

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 Long-term outcomes in survivors of pediatric primary solid tumors of the vertebral column and spinal canal

Planned research population (eligibility criteria)

Survivors of solid tumors of the vertebral column (cervical, thoracic, and lumbar vertebral levels), spinal cord, and associated meninges diagnosed between 1970-1999 who underwent any form of local or systemic control including resection, locally-delivered radiotherapy, and/or chemotherapy. Survivors will be identified based on ICD diagnosis codes for tumors of cervical, thoracic, lumbar spine (ICD dx site C41.2 = vertebral column) or spinal cord (C72.0) and exclude tumors of the sacrum/pelvis (C41.4).

Proposed specific aims

Specific aim 1: Describe the late health-related quality of life (HRQoL), functional impairment, activity limitations, and psychosocial outcomes of these spine tumor survivors according to tumor and treatment characteristics stratified by local control modality while controlling for systemic (chemotherapy) exposures.

Specific aim 2: Describe late socioeconomic outcomes including education, marriage status, employment/income, and recent healthcare utilization among spine tumor survivors according to tumor characteristics and local control methods.

Specific aim 3: Describe the rate of late-occurring spine surgery as a group and partitioned by tumor characteristics and local control methods.

Specific aim 4: Determine overall late mortality and cause-specific late mortality (health-related and external cause), late (>5 years from diagnosis) recurrence, and secondary malignancy for spine tumor survivors according to tumor characteristics (tumor type and location) and local control methods (radiotherapy and surgical resection) controlling for systemic exposures.

Specific aim 5: Estimate the cumulative incidence of relevant CTCAE chronic health conditions and scoliosis among spine tumor survivors according to tumor and treatment characteristics and local control methods.

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

Outcomes or Correlative Factors

Late Mortality	Secondary
Second Malignancy	Secondary

Health Behaviors

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

If other, please specify

Psychosocial

Insurance	Secondary
Marriage	Secondary
Education	Primary
Employment	Primary
Other	

If other, please specify

Medical Conditions

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

If other, please specify

Medications

Describe medications

Psychologic/Quality of Life

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

If other, please specify

Other

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

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 has been discussed and reviewed by all members of the Surgical Working Group plus Dr. Eric Chow. Their input was incorporated into the AOI and their approval was obtained before AOI submission. Additional information related to an analysis plan is below:

Statistical methods

Aim 1: Outcomes will be assessed using CCSS validated surveys, the Short Form (SF)-36, and Brief Symptom Inventory (BSI)-18. Univariate analysis will be used to identify risk factors for SF-36 physical and mental component scores below the population norm. This includes local control modality, demographic variables, and other treatment variables. Similar analysis will identify risk factors for mental and emotional impairment utilizing the BSI threshold T score > 63 to indicate impairment. Multivariate analysis will then be used to describe these outcomes based on previously identified significant factors in univariate analysis while controlling for systemic exposures. Risk ratios will be reported where appropriate.

Other HRQoL and functional outcomes evaluated will include bowel and bladder incontinence, back pain, and neurological symptoms such as deficits of balance, weakness, paralysis, and sensation.

Aim 2: We will evaluate for differences between tumor and treatment groups for socioeconomic outcomes including educational attainment, marriage status, employment status, personal income with respect to poverty level, and health insurance status. Demographic and treatment variables will be controlled for in multivariate analysis. Odds ratios will be reported where appropriate using the CCSS sibling cohort as the reference.

Aim 3: We will tabulate the cumulative incidence and cumulative count of late-occurring spine surgery in all survivors of vertebral column and spinal cord tumors and evaluate for differences due to tumor type and location and local control treatment modalities.

Aim 4: We will tabulate time-dependent rates and cumulative incidence curves for overall survival, cancer-specific and cause-specific mortality, late (>5 years from diagnosis) recurrence, and secondary malignancy according to local control treatment method. Unadjusted risk-ratios for all-cause late mortality, cause-specific mortality, and recurrence will be calculated.

Aim 5: We will tabulate cumulative incidence of relevant CTCAE chronic health conditions, particularly cardiac, GI, MSK, nervous system, and renal/GU conditions.

Agree

I agree to share this information with St. Jude

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