

Received: 2.26.10
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Requirements to submit AOI:

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 finalizing the concept proposal within 6 months.: Yes

Project Title: Health and Functional Status of Long Term Adult Medulloblastoma Survivors: A Report from the Childhood Cancer Survivor Study
Planned research population (eligibility criteria): Medullo/PNET survivors
Proposed specific aims: - To summarize the late occurring chronic medical conditions and concerns of childhood medulloblastoma/PNET survivors and compare their experience with a sibling cohort. Specifically, we will focus on the following outcomes: neurological conditions, memory impairment, hearing/vision/speech, cardiac disease, respiratory conditions, perceived health status and health related anxiety, fertility and concerns about future health and fertility. Educational history, employment status, marital status and current living situation will also be reported to provide a description of the survivors' performance. - To assess the variables on the primary outcomes: o Medulloblastoma/PNET o Treatment type: Surgery alone, Surgery + Radiation, Surgery + Radiation + Chemotherapy o Cranial, Cranial + spinal, or spinal radiation alone o Radiation dosing will likely be a categorical variable, given the distribution (0, 0-50, > 50 Gy) o Consider location of maximum radiation dosing by segments: none, frontal cortex, temporal cortex, parietal/occipital cortex, posterior fossa, spine (only if distribution allows)
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? (Check all that apply)

Second Malignancy: Secondary

Chronic Disease: Primary

Reproductive: Secondary

Neurologic:

Psychology / Neuropsychology: Secondary

Genetics:

Cancer Control:

Epidemiology / Biostatistics: Secondary

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)

Late mortality:

Second Malignancy:

Health Behaviors

Tobacco:

Alcohol:

Physical activity:

Medical screening:

Other:

If other, please specify:

Psychosocial

Insurance: Secondary

Marriage: Secondary

Education: Secondary

Employment: Secondary

Other:

If other, please specify:

Medical conditions

Hearing/Vision/Speech: Primary

Hormonal systems: Secondary

Heart and vascular: Secondary
Respiratory: Secondary
Digestive:
Surgical procedures:
Brain and nervous system: Primary
Other:
If other, please specify:

Medications

Describe medications:

Pregnancy and offspring: Secondary
Family History:

Psychologic/Quality of Life

BSI-18:
SF-36:
CCSS-NCQ:
PTS:
PTG:
Other: Secondary
If other, please specify:

Chronic conditions (CTCAE v3):
Health status: Secondary

Demographic

Age: Secondary
Race: Correlative Factors
Sex: Correlative Factors
Others:
If others, 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:

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?

Buccal cell DNA:

Peripheral blood:

Lymphoblastoid cell lines:

Second malignancy pathology samples:

Other requiring collection of samples:

If other, please explain:

Other general comments: