Global Cancer Research and Training Program

2025 Update

Memorial Sloan Kettering Cancer Center

ARGO

African Research Group for Oncology

Contents

Letter from the Directors

Dear GCRT Friends & Colleagues,

As we reflect on 2025, and all that our teams accomplished together, we are filled with tremendous gratitude for all your hard work and unwavering dedication to improving cancer outcomes in Low- and Middle-Income Countries (LMICs). In a challenging year for global health, marked by policy shifts and funding constraints, we are grateful that the program continues to expand to new countries through meaningful research and educational collaborations. Much of our program is focused in Nigeria, and this marks the 12th year of the African Research Group for Oncology (ARGO). This NCI-recognized consortium was founded by MSK and Obafemi Awolowo University Teaching Hospital and is led by Professor Isaac Alatise. ARGO has grown to now include 39 Nigerian institutions and six from North America. The annual ARGO symposium in September 2025 brought together our multi-disciplinary international team in Ile-Ife, Nigeria focused on "From Screening to Survivorship: A Multidisciplinary Approach to the Management of Breast, Cervical, Colorectal and Hepatobiliary Cancers in Nigeria". Leaders in global oncology, including local Nigerian and international speakers, provided inspiring comprehensive global oncology lectures to nearly 250 oncology professionals.

Thanks to our multidisciplinary faculty and research team, our program continues to thoughtfully grow and expand in global oncology research, education and clinical care. In this annual report you will learn about GCRT's current and future research, including the launch of the first immunotherapy trial in Nigeria by our group. GCRT educational programs also continue to flourish, with four cohorts of scholars in our Nigerian Cancer Research Training (NCAT) Program. The GCRT research team continues to work closely with over 40 research assistants in Nigeria who are the backbone of our studies. GCRT has also built important collaborations in countries outside of Nigeria, such as Tanzania and in Latin America, and we look forward both to growing these relationships and nurturing links across our collaborating sites.

Together with our international partners, we continue to address the challenges of cancer prevention, diagnosis, and treatment in LMICs. We work together to build capacity, knowledge, and skills that will result in robust health systems and meaningful clinical advances. We thank our partners, donors, and staff for their hard work and support, without whom none of this is possible. As the landscape for global health and global oncology has become more challenging, with evolving policy environments, reduced funding streams, and increasing barriers to international collaboration, global partnerships like ours are more important than ever to improve outcomes for cancer patients worldwide. We look forward to the years ahead as we continue to build partnerships and collaborations around the world to truly make an impact on global cancer care and the lives of patients.

In Partnership,

T. Peter Kingham, MD
Director, Global Cancer Research and Training Program

Victoria Mango, MD
Assistant Director, Global Cancer Research and Training Program

A Brief History of GCRT & ARGO

In 2009, Professor Olusegun Isaac Alatise, a Nigerian surgeon, came to Memorial Sloan Kettering Cancer Center (MSK) for clinical training and research education. Following the visit, MSK established a partnership with Obafemi Awolowo University Teaching Hospital Complex (OAUTHC) in Nigeria. As a result of the productivity of this research collaboration, Dr. Peter Kingham and Sir Murray Brennan founded MSK's Global Cancer Research & Training (GCRT) Program to improve outcomes for cancer patients in low- and middle-income countries (LMICs).

Dr. Kingham and Prof. Alatise wanted to create a mechanism for multi-institutional cancer research and training in Nigeria, so they founded the African Research Group for Oncology (ARGO) in 2013. With GCRT's mission to improve outcomes for cancer patients worldwide using collaborative research and training, ARGO and GCRT are committed to combining research, training, capacity building, and education to support a long-term sustainable improvement in outcomes for cancer patients in LMICs.

ARGO is an NCI-recognized consortium that has grown to include 45 medical institutions, 39 from Nigeria and 6 from the US and Canada as well as several partner institutions. ARGO has established research and training infrastructure, with biobanks and local scientific partnerships for novel cancer research training and clinical studies. OAUTHC and the College of Medicine, University of Lagos/Lagos University Teaching Hospital (LUTH) serve as ARGO's research and training hubs. ARGO is supporting innovative research focused on generating data to inform regional evidence-based management recommendations, investigating prevention and early detection strategies, increasing access to cancer care, and improving cancer care training in rural and underserved communities.

For more than a decade, both the ARGO consortium and the GCRT Program at MSK have grown. Faculty participation within GCRT now covers numerous disciplines, including epidemiology, biostatistics, medical oncology, nursing, gynecology, radiation

oncology, psycho-oncology, palliative care, pharmacy, pathology, neuro-oncology, medical physics, pediatrics, radiology, and surgery. Global oncology is a growing field in medicine, and there is a need for training opportunities for fellows and residents. GCRT is committed to supporting training in this growing field and in 2024 created a Global Oncology Track Program for fellows and residents at MSK, which now consists of 12 trainees from 8 MSK departments

Program Highlights & Growth

Program Highlights & Growth

Expanding the ARGO Consortium

The ARGO consortium continues to grow each year by including additional medical institutions in both low and high-income countries. In 2025, we added 1 new site in Nigeria: Federal Medical Center, Lagos. *For the full list of ARGO member sites, please reference* Appendix 1: Partner Institutions.

GCRT Move to TRA

As part of MSK's vision to be the world's leading authority on cancer, GRCT was elevated from an initiative to a program. The program is now housed in the Translational Research Administration (TRA). From its new academic home, the GCRT Program is in closer proximity to many of the most exciting advances developed at MSK and better positioned to explore how those advances can be applied to populations outside of the U.S.

Expanding Research

Our portfolio over the past year has grown to over 115 studies, with 30 active NCAT studies and 89 active studies/ projects within ARGO and GCRT.

MSK Surgery Grand Rounds

In 2025, we were fortunate to have two colleagues present at MSK Surgery Grand Rounds. On January 13th, Dr. Ophira Ginsburg, the Senior Scientific Advisor for Clinical Research at the Center for Global Health, NCI presented "The Lancet Commission women, power, and cancer- advancing progress through collaboration." On June 9th, Dr. Margaret Du, Associate Attending in Epidemiology/Biostatistics at MSK, presented "Gaining epidemiologic insights into colorectal cancer in Nigeria."

Expanding Faculty Participation/ Partnerships

RAD-AID Learning Center Course: Introduction to Artificial Intelligence (AI) for LMIC Radiologists.

GCRT partnered with RAD-AID International, a non-profit organization that seeks to bring radiology services to underserved areas of the world, to modify their Introduction to Artificial Intelligence course for LMIC Radiologists in Nigeria. The updated online course is being piloted through the RAD-AID Learning Center with 50 radiologists from OAU and LASUTH enrolled. Their feedback will be used to modify the course, which will then be made more widely available to radiologists from other ARGO institutions.

MSK-GCRT academic partnership with the Mexican National Cancer Institute (INCAN).
Dr. Rosario Costas-Muñiz, from MSK's Department of Psychiatry and Behavioral Sciences, founded the Formación de Investigación Psicosocial Oncológica Latinoamericana (FIPOL), a regional consortium dedicated to advancing psycho-oncology and palliative care across Latin America. In 2024, Dr. Costas-Muñiz, in partnership with investigators at INCAN, was awarded an NCI R01 to evaluate culturally adapted psycho-oncology interventions at INCAN—marking a significant milestone in MSK–INCAN collaborative research. Building on this scientific collaboration and the longstanding relationships fostered through FIPOL, MSK and INCAN are now positioned to develop a more formalized educational and training partnership. Both institutions share a commitment to strengthening clinical capacity, advancing binational research, and supporting faculty development through structured observerships, academic exchange, and program evaluation.
A 2025 joint meeting with INCAN leadership on November 13th, further highlighted the breadth of opportunities for alignment—ranging from INCAN's academic and clinical programs to shared priorities in behavioral oncology, adolescent and young adult cancer care, implementation science, and health-equity–focused research. A proposed MSK–INCAN observership framework will serve as a foundational mechanism for deepening these collaborations, enabling INCAN faculty to engage in guided learning experiences at MSK while supporting ongoing co-development of best practices, research initiatives, and future jointly developed grants.
We look forward to continuing programmatic growth and strengthening collaborative ties across our institutions as we work together to enhance global cancer research, education, and patient care.

MSK and Weill Cornell Medicine (WCM) Deepen Global Oncology Collaboration Through Joint Symposium and Research Initiatives.
In 2025, MSK's GCRT Program initiated a new collaboration with the Weill Cornell Medicine (WCM) Center for Global Health through joint scientific programs and shared research priorities. This partnership brings together institutional leaders, global health experts, and international collaborators to advance research across cancer types and to deepen engagement with partner sites in Africa, Latin America, and the Caribbean.
As part of these ongoing efforts, MSK and WCM co-hosted a Global Oncology Symposium on October 30, 2025, a joint event designed to highlight international collaborations in cancer research. Symposium attendees were welcomed by MSK President and CEO Dr. Selwyn Vickers, underscoring institutional commitment to global oncology innovation. The symposium was jointly led by Dr. T. Peter Kingham and Dr. Victoria Mango from MSK GCRT, as well as Dr. Harold Varmus and Dr. Daniel Fitzgerald of WCM. The seminar featured multidisciplinary sessions focused on cervical cancer, colorectal cancer, multiple myeloma, and breast cancer, with participation from experts at MSK, WCM, the New York Genome Center, and global collaborators from Nigeria and Tanzania. Presentations showcased research on modifiable cancer risk factors, immunotherapy access, genetics and tumor

biology, psychosocial and structural barriers to care, and the implications of cancer incidence across diverse populations.

MSK faculty contributed significantly across thematic areas, including talks from Drs. Fiyinfolu Balogun, Margaret Du, Jian Carrot-Zhang, Francesco Maura, Alexia Iasonos, Dianna Ng, Luis Diaz, and Sara Moufarrij. International collaborators such as Dr. Idd Shabani (Tanzania) offered critical perspectives that reflect the broader goals of MSK GCRT and WCM—to improve cancer outcomes globally through equitable research partnerships, capacity building, and scientific exchange.
The symposium reflects the growing alignment between MSK GCRT and the WCM Center for Global Health around shared strategic priorities: expanding collaborative research networks, deepening engagement with partner institutions across regions, and increasing opportunities for faculty and trainee involvement in global oncology.

Both programs look forward to continuing joint symposia, co-led research initiatives, and expanded training pathways that strengthen global cancer control efforts.

University of Bristol.
Dr. Kingham presented the GCRT Program to the Department of Epidemiology and Global Health at University of Bristol in UK. In 2026 we will meet with Bristol in Nigeria to determine pathways for future global oncology collaborations.

Multi-Institutional Global Oncology Lecture Series

GCRT continues to partner with global oncology teams at MD Anderson Cancer Center, Dana Farber Cancer Institute, Harvard T.H. Chan School of Public Health, Massachusetts General Hospital, University of Pennsylvania, University of California San Francisco, Princess Margaret Cancer Centre and Indiana University Cancer Center to provide relevant lectures on global oncology every other month via Zoom. Lecture details and recordings for each lecture are e-mailed to the GCRT and ARGO teams, and all who are interested are welcome to attend. Speaker suggestions for future sessions can be e-mailed to Dr. Mango.

12TH Annual ARGO Symposium

The ARGO–GCRT Symposium at OAUTHC brings together healthcare professionals from across West Africa each year to learn, share, and collaborate on best practices in cancer prevention, diagnosis, treatment, and research. The 2025 symposium, themed “From Screening to Survivorship: A Multidisciplinary Approach to the Management of Breast, Cervical, Colorectal, and Hepatobiliary Cancers in Nigeria,” convened nearly 250 participants representing 30 institutions across Nigeria, alongside 18 international faculty from MSK, the University of Toronto and Northwestern University Feinberg School of Medicine. Although ARGO and GCRT began with a focus on colorectal cancer, the partnership has expanded to include studies in breast, gyn, and a broader range of gastrointestinal cancers. This growth reflects our commitment to advancing research and strengthening cancer care for populations

in low- and middle-income countries, and we anticipate continued expansion as we address additional cancer types that disproportionately affect these communities.

MSK Hospital Research Forum

The Hospital Research Forum (HRF) features talks given by physicians and scientists across MSK with a focus on translational research. The topics include DMT/Collaborative Research Center research updates, emerging themes in translational cancer science, and translational research initiatives of interest to the MSK research community. At the Hospital Research Forum, Dr Kingham and Dr Mango presented a translational overview of GCRT, highlighting its role in advancing cancer research in low- and middle-income countries. Their talk emphasized how collaborative, multi-institutional research platforms, such as the ARGO, integrate clinical care, data generation, and training to address disparities in cancer outcomes. They showcased ongoing studies in areas like breast and colorectal cancer, alongside innovations in early detection and workforce development. The presentation underscored the importance of building sustainable research infrastructure and partnerships to translate scientific discoveries into improved global cancer care.

African Organization for Research and Training in Cancer (AORTIC) Conference

Members of MSK's GCRT Program joined colleagues from around the world in Tunisia at the 2025 AORTIC conference, a premier academic conference dedicated to advancing cancer prevention, diagnosis, treatment, and survivorship across the African continent. A total of 46 posters and presentations were delivered by 23 attendees from the GCRT/ARGO teams. Held from November 2 to 5 in Hammamet, Tunisia, the biennial meeting brought together clinicians, researchers, policymakers, and advocates committed to improving cancer care in Africa. This year marked MSK's seventh consecutive AORTIC participation, continuing a presence that began in 2013. The conference featured three days of expert-led sessions spanning epidemiology, early detection, treatment innovation, and palliative care. A side meeting also convened U.S. cancer centers focused on global oncology, where MSK's GCRT leadership represented the institution's long-standing commitment to equitable cancer care worldwide. The breadth of MSK's contributions underscores the strength of its long-term partnerships across Africa and its commitment to advancing global cancer research and care. Reflecting on the impact of MSK's involvement in the AORTIC conference this year, T. Peter Kingham, Director of MSK's GCRT Program, shares, "Our collaborative group delivered 46 posters/presentations covering a wide range of topics — including diagnosis with a focus on artificial intelligence, treatment, and the evaluation of our training and education programs."

"A highlight for us was a talk on cancer screening — A Customized Colorectal Cancer Early Diagnosis Program in Nigeria Can Identify Patients with Advanced Adenomas and Early-Stage Cancer — presented by our colleague, Nigerian surgical oncologist and ARGO Director Professor Olusegun Isaac Alatise," Dr. Kingham adds.

In addition to Dr. Kingham, MSK was represented by a multidisciplinary team whose work continues to strengthen research, training, and clinical collaborations across the region:

- Victoria Mango, MD, Radiologist, Assistant Director, GCRT
- Fiyinfolu Balogun, MD, PhD Medical Oncologist, GI Medicine
- Dianna L. Ng, MD, Pathologist/Cytology
- Rivka Kahn, MPH, Research Project Manager
- Naqiya Choonawala, MPH, MBA, Research Project Associate
- Joy Ogunmuyiwa, MD, MPH, Stern Fellow
- Colleen Witty, MD, GCRT Global Oncology Fellow

The team was joined by former MSK trainees now contributing to global oncology work at other institutions, a testament to the lasting impact of MSK's training pipeline.

The insights and relationships strengthened at this year's meeting will help shape the next phase of GCRT's work, furthering MSK's mission to bring life-changing cancer care and discovery to patients around the globe.

MSK – Medisys Achieving Health Equity in Cancer Care Conference

This conference cosponsored by Memorial Sloan Kettering Cancer Center and Medisys Health Network convenes multidisciplinary leaders to advance equitable cancer care through research, innovation, and community partnerships. The meeting highlights strategies to address disparities in access, outcomes, and care delivery, with a focus on underserved populations. Dr Kingham presentation's "Improving Outcomes for Colorectal Cancer in Nigeria" highlighted the role of global oncology programs in reducing cancer disparities. His talk emphasized building clinical and research capacity in low- and middle-income countries through training, infrastructure development, and sustainable partnerships. He underscored how integrating research, education, and clinical care can drive long-term improvements in global cancer outcomes.

AORTIC North America Series

This monthly series aims to bring together researchers with a common collective interest in improving cancer care in Africa, to share their ongoing research or capacity building efforts in cancer, in partnership with teams based in Africa. This series is largely driven by North American partners, diaspora, and friends of Africa as a demonstration of support for the African continent. The objectives are to foster regional and global opportunities for knowledge sharing and best practice, as well as to encourage interaction, collaboration, and networking among participants, distinct from larger conferences. On August 5th, 2025, MSK and ARGO faculty gave presentations on the on-going work within our program in Epidemiology, Early Diagnosis, Guidelines, Treatment and Training. Talks were led by: Dr. Margaret Du, Prof. Olusegun Alatise, Dr. Leye Omisore, Dr. Dianna Ng, Dr. Lekan Olasehinde, Dr. Fiyinfolu Balogun, Dr. Victoria Mango and Dr. Betiku Omolade.

Strategic Planning

On May 29, 2025, GCRT and ARGO teams convened at MSKCC for the Annual Strategic Planning Meeting. The hybrid meeting, attended both in person and via Zoom, reflected on the program's progress, current challenges, and strategic priorities for the coming year. A major highlight of 2025 was the formal transition of GCRT to its new academic home within the Translational Research Administration (TRA) at MSK. This transition, supported by Drs. D'Angelis and Brennan, provides enhanced administrative resources and positions GCRT alongside other major translational and clinical research programs at MSK.

The meeting focused on ongoing research studies, new research, and future directions. The GCRT-ARGO research portfolio now includes over 115 active projects spanning the cancer care continuum, from early detection to survivorship. Colorectal and breast cancer research remain the program's cornerstones, complemented by expanding portfolios. Key research areas discussed included breast cancer, colorectal cancer, gynecologic oncology, psycho-oncology, and health systems research.

Following the research discussions, educational initiatives, capacity building, research administration and program growth were reviewed. A report on the Strategic Planning meeting is available through GCRT.

The following two pages provide an overview of the breast and colorectal cancer research studies presented at the strategic planning meeting.

Breast Cancer Studies Presented at 2025 Strategic Planning Meeting

Early Detection

84% of breast cancer patients present with advanced disease

Delay in breast cancer presentation and treatment in Nigeria: Evaluating health systems and structures

PI: DiBernardo

Understanding the experiences, perceptions and health seeking behaviors of relatives of breast cancer patients at OAUTHC

PI: DiBernardo

Assessing Prevalence and Determinants of Fungating Breast Cancer Presentation in Nigerian Women

PI: Okereke

Access to Breast Cancer Screening and Treatment in Nigeria: The Triple Mobile Assessment and Patient Navigation Model

PI: Omisore

Diagnosis

There is one radiologist per 500,000 people in Nigeria (The US has 50x that!)

Ultrasound-guided core biopsy training program

PIs: Sutton & Omisore

Artificial Intelligence Decision-Support for Timely Breast Cancer Diagnosis in Nigeria

PIs: Mango & Omisore

Tablet-based Mobile Health Ultrasound for Point-of-care Breast Cancer Diagnosis in Nigeria

PIs: Omisore & Sutton

Addressing global inequities in breast cancer genetic testing, counselling & management among breast cancer patients in Nigeria

PIs: Wuraola & Cil

Pathology

22% of patients have immunohistochemistry (IHC) performed

Immunohistochemical Profiling of Breast Cancer in Nigeria: A National Snapshot

PI: Okereke

Improving hormone receptor testing in Tanzania

PIs: Ng & Vuhahula

Breast pathology synoptic template

PIs: Ng & Edelweiss

Online global breast pathology fellowship

PI: Edelweiss

Treatment

60% of locally-advanced breast cancer patients receive multimodality therapy

Expanding access to genetic testing and counseling for breast cancer in Nigeria

PIs: Wuraola & Cil

Educational and financial navigation interventions to improve treatment uptake and adherence

PIs: Wuraola & Lumati

MDTs to standardize evidence-based breast cancer care

PIs: Olasehinde & Romanoff & Lynch

Psychosocial distress, PROs, and quality-of-life outcomes in breast cancer treatment

PI: Folorunso

Chemotherapy side effects, lymphedema, and body composition correlations

PIs: Olasehinde & DiBernardo

Colorectal Cancer (CRC) Studies Presented at 2025 Strategic Planning Meeting

Epidemiology/Biology

Modifiable risk factors are unknown for patients with CRC in Nigeria

Case-control study evaluating modifiable risk factors for CRC

PIs: Alatise & Kingham

Determining sporadic and germline mutations in Nigerian CRC

PIs: Alatise & Kingham

Environmental risk factors for CRC in Nigeria

PIs: Alatise & Kingham

Early Detection

In Nigeria, 75% of patients with CRC present with stage III or IV disease

Urine metabolite point-of-care test

PIs: Alatise & Kingham

Early Diagnosis for bowel cancer

PIs: Alatise & Kingham

Point-of-care cfDNA methylation detection for CRC in high-risk patients

PIs: Sukumar, Alatise & Kingham

Delays in diagnosis for GI cancers

PIs: Alatise

Diagnosis

There are too few trained endoscopists to keep up with colonoscopy demand

Capacity building for colonoscopy skills

PIs: Alatise & Murthy

Establishing the feasibility of a deep-learning image classification network

PIs: DiBernardo

Treatment

Current 1-year survival for CRC is <50%

Phase II immunotherapy trial for MSI-H colorectal cancer

PIs: Balogun

Additional Highlights

Leadership in International Initiatives

Dr. Kingham represented MSK as a Commissioner on the 2025 Lancet Oncology Moonshot 2.0 Commission focused on cancer workforces in Africa and Latin America. The Commission is evaluating how national cancer control plans account for cancer workforce expansion, training and career advancement, as well as barriers that cancer workforce members face in treating patients. The Commission will be launched in 2026.

Dr. Kingham also represented MSK along with Dr. Vickers, President and CEO of MSK, in a stakeholder group to build a Global Fund for Cancer Control. This initiative launched in 2024 and their work continued in 2025. The group involves global cancer stakeholders including the World Health Organization (WHO), World Bank, American Society of Clinical Oncology (ASCO), American Cancer Society (ACS) and American Association of Cancer Research (AACR).

Educational Initiatives

GCRT continues to prioritize the educational needs of trainees and healthcare workers in LMICs.

New Staff & Visiting Scholars

Vicky Baudin joined MSK's GCRT Program in August 2025 as Program Manager. She brings more than a decade of experience in translational and clinical research administration, regulatory coordination, STEM workforce development, and health-equity programming. Vicky has led large-scale initiatives, secured substantial institutional and philanthropic support, and built research and training infrastructure across multisite, international collaborations.

She holds a Master of Public Health (MPH) in Social & Behavioral Sciences from Boston University and a Bachelor's degree in Public Health and African Studies from the University of Rochester. With deep expertise in grant stewardship, program development, and strategic partnership cultivation, Vicky is poised to strengthen GCRT's leadership team and advance evidence-driven, sustainable, and globally impactful programs.

Dr. Joy Ogunmuyiwa, a radiation oncologist and public health researcher, was appointed to the MSK Stern Fellowship in Global Oncology Research. The fellowship supports current residents, recent residency graduates, and PhD trainees committed to advancing cancer research in low-resource settings. Dr. Ogunmuyiwa joined the program in July 2025, following completion of her residency in Radiation Oncology at New York-Presbyterian Hospital. Prior to transitioning to OAUTHC, she spent several months at MSK integrating into the GCRT Program and collaborating with faculty across global oncology initiatives. Dr. Ogunmuyiwa brings extensive experience in clinical research, population health, and cancer disparities, informed by her training at Northeast Ohio Medical University, Harvard T.H. Chan School of Public Health, and Duke University. Her fellowship work focuses on strengthening research capacity and evaluating outcomes in radiation oncology, with projects spanning cancer treatment patterns, survivorship, and targeted needs assessments in global health education and implementation.

Dr. Colleen Witty, a general surgery resident, was appointed to the GCRT Global Oncology Fellowship. She joins the program with an MD/MPH from Tufts University and extensive global health experience across India,

Pakistan, Ghana, and Haiti, informed by clinical, epidemiologic, and implementation research roles at the Centers for Disease Control (CDC), Boston Children's Hospital, and Christian Medical College. Dr. Witty's work is rooted in advancing health equity, with interests spanning surgical oncology, cancer disparities, and capacity building. As a GCRT Global Oncology Fellow, she will contribute to MSK's GCRT Program through research focused on strengthening systems of care and supporting collaborative partnerships with institutions such as OAUTHC in Nigeria. Her goal is to integrate surgical practice, education, and global oncology research to improve cancer outcomes in low-resource settings.

NIH International Research Training Grant

In 2022, GCRT received a D43 international training grant, "Expanding cancer research capacity in Nigeria using team science," which includes post-doctoral training for PhD-level scientists. GCRT welcomed three post-doctoral Fellows in 2023 in the areas of nursing and epidemiology, and all successfully completed their one-year mentored research training at MSKCC. GCRT was pleased to welcome two more D43 post-doctoral Fellows in the areas of psycho-oncology and epidemiology in 2024-2025.

Dr. Jacob Mobolaji joined GCRT from Obafemi Awolowo University in Nigeria, where he is a Senior Lecturer in the Department of Demography and Social Statistics. While at MSK, he worked under the mentorship of Dr. Mengmeng Du, Associate Attending within the Department of Epidemiology.

Dr. Joyce Terwase joined GCRT from Benue State University in Nigeria, where she is a Senior in Department of Psychology. While at MSK, she worked within the Department of Psychiatry & Behavioral Sciences under the mentorship of Dr. Jamie Ostroff, Chief of the Behavioral Sciences Service and Dr. Smita Banerjee, Associate Attending Behavioral Scientist.

