Please Note!

— VERY IMPORTANT NOTICE —

WE HAVE JUST RECEIVED NOTIFICATION FROM THE HYATT REGENCY DALLAS REUNION HOTEL IN DALLAS, TEXAS, THAT THERE HAS BEEN AN UNRESOLVABLE SCHEDULE CHANGE FOR THE SOUTHWEST ONCOLOGY GROUP 2002 SPRING GROUP MEETING.

PLEASE MARK YOUR CALENDARS…. THE 2002 SPRING GROUP MEETING WILL OCCUR WEDNESDAY, APRIL 17, THRU SUNDAY, APRIL 21, 2002 ONE WEEK LATER THAN PREVIOUSLY ANNOUNCED!
Group Bylaws Changed to Provide for Chair Elect of the Southwest Oncology Group

This past April at the 2001 Spring Group Meeting, Charles A. Coltman, Jr., M.D. was elected to his sixth four-year term as Group Chair and honored for 20 years of dedicated leadership of the Group. As part of the planning process for future transition, the Southwest Oncology Group Bylaws were amended to include a new position entitled Chair Elect. Dr. Coltman appointed a nominating committee to oversee the slate of individuals to be considered as nominees for the position of Chair Elect. The Nominating Committee of 11 members was appointed from the Board of Governors of the Southwest Oncology Group and was widely representative of that governing body.

The Nominating Committee has taken steps to nationally advertise this process to Group and non-Group members. Potential candidates for the position of Chair Elect will be interviewed by the Nominating Committee and the Committee will submit at least two candidates for this position.

At the April 2002 Group Meeting, candidates will be given an opportunity to present their platforms and respond to questions, following which an election for Chair Elect will take place. The Chair Elect will work with Dr. Coltman through the competitive renewal application in 2003 and the site visit. Transition will follow the satisfactory distribution of funding based on the Pink Sheets.

The nomination timeline is as follows:


December 2001: Deadline for Letters of Interest to Nominating Committee is December 15, 2001.

January 2002: Candidates invited to interview.

February 2002: Members of the Board of Governors will have 21 days (February 6 - 27) in which to nominate candidates; all person(s) nominated have to give their consent to be considered. Nominations will be closed on February 27, 2002. The interview process will take place and those candidates who are endorsed will be notified. Those candidates endorsed as nominees by the Nominating Committee or added by a member of the Board of Governors will be asked to submit a position statement. This will include responses to a set of questions and any additional statements they would like to make. These will be made available to the Board. The list of endorsed candidates will be posted on the Group web site.

March 2002: Nominees’ position statements will be posted on the Group web site.

April 19, 2002: Vote by the Board of Governors. Candidates will be given approximately 5 minutes to state their positions and approximately 10 minutes to take questions. If necessary, there will be a run-off vote on April 20, 2002.

Once elected, the Chair Elect will work with Dr. Coltman through 2002 and into 2003, assuring a smooth transition for when he or she assumes the position of Chair in 2003.
Cigarette smoking, the principal cause of lung cancer, is a highly addictive behavior and it is estimated that approximately 50% or more of patients are still smoking at the time of diagnosis. Not all patients are able to stop smoking even after diagnosis, and a significant proportion continue to smoke or stop for surgery/treatment and then resume smoking sometime later. No study has systematically assessed the efficacy of a smoking cessation intervention in lung cancer patients in a clinical setting. Furthermore, there is a growing literature demonstrating that stopping smoking at or around the time of diagnosis of an aerodigestive tract tumor (lung, head and neck) confers benefit in terms of disease outcome. Significantly reduced rates of second primary tumors, and reduced recurrent rates and longer survival are other positive outcomes. Finally, the benefit of smoking cessation may be particularly important among patients with early stage disease, who have the best long term survival prognosis.

The goal of this randomized controlled trial, which will open for accrual in late 2001, is to compare the effectiveness of an antidepressant, bupropion (Zyban), with a placebo in helping patients to stop smoking. All patients will receive nicotine replacement therapy and a behavioral intervention, which will be primarily delivered by nurses/CRAs. Patients with completely resected Stage I and II non-small cell lung cancer who are current smokers and willing to make an attempt to quit are eligible for the study. The objectives are as follows:

1. To assess predictors of successful cessation in male and female patients.
2. To compare the effect on emotional functioning of adding bupropion to a behavioral intervention plus nicotine replacement in the study population.
3. To explore the relationship between smoking cessation and standard outcome measures (e.g., second malignancies, survival).
4. To explore the relationship of genetic indicators of susceptibility to nicotine dependence to smoking, treatment outcome, gender and pharmacologic agent.
5. To explore the relationship among metabolic polymorphism genes related to lung cancer susceptibility in smokers who are lung cancer patients.

The next nurse/CRA training session for S0002 is scheduled for the Spring 2002 Group Meeting (April 17-21) in Dallas. Participants in the training session will receive in-depth training in all aspects of the trial, and will learn state-of-the-art smoking cessation techniques.

New Member Nomination Deadline

The next deadline for submitting membership nominations to the Operations Office is March 15, 2002. Prior to each Group Meeting nominations are considered for Member, CCOP, Affiliate, UCOP and Special Member investigators. Nominations are reviewed by the Membership Committee and recommendations are made to the Board of Governors.

In order to process a new investigator nomination, all of the following must be received in the Operations Office by the deadline:

- Application for New Investigator Form
- Nomination letter from the Principal Investigator
- The nominee’s most recent curriculum vitae, stating whether or not the nominee is board certified
- FDA Form 1572 for Group studies
- New investigator pharmacy information
- Affirmation of Integrity Statement
- Purchase Service Agreement (Affiliate investigators only)
- Certification of Education in the Protection of Human Subjects

Incomplete nominations will not be processed until a complete packet is received. For a complete outline of the nomination process, please refer to Southwest Oncology Group Policy Memorandum No. 7 at the Group’s web site (http://swog.org). For your convenience, the Application for New Investigator Form can be downloaded and printed.
The publications listed below are those that have been received in published form by the Operations Office Publications Specialist August 10 through November 19, 2001.

MANUSCRIPTS PUBLISHED SINCE LAST NEWSLETTER


THERE WERE NO PUBLISHED ABSTRACTS RECEIVED SINCE LAST NEWSLETTER
Best Prescription for High-Grade PIN after PCPT: S9917

A substantial number of men coming off the Prostate Cancer Prevention Trial (PCPT) are being diagnosed with high-grade prostatic intraepithelial neoplasia (PIN) in their end-of-study biopsies. These men represent a very important source of potentially eligible participants for S9917, “L-Selenium-Based Chemoprevention of Prostate Cancer Among Men with High Grade PIN.” As of October 2001, however, only 6 ex-PCPT patients had registered to S9917. This low recruitment from the PCPT occurred despite the substantial number of potentially eligible PCPT men, a Statistical Center notification letter about S9917 to these men’s PCPT sites, and follow-up calls to these centers from Dr. James R. Marshall (S9917 Primary Study Coordinator).

“Why aren’t we recruiting more men from the PCPT with high-grade PIN?” Dr. Marshall wondered aloud during the recent Group Meeting in Chicago. He urgently requests an answer to this question based on the direct experience of PCPT personnel with S9917-eligible men. If you’re a PCPT CRA, research nurse, urologist, primary-care physician, or PI, please let Dr. Marshall know what you think the barriers are to recruiting to S9917 in your center and how best to overcome them. Dr. Marshall can be reached by e-mail (jrmarshall@azcc.arizona.edu), at his toll-free number (800-243-6519), and by FAX (520-626-5348). Despite steady improvement, S9917 accrual remains behind schedule, with approximately 86 registered and 51 randomized men as of late October (the goal is 466 randomized eligible men). If the accrual rate doesn’t improve, S9917 very likely will be closed in April 2002. This unwanted outcome can be prevented.

