Proposal No: 98-09
Topic: Smoking

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Priority Rating: 1.5
Childhood Cancer Survivor Study

Analysis Concept Form

1. Study Title: Smoking Among Childhood Cancer Survivors

2. Working Group and Investigators: This proposed publication will be within the Cancer Control/Interventions Working Group. Proposed investigators include:

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3. Background and Rationale

Childhood cancer survivors represent a large and rapidly increasing group due to successes in therapy over the last several decades. However, the treatments for childhood cancers tend to damage vital organs, and there is an increased risk of second cancers in childhood cancer survivors who may already have an innate susceptibility to neoplasia. Therefore, it is extremely important that preventable risk factors of cardiac, pulmonary, neoplastic, and other major disease be minimized among this high-risk population. In order to develop effective intervention strategies, it is important to examine smoking behavior among childhood cancer survivors, and in particular to determine predictors of smoking in this high-risk population.

Smoking prevalence among childhood cancer survivors: There are only a few studies in the literature that have examined smoking among childhood cancer survivors. Given the small number of studies conducted in this area to date, and the relatively small sample sizes included, further examination of smoking prevalence and the predictors of smoking among childhood cancer survivors is warranted.

4. Specific Aims/Research Hypotheses:

1. to describe the smoking prevalence among a large, national cohort of childhood cancer survivors
2. to examine predictors of smoking among this population
3. to examine predictors of smoking cessation among ever smokers in this population
5. Analysis Framework:

a. Outcome of interest: smoking status of each CCSS subject, as identified baseline data collection

b. Subject Population: all CCSS cases over age 14 at baseline

c. Explanatory Variables: Please see the outlines of tables below for the variables to be utilized in the analyses.

d. Specific Tables:

(1) Demographics/Sample Description:

A4,4a race
A1 age
A2 sex
A5,6 twin/adopted
A10 & 11 combine for BMI
O1 (for age appropriate group only) education
O5 & O6 (for those < 18 yrs) employment
L2 Marital Status
Q8 & 9 income

(2) Smoking Prevalence:

N1-Nd=former smokers
Nd current smokrs
N1a age of onset
N1b rate of smoking
N1c quit attempts
N2 other tobacco product use

(3) Predictors of Smoking Status

(I suggest running separately by gender; will include all participants > age 14 (? may want to look at age distribution 1st; I picked > age 14 because most smoking starts by then; if interested, we could do separate analyses for < 18 age group that would examine predictors of experimentation; NOTE: We usually run as a series of univariate analyses, and then do multivariate on those that are signif.)

All demographics outlined above
Q7 religion

Medical History
B9 treatment symptoms
G1-13 lung symptoms
K1, K5 2nd & 3rd cancers
Psychological Factors
B8, #15 anti-depressant use
J16-35, J37: anxiety scale

Life Context/Possible Stressors
M4 pregnancy status
M5 fertility problems
Q2, 3a, insurance status

Health Behaviors
N6, 7 alcohol use
N9 physical activity
N16-22, prevention practices

Quality of Life
N12 impairment/disability
N14a-f QOL/ADLs
J36 pain
R1-6 future concerns

(4) Predictors of Smoking Cessation (run same analyses as above, except with ever smokers only, and smoking cessation as outcome instead of smoking status)
All demographics outlined above
Q7 religion

Medical History
B9 treatment symptoms
G1-13 lung symptoms
K1, K5 2nd & 3rd cancers

Psychological Factors
B8, #15 anti-depressant use
J16-35, J37: anxiety scale

Life Context/Possible Stressors
M4 pregnancy status
M5 fertility problems
Q2, 3a, insurance status

Health Behaviors
N6, 7 alcohol use
N9 physical activity
N16-22, prevention practices

Quality of Life
N12 impairment/disability
N14a-f QOL/ADLs
J36 pain
R1-6 future concerns
6. Special Considerations: None