GCRT Clinical Training Programs

The Mammadi Soudavar Memorial Fellowship was established in The New York Community Trust in 1981 by Fereidoon and Shamsi Soudavar as a memorial to their son, Mammadi. This 3-month fellowship allows international physicians to study and observe at MSK and apply the knowledge gained when they return to their home country. MSK has hosted over 25 Soudavar Fellows from Africa. This year we welcomed Dr. Ademola Oyekan, a Consultant Radiation and Clinical Oncologist at Lagos State University Teaching Hospital (LASUTH), Nigeria.

MSK Stern Fellowship in Global Oncology Research, supported by the Stern Fund, invites applicants who are current residents or within two years of completing a residency training program or PhD program in the US or Canada. Fellows spend an initial few months at MSK and complete the remaining nine months in Nigeria at OAUTHC. Dr. Joy Ogunmuyiwa, a Radiation Oncologist, was appointed as our third Stern Fellow in 2025.

The GCRT Global Oncology Fellowship, supported by the Oak Foundation, invites applicants who are currently in or recent graduates of North American residency programs in surgery, medicine, radiology, pathology, psychiatry, or gynecology. Fellows begin at MSK for three months and complete the remaining nine months in Nigeria at OAUTHC. The fellowship aims to train leaders in multidisciplinary cancer care and research in high and low-income countries. Dr. Colleen Witty, a general surgery resident from Washington University in St. Louis, was appointed as our third GCRT Global Oncology Fellow in 2025.

The Murray F. Brennan International Fellowship for the study of Soft Tissue Sarcoma (STS) in Low and Middle-Income Countries is offered jointly by MSK's GCRT Program and ARGO. Fellows spend the first three months at MSK training in data collection, bioinformatics, and pathology workflows alongside MSK STS subspecialists, then spend

the remaining nine months in Nigeria working with ARGO and MSK staff to conduct STS-focused research. As a core deliverable, fellows will develop a multi-institutional clinical and pathologic database for soft tissue sarcoma, using ARGO's MOTIC scanners to enable remote digital pathology training with MSK pathology experts. The fellowship aims to generate critical data on STS incidence and outcomes in low- and middle-income countries, build local research capacity, and prepare physician-scientists to lead future sarcoma care and research initiatives in their home countries. Dr. Olaejirinde Olaofe, an anatomic pathologist at Obafemi Awolowo University was appointed as our first Murray F. Brennan Sarcoma Fellow.

Virtual Breast Pathology Fellowship was launched in 2022 and is supported by the GCRT Program and MSK's Department of Pathology. It provides training in breast oncologic pathology with consideration of local settings to general surgical pathologists from LMICs. It mirrors breast pathology fellowships offered in high-income countries by supporting regular, frequent one-on-one interactions between fellows and faculty. Three physicians successfully completed the Fellowship in 2025: Dr. Dolapo Akinjo from Lagos University Teaching Hospital, Nigeria; Dr. Atuganile Edward Malango, a pathologist at Muhimbili National Hospital in Tanzania; and Dr. Ivo Jone from Hospital Central da Beira, Mozambique. Past fellows who have joined the Fellowship as faculty are: Dr. Omolade Betiku, Dr. Oluwatosin Omoyiola, Dr. Omolade Adegoke, and Dr. Dolapo Akinjo from LUTH.

For the '25–26 class, we have welcomed four pathologists: Dr. Olaleke Folaranmi, a Consultant Pathologist at the University of Ilorin Teaching Hospital, Nigeria; Dr. Sonusi Sandra, a Consultant Histopathologist with Olabisi Onabanjo University Teaching Hospital in Ogun State, Nigeria; Dr. Caroline Ngimba, Head of the Pathology Department at the Aga Khan Hospital in Dar es Salaam, Tanzania; and Dr. Andrew Olushola Anjorin, a Consultant Histopathologist at Osun State University Teaching Hospital in Osogbo, Nigeria.

Virtual Medical Oncology Fellowship is a new program which launched in September 2025, sponsored by the Joel and Lillian Cohen endowment, which former MSK medical oncologist Dr. Diane Reidy-Lagunes designated to fund the fellowship upon her departure from MSK. The program is jointly led by Dr. Fiyinfolu

Balogun at Memorial Sloan Kettering Cancer Center and Dr. Sharif Folorunso at Obafemi Awolowo University providing specialized training in medical oncology to clinical oncologists across Nigeria.

Fellows participate in monthly **ECHO (Extension for Community Health Outcomes)** sessions hosted by MSK, complemented by live, interactive faculty-led discussions. These sessions allow participants to review case studies, address clinical questions, and receive personalized mentorship on specific GI cancers. In addition, fellows receive guidance on their research projects. They also attend didactic lectures in collaboration with MSK's GI medical oncology fellows, further enriching their learning experience.

Additional Highlights CONTINUED

For the '25-'26 class, we welcomed three fellows in Nigeria: Dr. Eben Aje, NSIA LUTH Cancer Centre, Dr. Shehu Salihu Umar, Ahmadu Bello University/Teaching Hospital Zaria, and Dr. Ajibike Orekoya, Federal Medical Centre Ebutemetta, Lagos State.

The Health Informatics Working Group – Nigeria (HIWG-NG) is a new collaborative initiative of ARGO and GCRT led by Dr Chamberlain Nwanne, Clinical Informaticist at MSK, designed to strengthen digital health capacity for cancer care and research in Nigeria. The group brings together clinicians, researchers, technologists, and public health professionals to develop scalable informatics tools, expand training in EHR systems and data analytics, support collaborative oncology research, and advance policy and standards for health IT. HIWG-NG aims to build a global network that improves digital health infrastructure and promotes cancer equity in resource-limited settings.

Breast Cancer Working Group was established to convene a multidisciplinary network of research collaborators representing diverse areas of expertise. It serves as a platform for presenting new research ideas, identifying potential research partners, refining study concepts, and maximizing shared resources. The group provides a forum to strengthen proposals prior to grant submission and to ensure that new breast cancer projects are synergistic rather than duplicative. Throughout 2025, the Breast Cancer Working Group met, engaging more than 70 physicians and health professionals in shaping future initiatives.

Colonoscopy Training Program is in its second year and is funded by Dalhousie University and led by Dr. Isaac Alatise (OAU), Dr. Shilpa Murthy (Yale) and Dr. Greg Knapp (Dalhousie) and additional faculty from OAU, Dalhousie and Barbados. The program aims to increase colonoscopy capacity in Nigeria as we perform more early diagnosis studies and identify patients who need colonoscopies. This year's training program consisted of a nine-week online lecture series and a four-day in person colonoscopy training workshop in April. The program included a randomized study comparing low- and high-fidelity colonoscopy training models in 2025. We plan to publish our results from this study in 2026.

Collaborative Education and Capacity-Building Initiatives

Project ECHO continued to be implemented by GCRT-ARGO by convening interdisciplinary teams virtually to maximize scarce resources and share best practices. We held an average of five ECHO sessions per month, with average monthly attendance of 80, and a total of 2,251 participants joining over the course of the year. Our ongoing Breast, Colorectal Cancer Management, Histology, and Radiology-Pathology (RADPATH) ECHOs continued throughout 2025. In November 2025, we also launched our first Gynecology ECHO, which drew 40 participants from MSK and our collaborating partner institutions.

A poster presentation titled "Building Capacity For Breast Cancer Diagnosis: Evaluating the Radiology-Pathology ECHO in Nigeria" was presented at this year's AORTIC conference. It provided an analysis of data from a post-meeting survey, which

assessed learning preferences, training needs, barriers to breast cancer diagnosis, the impact of RAD-PATH ECHO program and participant feedback. This poster was led by our colleague, Zainab Illonga, MD, MSc, at Muhimbili University of Health Allied Sciences, Dar es Salaam, Tanzania.

ARGO-MSK Safe Delivery of Chemotherapy a Biennial Virtual Symposium was held for the third time on June 24th 2025, led by Dr. Margaret Barton-Burke, Director of Nursing Research at MSK, and Lauren Koranteng, Clinical Pharmacy Specialist at MSK. The event brought together over 60 health professionals from across West Africa and beyond to address the need for safer standard operating procedures around the delivery of chemotherapy. Topics covered included preparation of chemotherapy, safety of personnel handling cytotoxic drugs, and the use of personal protective equipment, as well as disposal of chemotherapy and patient care before, during and after chemotherapy. The virtual symposium sponsored by ARGO-MSK and the Safe Chemotherapy Working Group at MSK and OAUTHC.

GCRT Programmatic Meetings continue to be held monthly, bringing together a wide variety of health professionals, including physicians, nurses, medical students, and research staff.

Meeting topics vary from reviews of ongoing or planned research studies to guest speakers on relevant research and best practices. This years speakers included Dr. Yuri Fedirow, Distinguished Professor and Vice Chair for Clinical Research, Department of Pathology and Laboratory Medicine, University of North Carolina discussing “Improving Lymphoma outcomes in Malawi through Research and Training”; Dr. Megan Huchko, Hollier Family Associate Professor of Global Health and Obstetrics & Gynecology and Global Health and Director of the Center for Global Reproductive Health, Duke University, discussing “Digital Health Strategies to Achieve Cervical Cancer Elimination Targets: Opportunities and Challenges in Kenya”; and Dr. Enrique Soto Pérez de Celis, discussing Geriatric Oncology Care, A Global Perspective.” A complete list of GCRT Programmatic meeting presentations from 2025 can be found in Appendix 2.

GCRT Global Oncology Track for Trainees at MSKCC, initiated in 2024, prepares MSK training program graduates to be collaborative leaders in global oncology. The program allows MSK clinical trainees (residents and fellows) to formally incorporate global health education, training, and research into their MSK training through the GCRT Program. This runs concurrently with their clinical training program.

Our pilot group of trainees started in January 2025 with two trainees, Dr Mahmasani and Dr Parvin-Nejad, completing the program by the summer of 2025:

- Layal Al Mahmasani, MD, Gastroentestinal Oncology
- Fatemeh P. Parvin-Nejad, MD, Breast Surgical Oncology
- Edward Christopher Dee, MD, Radiation Oncology
- Sara Moufarrij, MD, Gynecologic Surgical Oncology
- Ya Haddy Sallah, MD,

Additional Highlights CONTINUED

Hematology Oncology

In the fall of 2025 we were thrilled to welcome 9 additional trainees to the program:

- Esther Zusstone, MD, Radiology
- Sudharsan Madhavan, PhD, Medical Physics
- Ruthmarie Hernandez Torres, PhD, Psychiatry & Behavioral Sciences
- Gira Graciano Mireles, MD, Neurology
- Nynoshka Bassatt Cabrera, MD, Neurology
- Gabriela Sotolongo, MD, Gynecologic Surgical Oncology
- Anna Shyvgin, MD, Gynecologic Surgical Oncology
- Vanessa Josef, MD, Interventional Pulmonology
- Jesus Antonio Ocejo Gallegos, MD, Genitourinary, Medicine

HPBridge is a program that Dr. Kingham co-founded with the International Hepatopancreatobiliary Association (IHPBA). It is a global initiative designed to foster meaningful, two-way collaboration and learning between HPB surgeons in high-income countries (HICs) and those in LMICs. Dr. Kingham and Professor Alatise are members of a Bridge group that includes Nigerian HPB surgeons.

Research Capacity Building

The GCRT and ARGO research teams look forward to building on the achievements of 2025 and collaborating closely to drive meaningful advancements in cancer care and treatment for patients in Nigeria and other LMICs.

Nigerian Cancer Research Training (NCAT) Program & Team Science

The NCAT Program, funded by philanthropic support from the Oak Foundation and our NIH D43 training grant, entered its fourth year. The ultimate programmatic goals are to strengthen research capacity in Nigeria by training a cadre of physicians and scientists who will contribute to national and international centers of expertise in cancer research and create a pipeline for international research collaboration. After a competitive selection process, scholars and post-doctoral fellows are selected to participate in the training curriculum developed by GCRT and ARGO.

Over the four-year period of this program, 53 health professionals have participated, representing multiple disciplines, including anesthesiology, histopathology, hematology, obstetrics and gynecology, oncology, nursing, public health, radiology, and surgery. Many of our scholars are involved in ongoing ARGO research studies, 13 have been awarded pilot grants to support their own independent research, and many have published work in their areas of research.

All four cohorts of clinical research scholars have successfully completed the virtual Harvard University's Principles and Practice of Clinical Research Course, and five post-doctoral fellows have completed their mentored research year at MSKCC. Our first NCAT cohort has also undergone Mentorship Training through the MSKCC Communication Skills Training Program (Comskil) and many will now serve as mentors for present and incoming NCAT Scholars. The first two cohorts of NCAT Scholars graduated from the program at the 2025 ARGO Symposium.