PCPT Study Coordinator Dr. Ian M. Thompson, Jr., leads strong support from key investigators of the PCPT and the Selenium and Vitamin E Cancer Prevention Trial (SELECT) for S9917, commenting, “S9917 is an outstanding way to approach men with high-grade PIN and an outstanding study for these men” (please also see the companion article headlined “Dr. Ian Thompson Praises S9917: A Call to PCPT Urologists” in this issue). Dr. Eric A. Klein, SELECT Study Coordinator, concurs with Dr. Thompson, adding, “High-grade PIN is a precancerous condition for which there is no currently established treatment. There is some evidence that selenium may prevent the progression of precancerous conditions to cancer, and S9917 will assess this in a rigorous scientific fashion.” Further PCPT support for S9917 came from Dr. Gary J. Miller, the late PCPT pathologist, during his last formal Group presentation, given at the CCRC CCOP Symposium in San Francisco last April. Dr. Miller discussed several ways that he could facilitate recruiting potentially eligible men leaving the PCPT to S9917, such as approving the letter from the Statistical Center notifying relevant PCPT centers of his high-grade PIN biopsy diagnoses.

The NCI also supports S9917 comprehensively, offering 1 cancer control (CC) credit for the first year of patient participation and 0.3 CC credit for each of 9 following years (3.7 total CC credits for each patient completing the study). During the April 2001 CCRC Chemoprevention Subcommittee meeting in San Francisco, Dr. Lori M. Minasian (Chief, NCI Community Oncology and Prevention Trials Research) spoke up in strong support of keeping S9917 open and giving it a chance to recruit potentially eligible men from the PCPT. During the October 2001 CCRC Open Meeting, Dr. Howard L. Parnes (Chief, NCI Prostate and Urologic Cancer Research) announced NCI-sponsored training workshops for pathologists in diagnosing PIN to be conducted by S9917 Pathologist Dr. Wael A. Sakr. Along with PCPT and SELECT, S9917 is a very important element of the comprehensive NCI-supported prostate cancer prevention program within the Group.

S9917 is a field of dreams. Dr. Marshall and his team built it. Now, with your help, the men who can make this definitive cancer prevention trial a success will come.

The CCRC Swirls into the Windy City

Chicago’s chilly autumn winds couldn’t dampen the enthusiasm of Cancer Control Research Committee (CCRC) members participating in the Fall 2001 Group Meeting. On Thursday night, October 25, Chair Dr. Patricia A. Ganz presided over the CCRC Behavioral and Health Outcomes (BAHO) Subcommittee meeting. Carolyn C. Gotay, Ph.D., University of Hawaii, delivered an outstanding scientific presentation updating the more than 30 attending BAHO members and guests on the NCI Cancer Outcomes Measurement Working Group (COMWG). Following Dr. Gotay’s presentation, Dr. Ganz guided productive detailed working discussions of 18 active, recently closed and proposed studies involving the Subcommittee.

On Friday, October 26, Dr. Gary E. Goodman chaired the CCRC Chemoprevention Subcommittee meeting, attended by approximately 35 members and guests. After discussing the status of active chemoprevention protocols, the Subcommittee focused on several exciting proposed chemoprevention protocols, ranging from colorectal cancer prevention (Drs. David Z. J. Chu, Frank A. Sinicrope, Hans J. Berkel and David S. Alberts) to breast cancer prevention (Dr. Powel H. Brown) to cervical cancer prevention (Drs. William R. Robinson III and David S. Alberts) to prostate cancer prevention (Dr. Omer Kucuk).

The CCRC closed its Friday, October 26, agenda with the Molecular Epidemiology Subcommittee meeting chaired by Dr. Regina M. Santella and attended by approximately 20 members and guests. The productive Subcommittee agenda included working discussions of the blood collection and potential molecular epidemiologic studies involved with the PCPT (SWOG-9217) and SELECT (S0000) and of Dr. Christine B. Ambrosone’s recently submitted ROI proposal (in collaboration with key members of the Committee on Women and Special Populations and the Breast Cancer Committee) to study genetic predictors of toxicity and recurrence in breast cancer patients treated on SWOG-8897.

