

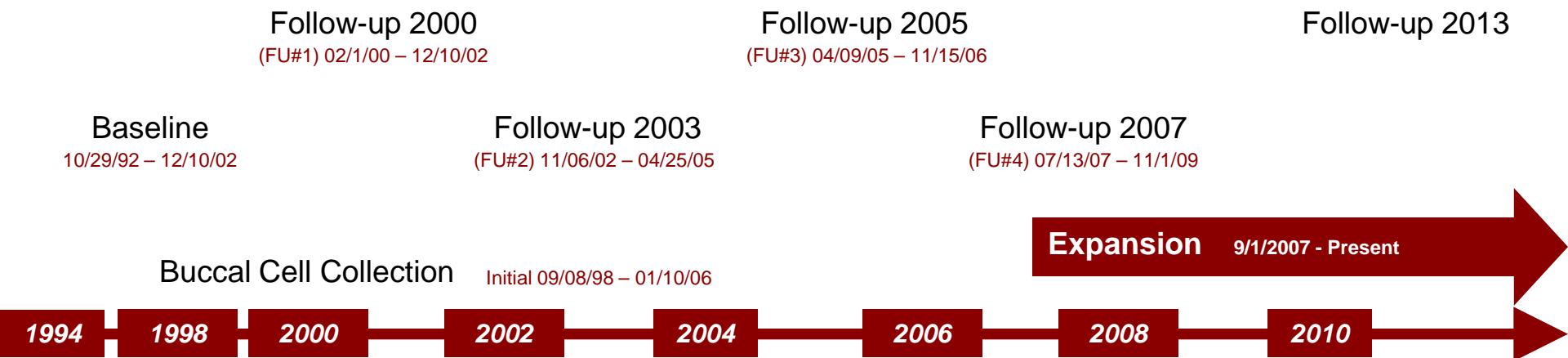
Childhood Cancer Survivor Study (U24 CA55727)

Report of the
Coordinating Center
Greg Armstrong, M.D.

CCSS Investigator Meeting
Williamsburg, VA
June 9-10, 2010

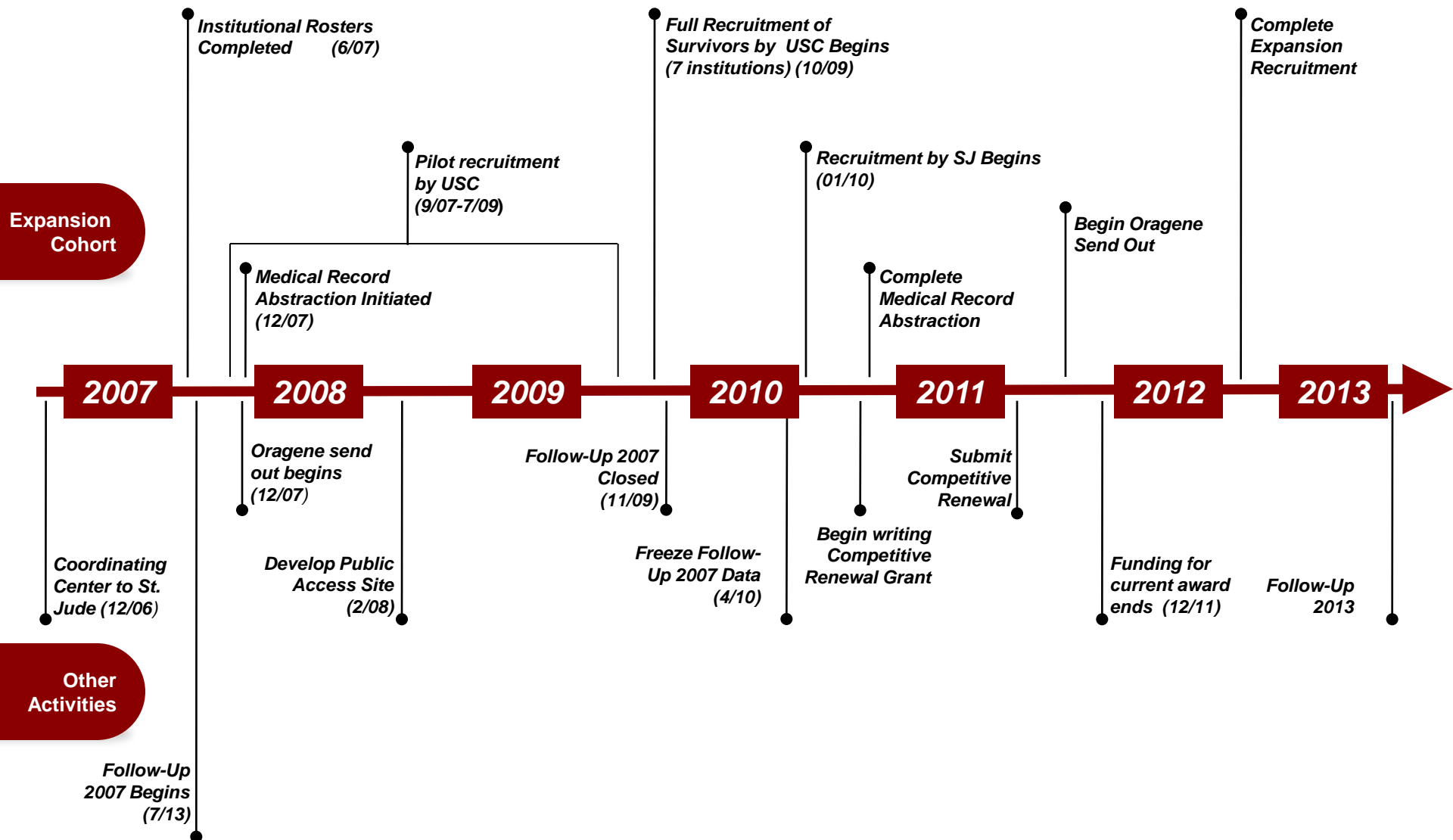
Childhood Cancer Survivor Study (U24 CA55727)