Additionally, NCAT scholars from the first two cohorts and our post-doctoral fellows are engaged in Team Science, a program that highlights the interdependent nature of research teams and the importance of effective collaboration. The scholars and post-docs have established six research teams, identified a research question, submitted a grant proposal and have received pilot grant funding. They will implement their research studies in the upcoming year.

GCRT and ARGO are proud of the achievements of all NCAT trainees and remain committed to supporting them as they progress in their careers and shape the future of oncologic research in Nigeria.

RA Pilot Grants

For the first time in Spring 2025, we targeted a call for applications for Research Assistants to apply for a pilot grant. We received 17 highly competitive applications.

The awardee was:

- Toyosi Teniola Sotala studying the "Investigation of the Breast Microbiome and its Association with Clinicopathological and Prognostic Features in a Cohort of Nigerian Breast Cancer Patients".

Pilot Grants

GCRT and ARGO provide pilot grants to physicians at ARGO institutions to conduct research on cancer prevention, diagnosis, treatment, and outcomes. In Fall 2025 we received over 50 research pilot grant applications. Awardees included:

- **Dr Adeleye Omisore** studying the "Low-Cost Laparoscopic Surgical Clips Versus Dedicated Breast Clips for Breast"
- **Dr Akinola Ayodeji Odedeyi** studying the "Validating Wide-Needle Aspiration Biopsy for Precision Breast Cancer Diagnostics in Nigeria: A Pilot Study of Biomarker Adequacy and Nodal Sampling"
- **Dr Antoinette Bediako-Bowan** studying the "Pattern of presentation, management & outcome of colorectal cancer in Ghana: a 10-year single-centre audit"
- **Dr Oluwabusayomi Roseline Ademakinwa (Research Assistant)** studying the "Gut Microbiome in Colorectal Cancer: Characterizing Biomarkers for Early Detection and Evaluating Probiotics intervention in a Nigerian Cohort"

Building Institutional Research Capacity

In May 2025, the GCRT-MSK clinical research team traveled to Nigeria to host our fourth annual "Capacity Building Research Training" workshop at OAUTHC. This training program has significantly expanded, both in terms of personnel and the number of participating sites across Nigeria. Forty-seven research assistants, representing 12 hospitals from across the country, joined our team of ARGO program managers for the event. Over the years, our capacity-building trainings have covered the entire protocol lifecycle, from development to quality assurance (QA), data analysis, and publication. Given the critical role of QA in the research process, we dedicated another day from this year's training to review our QA procedures and expectations. Breakout sessions were held for each disease group, allowing for focused discussions on individual studies. In response to feedback from the Research Assistants (RAs), we also offered specialized sessions on topics of particular interest, including Research Proposal Writing and Budgeting. As always, this training proved to be a valuable bidirectional learning experience, further strengthening the relationships between our institutions and enhancing the quality of research within our collaborative consortium.

This year, the MSK GCRT Research team had the distinct privilege of visiting a new ARGO partner site, Lakeshore Cancer Center in Lagos, Nigeria. We were honored by the invitation to tour the facility, learn about the treatments offered to patients, and gain insights into the challenges they face in recruiting participants for clinical research.

New Studies & Research Progress

In 2025, the GCRT-ARGO research teams made significant strides by continuing to expand collaborations both within MSK and globally. These partnerships have fostered the growth of our research programs across North America and Sub-Saharan Africa.

Collaborations within MSK

- Partnerships have continued to expand within MSK, involving several key departments: Surgery, Nursing, Pathology, Psychiatry and Behavioral Sciences, Radiology, Medical Oncology, Gynecology, Radiation Oncology, Biostatistics, Epidemiology, Pediatrics, and Palliative Care.

North America

- Collaborative efforts in North America have been strengthened with renowned institutions, including: Johns Hopkins University, Duke University, Mount Sinai, Northwestern University, Dalhousie University, University of Toronto, Princess Margaret Cancer Center, Cornell University, University of Alberta, Albert Einstein College of Medicine, BIO Venture for Global Health, and University of California, San Francisco.

Sub-Saharan Africa

- In Nigeria, the network includes sites nationwide, from the North to the South.
- In East and West Africa, partnerships have extended to Mozambique, Tanzania, Kenya, South Africa, Rwanda, and Ghana.

Mexico

- As part of our ongoing commitment to improving cancer outcomes in low- and middle-income countries (LMICs), we also expanded our collaborations in Mexico, partnering with the Mexican National Cancer Institute (INCAN), led by Dr. Rosario Costas Muniz.

2025 Research and Training Expansion

This year, we focused on integrating advanced technologies and expanding training programs to bridge gaps in cancer care and research.

- We created a Digital Pathology Platform, which will help streamline cancer diagnostics, especially in resource-constrained settings.
- Expansion of Radiation Oncology to the ARGO network, creating a more comprehensive program, and marking an important step in expanding our research scope.

Our studies this year have placed a strong emphasis on improving access to cancer screening, diagnosis, and treatment in Nigeria. Additionally, we have investigated the factors contributing to delays in cancer presentation and treatment decision-making.

- **Colorectal Cancer Stigma:** We have focused on understanding colorectal cancer-related stigma in Nigeria, which often hinders early detection and treatment.
- **Healthcare Professional Guideline Adherence:** A study on healthcare professionals' adherence to breast cancer management guidelines in Nigeria was conducted to better understand the gaps in care delivery.
- **Financial Toxicity:** A major area of focus in 2025 has been the financial burden that cancer patients face in LMICs. We have made substantial progress in studying ways to mitigate these financial challenges.
- **Breast Ultrasound AI Decision Support:** Completed a study on the accuracy of breast ultrasound AI decision support, paired with tablet-based ultrasound, to improve early breast cancer diagnosis in LMICs.

Ongoing efforts throughout 2025 to prepare for the official launch in 2026:

Immunotherapy & Cancer Databases

- Immunotherapy Study in Nigeria: After overcoming regulatory hurdles, ARGO will launch its first PD-1 blockade study for colorectal cancer patients with mismatch-repair deficiency in Nigeria in 2026, exploring the potential of immunotherapy in this setting.

- Immuno-Oncology Center: We will establish a dedicated immuno-oncology center in Nigeria, which will focus on advancing immuno-oncology research and improving patient care.
- Cancer Databases: ARGO will begin data collection for Sarcoma and Gynecologic cancers, which will be critical for research, and the development of treatment protocols.

Training & Capacity Building

- GYN Surgical Training: MSK surgeons will travel to Nigeria in 2026 to train local surgeons in advanced gynecological procedures.
- Biostatistics Course: A cancer-specific biostatistics course will be developed to train researchers and clinicians in the statistical methods most relevant to cancer care in LMICs.
- Microsurgery Training: We will implement microsurgery training for surgeons, focusing on precision techniques for plastic/reconstructive breast surgery.
- Genetic counselor training: We are partnering with SyndicateBio and City of Hope to support 9 Nigerian healthcare professionals to enroll in City of Hope's Intensive Course in Genetic Cancer Risk Assessment.
- Urine Metabolite Project aims to adapt and validate a novel urine-based point-of-care diagnostic test to identify colorectal cancer (CRC) and precancerous polyps in high-risk patients across Ghana, Tanzania, and South Africa. This study expands upon previous research conducted in Nigeria and will assess metabolite signature variability, refine the testing algorithm, and determine its applicability in different regions of Africa.

Ongoing ARGO Projects

ARGO is committed to continuing its pivotal research across a range of cancer types, with a focus on equity in treatment and diagnosis. Some of those included below:

- DNA Methylation Blood Test: We are continuing the development of an automated, point-of-care DNA methylation cartridge for colorectal cancer detection.
- Breast Cancer Genetic Testing: Efforts to address inequities in breast cancer genetic testing, counseling, and management in Nigeria are ongoing.
- De-escalation of Breast Cancer Surgeries: We are working to de-escalate axillary surgery after neoadjuvant chemotherapy and to de-escalate mastectomy to facilitate breast conservation in Nigerian women.
- Breast Cancer Reconstruction: We are also focusing on understanding and addressing the barriers to breast cancer reconstruction in Nigeria.
- Mobile Health Ultrasound and teleultrasound: The tablet-based mobile health ultrasound for point-of-care breast cancer diagnosis enables more rapid diagnosis to facilitate timely treatment.
- Breast Multidisciplinary Tumor Board (MDT) will help standardize care, improve outcomes, and address the challenges hindering MDT implementation, such as healthcare workforce shortages, infrastructure limitations, and coordination difficulties.
- Colonoscopy Training: The third cohort of colonoscopy training will take place in Ile Ife, Nigeria, for senior resident doctors and junior consultants.
- Research Capacity Building: The fifth annual research capacity building training for research assistants (RAs) will take place in 2026.

Financial Support

Internal

Financial support has been provided by MSK's Chief Physician Executive, MSK's Dept. of Surgery, MSK's Dept. of Radiology and Sir. Murray Brennan, Chairman Emeritus, Department of Surgery, Benno C. Schmidt Chair of Clinical Oncology.

Grants

Several competitive US grants have been obtained by the GCRT-ARGO team to support our research efforts.

- NIH P30 (Population Science Research Award) "AI and Digital Pathology Advancements for Expanding Immuno-Oncology in Nigerian Colorectal Cancer Care"
  PI: Sanchez-Vega/Kingham.
  1-year grant. $100,000 total costs; starts 10/1/2025
- NIH P20 "Addressing cancer disparities in Nigeria through Immuno-oncology Research – The NOLA Program"
  PI: Kingham/Vega Sanchez/ Alatise. 2-year grant. $781,222 total costs; start 9/1/2024
  PI: Kingham/Sanchez-Vega/ Alatise. 2-year grant. $781,222 total costs; start 4/1/2024.
- D43 supplement "Administrative supplement to expand clinical trial capacity in sub-Saharan Africa"
  PI: Kingham/Alatise. 1-year grant; $88,400 total costs; start 8/1/2024.
- The Prevent Cancer Foundation "Artificial Intelligence Decision Support for Timely Breast Cancer Diagnosis in Nigeria"
  PI: Mango/Omisore. 1-year grant. $95,000 total costs; start 1/2024.
- NIH R01 "Development of an automated, point-of-care DNA methylation cartridge blood test for colorectal cancer detection in LMICs-an academic-industrial partnership"
  PI: Sukumar/Kingham/Alatise. 5-year grant. $564,357 total costs; start 6/6/2023.
- NIH D43 "Expanding cancer research capacity in Nigeria with team science"
  PI: Kingham/Alatise; 5-year grant; $1,344,046 total costs; start 3/2022
- R01 Supplement "Collecting whole genome sequence data to enhance the value of the first multi-center study of colorectal cancer risk factors and biology in Nigeria"
  PI: Du; 1-year supplement; $195,604 total costs; start 9/1/2022
- R01 Supplement "Mentoring a Nigerian junior investigator with a mixed-methods analysis of barriers to colorectal cancer presentation in Nigeria"
  PI: Kingham; 1-year supplement; $124,999 total costs; start 9/1/2022
- American Society of Clinical Oncology (ASCO) Young Investigator Award "Improving guideline-concordant breast cancer treatment and quality oncology care delivery in Nigeria"
  PI: Romanoff; 1-year grant; $50,000 total costs; start 1/2022
- NIH P30 (Cancer Center Support Grant) Supplement: "Empathic Communication Skills Training to Reduce Lung Cancer Stigma in Nigeria"
  PI of Supplement: Banerjee/Ostroff; 1-year supplement; $213,550 total costs; starts 9/1/2021
- American Society of Clinical Oncology (ASCO) Conquer Cancer Innovation Grant "Assessment of diagnostic accuracy of AI in the assessment of lesions on breast ultrasound"
  PI: Ndumia/Mango; 1-year grant; $20,000 total costs; start 10/2021
- NIH K08 "A multi-faceted intervention to promote Breast Cancer Hormone Receptor Testing in Tanzania"
  PI: Ng; 5-year grant; $1,259,171 total costs; start 9/2021
- Pfizer grant "Improving Access to Breast Cancer Screening and Treatment in Nigeria: The Triple Mobile Assessment and Patient Navigation Model"
  PI: Omisore/Mango (OAUTH prime); 2-year grant; $150,000 total costs; start 1/2021
- NIH R01 "Determining the Risk Factor Profile and Biology of Colorectal Cancer in Nigeria"
  PI: Kingham/Alatise/Du; 4-year grant; $1,459,136 total costs; start 8/2020
- Oak Foundation "Nigerian Cancer Research Training (NCAT) Program"

PI: Kingham; 3-year grant; $499,510 total costs; start 7/2021

- NIH UH3/UG3 "Point of care, real time urine metabolomics test to diagnose colorectal cancers and polyps in low-and middle-income countries" PI: Kingham/Alatise; 3-year UH3 phase; $2,273,622 total costs; start 4/2020
- The Prevent Cancer Foundation "Efficacy and Feasibility of Fecal Immunochemistry for Colorectal Cancer Screening in Nigeria" PI: Kingham/Alatise; 2-year grant; $75,000 total costs; start 1/2020
- The Prevent Cancer Foundation "Feasibility of breast cancer screening in high-risk Nigerian women using a novel low-cost device" PI: Mango/Olasehinde; 1-year grant; $100,000 total costs; start date 1/2019
- NIH /NCI R21 "Tablet-based mobile health ultrasound for point-of-care breast cancer diagnosis in Nigeria. PI: Sutton; 2-year grant; $389,005 total costs; start date 7/2019

Philanthropic Support

- The Thompson Family Foundation has continued to provide annual support for the GCRT Program and renewed its commitment to support our work in a urine metabolite project in 2025 and the planned immunotherapy trial in 2026 as well.
- AK Foundation contributed support to the Nigerian Cancer Research Training Program and the GCRT Global Oncology Fellow.
- Dalhousie University supports the annual colonoscopy training program
- Joel and Lillian Cohen Endowment supports the Medical Oncology Fellowship.

