Section: Contact Information

First Name : Jennifer Last Name : Yeh Institution : Boston Children's Hospital Address 1 : 300 Longwood Avenue Address 2 : City : Boston State/Province/Region : MA Country : US Zip/Postal Code : 02115 Phone Number : (617) 218-5577 Alternate Phone Number : Email Address : jennifer.yeh@childrens.harvard.edu

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 : Trends in Utility-based Health-related Quality of Life Among Childhood Cancer Survivors

Planned research population (eligibility criteria) :

Original Cohort survivors and siblings who completed the SF-36 survey at Follow-up 2 and/or Follow-up 5

Expansion Cohort survivors and siblings who completed the SF-36 survey at Follow-up 5

Proposed specific aims :

By using the SF-36 data to derive SF-6D utility weights, we propose to:

Estimate longitudinal changes in health-related quality of life among the Original Cohort participants.

2. Assess trends in health-related quality of life over diagnosis eras (1970-79, 1980-89, 1990-99) among Original and Expansion Cohort participants.

 Identify patient characteristics, treatment factors and/or chronic conditions associated with lower health-related quality of life.

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? : This project will not require non-CCSS funding to complete. However, we may seek external funding to support the project.

Group: 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. :

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

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

Section: Outcomes or Correlative Factors

Late mortality : Second Malignancy :

Group: Health Behaviors

Tobacco : Alcohol : Physical activity : Medical screening : Other : If other, please specify :

Group: Psychosocial

Insurance : Correlative Factors Marriage : Correlative Factors Education : Correlative Factors Employment : Correlative Factors Other : Correlative Factors If other, please specify : Household income

Group: Medical Conditions

Hearing/Vision/Speech : Correlative Factors Hormonal systems : Correlative Factors Heart and vascular : Correlative Factors Respiratory : Correlative Factors Digestive : Correlative Factors 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 : **Primary** CCSS-NCQ : PTS : PTG : Other : If other, please specify :

Group: Other

Pregnancy and offspring : Family history : Chronic conditions (CTCAE v3) : Correlative Factors Health status :

Group: Demographic

Age : Correlative Factors Race : Correlative Factors Sex : Correlative Factors Other : If other, please specify :

Group: Cancer treatment

Chemotherapy : **Correlative Factors** Radiation therapy : **Correlative Factors** Surgery : **Correlative Factors**

Section: 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. :

We would like to request individual-level data from the CCSS Statistical Center. Using these data, we will then conduct the analyses to derive SF-6D utility weights. Will this project utilize CCSS biologic samples? : **No** If yes, which of the following? : If other, please explain :

Section: Other General Comments

Other General Comments :