CCRC Chair Dr. Scott M. Lippman presided over the CCRC Open Meeting on Saturday, October 27. Dr. Lippman welcomed the 75 to 100 members and guests in attendance and announced that Cal Bonugi had succeeded Jennifer Scott as the CCRC protocol coordinator.

Continued on the next page.
Highlights of this informative meeting included:

* the outstanding keynote address by Christine B. Ambrosone, Ph.D., Co-Chair of the Molecular Epidemiology Subcommittee and Director of Cancer Epidemiology, Derald H. Ruttenberg Cancer Center, entitled “Cancer Pharmacogenetics: A Molecular Epidemiologic Perspective.”

* the Harry E. Hynes CCOP Symposium (Chaired and moderated by Dr. J. Philip Kuebler) on “Recruitment in the CCOPs: Networking with Primary Care Physicians” featuring presentations and interactive discussion by Drs. Ellen R. Gritz, Joe D. Davison and Shaker R. Dakhil and Wichita CCOP’s Marge Good, RN, BSN.

* a timely update of SELECT, featuring presentations and interactive discussion by Drs. Lippman, Klein, Minasian and Elise Cook, and SELECT Project Manager Jo Ann Hartline, MPH.

The agenda finished with concise brief reviews of current business of the CCRC subcommittees.

Attendees receive three hours of CME credit.

Be sure to tune into these pages next issue to find out what exciting plans are bubbling for the Dallas CCRC Open Meeting in April 2002.

Dr. Ian Thompson Praises S9917 — A Call to PCPT Urologists —

PCPT Study Coordinator Dr. Thompson offered high praise for S9917, “L-Selenium-Based Chemoprevention of Prostate Cancer Among Men with High Grade Prostatic Intraepithelial Neoplasia (PIN),” in a recent letter to the Cancer Control Research Committee (CCRC). Dr. Thompson wrote in response to the query, “Why do you think urologists should recommend that their patients coming off the PCPT with high-grade PIN should consider joining S9917?” The text of his letter follows:

“Entry into S9917 is an attractive option for both the patient with PIN and the urologist taking care of the patient. We know that high-grade PIN is associated with a 30%-50% chance of prostate cancer in a repeat biopsy. Additionally, evidence suggests that this lesion may be premalignant—the cells that characterize high-grade PIN look microscopically just like moderately differentiated prostate cancer epithelial cells. The dramatic risk of concomitant prostate cancer or prostate cancer development has led many patients to seek methods to prevent the disease. There is evidence that selenium may play a role in prostate cancer prevention. For these reasons, S9917 was developed. The evaluation and follow-up of men who enter this protocol is a state-of-the-art series of steps, beginning with a repeat prostate biopsy. If this biopsy shows no cancer, then men begin taking a pill once a day—either selenium or placebo. They’re followed closely with examinations and PSA determinations—again, state-of-the-art follow-up.

“Men might ask, ‘Why shouldn’t I just take selenium instead of entering the trial?’ There are several reasons why we would recommend the trial rather than just taking the medication. First, like other supplements suggested to be effective in disease development, we really never know if they’re effective without doing a clinical study. For example, many men took beta-carotene to reduce their risk of disease, but this supplement turned out to increase lung cancer risk among men in two studies, a finding that would never have been known unless the studies were performed. Second, although selenium is generally very safe, there are potential side effects in a small number of men and there is a cost associated with taking it. Finally, without performing the trial, we’ll never know if selenium can actually reduce the risk of developing prostate cancer for men with high-grade PIN. For these reasons, S9917 is an outstanding way to approach men with high-grade PIN and an outstanding study for these men.”

(Please also see “A Letter from the Cancer Control Research Committee” in this issue for a further discussion of S9917.)
Southwest Oncology Group Protocol Update
September 1 — November 15, 2001

This PROTOCOL UPDATE is meant to be a handy reference for protocol activity during the stated period. When noting Temporary Closures and Reactivated Protocols, bear in mind that temporarily closed studies are often reopened after observation of some degree of antitumor activity in the initial cohort of patients. Other reasons for reopening studies could include revision of the protocol to enhance the margin of safety for patients or resolution of administrative problems, such as with drug supply or drug distribution. If you have any questions about a temporary closure or reactivation, you may wish to contact the Study Coordinator for more information.