Cohort History (page 13)



Childhood Cancer Survivor Study (U24 CA55727)

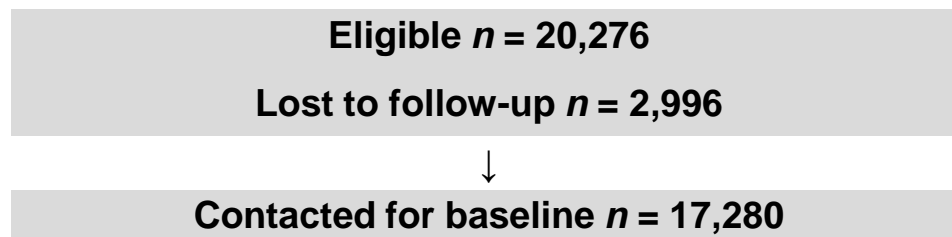
Coordinating Center Timeline (page 14)



Follow-up 2007

- Comprehensive update of baseline data
 - 28 pages
 - 10,143 eligible participants, 3,065 siblings
 - Update: demographics, medical care, chronic medical conditions, health habits, SMNs, pregnancy/offspring, additional chemo/RT
- Timeline
 - Initial send out: July 2007-April 2008
 - Follow-up complete: October 2009
 - Data freeze: June 2010

Participation Rates: Baseline and Follow-up Studies (page 15)



Questionnaire	Number of Pages	Presumed Eligible	Participation Rate	Non-Response	Refused Questionnaire	Dropout of Study	Lost to Follow-Up
Baseline	20	$n = 17,280$					
Follow-Up 2000	16	$n = 12,884$					
Follow-Up 2003	24	$n = 11,859$					
Follow-Up 2005	4	$n = 11,393$					
Follow-Up 2007	28	$n = 10,143$					
		(9,769 sent)					

Participation Rates: Baseline and Follow-up Studies (page 15)

Eligible $n = 20,276$

Lost to follow-up $n = 2,996$



Contacted for baseline $n = 17,280$

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Follow-Up 2000	16	$n = 12,884$	81%	6%	2%	4%	7%
Follow-Up 2003	24	$n = 11,859$	78%	8%	3%	5%	6%
Follow-Up 2005	4	$n = 11,393$	78%	5%	1%	3%	13%
Follow-Up 2007	28	$n = 10,143$					
		(9,769 sent)					

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Follow-Up 2005	4	$n = 11,393$	78%	5%	1%	3%	13%
Follow-Up 2007	28	$n = 10,143$	79%	8.7%	2.4%	1.6%	5.1%
		(9,769 sent)	(82%)				

Follow-up 2007: Participation (p.16)

Number Sent

Survivors (*n* = 9,769)

Siblings (*n* = 3,065)

