full support of the bowel cancer advocacy group Beat Bowel Cancer Aotearoa. Chairperson, Rachel Holdaway said “this is a really positive move to address these important issues regarding colorectal cancer outcomes. We believe that where you live, and which ethnic group you belong to should not determine the timeframe for care and access to services, which can influence outcomes.” [www.beatbowelcancer.org.nz](http://www.beatbowelcancer.org.nz)

### PROJECT CO-INVESTIGATORS

Professor Michael Findlay – Director, CTNZ and Professor of Oncology, the University of Auckland.

Dr Christopher Jackson – Medical Oncologist, Southern DHB and Senior Lecturer University of Otago

Dr Katrina Sharples – Senior Lecturer, University of Otago and Senior Biostatistician, CTNZ.

Associate Professor Papaarangi Reid, Faculty Medical Health Sciences, University of Auckland

Mr John Keating – Colorectal Surgeon, Wellington Hospital and Senior Lecturer, Wellington School of Medicine, University of Otago.

Mr Adrian Secker – General Surgeon, Nelson-Marlborough DHB

Professor Ross Lawrenson – Head, Waikato Clinical School, School of Medicine, the University of Auckland.

Dr Mark Jeffery – Medical Oncologist, Canterbury DHB

Melissa Murray – Clinical Research Officer, CTNZ

### PROJECT CONTACTS

Principal Investigator: Professor Michael Findlay  
Phone: 09 923 2005  
Email: [mp.findlay@auckland.ac.nz](mailto:mp.findlay@auckland.ac.nz)

Project Clinical Lead: Dr Christopher Jackson  
Phone: 03 474 0999 ext 8760  
Email: [Christopher.Jackson@southerndhb.govt.nz](mailto:Christopher.Jackson@southerndhb.govt.nz)

Project Manager: Melissa Murray  
Phone: 09 923 5133  
Email: [m.murray@auckland.ac.nz](mailto:m.murray@auckland.ac.nz)