

**AstraZeneca –Call for Grant Application - CGA- Immuno-Oncology-HCC
(Hepatocellular Carcinoma) - 2026 ESMO-GI - 03/2026**

Submission / Review Timeline	Accepting applications until 9 AM EST on May 1 st 2026. Internal review will be ongoing during this time-period.
Primary Area of Focus	Oncology – Hepatobiliary Cancers
Therapeutic Area	Hepatocellular Carcinoma (HCC)
Focus	Conference coverage of 2026 ESMO-GI. US-based clinicians who could not attend the main ESMO-GI congress still need practical, evidence-based updates on the latest HCC research findings presented at the congress, and be able to apply such new developments in their practice.
Educational Format	<p>Certified impactful Education credit for the target audience.</p> <p>Educational formats (including enduring components) that will be considered include but are not limited to:</p> <ul style="list-style-type: none"> • Live, Virtual Live with Audio and/or Video • Visual and kinesthetic learning styles such as: <ul style="list-style-type: none"> • Interactive videos or infographics • Micro-learning or tiered/multi-activity • Adaptive learning • Social media, tweetorials • Podcasts • Panel discussions • Simulations • Patient case studies • Live webinar video broadcast • General interactive/digital or video-based/online learning <p><u>In addition to your proposal, please provide 1 or 2 slide(s) summarizing your proposed program</u></p>
Educational Audience	US-based medical oncologists, gastrointestinal oncologists, APPs, nurses, and other HCPs who treat patients with GI cancers.
Expected Program Start Date	July 2026
Total Program Budget (multi-support acceptable)	≤ \$150,000 to \$200,000
CGA Reference/Request Code	PLEASE REFERENCE THE FOLLOWING REQUEST CODE IN THE CYBERGRANTS APPLICATION CGA- Immuno-Oncology-HCC (Hepatocellular Carcinoma) 2026 ESMO-GI - 03/2026 Grant Title should also begin with the Request Code:

	CGA- Immuno-Oncology-HCC (Hepatocellular Carcinoma) 2026 ESMO-GI - 03/2026
Final Grant Decision	Grants will be reviewed and approved on a rolling basis
Submission Information & Website URL	MEGO website: www.astrazenecagrants.com Grant Application: https://www.cybergrants.com/astrazeneca/full Augusta Hughes, MBA, Associate Director, Medical Education and Grants Office, Augusta.Hughes1@astrazeneca.com

The Request:

We welcome submissions for independent medical education grants (IME/CME) from educational providers who believe they can meet the high demands of a time-sensitive rapid grant submission and deployment of virtual medical education. Submitted applications should include a formal letter of request and grant proposal with needs assessment, learning objectives, agenda, and budget schedule.

AstraZeneca, Medical Education Grants Office (MEGO)

AstraZeneca is committed to supporting quality independent medical education that meets an educational need by providing information to healthcare professionals to improve patient care and outcomes. We support education that furthers the understanding of emerging therapies based on a documented unmet need and supports the efforts of health care professionals to broaden patient knowledge and awareness of disease states and treatment options. Our grant support is focused on areas of high unmet need that overlap with our medical areas of interest. For more information, please visit www.astrazenecagrants.com

Background/Need

Treatment strategies for patients with hepatobiliary cancers - HCC and BTC have advanced substantially, with the introduction of new first-line immune therapies that offer the potential to enhance patient outcomes.

However, management of patients with HCC is becoming more complex due to recent treatment advancements for HCC and the rapid evolution of immune-based therapies. An expanding body of new and emerging clinical research studies and the advent of novel therapeutic strategies such as optimized delivery models have also added to the increased complexity within this landscape.

Even though immunotherapy has reshaped outcomes in select HCC patient populations, optimal clinical decision-making remains difficult because of clinicians' limited knowledge of clinical data and clarity on the implications of these data.