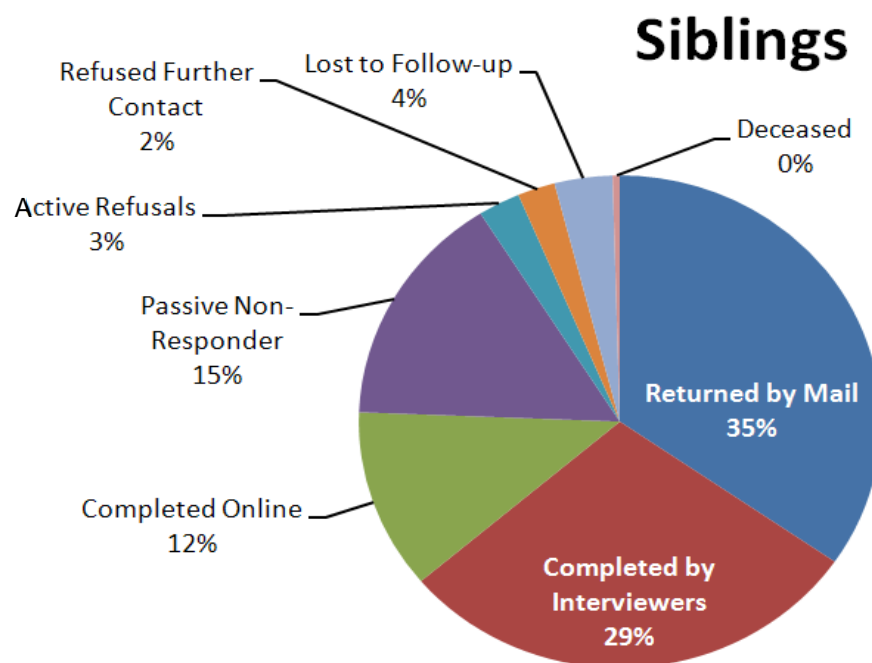
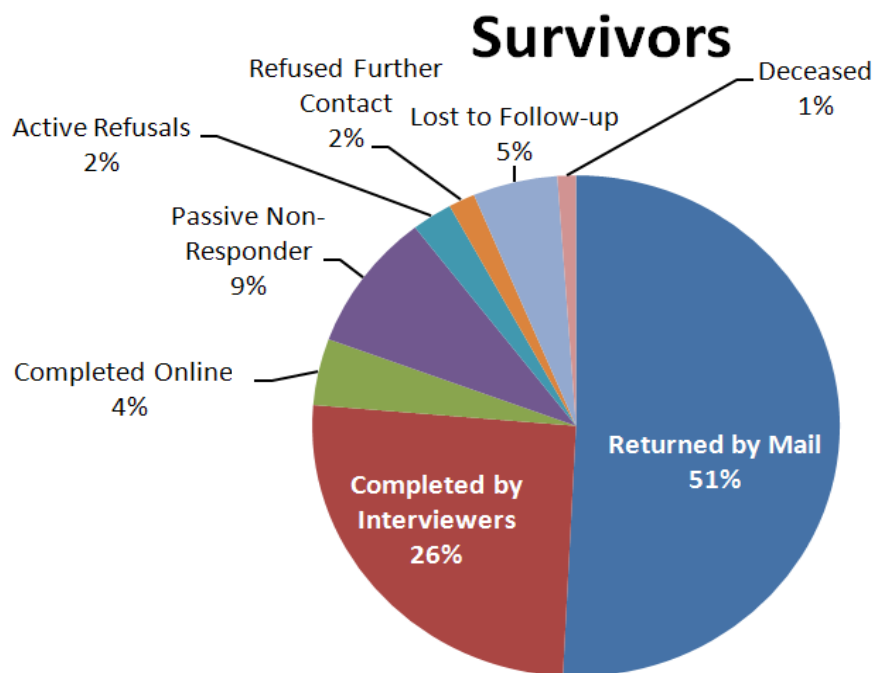
	<i>%</i>			<i>%</i>		
	<i>n</i>	<i>% of Sent</i>	<i>Completed</i>	<i>n</i>	<i>% of Sent</i>	<i>Completed</i>
Total Completed	8,015	82.0%		2,378	77.6%	
Passive Non-Responder	887	9.1%		485	15.8%	
Active Refusals	248	2.5%		82	2.7%	
Refused Further Contact	162	1.7%		73	2.4%	
Lost to Follow-up	516	5.3%		113	3.7%	
Deceased	113	1.2%		14	0.5%	

