

Section: Contact Information

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Section: Project Requirements and Description

Group: 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 to finalize the concept proposal within 6 months. : **Yes**

Project Title : **The effects of home based interval training on fitness and physical activity among childhood cancer survivors**

Planned research population (eligibility criteria) :

- 18 years of age or older**
- report < 150 minutes of MVPA per week**
- cardiotoxic therapy exposure**

Proposed specific aims :

To evaluate the effects of interval training on

- 1) fitness and physical activity**
- 2) CVD risk factors**
- 3) biomarkers of aging**

among adult survivors of childhood cancer who are not physically active and who were exposed to cardiotoxic therapy

Will the project require non-CCSS funding to complete? : **Yes**

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

Planned submission of R01 fall 2015

Group: Does this project require contact of CCSS study subjects for:

Additional self-reported information : **Yes**

Biological samples : **Yes**

Medical record data : **Yes**

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

Will need medical record information to identify participants

Will need blood draw pre and post intervention

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

Second Malignancy :

Chronic Disease : **Secondary**

Psychology / Neuropsychology :

Genetics :

Cancer Control : **Primary**

Epidemiology / Biostatistics : **Secondary**

Section: Outcomes or Correlative Factors

Late mortality :

Second Malignancy :

Group: Health Behaviors

Tobacco : **Correlative Factors**

Alcohol : **Correlative Factors**

Physical activity : **Primary**

Medical screening : **Secondary**

Other :

If other, please specify :

Group: Psychosocial

Insurance :

Marriage :

Education :

Employment :

Other :

If other, please specify :

Group: Medical Conditions

Hearing/Vision/Speech : **Correlative Factors**

Hormonal systems : **Correlative Factors**

Heart and vascular : **Primary**

Respiratory : **Primary**

Digestive :

Surgical procedures : **Correlative Factors**

Brain and nervous system : **Correlative Factors**

Other :

If other, please specify :

Group: Medications

Describe medications :

Group: Psychologic/Quality of Life

BSI-18 :

SF-36 :

CCSS-NCQ :

PTS :

PTG :

Other :

If other, please specify :

Group: Other

Pregnancy and offspring :

Family history :

Chronic conditions (CTCAE v3) : **Correlative Factors**

Health status : **Correlative Factors**

Group: Demographic

Age :

Race : **Correlative Factors**

Sex : **Correlative Factors**

Other :

If other, please specify :

Group: Cancer treatment

Chemotherapy : **Correlative Factors**

Radiation therapy : **Correlative Factors**

Surgery :

Section: Anticipated Sources of Statistical Support

CCSS Statistical Center :

Local institutional statistician : **Yes**

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

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Will this project utilize CCSS biologic samples? : **Yes**

If yes, which of the following? : **Peripheral blood,Other requiring collection of samples**

If other, please explain : **New blood collection**

Section: Other General Comments

Other General Comments :

Home based intervention using remote technology