ACTIVATIONS (NOTE: No Activations 09/15/01 and 10/01/01.)


S0001, A Phase III Study of Radiation Therapy (RT) and O6-Benzylguanine (O6-BG) Plus BCNU Versus RT and BCNU Alone For Newly Diagnosed Glioblastoma Multiforme (GBM) and Gliosarcoma. Study Coordinators: Drs. A.M. Spence, K.J. Stelzer, A.E. Sloan, E.J. Rushing, and D.M. Kokkinakis. Activation, 09/01/01.

S0027, Phase II Trial of Sequential Vinorelbine and Docetaxel in Advanced Non-Small Cell Lung Cancer Patients Age Seventy and Older, or With Performance Status 2. Study Coordinators: Drs. P.J. Hesketh and D.M. Lau. Activation, 09/01/01.

S0026, Evaluation of Interferon Alpha-2b (NSC-377523) and Thalidomide (NSC-66847) in Patients with Disseminated Malignant Melanoma, Phase II. Study Coordinators: Drs. L.F. Hutchins, and J.I. Clark. Activation, 11/01/01.

4B951, MVAC in Organ-Confined Bladder Cancer Based on p53 Status. Study Coordinator: Dr. S.P. Lerner. Activation, 10/15/01.

REACTIVATION REVISION


CLOSURES (NOTE: No Closures 09/15/01)


SWOG-9451, Induction Chemotherapy Followed by Chemoradiation for Organ Preservation in Patients with Advanced Resectable Cancer of the Hypopharynx and Base of Tongue, Phase II. Study Coordinator: Dr. S.G. Urba. Permanent Closure (effective 12/01/01).

S9701, Phase III Randomized Trial of 12 Months VS 3 Months of Paclitaxel in Patients With Advanced Ovarian, Fallopian Tube or Primary Peritoneal Cancer Who Attain a Clinically Defined Complete Response (CR) Following Platinum/Paclitaxel-Based Chemotherapy. Study Coordinators: Drs. M. Markman, B. Monk and S. Wilczynski. Permanent Closure (effective 12/01/01).


Continued on the next page.
CLOSURES (Continued)

S9922. A Phase III Trial of Dexamethasone, Cyclophosphamide, Etoposide, Cisplatin (DCEP) and G-CSF With or Without Thalidomide (NSC #66847) as Salvage Therapy for Patients with Refractory Multiple Myeloma. Study Coordinators: Drs. M. Hussein and J. Weick. Permanent Closure (effective 11/01/01).


TEMPORARY CLOSURES


Dr. Coltman Leads San Antonio Olympic Torch Relay

As Dr. Charles A. Coltman, Jr., made his way through the rain-soaked streets of San Antonio on December 11, it may have seemed like just another run; however, it was truly an historic run. Dr. Coltman and 90 other South Texans proudly escorted the Salt Lake 2002 Olympic Flame through the streets of San Antonio for the first time in the history of San Antonio.

All the torchbearers were nominated by friends and family for embodying the Olympic Spirit and for being an inspiration to their communities. Dr. Coltman had the distinction of lighting the city’s first torch and being the first torchbearer. “Climbing up to the front of the Olympic Train, where the huge Eternal Flame burned and lighting my torch from the flame was a thrilling moment,” Coltman said. “It was a once in a lifetime experience.” The list of other notable runners included innovative doctors, cancer survivors, and generous philanthropists.