Survey Period: 7/07 - 9/09

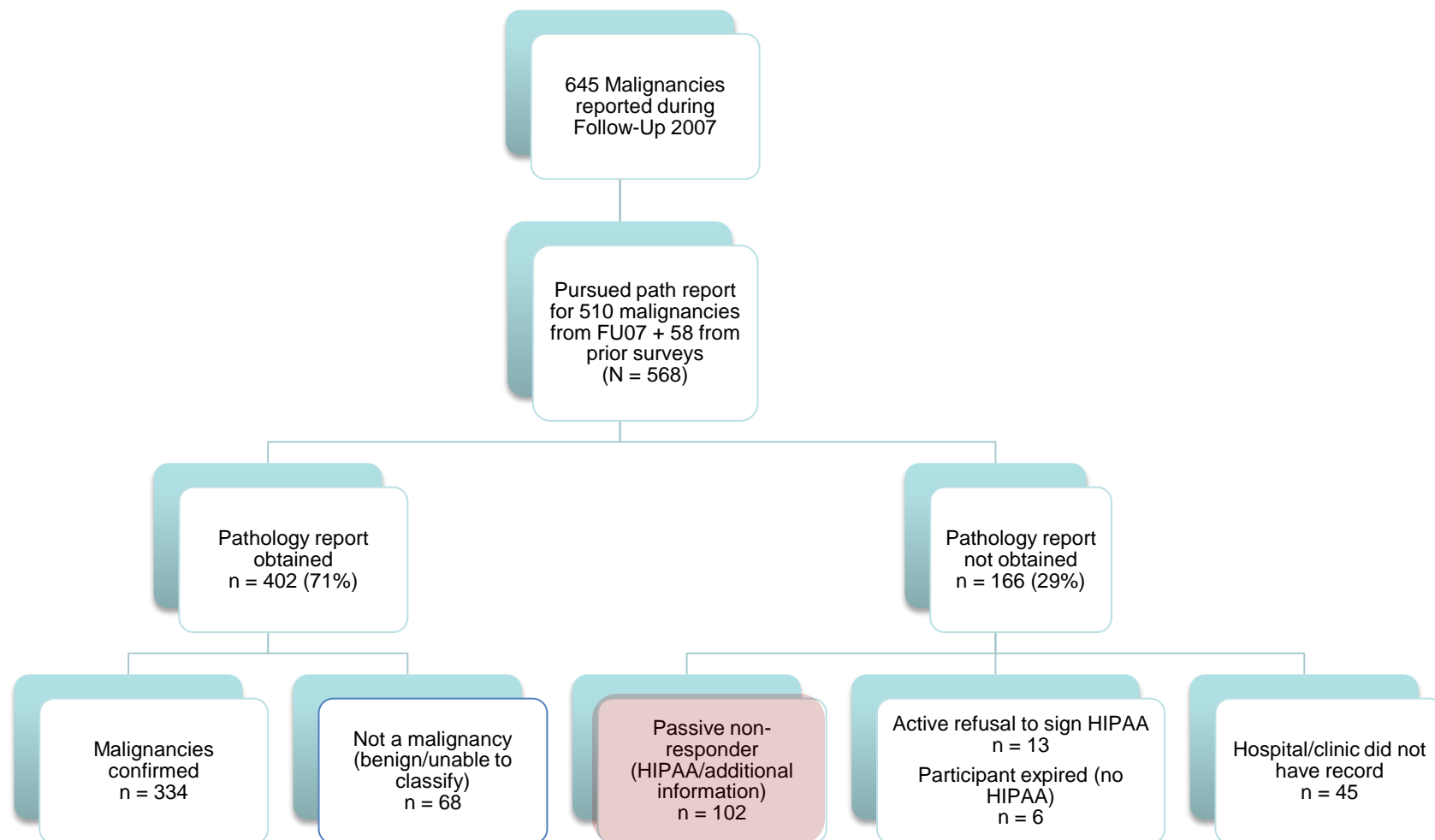
Survey Period: 7/08 - 10/09

*Note: online option not available until 6/1/2008

Follow-up 2007 Participation



SMN Confirmation Status (p. 22)



Men's Health Questionnaire

- Puberty, sexual development, infertility and QOL in male survivors
- LAF funded, Lillian Meacham PI
- Timeline: May 2008 – Oct. 2009
 - 16 pages
 - 4,001 eligible males (completing FU 2007)
- Methods
 - Sent to males who agreed to receive survey
 - 1 mail out, phone follow-up reminder

Men's Health Questionnaire

10/12/2007 04:14:27 PM

LTFU

Long-Term Follow-Up Study

Men's Health Questionnaire

St. Jude Children's Research Hospital
Children's Healthcare of Atlanta/Emory University
Children's Hospital at Stanford
Children's Hospital of Columbus
Children's Hospital of Orange County
Children's Hospital of Philadelphia
Children's Hospital of Los Angeles
Children's Hospital of Pittsburgh
Children's Hospitals & Clinics of Minnesota,
Minneapolis and St. Paul
Children's Medical Center of Dallas
Children's National Medical Center
City of Hope National Medical Center
Dana-Farber Cancer Institute
Loma Linda University
Mattel Children's Hospital at UCLA
Mayo Clinic
Memorial Sloan-Kettering Cancer Center
Miller Children's Hospital
Riley Hospital for Children - Indiana University
Roswell Park Cancer Institute
Seattle Children's Hospital & Medical Center
St. Louis Children's Hospital
Texas Children's Hospital
The Denver Children's Hospital
Toronto Hospital for Sick Children
UAB/The Children's Hospital of Alabama
University of California at San Francisco
University of Michigan - Mott Children's Hospital
University of Minnesota
U.T.M.D. Anderson Cancer Center

Our mailing address is:
Long-Term Follow-Up Study
St. Jude Children's Research Hospital
Department of Epidemiology
Mail Stop 735
332 N. Lauderdale St.
Memphis, TN 38105-2794

Toll-free phone number:
1-800-775-2167

e-mail: LTFU@stjude.org

**The LTFU Men's Health Study
is funded by**



Puberty, sexual development, infertility, and quality of life are important areas to study and understand in young adult survivors of pediatric cancer and other childhood illnesses. In a survey we sent you previously, you indicated your interest in participating in a study with this subject matter. Questions like these have already been asked of the female cancer survivors in the LTFU cohort. Important findings came from the female health questionnaire - for example the risk of premature menopause in female survivors of pediatric cancer and other childhood illnesses. This finding has been used to change clinical practice and counseling to female survivors of pediatric cancer and other childhood illnesses.

So, now it is your turn to teach us more about the health of male survivors of pediatric cancer and other childhood illnesses. Participation in this aspect of the study involves answering a series of questions that will take approximately 30 minutes to complete. You may feel these questions are very personal. Please be reassured your responses will remain confidential. We appreciate your willingness to answer this questionnaire.

Sincerely,

The LTFU study staff

Today's date:

		/			/	2	0	0	
--	--	---	--	--	---	---	---	---	--

Men's Health Questionnaire (p.17)

	Survivors			Siblings		
Males Completing FU2007	4,001			1,083		
Answered "Yes" or "Unsure" to MHQ	2961 (74%)			723 (66.8%)		
	<i>n</i>	% Sent	% Completed	<i>n</i>	% Sent	% Completed
Total Completed	1,602	54.1%		272	37.6%	
Passive Non-Responder	1,279	43.2%		434	60.0%	
Active Refusals	36	1.2%		10	1.4%	
Refused Further Contact	15	0.5%		2	0.3%	
Lost to Follow-up	33	1.1%		4	0.6%	
Deceased	6	0.2%		0	0.0%	
	Survey Period: 5/08 - 10/09			Survey Period: 1/09 - 10/09		

Cohort Expansion

- Diagnosed and treated 1987-99
 - Baseline survey based on original cohort baseline
- Recruitment
 - Privacy laws (HIPAA), new methods needed
 - USC as business associate
 - Pilot testing: Sept. 2007- July 2009

CCSS Institution

IRB Approval → Identify roster of potentially eligible subjects → Collect data on selected criteria and contact information (where available)

Business Associate

Apply required selection criteria

Validate address

Send letters to eligible participants with electronic signature

Determine initial response to contact letter

No contact

Send second letter

Tracing
Send third letter
Phone contact

New Address

Coordinating Center

Confirm eligibility

Recruit subject to participant in baseline survey

Non-Participant

Participant

BA will release data from Medical Record Abstraction to Coordinating Center

Submit survey and medical record data to CCSS database

Register patients with Coordinating Center

Successful Contact

Recruitment: Pilot Study #1

- US Postal mail out (St. Jude only: n = 2,007)
 - Introductory letter from the PI
 - Brochure
 - HIPAA authorization form (paper only)
 - Stamped return envelope
 - \$2 bill
 - Experian “pre-search” contact information
- HIPAAs Received: 39%
 - No difference by age (> or < 18 years)
- Key Questions:
 - 1) Are we getting the packet into the hands of the eligible participant???
 - 2) Is HIPAA a barrier to research?

