

# Edgecomb Legacy Lives On At Moffitt

*Landmark Tampa Family Name Supports Cancer Disparities Research*

*By Ann Miller Baker and Cathy Clark*

What began as a friendship now lives on as a legacy, linking two iconic local names in a battle against cancer's unequal burden in the African American community.



*Photography: Ray Reyes*

*Kickoff events to introduce the newly formed George Edgecomb Society drew about 300 people who wanted to learn how they could support Moffitt's cancer research efforts to address racial disparities. L-R: Dr. Alan List, Valerie Goddard, Doretha Edgecomb, Vivica A. Fox, H. Lee Moffitt, Dr. Lee Green*

**Before there was a Moffitt Cancer Center, founder and former state Speaker of the House H. Lee Moffitt lost three close friends to cancer – all of whom had to search out of state for expert cancer care. Among them was fellow attorney George Edgecomb, Hillsborough County’s first African American judge whose name now graces the county’s courthouse. Added to the deaths of two close associates, Edgecomb’s passing in 1976 fueled Lee Moffitt’s drive to create a premiere cancer center in the state of Florida to serve all its citizens.**

Now, George Edgecomb’s memory will fuel the cancer center’s drive to address one of cancer’s most glaring inequities; the disproportionate toll it takes on the African American community (see sidebar). As federal research dollars continue to decline, Moffitt aims to further engage those most impacted by these disparities in a new fundraising effort, the George Edgecomb Society at Moffitt Cancer Center. Society membership comes with options at all giving levels. Some Society members will even have a voice in selecting which Moffitt research studies related to cancer disparities will receive Edgecomb funding each year.

These funds will have a meaningful impact, according to B. Lee Green, Ph.D., vice president for Moffitt Diversity, Public Relations and Strategic Communications. “Our goal is to get funding into the hands of our disparities researchers, so that we can put into action strategies that can reduce and eventually eliminate disparities altogether.”

George’s widow and retired Hillsborough County School Board leader Doretha Edgecomb views the new Society as a fitting tribute to her late husband. “George was always committed to making a positive impact wherever it was needed,” she says. “And if the impact of using his name brings attention to these disparities, saves lives and encourages research, then it’s the right thing to do.”

“It brings instant credibility to the cause,” says Dr. Green. “The community knows that the Edgecomb family would only lend his name to something of significance.”

Launching the Society drew a sizeable crowd. More than 300 people attended events in January and February to learn more about the Society and how they could support Moffitt’s cancer research efforts. Joining Mrs. Edgecomb, founder H. Lee Moffitt and Dr. Green were entertainment luminaries: actress Vivica A. Fox, Kathy Sledge of Sister Sledge and Grammy Award-winning R&B hip-hop artist Paul Anthony of Full Force, who performed and shared details of his own cancer experience. Fox and Anthony went on to join Moffitt’s National Board of Advisors.

Local VIPs attending included Tampa Bay Buccaneers Hall of Famer Derrick Brooks; Chloe Coney, retired deputy director to U.S. Rep. Kathy Castor; former state Senator Arthenia Joyner, and former state appellate court Judge E. J. Salcines. They had an opportunity to mingle with cancer survivors and Moffitt

researchers like radiation oncologist Kosj Yamoah, M.D., Ph.D. Dr. Yamoah’s work examines the biologic and behavioral drivers behind the inordinate incidence and death toll of prostate cancer among black men of African descent.

“We’re raising the next generation of health care professionals with knowledge and experience in health disparities gained at Moffitt,” says Valerie Goddard, Moffitt Hospital Board member and chair of the Edgecomb Society. “It’s important that we have health care leaders who can relate to the African American community and its culture.”

But the bottom line, says Goddard, “is to make sure that everyone has the best possible opportunities to beat cancer. And Moffitt Cancer Center is the best place for that to occur.”

**To learn more about how you can join the George Edgecomb Society, visit [Moffitt.org/GES](https://Moffitt.org/GES).**

## **RIGHTING A CANCER WRONG. MOFFITT RESEARCHERS TAKE ON HEALTH DISPARITIES**

Cancer touches everyone, but the damage it inflicts across cultures and races is far from equitable. What causes these disparities – and what’s being done to eliminate them? Moffitt researchers have undertaken major studies of both the biology and the behaviors behind cancer health disparities. Their investigations run the gamut: studying disparities in breast and cervical cancer, looking into the role of HPV in various diagnoses, developing culturally- and literacy-relevant cancer communications, and examining the impact of disproportionate minority participation in clinical trials. Funding from the George Edgecomb Society will enable even more research.