For a list of individuals who have supported GCRT's work, please see Appendix 4.

Digital Resources

GCRT is pleased to share the links below to our websites and social media platforms. We would like to particularly thank Ms. Donna Gibson, Director of Library Services at MSK, Ms. Johanna Goldberg and Ms. Celine Soudant, Research Informationists, at MSK, who have graciously provided various training sessions to our NCAT scholars and D43 Fellows and who have built our GCRT library home page that allows us to share our lectures, events, manuscripts, and a recommended reading list.

1. ARGO Website
2. GCRT – MSK Website
3. ARGO LinkedIn
4. ARGO X (Twitter)
5. Library
6. ARGO-GCRT Video

*Many thanks to Jim Dawson for traveling with our GCRT teams and capturing video footage of GCRT/ARGO in action

Please consider a tax-deductible donation to help end global cancer disparities: GCRT MSK Giving Page

Appendix 1: Partner Institutions

Nigerian Members

Abia State University Teaching Hospital, Aba, Abia State

Afe Babalola University, Ado-Ekiti

Ahmadu Bello University Teaching Hospital, Zaria, Kaduna State

Alex Ekwueme Federal University Teaching Hospital, Abakaliki, Ebonyi State

Aminu Kano Teaching Hospital, Kano, Kano State

Babcock University Teaching Hospital, Inisa-Iremo, Ogun State

Barau Dikko Teaching Hospital, Kaduna, Kaduna State

Bayero University, Kano

Ekiti State University Teaching Hospital, Ado-Ekiti, Ekiti State

Federal Medical Centre, Abeokuta, Ogun State

Federal Medical Centre, Birnin Kebbi, Kebbi State

Federal Medical Centre, Lagos

Federal Medical Centre, Owerri, Imo State

Federal Medical Centre, Yola, Adamawa State

Federal Medical Center, Bida

Federal Medical Center, Owo, Ondo State

Federal Medical Centre, Zamfara

Federal Teaching Hospital, Ido-Ekiti, Ekiti State

Irrua Specialist Teaching Hospital / Ambrose Alli University, Ekpoma

Kwara State University, Ilorin

Ladoke Akintola University Teaching Hospital, Ogbomosho, Oyo State

Lagos State University Teaching Hospital, Ikeja, Lagos State

Lagos University Teaching Hospital, Idi Araba, Lagos State

Lakeshore Cancer Centre, Lagos State

Marcelle Ruth Cancer Centre & Teaching Hospital, Lagos

National Hospital, Abuja

Niger Delta University Teaching Hospital, Okolobiri, Bayelsa State

Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Osun State

Onabisi Onabanjo University Teaching Hospital, Sagamu, Ogun State

Surgery and Trauma Center, Ondo, Ondo State

UNIOSUN Teaching Hospital, Osogbo, Osun State

University College Hospital, Ibadan, Oyo State

University of Abuja Teaching Hospital, Gwagwalada, FCT, Abuja

University of Benin Teaching Hospital, Benin City, Edo State

University of Calabar Teaching Hospital, Calabar, Cross-River State

University of Ilorin Teaching Hospital, Ilorin, Kwara State

University of Maiduguri Teaching Hospital, Maiduguri, Borno State

University of Nigeria Teaching Hospital, Enugu, Enugu State

University of Port Harcourt Teaching Hospital, Port Harcourt, Rivers State

Other Study Sites

University of Nigeria, Nsukka

University of Port Harcourt (UNIPORT), Port Harcourt, Rivers State

North American Members

Memorial Sloan Kettering Cancer Center, New York, USA

Dalhousie University, Halifax, NS, Canada

Albert Einstein University, New York, USA

Icahn School of Medicine at Mount Sinai, New York, USA

Princess Margaret Cancer Center, Toronto, Canada

Wake Forest University Health Sciences, North Carolina, USA

Partner Institutions in Kenya

Agha Khan University Hospital, Nairobi

Partners Institutions in Ghana

Korle Bu Teaching Hospital/University of Ghana Medical School

Partner Institutions in Tanzania

Muhimbili National Hospital

Aga Khan Hospital

Bugando Medical Center

Kilmanjaro Christian Medical Centre

Mbeya Zonal Regional Referral Hospital

Muhimbili University of Health and Allied Sciences

Ocean Road Cancer Institute

Additional Partner Institutions in North America

Brigham and Women's Hospital, Boston, MA, USA

University of California, San Francisco, CA, USA

Duke University, Durham, NC, USA

Johns Hopkins University, Baltimore, MD, USA

Instituto Nacional de Cancerologia, Mexico City, Mexico

Appendix 2: GCRT Program Presentations 2025

Malaria and Triple Negative Breast Cancer in West Africa

Dr. Fatemah Parvin-Nejad
Assistant Attending of Breast Surgical Oncology, Atrium Health

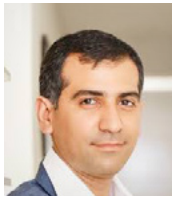
Evaluating Guideline Adherence and Treatment Gaps for HER2-Positive Breast Cancer in Nigeria

Dr. Ya Haddy Sallah
Hematology Oncology Fellow, Memorial Sloan Kettering Cancer Center

Geriatric Oncology Care, A Global Perspective

Dr. Enrique Soto Pérez de Celis
Associate Professor of Medical Oncology and Associate Director for Global Oncology, University of Colorado Cancer Center

Impact of Social Drivers of Health and Supportive Care Needs on Psychological Well-Being in Peruvian Oncology Patients in Shelters: An Analysis of Access to Health Services



José Carlos Sánchez Ramírez, MSc
Faculty of Psychology, University of Lima

Digital Health Strategies to Achieve Cervical Cancer Elimination Targets: Opportunities and Challenges in Kenya

Dr. Megan Huchko, Hollier
Family Associate Professor of Global Health and Obstetrics & Gynecology and Global Health and Director of the Center for Global Reproductive Health, Duke University

Lessons from a decade of work in sub-Saharan Africa and beyond

Dr. Adebola Adedimeji
Tenured Professor in the Departments of Social Sciences and Health Policy and Implementation Science, Wake Forest University School of Medicine

Implementation strategies to decentralize breast ultrasound services in Rwanda

Dr. Lydia Pace
Primary Care Internist and Researcher in the Division of Women's Health at Brigham and Women's Hospital and Associate Professor of Medicine, Harvard Medical School

Improving lymphoma outcomes in Malawi through research and training

Dr. Yuri Fedoriw
Distinguished Professor and Vice Chair for Clinical Research, Department of Pathology and Laboratory Medicine, University of North Carolina

Global Cancer Equity: Perspectives from Southeast Asia

Dr. Edward Christopher Dee
Resident, Radiation Oncology, Memorial Sloan Kettering Cancer Center

Pilot Study of a Rapid Breast Cancer Biomarker Assay in Tanzania

Dr. Dianna Ng
Pathology, Memorial Sloan Kettering Cancer Center

De-escalating axillary surgery for locally advanced breast cancer in Nigeria

Dr. Gregory Knapp
Surgical Oncologist and Assistant Professor of Surgery, Dalhousie University

Appendix 3: Publications

1. Abate M, Alatise OI, Omisore AD, et al. Unique microbial biomarkers identified in Nigerian patients with colorectal cancer. Published online 2023.
2. Adeleke, A.A., Wuraola, F.O., Olasehinde, O., et al. (2025). Effect of Wound Irrigation with Povidone Iodine Versus Normal Saline on Superficial Incisional Surgical Site Infection Following Laparotomy for Peritonitis. *Journal of The West African College of Surgeons* , 15(2), 203-208. DOI: 10.4103/jwas.jwas_24_24
3. Adeomi, A.A., Alatise, O.I., Wishart, D., et al. (2025). Point-of-Care Urine Metabolomics Test to Diagnose Colorectal Cancers in Low- and Middle-Income Countries: A Pilot Controlled Trial in Southwestern Nigeria. *JCO Glob Oncol* , 11, e2500062. doi: 10.1200/GO-25-00062. PMID: 40768684.
4. Aderibigbe AS, Dare AJ, Kalvin HL, et al. Analysis of Risk Factors, Treatment Patterns, and Survival Outcomes After Emergency Presentation With Colorectal Cancer: A Prospective Multicenter Cohort Study in Nigeria. J Surg Oncol. Published online November 21, 2024. doi:10.1002/jso.27878
5. Afolaranmi, O., Okeke, S., Aduloju, T.S., et al. (2025). Scoping Review on Cancer Care Financing in Nigeria [abstract]. In: Proceedings of the 13th Annual Symposium on Global *Cancer Research. Cancer Epidemiol Biomarkers Prev*, 34(12_Suppl), Abstract nr 19.
6. Agodirin O, Olatoke S, Rahman G, et al. Determinants of late detection and advanced-stage diagnosis of breast cancer in Nigeria. *PLoS One*. 2021;16(11):e0256847. doi:10.1371/journal.pone.0256847
7. Ajeigbe, A., Omisore, A., Akinde, A.O., et al. (2025). Assessment of Lipid Profile among Women with Malignant and Non-malignant Breast Lesions in a Tertiary Hospital, Nigeria: A Pilot Study. *Ibom Medical Journal* , 18, 181-186. doi: 10.61386/imj.v18i1.606.
8. Alatise, O.I., Allen, H., Barton-Burke, M., et al. (2025). Endoscopy capacity in Nigeria: a national needs assessment and recommendations. *Surg Endosc* , 39, 5698–5713. doi: 10.1007/s00464-025-11874-3.
9. Alatise OI, Ayandipo OO, Adeyeye A, et al. A symptom based model to predict colorectal cancer in low resource countries: Results from a prospective study of patients at high risk for colorectal cancer. *Cancer*. 2018;124(13):2766-2773.
10. Alatise OI, Dare AJ, Akinyemi PA, et al. Colorectal cancer screening with fecal immunochemical testing: a community-based, cross-sectional study in average-risk individuals in Nigeria. *Lancet Glob Health*. 2022;10(7):e1012-e1022. doi:10.1016/S2214-109X(22)00121-8
11. Alatise OI, Fischer SE, Ayandipo OO, Omisore AG, Olatoke SA, Kingham TP. Health-seeking behavior and barriers to care in patients with rectal bleeding in Nigeria. *J Glob Oncol*. 2017;3(6):749-756. doi:10.1200/JGO.2016.006601
12. Alatise OI, Knapp GC, Bebington B, et al. Racial Differences in the Phenotype of Colorectal Cancer: A Prospective Comparison Between Nigeria and South Africa. *World J Surg*. 2022;46:47-53.
13. Alatise OI, Knapp GC, Sharma A, et al. Molecular and phenotypic profiling of colorectal cancer patients in West Africa reveals biological insights. *Nat Commun*. 2021;12(1):6821. doi:10.1038/s41467-021-27106-w
14. Alatise, O.I., Mann, E., Zivanov, C.N., et al. (2025). Starting a Hepato-Pancreato-Biliary Surgery Program from scratch: closing the gap in West Africa. *Surgical Oncology Insight* , 2(2), 100132. doi: 10.1016/j.soi.2025.100132.
15. Alatise, O.I., Padmore, G.M., Zivanov, C.N., et al. (2025). Liver Surgery Experience and Outcomes at Low-volume Centers in Nigeria and Barbados. *HPB* , 27(Suppl 2), S415. doi: 10.1016/j.hpb.2025.07.362
16. Alatise OI, Yibrehu B, Jackman J, et al. Hepato-pancreato-biliary surgery in West Africa: a timely capacity assessment. HPB (Oxford). 2024;26(9):1123-1130. doi:10.1016/j.hpb.2024.05.009
17. Arora, N., et al. (2025). Burden of General Surgical Cancer Care in West Africa: A Review of the Literature. *JCO Glob Oncol* , 11, e2400459. DOI:10.1200/GO-24-00459
18. Asombang A, Alatise OI, Adewale A, et al. Teaching and pioneering endoscopic retrograde cholangiopancreatography at a tertiary center in Nigeria—— Year 1 experience: The apprenticeship model——Is this a viable option for Africa?. NIGERIAN JOURNAL OF GASTROENTEROLOGY AND HEPATOLOGY. 14. 49-54. 10.4103/njgh.njgh_15_22.
19. Awe, Y.T., Onayade, A.A., Sosan, M.B., et al. (2025). Distribution of Organochlorine Pesticides in Nigerian Human Serum and Risk of Cancer: A case-control study. *Nigerian Journal of Environment and Health* , 5, 01 – 10. DOI: 10.5281/zenodo.14891120