Pilot Studies: Overview

Into hands of eligible survivor?

NO



Need better
contact information



Pilot II: Experian
Pre-search +
Phone follow-up

YES



Need improved method for
recruitment



Pilot III: Web-based HIPAA

Results

- Pilot II: Experian pre-search + limited phone follow-up (3 calls only)
 - Experian provides updated address for 28%
 - Calls to non-responders: 50% unreachable, those reached report interest
 - St Jude: 39% → 49%
 - Roswell Park: 46%
- Pilot III: Web-based HIPAA (2 institutions)
 - Arm I: original paper method → 26%
 - Arm II: web-based method → 22%
 - Arm III: web with sample survey → 19%
- Conclusion:
 - even minimal phone f/u is essential
 - Pre-search all
 - Offer all methods of HIPAA completion
- No single method change will assure adequate recruitment

Pilot Studies: Overview

Into hands of eligible survivor?

NO

YES

Need better
contact information

Need improved method for
recruitment

Pilot II: Experian
Pre-search +
Phone follow-up

Pilot III: Web-based HIPAA

Pilot IV: FedEx w/
return notification

Pilot IV: FedEx Return Notification

- Return notification (Emory, n = 802)
 - Experian pre-search (30% updated)
 - 3 attempts, including note on door
 - On-line notification to USC of delivery status
- Undeliverable
 - Arm 1: US postal service → 16%
 - Arm 2: FedEx → 33%
- HIPAA Response rate: No difference (10%)
- Conclusions:
 - Once in hand, FedEx does not improve response rate over USPS
 - *We are only reaching 2/3 of eligible survivors!!*

Westat Tracing

Westat research services

-Improved search techniques: **Lexus/Nexus**

99 cases USC unable to reach

-26 cases with updated contact info

-5% return HIPAA

	Riley & UCSF (lost to follow-up)	Emory (FedEx Pilot)
Total	65	34
New address & Phone	2 (3%)	8 (24%)
New address OR Phone	7 (11%)	9 (26%)
New HIPAA	3 (5%)	2 (6%)

Pilot Studies: Overview

Into hands of eligible survivor?

NO

YES

Need better
contact information

Need improved method for
recruitment

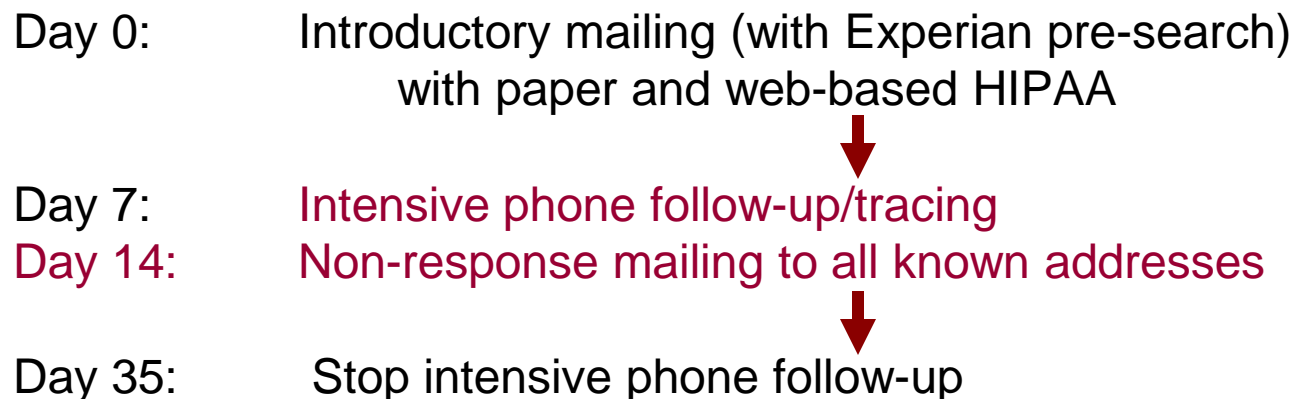
Pilot II: Experian
Pre-search +
Phone follow-up

Pilot III: Web-based HIPAA

Pilot IV: FedEx w/
return notification

Pilot V: The “Mini-surge”

The “Mini-surge”



Results: UCSF (62%), Riley (59%)

Conclusions:

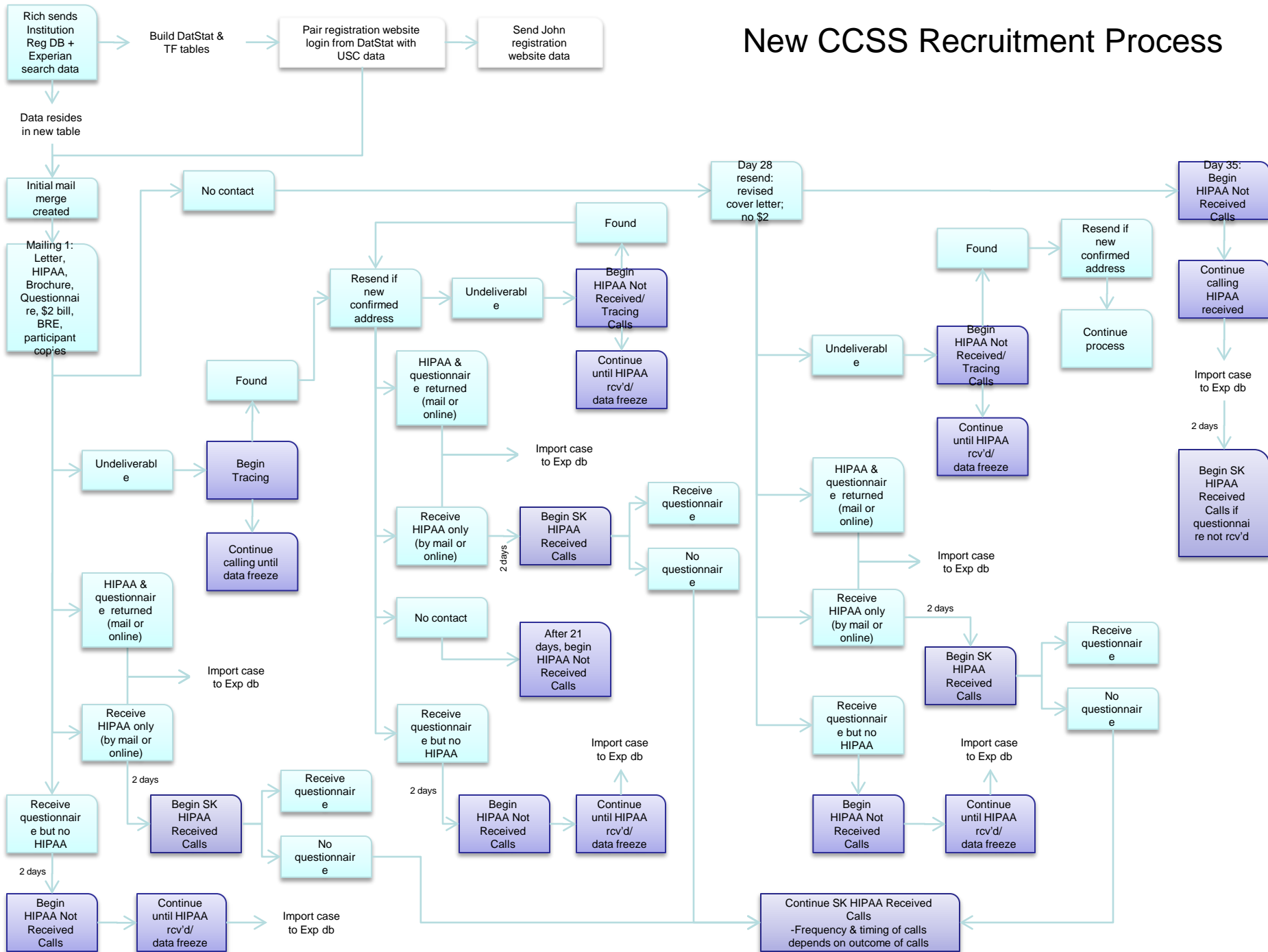
- 1) Intensive, multi-modal (paper, phone, web) recruitment needed
- 2) Upon contact, response is positive (<7% refusal rate)
- 3) Cost is high → \$\$\$

USC: Complete recruitment of 9 institutions, began Oct. 2009 - ongoing

Direct Recruitment by St. Jude

- Amendment 9.0
 - BAA or waiver of HIPAA for SJ (not CCSS) to directly contact eligibles for HIPAA signature
 - Approved at 19 institutions
 - “Firewall” between St. Jude and CCSS
 - “One-step process”
- Recruitment
 - MSKCC – January 2010
 - CHOP and SJCRH – February 2010
 - Stanford and UAB – March 2010
 - Wash. U. (St. Louis) – April 2010
 - MD Anderson – May 2010

New CCSS Recruitment Process



Recruitment by Institution (as of 5/5/10; page 18)

