Unraveling the Mysteries of Cancer Bit by Bit

CARLA KURKJIAN, MD



"Optimism" isn't generally a word associated with oncology, but it's one of the reasons that Carla Kurkjian became an oncologist.

"There's a lot going on in oncology that's very exciting," she says, "and there's more reason for optimism now than there's ever been."

She became interested in oncology research during her fellowship training at the University of Oklahoma. It led her to pursue a drug development fellowship at the National Cancer Institute within the National Institutes of Health and then to Mercy Research five years ago, right at the organization's inception.

"I wanted to be in on it from the beginning," she says. Mercy's digital network is a large part of what makes her work in Oklahoma City possible. "We see 10,000 cancer diagnoses a year across Mercy," Dr. Kurkjian says. "And 85% of patients receive treatment within the communities where they live. It's that level of digital connectedness that allows Mercy to be one big 'site' and lets us bring the most advanced treatments to patients in areas far from major research hubs."

Perhaps it's this multidisciplinary background that interested her in working with industry partners to bring novel agents and combination therapies to patients in a community setting.

"Immunotherapy as cancer therapy is arguably one of the greatest advances in medical care," she says. It doesn't yet work for everyone, but Dr. Kurkjian believes new research brings the possibility that therapies to harness the body's own immune system can become more widely successful.

She concentrates on cancers of the gastrointestinal (GI) tract, a group of cancers that are particularly impacted by the Kirsten RAt Sarcoma (KRAS) mutation. This mutation changes the protein generation of normal cells, causing cancers to grow. Developing drugs to target KRAS has been elusive. Now with novel drugs targeting this pathway, Dr. Kurkjian is excited that Mercy will have a clinical trial utilizing a novel KRAS inhibitor in colorectal cancer patients who have chemotherapy refractory disease.

This approach may also have less toxicity than traditional intravenous chemotherapy, which appeals to Dr. Kurkjian as well.

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She was drawn to oncology by the patient population and to the enduring relationships that form between patients and their doctors. She was also attracted by the complexity of the challenge. A problem-solver by nature, she got an MBA in order to better understand the issues and logistics of care delivery. Her business school experience gave her not only a more holistic picture of health care, but also experience in organizational behavior.

"It's not just about improving outcomes in the treatment of cancer," she says. "The effects of the therapy on the patient should always be factored in. That should be our goal: not just achieving control of the cancer, but helping patients live life how they intend to live it and preserving the dignity of the patient."

This is an area where her personal values dovetail with those of Mercy Research. "The values of dignity, justice and a bias for action—these are all what any practicing oncologist should have," she says.