Appendix 3: Publications CONTINUED

20. Banerjee SC, Asuzu C, Mapayi B, et al. Feasibility, acceptability, and initial efficacy of empathic communication skills training to reduce lung cancer stigma in Nigeria: a pilot study. J Natl Cancer Inst Monogr. 2024;2024(63):30-37. doi:10.1093/jncimonographs/lgae006
21. Banerjee, S.C., Gilliland, J., Asuzu, C., et al. (2025). "I Am Not the One That Caused Your Illness": Lung Cancer Stigma in Nigeria. *Psycho-Oncology* . doi:10.1002/pon.70362.
22. Byemerwa, J., Neish, D., Deveaux, A., et al. (2025). Characterizing the immune microenvironment of Nigerian breast tumors by subtype [abstract]. In: Proceedings of the American Association for Cancer Research Annual Meeting 2025. *Cancer Res* , 85(8_Suppl_1), Abstract nr 7360
23. Caputo, M., Sohail, A., Wuraola, F., et al. (2025). Evaluating the impact of financial navigation on financial toxicity for cancer care. *HPB* , 27(Suppl 1), S193-S194. ISSN 1365-182X. https://doi.org/10.1016/j.hpb.2025.03.354
24. Cazap E, Magrath I, Kingham TP, Elzawawy A. Structural barriers to diagnosis and treatment of cancer in low-and middle-income countries: the urgent need for scaling up. *J Clin Oncol*. 2016;34(1):14. doi:10.1200/JCO.2015.61.9189
25. Choonawala, N.R., Abdulkareem, F.B., Olanrewaju, O., et al. (2025). Nigerian Cancer Research Training (NCAT) Program [abstract]. In: Proceedings of the 13th Annual Symposium on Global Cancer Research. *Cancer Epidemiol Biomarkers Prev* , 34(12_Suppl), Abstract nr 77.
26. Dare AJ, Knapp GC, Romanoff A, et al. High-burden cancers in Middle-income countries: a review of Prevention and early detection strategies targeting At-risk populations. *Cancer Prev Res (Phila Pa)*. 2021;14(12):1061-1074. doi:10.1158/1940-6207.CAPR-20-0571
27. Dare A, Olasehinde O, Bernardo M, et al. Abstract 31: Does Receipt of Resource-Adapted Guideline-Concordant Breast Cancer Care Improve Outcomes? A Retrospective Study of 517 Breast Cancer Patients in Southwest Nigeria. Cancer Epidemiology, Biomarkers & Prevention. 32. 31-31. 10.1158/1538-7755.ASGCR23-Abstract-31.
28. Dare A, Olasehinde O, Bernardo MD, et al. Does Receipt of Resource-Adapted Guideline-Concordant Breast Cancer Care Improve Outcomes? A Retrospective Study of 517 Breast Cancer Patients in Southwest Nigeria. *Cancer Epidemiol Biomarkers Prev.* 2023;32(6_Supplement):31-31.
29. Dare AJ, Olatoke SA, Okereke CE, et al. The African Research Group for Oncology: A decade fostering colorectal cancer research in Nigeria. *J Surg Oncol.* 2023;128(6):1011-1020. doi:10.1002/jso.27444
30. Dee, E.C., Laversanne, M., Bhoo-Pathy, N., et al. (2025). Cancer incidence and mortality estimates in 2022 in southeast Asia: a comparative analysis. *Lancet Oncol* . doi:10.1016/S1470-2045(25)00017-8.
31. Dent, J., Jorge, M., Sobrevilla, N., et al. (2025). Cancer immunotherapy clinical trials to support urgently needed access in low- and middle-income countries: a report from the SITC global access and impact committee. *J Immunother Cancer* , 13(6), e011258. doi: 10.1136/jitc-2024-011258. PMID: 40550565; PMCID: PMC12184393.
32. Diaz, K. et al. (2025). Evaluating the impact of financial navigation on financial catastrophe and distress for cancer care in Nigeria: A randomized control trial—COST-FIN. JCO *Oncol Pract* , 21, 515-515. DOI:10.1200/OP.2025.21.10_suppl.515
33. Feliciano, E.J.G., Go, A.E., Martinez, J., et al. (2025). Global Cancer System Characteristics and Cervical Cancer Outcomes. *International Journal of Radiation Oncology* BiologyPhysics , 123(1, Suppl), e330-e331. ISSN 0360-3016. https://doi.org/10.1016/j.ijrobp.2025.06.2256
34. Fischer SE, Alatise OI, Komolafe AO, et al. Establishing a cancer research consortium in low-and middle-income countries: challenges faced and lessons learned. *Ann Surg Oncol*. 2017;24(3):627-631. doi:10.1245/s10434-016-5624-2
35. Fitch MI, Barton-Burke M, Fong W, Young A. Oncology nursing research: a global perspective. *Ann Palliat Med.* 2023;13(1):11225-11125. doi:10.21037/apm-23-382
36. Folorunso, S.A., et al. (2025). Clinicopathological features of colorectal cancer in adolescents and young adults (AYA) at a tertiary referral centre in Nigeria. *J Clin Oncol* , 43, 3629-3629. DOI:10.1200/JCO.2025.43.16_suppl.3629
37. Folorunso SA, Abiodun OO, Abdus-Salam AA, Wuraola FO. Evaluation of side effects and compliance to chemotherapy in breast cancer patients at a Nigerian tertiary hospital. *ecancermedicalscience*. 2023;17.
38. Gyedu A, Shrauner WR, Kingham TP. No patients to resect or transplant: an analysis of patients with hepatocellular carcinoma admitted to a major African referral hospital. *World J Surg*. 2015;39(1):231-236. doi:10.1007/s00268-014-2762-1
39. Hodges, P., Adeniyi, O., Devani, S., et al. (2025). Emerging Patterns of Inflammatory Bowel Disease in Sub-Saharan Africa: 175 Cases From an Inflammatory Bowel Disease Network. *J Crohns Colitis* , 19(1), jjae126. doi: 10.1093/ecco-jcc/jjae126. PMID: 39140612; PMCID: PMC11725509.

Appendix 3: Publications CONTINUED

40. Hughes, D., Yibrehu, B., Kingham, P., et al. (2025). Building effective relationships in global surgery: an exploratory qualitative study. *HPB* , 27(11), 1427-1436. doi: 10.1016/j.hpb.2025.08.002
41. Jackman, J.M., Peeri, N., Yibrehu, B., et al. (2025). Silicone Wristbands as Passive Environmental Sampling Devices in Low- and Middle-Income Countries: a Scoping Review of the Evidence. *Curr Envir Health Rpt* , 12, 37. doi: 10.1007/s40572-025-00501-x.
42. Jackman JM, Yibrehu B, Doyle A, et al. Updates in global oncology: Advancements and future directions. J Surg Oncol. 2024;129(7):1374-1383. doi:10.1002/jso.27633
43. Jalloul M, Miranda Schaeubinger M, Noor AM, et al. MRI scarcity in low and middle income countries. *NMR Biomed*. 2023;36(12):e5022. doi:10.1002/nbm.5022
44. Katzen, J.T., Hunt, K., Friedlander, L., et al. (2025). Assessing the Outcomes of the Initial Virtual Breast Imaging Fellowship Interview Season. *J Breast Imaging* , 7(5), 599-605. doi: 10.1093/jbi/wbaf004. PMID: 40222034
45. Kingham TP, Alatise OI. Establishing translational and clinical cancer research collaborations between high-and low-income countries. *Ann Surg Oncol*. 2015;22:741-746.
46. Kingham TP, Alatise OI, Vanderpuye V, et al. Treatment of cancer in sub-Saharan Africa. *Lancet Oncol*. 2013;14(4):e158-e167. doi:10.1016/S1470-2045(12)70472-2
47. 47. Kingham TP, Ginsburg O, Sivaram S, Ilbawi A, Trimble T. Priorities and funding for global cancer surgery research. *J Surg Oncol*. 2017;115(5):513. doi:10.1002/jso.24586
48. Kingham TP, Wong SL. Global surgical oncology: addressing the global surgical oncology disease burden. *Ann Surg Oncol*. 2015;22(3):708-709. doi:10.1245/s10434-014-4347-5
49. Knapp GC, Alatise OI, Olasehinde OO, et al. Is colorectal cancer screening appropriate in Nigeria? *J Glob Oncol*. 2019;5:1-10.
50. Knapp GC, Alatise O, Olopade B, et al. Feasibility and performance of the fecal immunochemical test (FIT) for average-risk colorectal cancer screening in Nigeria. *PLoS One*. 2021;16(1):e0243587. doi:10.1371/journal.pone.0243587
51. Knapp, G., Olasehinde, O., Brownstone, R., et al. (2025). De-Escalating Axillary Surgery in Nigeria: a phase II Single Arm Trial Protocol [abstract]. In: Proceedings of the San Antonio Breast Cancer Symposium 2024. *Clin Cancer Res* , 31(12 Suppl), Abstract nr P2-08-18
52. Knapp GC, Sharma A, Olopade B, et al. An exploratory analysis of fecal immunochemical test performance for colorectal cancer screening in Nigeria. *World J Surg*. 2019;43(11):2674-2680. doi:10.1007/s00268-019-05100-0
53. Knapp GC, Tansley G, Olasehinde O, et al. Geospatial access predicts cancer stage at presentation and outcomes for patients with breast cancer in southwest Nigeria: A population based study. *Cancer*. 2021;127(9):1432-1438.
54. Knapp GC, Tansley G, Olasehinde O, et al. Mapping population access to comprehensive cancer care in Nigeria. *J Glob Oncol*. 2019;5:1-8. doi:10.1200/JGO.19.00283
55. Knapp GC, Wuraola FO, Olasehinde O, Romanoff A, Kingham PT, Alatise OI. The out-of-pocket cost of breast cancer care at a public tertiary care hospital in Nigeria: an exploratory analysis. *Pan Afr Med J*. 2022;41(1).
56. Knaul, F.M., Arreola-Ornelas, H., Kwete, X.J., et al. (2025). The evolution of serious health-related suffering from 1990 to 2021: an update to The Lancet Commission on global access to palliative care and pain relief. *Lancet Glob Health* , 13(3), e422-e436. doi:10.1016/S2214-109X(24)00476-5
57. Koranteng L, Wuraola FO, Thom B, et al. Assessing safe chemotherapy needs and practices in Ile-Ife, Nigeria: a multi-disciplinary quality improvement project. BMJ Open. 2024;14(6):e077154. Published 2024 Jun 4. doi:10.1136/bmjopen-2023-077154
58. Kwakye G, Dally CK. Colorectal cancer screening in sub-Saharan Africa. Lancet Glob Health. 2022;10(7):e938-e939. doi:10.1016/S2214-109X(22)00231-5
59. Kwarteng, L.A., Lee, A.Y., Sakafu, L., et al. (2025). Global radiology: Building equitable and effective partnerships with low and middle-income countries. *Clin Imaging* , 125, 110559. doi: 10.1016/j.clinimag.2025.110559. Epub 2025 Jul 7. PMID: 40633489
60. Liu B, Shen S, Omoyiola OZ, et al. Prevalence and patterns of breast white adipose tissue inflammation among American Black women and indigenous Nigerian women with early-stage breast cancer. Published online 2023.
61. Lynch KA, Atkinson TM, Omisore AD, et al. Developing a Technology Acceptability and Usage Survey (TAUS) for mHealth Intervention Planning and Evaluation in Nigeria: Pilot Study. *JMIR Form Res*. 2022;6(4):e34035. doi:10.2196/34035