	Institution Name	Recruiting Institution	IRB Amendment 9.0 Approved*	Selected Eligible Patients	Recruitment Timing	# Signed HIPAAs rec'd as of 5/5/10
1	University of Minnesota	St. Jude	Yes	293	Summer 2010	
2	Denver Children's Hospital	St. Jude	Pending	603	Pending	
3	Children's Hospital of Pittsburgh	St. Jude	Yes	814	Summer 2010	
4	Children's Hospital at Stanford	St. Jude	Yes	375	Active	90
5	Dana Farber Cancer Institute	USC	No	932	Active	302
6	Children's Atlanta/ Emory University	USC	Yes	732	Active	288
7	Children's National Medical Center	St. Jude	Pending	442	Pending	
8	UTMD Anderson Cancer Center	St. Jude	Yes	654	Active	15
9	Memorial Sloan-Kettering Cancer Center	St. Jude	Yes	663	Active	228
11	University of California San Francisco	USC	No	519	Active	263
12	Seattle Children's Hospital	St. Jude	Yes	848	Summer 2010	
13	Toronto Hospital for Sick Children	St. Jude	Yes	1,704	Fall 2010	
15	St. Jude Children's Research Hospital	SJ/USC	Yes	2,155	Active	1206
16	Nationwide Children's Hospital	St. Jude	Yes	503	Summer 2010	
17	Roswell Park Cancer Institute	USC	No	242	Active	137
19	Children's Hospitals and Clinics of Minnesota	USC	Yes	592	Active	320
20	Children's Hospital of Philadelphia	St. Jude	Yes	1,019	Active	352
21	St. Louis Children's Hospital	St. Jude	Yes	427	Active	78
22	Children's Hospital of Los Angeles	St. Jude	Yes	757	Summer 2010	
23	UCLA Mattel Children's Hospital	St. Jude	Yes	67	Summer 2010	
24	Riley Hospital for Children	USC	Pending	889	Active	421
25	UAB/Children's Hospital of Alabama	St. Jude	Yes	366	Active	91
26	Univ of Michigan/Mott Children's Hospital	St. Jude	Pending	678	Summer 2010	
27	Children's Medical Center of Dallas	USC	Yes	660	Active	192
28	Texas Children's Hospital	St. Jude	Yes	633	Summer 2010	
29	City of Hope National Medical Center	St. Jude	Yes	135	Summer 2010	
TOTAL				17,702		3,983

*Amendment 9.0 allows both St. Jude and USC to conduct recruitment activities

Expansion: Baseline Survey Completion (page 10)

HIPAA's Received	3,983	
Questionnaires Sent	3,621	
Pending Send out	362	
Returned	2,961	82%

Alive	<i>n</i>	<i>% of Sent</i>
<i>Number Sent</i>	3,451	
Number Completed	2,866	83%
Deceased	<i>n</i>	<i>% of Sent</i>
<i>Number Eligible</i>	170	
Completed	95	55.9%

MRAF Completion (page 20)

- As of May 2010
- >95% completion: 22 institutions
- Ongoing at 7 institutions
 - IRB delays
 - Completed on paper but not yet submitted on line



LTFU
Long-Term Follow-Up Study

Before Collection, All Instructions

- Do not eat, drink, smoke or chew gum for 30 minutes before giving your saliva sample.
- Rinse the mouthpiece 10 times with water before use.
- Do NOT remove the mouthpiece from the saliva collection envelope for 30 minutes.
- Do NOT use the mouthpiece for anything other than the collection of saliva.
- Do NOT use the mouthpiece for anything other than the collection of saliva.
- Do NOT use the mouthpiece for anything other than the collection of saliva.



CCSR
Page 1 of 1
Revised 04/07/07

CONSENT STATEMENT LONG-TERM FOLLOW-UP STUDY

As a patient who received treatment for a childhood cancer at St. Jude Children's Research Hospital, you are now invited to take part in the Long-Term Follow-Up Study, a research study being conducted by St. Jude Children's Research Hospital. We are requesting permission to study the DNA in some of your body's cells. Specifically, we would like to use the DNA to research factors in your body that might be involved in the development of cancer and related diseases.

This consent form gives you information about the study. Before you sign about the study, it is important that you know the following:

- Whether or not you take part in this study is entirely up to you.
- If you decide not to be in the study, it is voluntary from the study at any time, your decision will not affect your relationship with St. Jude Children's Research Hospital.
- Your study information will be shared with researchers at St. Jude Children's Research Hospital, the LTFU Research Center (located at St. Jude Children's Research Hospital, 2625 Lusk Avenue, Memphis, TN 38105), LTFU Follow-up Center (located at St. Jude Children's Research Hospital, 2625 Lusk Avenue, Memphis, TN 38105), and LTFU participating institutions.

Why is this study being done?

Researchers are trying to learn more about cancer, such as what causes cancer, how to prevent it, how to stop it from spreading to other parts of the body, and how to treat it. There are many studies of cancer, not all of which are known. It is known that some environmental factors, such as toxic chemicals and radiation from nuclear bombs, can cause cancer. There are some genetic factors in people which can predispose or make it more likely for themselves or their children to develop cancer. Some cancers are caused by a combination of factors, including the environment and genetics. Some cancers, including many in children, probably result from a change or error during growth of one cell in a person's body and are not caused by other factors, such as the environment or genetics.

What is involved in this study?

A sample of blood will be obtained from your arm at the same time other laboratory studies are performed on St. Jude LTFU study are being obtained. The blood will be processed and sent to the LTFU Molecular Genetics Center in Cincinnati, Ohio. In the laboratory, we will extract DNA from these cells. With your permission, the DNA will be kept in a storage bank for an unknown period of time. The DNA will be used for cancer research which may help improve people's health and the kind of care they receive when they are sick. Even if the research that is done with your blood is not able to help you, it might help us with the care that we can give to some people with cancer. The chance to let us keep your DNA for doing research is up to you.

