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**Project Title** Creation of a risk score algorithm to predict individual risk of future serious cardiovascular disease

**Planned research population (eligibility criteria)** All CCSS participants potentially eligible for primary analysis. Individuals free of cardiovascular disease at baseline survey in secondary analyses.

**Proposed specific aims** 1. Create an easily applied algorithm based on available baseline cancer treatment and demographic factors to predict individual risk of future serious cardiovascular (CV) disease, both in terms of cardiac-related mortality, as well as selected self-reported cardiovascular disease outcomes. 2. Among individuals free of significant CV disease at the baseline survey, determine improvements in prediction after inclusion of available behavioral factors and underlying medical conditions known to increase subsequent CV disease risk. 3. Validate the prediction algorithm using updated data from the original CCSS cohort (follow-up 2007) and/or when data from the new expanded cohort are available. While components of risk scores will differ given the available CCSS data, this project proposes similar methodology as has been used to generate Framingham or other CV disease risk score models, e.g. using results of multivariate time-to-event analyses and receiver operating characteristic curves to determine the values of relevant coefficients and the most parsimonious model. Given the numbers of events and relative young age of the CCSS cohort, a model examining longer-term risk (e.g. 20-30 years) may be more appropriate and clinically relevant than the typical 10-year risk estimated by most current CV risk score algorithms. This proposal differs from existing CCSS CV outcome proposals in that it seeks to estimate individual-level as opposed to population-level risk, and to describe the cumulative effect of multiple potential cardiovascular risk factors as opposed to risk associated with single risk factors, adjusted for others.

**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?**

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Does this project require contact of CCSS study subjects for . . .

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**Additional self-reported information** No

**Biological Samples** No

**Medical record data** No

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

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

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**Second Malignancy**

Primary - No

Secondary - No

**Chronic Disease**

Primary - Yes

Secondary - No

**Reproductive**

Primary - No                      Secondary - No

**Neurologic**

Primary - No                      Secondary - No

**Psychology / Neuropsychology**

Primary - No                      Secondary - No

**Genetics**

Primary - No                      Secondary - No

**Cancer Control**

Primary - No                      Secondary - Yes

**Epidemiology / Biostatistics**

Primary - Yes                      Secondary - No

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To describe the anticipated scope of the study, please indicate the specific CCSS data to be included as outcome (primary or secondary) or correlative factors. (Check all that apply)

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**Late mortality**

Primary - Yes                      Secondary - No                      Correlative Factors - No

**Second Malignancy**

Primary - No                      Secondary - No                      Correlative Factors - No

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Health Behaviors

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**Tobacco**

Primary - No                      Secondary - No                      Correlative Factors - Yes

**Alcohol**

Primary - No                      Secondary - No                      Correlative Factors - No

**Physical activity**

Primary - No                      Secondary - No                      Correlative Factors - Yes

**Medical screening**

Primary - No                      Secondary - No                      Correlative Factors - Yes

**Other**

Primary - No                      Secondary - No                      Correlative Factors - No

**If other, please specify** Data on medical care and medical screening (ECHO/MUGA) may be examined as correlative factors

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Psychosocial

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**Insurance**

Primary - No                      Secondary - No                      Correlative Factors - No

**Marriage**

Primary - No                      Secondary - No                      Correlative Factors - No

**Education**

Primary - No

Secondary - No

Correlative Factors - No

**Employment**

Primary - No

Secondary - No

Correlative Factors - No

**Other**

Primary - No

Secondary - No

Correlative Factors - No

**If other, please specify**


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 Medical conditions
 

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**Hearing/Vision/Speech**

Primary - No

Secondary - No

Correlative Factors - No

**Hormonal systems**

Primary - No

Secondary - No

Correlative Factors - Yes

**Heart and vascular**

Primary - Yes

Secondary - No

Correlative Factors - No

**Respiratory**

Primary - No

Secondary - No

Correlative Factors - No

**Digestive**

Primary - No

Secondary - No

Correlative Factors - No

**Surgical procedures**

Primary - No

Secondary - Yes

Correlative Factors - No

**Brain and nervous system**

Primary - No

Secondary - No

Correlative Factors - No

**Other**

Primary - No

Secondary - No

Correlative Factors - No

**If other, please specify** Cardiac related surgical procedures may be examined, realizing their limitations

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 Medications
 

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**Describe medications** Any used for cardiovascular disease (as identified in recently submitted metabolic syndrome/CV risk factor cluster study)

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**Pregnancy and offspring**

Primary - No

Secondary - No

Correlative Factors - No

**Family History**

Primary - No

Secondary - No

Correlative Factors - No

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 Psychologic/Quality of Life

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<b>BSI-18</b>			
Primary - No	Secondary - No	Correlative Factors - No	
<b>SF-36</b>			
Primary - No	Secondary - No	Correlative Factors - No	
<b>CCSS-NCQ</b>			
Primary - No	Secondary - No	Correlative Factors - No	
<b>PTS</b>			
Primary - No	Secondary - No	Correlative Factors - No	
<b>PTG</b>			
Primary - No	Secondary - No	Correlative Factors - No	
<b>Other</b>			
Primary - No	Secondary - No	Correlative Factors - No	

**If other, please specify**

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<b>Chronic conditions (CTCAE v3)</b>			
Primary - Yes	Secondary - No	Correlative Factors - No	
<b>Health status</b>			
Primary - No	Secondary - No	Correlative Factors - No	

Demographic

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<b>Age</b>			
Primary - No	Secondary - No	Correlative Factors - Yes	
<b>Race</b>			
Primary - No	Secondary - No	Correlative Factors - Yes	
<b>Sex</b>			
Primary - No	Secondary - No	Correlative Factors - Yes	
<b>Others</b>			
Primary - No	Secondary - No	Correlative Factors - No	

**If others, please specify**

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Cancer treatment

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**Chemotherapy**  
Correlative Factors - Yes

**Radiation therapy**  
Correlative Factors - Yes

**Surgery**  
Correlative Factors - Yes

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Anticipated sources of statistical support

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**CCSS Statistical Center** Yes

**Local institutional statistician**

**If local, please provide the name(s) and contact information of the statistician(s) to be involved.** E. Chow has familiarity with proposed methods. Dr. Yasui also to provide oversight.

**Will this project utilize CCSS biologic samples?** No

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If yes, which of the following?

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**Buccal cell DNA**

**Peripheral blood**

**Lymphoblastoid cell lines**

**Second malignancy pathology samples**

**Other requiring collection of samples**

**If other, please explain**

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**Other general comments** Other investigators w/ whom this proposal has been discussed and who would be interested include: Greg Armstrong, William Border (cardiologist at Emory), Lillian Meacham, and Dan Mulrooney.