Appendix 3: Publications CONTINUED

62. Lynch KA, Merdjanoff AA. Impact of Disasters on Older Adult Cancer Outcomes: A Scoping Review. JCO Glob Oncol. 2023;9:e2200374. doi:10.1200/GO.22.00374
63. Lynch KA, Omisore AD, Atkinson TM, et al. Multistakeholder Needs Assessment to Inform the Development of an mHealth-Based Ultrasound-Guided Breast Biopsy Training Program in Nigeria. *JCO Glob Oncol*. 2020;6:1813-1823. doi:10.1200/GO.20.00353
64. Lynch KA, Omisore AD, Famurewa O, et al. Designing Participatory Needs Assessments to Support Global Health Interventions in Time-Limited Settings: A Case Study From Nigeria. *Int J Qual Methods*. 2021;20:16094069211002421. doi:10.1177/16094069211002421
65. Mango VL, Olasehinde O, Omisore AD, et al. The iBreastExam versus clinical breast examination for breast evaluation in high risk and symptomatic Nigerian women: a prospective study. *Lancet Glob Health*. 2022;10(4):e555-e563. doi:10.1016/S2214-109X(22)00030-4
66. Mustapha, B., Alatise, O.I., Olasehinde, O., et al. (2025). LigaSure versus conventional Milligan MORGAN hemorrhoidectomy in Nigerian patients with symptomatic hemorrhoids. *World J Surg* , 49(2), 334-342. doi: 10.1002/wjs.12416. PMID: 39578689. Epub 2024 Nov 22
67. Nanji, S., Ezeome, E., Alatise, O., et al. (2025). A Novel Curriculum for Surgical Oncology Fellowship Training in West Africa. Ann Surg Oncol , 32, 1590–1600.
68. Nanji, S., et al. (2025). Confronting the Challenges of Hepatocellular Carcinoma in Sub-Saharan Africa: Opportunities for Progress. *JCO Glob Oncol* , 11, e2400645. DOI:10.1200/GO-24-00645
69. Nanji, S., Alatise, O., Magueye Gueye, S., et al. (2025). Developing a Surgical Oncology Workforce in West Africa: A Needs Assessment and Environmental Scan. *Ann Surg Oncol* , 32, 1579–1589.
70. Ndikom CM, Oluwatosin OA, Salami KK, et al. Exploration of the Need for Integration of Cervical Cancer Information into Postnatal Services at Primary Health Care Centers in Ibadan Nigeria. *Eur J Med Health Sci*. 2023;5(5):96-104.
71. Ng DL, Edelweiss M, Kimambo AH, et al. (2025). Efforts to strengthen anatomic pathology diagnostic services for cancer in sub-Saharan Africa: a scoping review protocol. *BMJ Open* , 15(2), e089425. doi:10.1136/bmjopen-2024-08
72. Ngwa W, Addai BW, Adewole I, et al. Cancer in sub-Saharan Africa: a lancet oncology commission. *Lancet Oncol*. 2022;23(6):e251-e312. doi:10.1016/S1470-2045(21)00720-8
73. Ntiamoah, P., Adedeji, T.A., Odujoko, O., et al. (2025). Characterization and Comparison of Breast White Adipose Tissue Inflammation in Nigerian and African American Women with Primary Breast Cancer [abstract]. In: Proceedings of the San Antonio Breast Cancer Symposium 2024. *Clin Cancer Res* , 31(12 Suppl), Abstract nr P3-04-13
74. Ntiamoah P, Monu NR, Abdulkareem FB, et al. Pathology services in Nigeria: cross-sectional survey results from three cancer consortia. *J Glob Oncol*. 2019;5:1-9. doi:10.1200/JGO.19.00138
75. Ntirenganya F, Petroze RT, Kamara TB, et al. Prevalence of breast masses and barriers to care: Results from a population based survey in Rwanda and Sierra Leone. *J Surg Oncol*. 2014;110(8):903-906. doi:10.1002/jso.23726
76. Obadare, T.O., Adeyemo, A.T., Ibrahim, O.A., et al. (2025). Bacterial agents and antibiotic resistance in febrile neutropaenia in Africa: A systematic review and meta-analysis. *Afr J Lab Med* , 14(1), 2816. doi: 10.4102/ajlm.v14i1.2816. PMID: 40937301; PMCID: PMC12421475
77. Okeke, S., Afolaranmi, O., Aduloju, T.S., et al. (2025). Cancer care financing in Nigeria: A scoping review of the literature. *Surgical Oncology Insight* , 2(3), 100166. ISSN 2950-2470.
78. Olaogun JG, Agodirin OS. Breast cancer screening: can the iBreastExam bridge the gap?. Lancet Glob Health. 2022;10(4):e461-e462. doi:10.1016/S2214-109X(22)00078-X
79. Olasehinde O, Alatise O, Arowolo O, et al. Safety and feasibility of early postmastectomy discharge and home drain care in a low resource setting. *J Surg Oncol*. 2018;118(6):861-866. doi:10.1002/jso.25215
80. Olasehinde O, Alatise O, Omisore A, et al. Contemporary management of breast cancer in Nigeria: Insights from an institutional database. *Int J Cancer*. 2021;148(12):2906-2914. doi:10.1002/ijc.33484

Appendix 3: Publications CONTINUED

81. Olasehinde O, Arije O, Wuraola FO, et al. Life without a breast: Exploring the experiences of young Nigerian women after mastectomy for breast cancer. *J Glob Oncol*. 2019;5:1-6.
82. Olasehinde O, Bernardo MD, Komolafe AO, et al. Immediate lymph node extraction improves retrieval rate following axillary lymph node dissection: an effective approach to improving guideline-concordant breast cancer care in Nigeria. Published online 2023.
83. Olasehinde O, Boutin-Foster C, Alatise OI, et al. Developing a breast cancer screening program in Nigeria: evaluating current practices, perceptions, and possible barriers. *J Glob Oncol*. 2017;3(5):490-496. doi:10.1200/JGO.2016.007641
84. Olasehinde O, Fagbayimu MO, Aderounmu A, et al. Translating Evidence into Practice: A Review of Clinical Practice and Outcomes following the Adoption of an Early Post-Mastectomy Discharge Protocol in a Nigerian Hospital. Breast Care (Basel). 2024;19(3):135-141. doi:10.1159/000536080
85. Olasehinde O, Lynch K, Goldman D, et al. Translation and psychometric assessment of the mastectomy module of the BREAST-Q questionnaire for use in Nigeria. J Patient Rep Outcomes. 2024;8(1):17. Published 2024 Feb 9. doi:10.1186/s41687-024-00692-1
86. Olasehinde O, Romanoff A. Translation and Linguistic Validation of the Mastectomy Module of the BREAST-Q Questionnaire for Use in Nigeria. *Cancer Epidemiol Biomarkers Prev*. 2023;32(6_Supplement):89-89.
87. Olasehinde, O., Wuraola, F., Di Bernardo, M., et al. (2025). Breast Cancer-Related Lymphedema: A Common Challenge among Nigerian Breast Cancer Survivors. *Breast Care (Basel)* . doi: 10.1159/000547583. Epub ahead of print. PMID: 41063768; PMCID: PMC12503884
88. Olasehinde O, Wuraola F, Kajetanowicz A, et al. Abstract P2-23-17: Programmed death ligand-1 expression in triple-negative breast cancer from Nigeria. *Cancer Res*. 2023;83(5_Supplement):P2-23-17-P2-23-17.
89. Olayide A, Isiaka A, Ganiyu R, et al. Breast Cancer Treatment and Outcomes in Nigeria: A Systematic Review and Meta-analysis. *Asian Pac J Cancer Care*. 2023;8(3):591-598.
90. Olubodun, T., Olaniran, A., Wuraola, F.O., et al. (2025). Practice of opportunistic breast cancer screening and health education among healthcare workers in public health facilities in Ogun state, Southwest Nigeria: a qualitative study of barriers and facilitators. *BMC Health Serv Res* , 25, 1197.
91. Omisore, A.D., et al. (2025). Establishing Interventional Radiology in a Low-Resource Setting: Lessons From Obafemi Awolowo University Teaching Hospitals Complex, Nigeria. *JCO Glob Oncol* , 11, e2400637. DOI:10.1200/GO-24-0063
92. Omisore, A.D., Egberongbe, A.A., Pace, L.E., et al. (2025). A Competency-Based Ultrasound-Guided Breast Biopsy Training Program for Radiologists From Low-and-Middle-Income Countries that Leverages Mobile Health Technology (NCT04501419): A Study Protocol. *Cancer Control* , 32. doi:10.1177/10732748251334435
93. Omisore AD, Olasehinde O, Wuraola FO, et al. Improving access to breast cancer screening and treatment in Nigeria: The triple mobile assessment and patient navigation model (NCT05321823): A study protocol. *Plos One*. 2023;18(6):e0284341. doi:10.1371/journal.pone.0284341
94. Omisore AD, Sutton EJ, Akinola RA, et al. Population-Level Access to Breast Cancer Early Detection and Diagnosis in Nigeria. *JCO Glob Oncol*. 2023;9:e2300093. doi:10.1200/GO.23.00093
95. Omoyiola, O., Alatise, O., Bolarinwa, R., et al. (2025). Prognostic biomarkers for colorectal cancer in a Nigerian population. *Journal of Clinical Oncology* , 43. DOI:10.1200/JCO.2025.43.16_suppl.e15575
96. Omoyiola, O.A., et al. (2025). Prognostic biomarkers for colorectal cancer in a Nigerian population. *J Clin Oncol* , 43, e15575-e15575. DOI:10.1200/JCO.2025.43.16_suppl.e15575
97. Owoade I, Wuraola F, Olasehinde O, et al. Unveiling research training gaps in oncology: Evaluating a research capacity-building effort among Nigerian physicians. *Niger J Clin Pract*. 2022;25(7):1038-1045.
98. Oyewole, A.I., Diaz, K., Guiterrez, G., et al. (2025). Barriers and Facilitators of Adoption and Implementation of a Financial Navigation Program: COST-FIN Trial [abstract]. In: Proceedings of the 13th Annual Symposium on Global Cancer Research. *Cancer Epidemiol Biomarkers Prev* , 34(12_Suppl), Abstract nr 36
99. Pramesh C, Badwe RA, Bhoo-Pathy N, et al. Priorities for cancer research in low- and middle-income countries: a global perspective. *Nat Med*. 2022;28(4):649-657. doi:10.1038/s41591-022-01738-x

Appendix 3: Publications CONTINUED

100. Romanoff A, Olasehinde O, Lynch K, et al. (2024). National Healthcare Provider Assessment of Guideline Adherence and Multi-disciplinary Breast Cancer Care in Nigeria: A Call for Action. JCO Global Oncology. 10. 130-131. 10.1200/GO-24-10600.

101. Romanoff, A., Olasehinde, O., Lynch, K., et al. (2025). Health Care Professional Adherence to Breast Cancer Management Guidelines in Nigeria. *JAMA Netw Open* , 8(2), e2459614. doi:10.1001/jamanetworkopen.2024.59614

102. Romanoff A, Olasehinde O, Okereke C, et al. (2024). Achieving World Health Organization Global Breast Cancer Initiative targets: A situational analysis and action plan in Nigeria. Journal of Clinical Oncology. 42. e13782-e13782. 10.1200/JCO.2024.42.16_suppl.e13782.

103. Romanoff A, Olasehinde O, Okereke C, et al. (2024). Patient-Reported Outcomes Improve Following Mastectomy for Early-Stage Breast Cancer in Nigeria: Pilot Experience Using a Translated and Validated BREAST-Q. JCO Global Oncology. 10. 141-142. 10.1200/GO-24-11400.

104. Rosa WE, Ahmed E, Chaila MJ, et al. Can you hear us now? Equity in global advocacy for palliative care. *J Pain Symptom Manage*. 2022;64(4):e217-e226.

105. Rosa, W.E., Knaul, F.M., Touchton, M., et al. (2025). Towards opioid access without excess. *Lancet Public Health* . Published online February 26, 2025. doi:10.1016/S2468-2667(25)00035-0

106. Rosa WE, Lumati JS, Alatise OI, et al. Surgery: a crucial ally for universal palliative care access. *Lancet Glob Health*. 2023;11(5):e650-e652. doi:10.1016/S2214-109X(23)00066-9

107. Saluja S, Alatise OI, Adewale A, et al. A comparison of colorectal cancer in Nigerian and North American patients: is the cancer biology different? *Surgery*. 2014;156(2):305-310.

108. Samson ML, Peeri NC, Alatise OI, et al. Validating a semi-quantitative food frequency questionnaire to assess regional diet in a study of cancer in South West Nigeria. *Cancer Causes Control*. 2023;34(6):495-503. doi:10.1007/s10552-023-01684-0

109. Sharma A, Alatise OI, O'Connell K, et al. Healthcare utilisation, cancer screening and potential barriers to accessing cancer care in rural South West Nigeria: a cross-sectional study. *BMJ Open*. 2021;11(7):e040352. doi:10.1136/bmjopen-2020-040352

110. Smiley KE, Wuraola F, Mojibola BO, Aderounmu A, Price RR, Adisa AO. An Outcomes-Focused Analysis of Laparoscopic and Open Surgery in a Nigerian Hospital. *JSLS J Soc Laparosc Robot Surg*. 2023;27(1). doi:10.4293/JSLS.2022.00081

111. Suleiman TA, Tolulope AM, Wuraola FO, et al. Overview of Cancer Management—The Role of Medical Imaging and Machine Learning Techniques in Early Detection of Cancer: Prospects, Challenges, and Future Directions. *Open Access Libr J*. 2023;10(4):1-21.

