

Proponent Testimony – House Bill 608

Good Morning Chairman Lipps and members of the Health Committee. My name is Dr. Alique Topalian. I am a Research Scientist in Cancer Survivorship and Supportive Services. I am involved in several nonprofits nationally, throughout Ohio, and here locally in Cincinnati. I am a daughter, fiancée, sibling to 5 and aunt to 11.

I am also a two-time Acute Myeloid Leukemia (AML) survivor.

At the age of four in 1998 I was diagnosed with AML for the first time. Back in the 90s this was a very hard disease to treat in children and I was given a 13% chance of survival without a bone marrow transplant and 20% with a transplant. At this time, I was part of one of the first ever childhood biomarker studies. This study helped scientists pave the way for where we are currently with biomarker testing. I was lucky and went into remission with experimental chemotherapy.

Going through this at such a young age I knew I wanted to devote my life and career to the healthcare field. Helping my family found the Armenian Bone Marrow Donor Registry and becoming involved in cancer advocacy and volunteer work at the age of 7. I then went on to get my BA in psychology, followed by my Master of Public Health and my PhD in Health Promotion and education in 2020.

Less than a year after completing my PhD, my AML relapsed, the first ever person to relapse with AML after 22 years. The day I was diagnosed we conducted biomarker testing on my cancer to help us understand what the best treatment would be. In AML biomarker testing is imperative from the day of diagnosis. This testing is what determines all treatments that the patient will have moving forward. Many times, patients won't even start active cancer treatment until the results of these biomarker tests come back.

For AML there are many different biomarkers one's cancer can take. Luckily, we learned mine was favorable this time. We were even able to compare my biomarkers on this cancer to the cancer I had when I was four. A true testament to how far science has come.

Luckily, we learned that because of my biomarkers, a bone marrow transplant was not necessary. I did not have a good enough match for a transplant to be considered safe. This is a blessing because of all the complications that come along with a bone marrow transplant and how risky the procedure is.

I also was given a targeted therapy. This therapy targeted the specific biomarkers of my cancer and would attach to those cells and kill them throughout my body. This is thought of to be the next breakthrough in cancer care. This type of targeted therapy can save countless lives.

This therapy saved my life. Biomarker testing saved us from having to do an expensive, risky, and complicated bone marrow transplant. Because of not having a proper match I was only given 20% chance of 5-year survival with a transplant but 70-80% chance of survival with chemotherapy and targeted therapy combined. However, this testing was still initially denied by my insurance.

Biomarker testing and targeted therapies are the future of cancer care. They can save Ohioans from even more costly long-term therapies that can be risky to the health of the individual and more expensive in the long term.

I am here, working, advocating, and helping others because I was able to survive with targeted therapy. Every Ohioan should have access to this life saving resource if they need it.

Thank you Chairman Lipps and members of the Health Committee for considering this important legislation. I urge you to pass House Bill 608.

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