Approved 11/07/07
Consent Document Date 11/07/07

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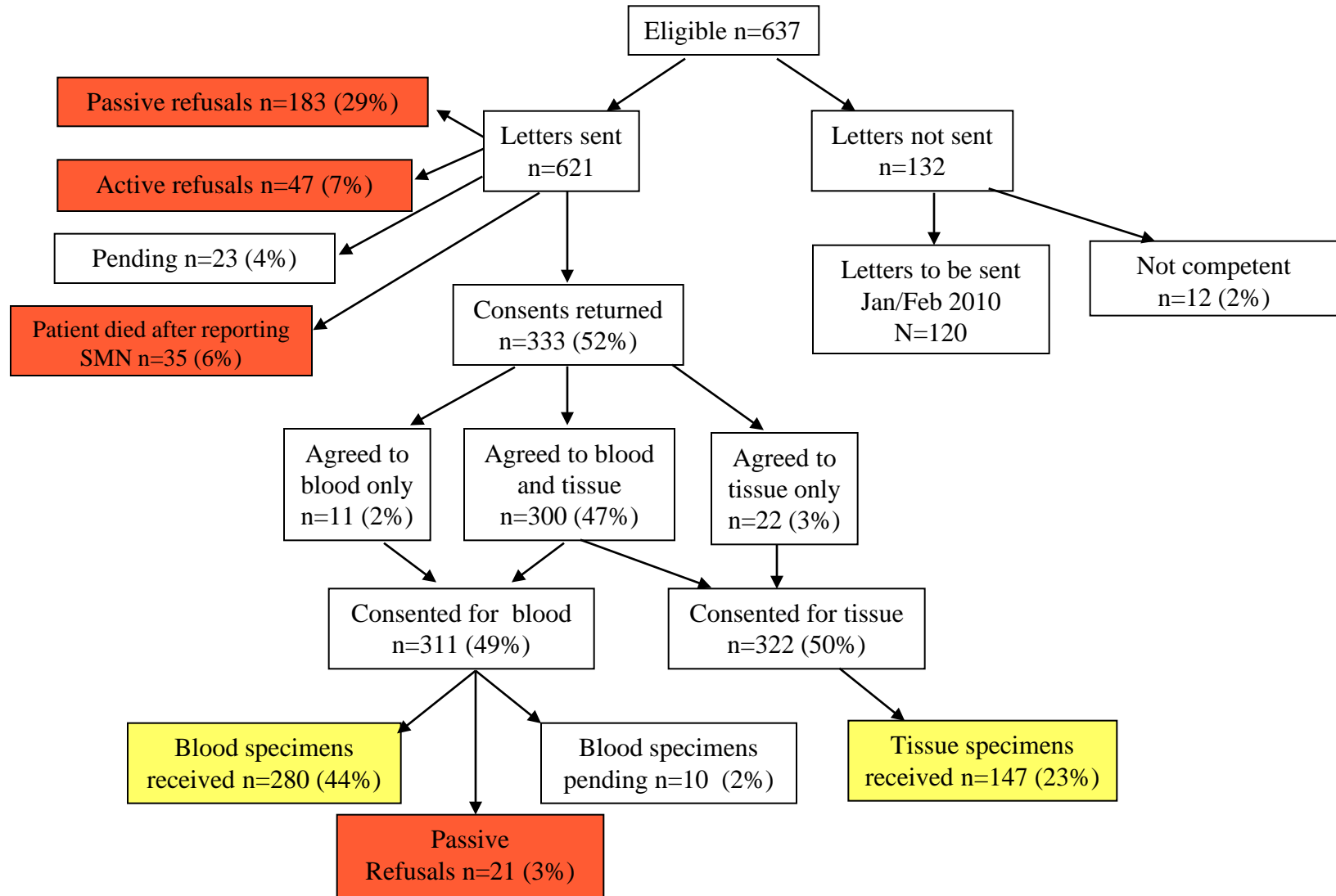
Oragene Collection: Original Cohort (page 21)

Kits Sent	Cases (n = 8,268)		Siblings (n = 2,710)	
	<i>n</i>	<i>% of Sent</i>	<i>n</i>	<i>% of Sent</i>
Returned	3,066	37.1%	701	25.9%
Refused	308	3.7%	76	2.8%
Pending	4,659	56.3%	1,923	71.0%
In Tracing	109	1.3%	10	0.4%
Deceased	22	0.3%	0	0.0%

Methodology Summary

- Send letter, consent form and kit to active participants.
- Trace non-current addresses. Resend kit if new address found.
- Call non-responders 3-weeks after kit mailing date.
- Call until contact or until reminder message is left.
- Resend kit upon participant request.
- Recruitment Intensification:
 - o Call intensity increased in December 2009. Up to 10 calls per participant.
 - o Mass resend to all non-responders will occur in January 2010.

Status of Blood and Tissue Specimens for Survivors Reporting a Subsequent Malignancy



- Recruitment in process from FU2007
 - 264 new neoplasms with letters sent
- New summary tables of all biospecimens by primary diagnosis & by SMN diagnoses



Welcome >

Welcome to the new Childhood Cancer Survivor Study Web site!

The Childhood Cancer Survivor Study (CCSS) was created to take advantage of:

1. The opportunity to gain new knowledge about the long-term effects of cancer and therapy, knowledge that can be used to help design treatment protocols and intervention strategies that will increase survival and minimize harmful health effects.
2. The obligation to educate survivors about the potential impacts of cancer diagnosis and treatment on their health, and to provide follow-up care, for example, by treating and implementing programs for the prevention and early detection of late effects.

Website

- Separate CCSS & LTFU websites
- <http://ccss.stjude.org/>
- Approved concepts, ancillary studies, AOs, publications & abstracts
 - All sort by column
 - New search feature
- Meeting information
- Public Access data tables
- “What’s new” link
- **Easier to navigate!**