TARGETED RESEARCH

FRESH IDEAS, LIFESAVING BREAKTHROUGHS

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Corinne E. Joshu, PhD, is a cancer epidemiologist. She is the Director of the Master's Program in the Department of Epidemiology. She is also a member of the Cancer Prevention and Control Program at the Sidney Kimmel Comprehensive Cancer Center (SKCCC) at Johns Hopkins.

Dr. Joshu's research examines the role of modifiable risk factors, in particular obesity, on cancer incidence and outcomes. With this work, she aims to (1) inform our understanding of the biological mechanisms that underlie these associations, and (2) translate these findings into clinically useful strategies to prevent disease and/or poor outcomes among those with cancer. She conducts both population-based and tissue-based research to address these questions. Dr. Joshu also conducts research to identify opportunities to improve cancer prevention and treatment across the lifespan with particular focus on residents of the Baltimore region and people with HIV.

Dr. Joshu is an active participant in several multidisciplinary studies on cancer etiology, prevention, and control. Dr. Joshu co-leads the Atherosclerosis Risk in Communities (ARIC) Study Cancer Working Group and co-directed the effort to enhance ARIC's infrastructure for cancer research. To facilitate the conduct of tissue-based research in population-based studies, she established a tissue repository for Washington County ARIC participants and participants of two long-standing Washington County cancer cohorts, CLUE I and CLUE II, which includes specimens from ~1,800 ARIC participants and ~9,300 CLUE I and CLUE II participants. She has also partnered with leadership of Johns Hopkins Community Physicians (JHCP) and the Baltimore City Health Department to identify opportunities to improve cancer prevention, including HPV vaccination and colorectal and lung cancer screening, in the Baltimore region.

Targeting Reoccurring Biochemical Prostate Cancer

Approximately 500,000 US men are living with biochemical recurrent prostate cancer (BCR). Therapies are needed to delay the appearance of metastatic disease and need for androgen deprivation therapy (ADT), which has significant adverse side effects. Observational evidence suggests that weight loss may slow the rate of disease progression.

The EMPOWER trial will use an enhanced version of a remote weight loss intervention shown to yield clinically significant weight loss to test whether weight loss reduces prostate cancer progression at 12 months. EMPOWER has the potential to provide men with BCR a "first line therapy" to slow disease progression and delay the need for ADT. Importantly, this "treatment" is without significant side effects, and can improve overall health. EMPOWER will also inform the biologic mechanisms underlying the association between obesity and prostate carcinogenesis, and potentially identify metabolic biomarkers with prognostic or therapeutic potential. This research is currently being funded by the TUCC Foundation.

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