These, coupled with the complex heterogeneous disease biology, baseline liver dysfunction that affects eligibility, dosing, safety/efficacy, and immunologic resistance that limits response durability further complicate effective patient management and pose challenge for sound clinical decision-making.

To optimize outcomes for patients with HCC, healthcare professionals require up-to-date education on clinically relevant research findings, emerging efficacy and safety data, and the real-world applicability of new and emerging data sets across the HCC treatment continuum. Integrating these insights into real-world clinical practice is

essential to help inform patient selection, sequencing, and the efficient management and delivery of care in patients with HCC.

These factors underscore the need to educate HCPs on the pertinence of new data sets, so they can be able to apply recent data evidence to help inform optimal care in patients with HCC.

Thus, timely dissemination of newly presented data and clinical findings from international congresses to U.S. clinicians is essential. Such structured education that summarizes and contextualizes ex-U.S. congress outputs for our US audience will enhance awareness and understanding of new science and key data emerging from ex-US congresses, facilitating evidence-based adoption of by U.S audience where appropriate and improve consistency of care across practice settings.

References:

Kelley RK, Rimassa L, Cheng A-L. Cabozantinib plus atezolizumab versus sorafenib for advanced hepatocellular carcinoma (COSMIC-312): a multicentre, open-label, randomised, phase 3 trial. *Lancet Oncol.* 2022;23:995-1008.

Foerster F, Gairing SJ, Ilyas SI, Galle PR. Emerging immunotherapy for HCC: A guide for hepatologists. *Hepatology.* 2022 Jun;75(6):1604-1626



Wong RJ, Jones PD, Niu B, et al. Clinician-Level Knowledge and Barriers to Hepatocellular Carcinoma Surveillance. *JAMA Netw Open.* 2024;7(5): e2411076. Published 2024 May 1. doi:10.1001/jamanetworkopen.2024.11076

Program Requirements:

The Program must be accredited and fully compliant with the criteria and/or standards of commercial support for ACCME, AAFP, AOA, ACPE, ANCC, AANP, NCCPA, C A P, A M P, U S C A P. Furthermore, the program will be educational and non-promotional in nature and will be planned, designed and implemented in accordance with the U.S. Food and Drug Administration's Guidance on Industry- Supported Scientific and Educational Activities ("Policy Statement").

The Policy Statement and the ACCME Standards require, among other things, that (i) Institute conduct the Program independently and without control or influence by AstraZeneca over the Program's planning, content (including the selection of speakers or moderators), or execution; (ii) the Program be free of commercial bias for or against any product; (iii) Institution make meaningful disclosure of AstraZeneca support of the Program and any prior relationship between Institution and AstraZeneca, and the relationship, if any, between AstraZeneca and the speakers selected by Institution; and (iv) AstraZeneca not engage in, and Institution not permit any other sponsor to engage in, promotional activities in or near the Program room or advertise its products in any materials disseminated as part of the Program.

In addition, Institution is required by the Policy Statement and the ACCME Standards to ensure that any product discussions at the Program be accurate, objective, balanced and scientifically rigorous. This includes a balanced discussion of each product and of treatment alternatives, that limitations on data be disclosed, that unapproved uses be identified as such, and that for live presentations there be opportunities for questioning or debate.

ONCOLOGY - LIVER CANCER / BILIARY TRACT CANCER		
HER2 Expression – Biliary Tract Cancer (BTC)	✓	
Immuno-Oncology - Biliary Tract Cancer (BTC)	✓	
Immuno-Oncology – <u>eHCC</u> (early Hepatocellular Carcinoma)	✓	
Immuno-Oncology - HCC (Hepatocellular Carcinoma)	✓	 CGA - Oncology - Hepatobiliary Cance
Immuno-Oncology - <u>iHCC</u> (intermediate stage Hepatocellular Carcinoma)	✓	
Immuno-Oncology - <u>uHCC</u> (unresectable Hepatocellular Carcinoma)	✓	 CGA - Oncology - Hepatobiliary Cance