Contact Information

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Project Requirements and Description

Requirements to submit AOI (all answers must be "yes" to proceed)

A comprehensive review of previously published data has been completed	Yes
The specific aims are clear and focused	Yes
The investigator has appropriate experience and expertise to develop the concept proposal; if not, has identified a mentor or senior co-investigator.	Yes
The investigator agrees to develop an initial draft of the concept proposal within 6 weeks of approval of the AOI and to finalize the concept proposal within 6 months	Yes

Project Title

Comparison of excess risk of late mortality and subsequent malignant neoplasms after Hodgkin lymphoma: a Childhood Cancer Survivor Study and Dutch Hodgkin lymphoma Survivor Study collaboration

Planned research population (eligibility criteria)

- Survivors eligible for CCSS diagnosed with Hodgkin lymphoma at ages 15-<21 years between 1970-1999.
- Participants from the Dutch Hodgkin lymphoma Survivor Study diagnosed at ages 15-<21 years between 1970-1999.

Proposed specific aims

I. Aim 1.1: To compare the absolute excess risk (AER) and standardized mortality ratios (SMRs) for all-cause and cause-specific late-mortality among adult survivors of Hodgkin lymphoma diagnosed ages 15-<21 years in the CCSS and Dutch cohorts.

Hypothesis 1.1: Survivors from North America will experience a higher risk of death from late effects when compared to the risk of the Dutch cohort survivors.

Aim 1.2: To identify treatment and lifestyle-related factors associated with the observed differences in late mortality between the CCSS and Dutch cohorts.

Hypothesis 1.2: We hypothesize that survivors from both cohorts may have received similar treatment exposures. However, survivors treated in North America will have a greater burden of modifiable lifestyle risk factors compared with the Dutch cohort, contributing to the increased risk of death from late effects.

II. Aim 2.1: To compare the AER and standardized incidence ratios (SIRs) of subsequent malignant neoplasms (SMNs; overall and type-specific) among survivors of Hodgkin lymphoma diagnosed between the age of 15-<21 years in the CCSS and the Dutch cohorts.

Hypothesis 2.1: Survivors from North America will have an increased risk of developing SMNs when compared to the risk of the Dutch cohort survivors.

Aim 2.2: To identify treatment, lifestyle-related factors, and for breast cancer, differential use of hormone replacement therapy, associated with the observed differences in risk of developing SMNs between the CCSS and Dutch cohorts.

Hypothesis 2.2: We hypothesize that survivors from both cohorts may have received similar treatment exposures. However, survivors treated in North America will have a greater burden of modifiable lifestyle risk factors compared with the Dutch cohort, contributing to the increased risk of developing SMNs.

Exploratory aim 1.1: Acknowledging the lack of a population-based registry for myocardial infarction (MI) in the US, we aim to compare the cumulative incidence and rate of MI among survivors of Hodgkin lymphoma diagnosed between the age of 15-<21 years in the CCSS and the Dutch cohorts.

Hypothesis: Survivors from North America will have an increased risk of MI when compared to the risk of the Dutch cohort survivors. -

Exploratory aim 1.1: To identify treatment and lifestyle-related factors associated with the observed differences in risk of developing an MI between the CCSS and Dutch cohorts.

Hypothesis: We hypothesize that although survivors from both cohorts may have received similar treatment exposures. However, survivors treated in North America will have a greater burden of modifiable lifestyle risk factors compared with the Dutch cohort, contributing to the increased risk of developing an MI.

Will the project require non-CCSS funding to complete? No

If yes, what would be the anticipated source(s) and timeline(s) for securing funding?

Does this project require contact of CCSS study subjects for:

Additional self-reported information	No
Biological samples	No
Medical record data	No

If yes to any of the above, please briefly describe.

What CCSS Working Group(s) would likely be involved? (Select all that apply)

Second Malignancy	Secondary
Chronic Disease	Secondary
Psychology/Neuropsychology	
Genetics	
Cancer Control	
Epidemiology/Biostatistics	Primary

Outcomes or Correlative Factors

Late Mortality	Primary
Second Malignancy	Secondary

Health Behaviors

Tobacco	Correlative Factors
Alcohol	Correlative Factors
Physical Activity	Correlative Factors
Medical Screening	
Other	

If other, please specify

Psychosocial

Insurance	Correlative Factors

Marriage	
Education	Correlative Factors
Employment	Correlative Factors
Other	

If other, please specify

Medical Conditions

Hearing/Vision/Speech	
Hormonal Systems	
Heart and Vascular	Secondary
Respiratory	
Digestive	
Surgical Procedures	
Brain and Nervous System	
Other	

If other, please specify

Medications

Describe medications

Psychologic/Quality of Life

BSI-18	
SF-36	
CCSS-NCQ	
PTS	
PTG	
Other	

If other, please specify

Other

Pregnancy and Offspring	
Family History	
Chronic Conditions (CTCAE v3)	Correlative Factors
Health Status	Correlative Factors

Demographic

Age	Correlative Factors
Race	Correlative Factors
Sex	Correlative Factors
Other	

If other, please specify

Cancer Treatment

Chemotherapy	Correlative Factors
Radiation Therapy	Correlative Factors
Surgery	Correlative Factors

Anticipated Sources of Statistical Support

CCSS Statistical Center	Yes
Local Institutional Statistician	No

If local, please provide the name(s) and contact information of the statistician(s) to be involved.

Will this project utilize CCSS biologic samples?

No

If yes, which of the following?

If other, please explain

Other General Comments

I plan to submit this proposal for the career development trainee award.

Agree

I agree to share this information with St. Jude

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