“It is really disconcerting to know that the answers we already have are not being delivered to all populations,” says Clement Gwede, Ph.D., MPH, R.N., an associate member in Moffitt Population Sciences. His research focuses on identifying the barriers that prevent underserved populations from adopting known cancer-fighting strategies and finding ways to tailor and deliver these interventions to those communities. Culturally based interventions, developed with thoughtful engagement of community members are more effective and more likely to be accepted by underserved communities.

Colorectal cancer is a case in point. Its incidence and mortality are highest among blacks. Despite the proven

# *“Of all the forms of inequality, injustice in healthcare is the most shocking and inhumane.”*

Martin Luther King, Jr.

life-saving potential of colorectal cancer screening tools like inexpensive, easy-to-perform home stool sample test kits, this group consistently posts screening rates well below the national average.

What can be done to reverse this trend? Dr. Gwede and his colleagues worked with community partners to take their questions to the source - black men between 50-75 years old who have not been screened. “We asked - how do you want to learn about colon cancer? And they said they want engaging materials. We want it to be apparent and transparent that they are made for me, particularly the fact that I am from Jamaica or Haiti.”

Through a series of studies, Dr. Gwede and colleagues developed a “photonovella” heavy on pictures and a video that share the reasons for screening through a story. It’s tagged with national flags and details from common countries of origin or descent. When paired with a home stool sample test kit and given as part of a clinic visit, screening rates climbed to over 80 percent – but repeat screening dropped off in subsequent years. Current studies hope to identify the best mechanisms to remind and coach these patients to improve rescreening rates.

Such incremental studies are crucial – and often in need of a funding source like the Edgecomb Society. “Even though it’s an investment in one simple project, one at a time we can move the needle forward,” says Kosj Yamoah, M.D., Ph.D., Moffitt radiation

oncologist and assistant member of Cancer Epidemiology.

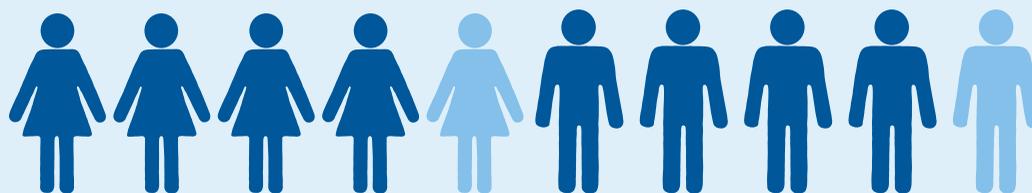
A native of Ghana, Dr. Yamoah’s research focus is on the biologic factors that predispose African American men to higher prostate cancer incidence and mortality. Understanding the biology can inform future targeted treatments. He has already led studies that identified a subset of genes known as biomarkers which define a subtype of aggressive prostate cancer more common in black men of African origin.

Dr. Yamoah likens this to the finding of the BRCA genes in the Ashkenazi Jewish population, and its link to a biologic subtype of breast cancer. “We’ve now identified new therapeutic agents that are more effective in patients with the BRCA gene mutations,” says Dr. Yamoah, who hopes that further study of the genetic biomarkers he’s identified in prostate cancer patients of African origin will lead to development of better treatments.

And he is most gratified, amidst mounting threats to federal research funding, to see the Edgecomb Society efforts take hold in the African American community. “Until this effort, there has been very little to move us forward in taking ownership of disparities research funding. And while the funding is much needed, supporting researchers who have demonstrated a track record and commitment to work on cancer disparities or who personally share disparity risks will provide the right environment to move this field forward.”

## HEALTH DISPARITIES

Despite progress in cancer treatment, screening, diagnosis and prevention, the black/African American community continues to face cancer health disparities.



Based on skin color alone, National Institutes of Health statistics show:

African American men have lower 5-year cancer survival rates for lung, colon, and pancreatic cancers compared to non-Hispanic white men

U. S. death rates from all cancers combined are 25 percent higher among blacks than whites

African Americans have the highest mortality rate of any racial or ethnic group for all cancers combined and for most major cancers.

Black men have the highest incidence rates for all cancers combined - higher than any other racial or ethnic group

African American women are less likely than white women to develop cancer - but more likely to die from it