112. Sullivan R, Alatise OI, Anderson BO, et al. Global cancer surgery: delivering safe, affordable, and timely cancer surgery. *Lancet Oncol*. 2015;16(11):1193-1224. doi:10.1016/S1470-2045(15)00223-5

113. Tawfiles, D., Bounedjar, A., Alatise, O.I., et al. (2025). African self-sufficiency in cancer control. *The Lancet Oncology* , 26(7), 1

114. Tawfiles, D., Tawfiles, M., Feliciano, E.J.G., et al. (2025). Global burden of early-onset colorectal cancer. *Surgery* , 186, 109575. ISSN 0039-6060.

115. Uwechue, F.I., Uduigwome, E.O., Zaza, N.N., et al. (2025). Introducing a Novel Financial Navigation Program for Cancer Patients in Nigeria: A Pilot Survey of Stakeholders [abstract]. In: Proceedings of the 13th Annual Symposium on Global Cancer Research. *Cancer Epidemiol Biomarkers Prev* , 34(12_Suppl), Abstract nr 34

116. Winn A, Afolabi EK, Bifarin M, et al. Knowledge, Attitudes, and Practice of Chemotherapy Management Among Nurses at Obafemi Awolowo University Teaching Hospital, Ile-Ife, Nigeria. *Asia-Pac J Oncol Nurs*. Published online 2023:100371.

117. Wuraola, F.O., Adisa, A.O., Olasehinde, O., et al. (2025). Evaluating the Accuracy of Appendicitis Inflammatory Response and Alvarado Scoring Systems in Predicting Acute Appendicitis. *Journal of The West African College of Surgeons* . doi: 10.4103/jwas.jwas_19_25

118. Wuraola, F., Aderounmu, A., Jackman, J., et al. (2025). "Life without an Anus": Experience of Cancer Patients Living with Colostomy in South West Nigeria. *West African Journal of Medicine* , 42, 364-371

119. Wuraola, F.O., Dare, A., Ramruthan, J., et al. (2025). Knowledge and perceptions of genetic testing for patients with breast cancer in Nigeria: a survey of healthcare providers. *Hered Cancer Clin Pract* , 23, 16.

120. Wuraola F, Blackman C, Owoade IA, et al. Abstract P4-07-46: The Out-of-Pocket Cost of Breast Cancer Care in Nigeria: A Prospective Analysis. *Cancer Res*. 2023;83(5_Supplement):P4-07-46-P4-07-46.

Appendix 3: Publications CONTINUED

121. Wuraola F, Olasehinde O, Alatise O, Adisa A, Arowolo O. Delayed Presentation for Oncological Care among Patients with Hepato-pancreato-Biliary Cancers in Ile-Ife, Nigeria. *HPB*. 2021;23:S397.

122. Wuraola FO, Olasehinde O, Di Bernardo M, et al. Breast cancer in elderly patients: a clinicopathological review of a Nigerian database. e*cancermedicalscience*. 2022;16:1484. doi:10.3332/ecancer.2022.1484

123. Wuraola FO, Olasehinde O, Di Bernardo M, et al. Clinicopathologic Profile and Psychosocial Experiences of Nigerian Breast Cancer Survivors. *JCO Glob Oncol*. 2023;9:e2300022. doi:10.1200/GO.23.00022

124. Wuraola F, Olasehinde O, Di Bernardo M, et al. Prevalence and determinants of lymphedema in newly diagnosed Nigerian breast cancer patients using bioimpedance estimations. e*cancermedicalscience*. 2023;17:1506. doi:10.3332/ecancer.2023.1506

125. Yang JD, Gyedu A, Afihene MY, et al. Hepatocellular carcinoma occurs at an earlier age in Africans, particularly in association with chronic hepatitis B. *Off J Am Coll Gastroenterol ACG*. 2015;110(11):1629-1631.

126. Yibrehu, B., Mohammed, T.O., Murthy, S., et al. (2025). Gastric Cancer at a Nigerian Tertiary Referral Center: Experiences With Establishing an Institutional Cancer Registry. *J Surg Oncol* , 131(4), 630-636. doi: 10.1002/jso.27993. PMID: 39558548; PMCID: PMC12629506

127. Zhang L, Zheng J, Ismond KP, et al. Identification of urinary biomarkers of colorectal cancer: Towards the development of a colorectal screening test in limited resource settings. *Cancer Biomark*. 2023;36(Preprint):1-14. doi:10.3233/CBM-220034

128. Zivanov, C.N., Owoade, I.A., Mann, E.J., et al. (2025). Understanding colorectal cancer-related stigma and its impact on cancer survivors in South-West Nigeria: a qualitative study of patients, caregivers, and healthcare professionals. *J Cancer Surviv* . doi:10.1007/s11764-025-01953-8

129. Zivanov, C.N., Owoade, I.A., Mann, E.J., et al. (2025). Understanding Colorectal Cancer–Related Stigma in Nigeria: A Qualitative Analysis [abstract]. In: Proceedings of the 13th Annual Symposium on Global Cancer Research. *Cancer Epidemiol Biomarkers Prev* , 34(12_Suppl), Abstract nr 6

Appendix 4: Individual Supporters to GCRT

GCRT is grateful to all who have supported our mission to improve cancer care and treatment in LMIC. The support of individual donors allows us to continue to investigate prevention and early detection strategies, increase access to cancer care, and improve cancer care training in underserved communities.

GCRT and ARGO would like to express immense gratitude to the following individuals:

Juliana Achury
Joshua Adelman
Elizabeth Bezares
Jeffrey Bigelow
Meredith Brehm
Yasmin Clark
Jo Ann Donnelly
Patrick Donnelly
Lauren Friedlander
Yiming Gao
Adam Green
Samantha Heller
Tammy Huang
Angela Jin
Stephanie Jose
Tara Kando
Sarah and Dan Leonard
Katie Llewellyn
Joann and Dan Mango
Jessica May
Natasha Monga
Allyson Parnes
Ronnie Phillips
Christina Pili
Jeff and Laurie Rubin
Julie Rubin
Amy Sabach
Christie Stage
Serena Young

Future Focus

Thank you to all our GCRT and ARGO team members, partners, donors, and staff for the incredible collaborative effort that makes all of this work possible. We look forward to building on these research and training efforts in the years to come. Together we can make a tremendous impact to decrease cancer disparities in low-resource areas around the globe.

The MSK GCRT Team

Leadership

Sir Murray Brennan, MD
Chairman Emeritus, Department of Surgery, Benno C. Schmidt Chair of Clinical Oncology

T. Peter Kingham, MD
Director, GCRT

Victoria Mango, MD
Assistant Director, GCRT

Vicky Baudin, MPH
Program Manager, GCRT

Cristina Olcese
Clinical Research Manager, GCRT

Faculty Members (MSK-affiliated unless noted)

Miseker Abate, MD
Sloan Kettering Institute

Nadeem Abu-Rustum, MD
Surgery

Ahmed Al-Niaimi, MD
Surgery

Thomas Atkinson, PhD
Psychiatry

Adebola Adedimeji, PhD
Epidemiology & Population Health,
Wake Forest University

Fiyinfolu Balogun, MD, PhD
Medicine

Onyinye D. Balogun, MD
Radiation Oncology,
Northwell Health

Smita Banerjee, PhD
Psychiatry

Margaret Barton-Burke, PhD
Nursing Research

Victoria Blinder, MD
Medical Oncology

Yolanda Bryce, MD
Radiology

Brian Del Corral, PhD
Pharmacy

Michelle Coriddi, MD
Plastics & Reconstructive Surgery

Rosario Costas-Muniz, PhD
Psychiatry & Behavioral Sciences

Kristina Diaz, MSN, RN, CNL
Northwestern Medicine

Margaret Du, PhD
Epidemiology & Biostatistics

Marcia Edelweiss, MD
Pathology

Jaime Gilliland, MA
Qualitative Methods Specialist
Sloan Kettering Institute

Maria El Homsi, MD
Radiology

Mithat Gonen, PhD
Epidemiology & Biostatistics

Dean Hosgood, PhD
Epidemiology & Population Health
Albert Einstein College of Medicine

Tammy Huang, MD
Radiology

Alexia Iasonos, PhD
Epidemiology and Biostatistics

Neil Iyengar, MD
Medicine
Winship Cancer Institute at Emory University

Hannah Kalvin, MSPH
Epidemiology & Biostatistics

Greg Knapp, MD
Surgery
Dalhousie University, Nova Scotia

Lauren Koranteng, Pharm D
Pharmacy

Priya Kumar, MD
Pathology

Andrew Kung, MD, PhD
Pediatrics

Kara Long-Roche, MD
Surgery

Kathleen Lynch, MS, MPH
Sloan Kettering Institute

Juliet Lumati, MD
Northwestern Medicine

Shilpa Murthy, MD
Yale University

Lisa Newman, MD
Surgery
Weill Cornell Medicine

Dianna Ng, MD
Pathology

Peter Ntiamoah, PhD
Pathology

Chamberlain Nwanne, PhD
Clinical Informatics Specialist

Jamie Ostroff, PhD
Psychiatry

Noah Peeri, PhD, MPH
Epidemiology & Biostatistics

Diane Reidy-Lagunes, MD
Medicine
Duke

Ying Liu, MD
Medicine

Jeffrey Reiner, MD
Radiology

Elizabeth Robilotti, MD
Medicine

Anya Romanoff, MD
Global Health and Health Systems Design, Mount Sinai

William Rosa, PhD
Psychiatry & Behavioral Sciences

J. Joshua Smith, MD
Surgery
MD Anderson

Elizabeth Sutton, MD
Radiology

Srinivasa (Varadan) Sevilimedu, MBBS, DrPH
Epidemiology & Biostatistics

Laura Tang, MD
Pathology

Jimmiti Teysir, MD
Medicine

Cynthia Thornton, RT (R)(M)
Radiology

Tanya Trippett, MD
Pediatrics

Martin Weiser, MD
Surgery

Amy Winn, RN
Nursing

Ann Zauber, PhD
Epidemiology & Biostatistics

The MSK GCRT Team CONTINUED

Fellows & Residents

Adeleye Adeomi, MD
Post-Doctoral Fellow

Nynoshka Bassatt Cabrera,MD
Nuerology

Anna Dare, MD
Surgeon and Global Cancer Disparities Fellow

E. Christopher (Chris) Dee, MD
Radiation Oncology

Matteo Di Bernardo
Fulbright Fellow

Alex Doyle, MD
Surgeon and Global Cancer Disparities Fellow

Adenike Faremi, PhD
Post-Doctoral Fellow

Sharif Folorunso, MD
Medical Oncology Fellow

Gira Graciano Mireles, MD
Neurology

Ruthmarie Hernandez, PhD
Psychiatry & Behavioral Sciences

Julia Jackman, MPH
Global Research Associate

Vanessa Josef, MD
Interventional Pulmonology

Gregory Knapp, MD
Surgeon and Global Cancer Disparities Fellow

Sudharsan Madhavan, PhD
Medical Physics

Layal Al Mahmasani, MD
Medical Oncology

Erica Mann
GCRT Global Oncology Fellow

Sara Moufarrij, MD
Surgery

Shilpa Murthy, MD
Surgeon and Global Cancer Disparities Fellow

Jesus Antonio Ocejo Gallegos, MD
Medicine

Joy Ogunmuyiwa, MD, MPH
Stern Fellow in Global Oncology Research

Oludolapo Omoyiola, MD
Medical Oncology Fellow

Fatemah Parvin-Nejad, MD
Surgery
Atrium Health

Ya Haddy Sallah, MD
Medical Oncology

Molly Samson
Fulbright Fellow

Avinash Sharma, MD
Surgeon and Global Cancer Disparities Fellow

Anna Shvygin, MD
Surgery

Gabriela Sotolongo, MD
Surgery

Colleen Witty, MD, MPH
Surgery

Mfuh Anita Yafeh, PhD
Post-Doctoral Fellow

Betel Yibrehu, MD
Stern Fellow in Global Oncology Research

Catherine Zivanov, MD
Stern Fellow in Global Oncology Research

Esther Zusstone, MD
Radiology

Research and Administration

Rivka Kahn, MPH
Research Project Manager

Naqiya Choonawala, MPH
Research Project Associate

Seyram Doe Tetteh
Clinical Research Coordinator

Ryan Fodero
Clinical Research Coordinator

Tanya Dragic, PhD
Senior Editor/Grant Writer

Krystal Hasan
Administration

Penny Tsougas
Program Manager, Global Cancer Disparities Initiatives, Pediatrics

Memorial Sloan Kettering
Cancer Center

ARGO

African Research Group for Oncology