

Contact Information

Name	Perri Tutelman
Institution	University of Calgary
Address	2202 2 St SW Calgary, Alberta, T2S 3C3 Canada
Phone Number	403-698-8103
Alternate Phone Number	
Email Address	perri.tutelman@ucalgary.ca

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 Longitudinal Patterns and Predictors of Cancer Fears in Survivors of Childhood Cancer

Planned research population (eligibility criteria)

Survivors who participated in the Baseline survey (original and expansion) and applicable Follow-up surveys (Follow-up 2, Follow-up 5 and Follow-up 7).

Proposed specific aims

Aim 1: To establish distinct trajectories of cancer fears (fear of cancer recurrence and fear of future health) in survivors from Baseline to FU7.

Aim 2: To examine demographic and clinical (e.g., diagnosis, treatment history, pain, emotional distress, chronic health conditions) predictors of trajectories.

Aim 3: To compare rates of healthcare utilization between trajectory groups over time.

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

Outcomes or Correlative Factors

Late Mortality	
Second Malignancy	Correlative Factors

Health Behaviors

Tobacco	
Alcohol	
Physical Activity	
Medical Screening	Secondary

Other	
-------	--

If other, please specify

Psychosocial

Insurance	Correlative Factors
Marriage	Correlative Factors
Education	Correlative Factors
Employment	Correlative Factors
Other	

If other, please specify

Medical Conditions

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

If other, please specify

“Do you currently have pain as a result of your cancer, leukemia, tumor or similar illness or its treatment?”

Medications

Describe medications

Antidepressant medications, analgesic medications

Psychologic/Quality of Life

BSI-18	Correlative Factors
SF-36	
CCSS-NCQ	
PTS	
PTG	
Other	Primary

If other, please specify

“Please rate how concerned you are about the following issues: Your future health; Developing a cancer”

Other

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

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

This AOI is associated with an application to the CCSS Career Development Trainee Award. This AOI was developed with the support of my primary mentor, Dr. Fiona Schulte, who has extensive experience with the CCSS. Dr. Kevin Krull, Psychology Working Group Chair, is aware of the application and has provided approval to proceed with submission.

Agree

I agree to share this information with St. Jude

This Service is governed by and operated in accordance with US law. If you are located outside of the US, you use this Service voluntarily and at your own risk. If you choose to submit personal data like your name and email address, please note that your Information will be transferred to and processed in the United States. By checking this box while using this Service, you acknowledge that the data protection and other laws of other countries, such as the United States, may provide a less comprehensive or protective standard of protection than those in your country, and consent to your Information being collected, processed and transferred as set forth in the Privacy Policy and US law.