Twenty-five thousand people lined the streets to watch the runners carry the Olympic flame along the 24.7-mile route. All the participants received an Olympic Torchbearer uniform as a reminder of their involvement in the 2002 Olympic Winter Games. The Olympic Flame will have traveled 13,500 miles across the United States in 65 days, carried by 11,500 torchbearers across 46 states (the greatest number of States ever covered by an Olympic Torch Relay in the U.S.) It will reach its final destination of Salt Lake City, Utah, in February.
Nurse Oncologist Committee News

**CHAIRMAN’S NOTES:**

The Fall 2001 Group Meeting saw the Nurse Oncologist Committee (NOC) focusing on new projects and new phases of existing projects in each subcommittee. The plenary session, “Future Agents, Future Regulations,” was very informative and stimulated planning for new research and educational projects. Lisa Stuckey-Marshall, Chairman of the Eastern Cooperative Oncology Group (ECOG) Nursing Committee, met with the NOC Executive Board. The purpose of this was to learn about the similarities and differences of our respective committees and to brainstorm for possible cooperative work.

With SO many new and continuing projects, the NOC needs your active participation. We need you to participate in the following ways:

1. **JOIN the NOC** if you are a RN working with Southwest Oncology Group clinical trials. Applications are on the Group’s web page or contact Patra Grevstad, Membership. Your organization receives credits for your membership.
2. **Answer and Return survey(s)** you will be receiving in the next months.
3. **Contact one of us** with your questions or ideas for new projects or program ideas.

**Executive Board members:**

Marcia Grove-Conrad, Chair & CWSP liaison, 251-435-3941
Lisa Hansen, Vice-Chair & Cancer Control liaison, 503-413-6285
Linda Davis, Secretary & Lay Advocates liaison, 313-745-2188
Dorothy Coleman, Co-Chair, Education Subcommittee, 808-586-2979
Rose Ermete, Co-Chair, Program Subcommittee, 313-593-8090
Marge Good, CCOP liaison, 316-268-5784
Patra Grevstad, Membership Subcommittee, 206-386-2442
Karen Mack, Co-Chair, Program Subcommittee, 501-296-1502, ext. 1231
Maggie Ramsey, Co-Chair, Research Subcommittee, 504-585-6062
Carolyn Schmidt, Co-Chair, Disease & Discipline Subcommittee, 313-916-7277
Anna Schwartz, Chair, Research Subcommittee, 503-94-8167
Deb Ward, Co-Chair, Disease & Discipline Subcommittee, 313-993-0965
Pam Williams, Co-Chair, Education Subcommittee, 864-560-6812

**Welcome New Members!!!**

The Nurse Oncologist Executive Committee would like to welcome four new members to the Nurse Oncologist Committee: Karen M. Baranowski, RN, MSN; Karmanos Cancer Institute; Holly K. Cignarale, RN, OCN; Greenville CCOP; Lisa M. Johnson, RN, BSN; Greenville CCOP; Dorothy J. Wiley, PhD., MPH, RN; UCLA Clinical Research Unit

**REPORTS FROM THE FALL 2001 GROUP MEETING:**

Committee on Women and Special Populations Liaison Report

There are six nurse members on this discipline committee. The three treatment studies for the elderly (70 years of age or older) are part of the elderly initiative of the CWSP Committee in conjunction with disease committees of the Southwest Oncology Group. There is a request for a nurse coordinator for the quality of life component of the GU-bladder study of this group. Interested NOC members with a strong GU or “quality of life” background are encouraged to contact Lisa Hansen or Marcia Grove-Conrad. The “Pulmonary Rehabilitation” capsule, which will be an ancillary study to lung study S9923, is under review now. Anna Schwartz, RN, PhD, a co-investigator on this study capsule, is a nurse researcher with extensive work in exercise programs and studies. She chairs the NOC Research Subcommittee.

The CWSP special project addressing “Barriers to Elderly Participation in Clinical Trials” is another committee project in which nursing is taking an active role. Maggie Ramsey, Co-Chair of NOC Research Subcommittee and whose past work with CALGB and present doctoral work addresses barriers to participation in clinical trials, is involved.

New areas of work for the Committee will address survivor issues of patients who participated in GYN study, SWOG-8501. The Lay Advocates subcommittee of CWSP remains very active, participating in the Disease Committees to which they are assigned. Linda Davis, Secretary of NOC, serves on this subcommittee to clarify nursing-related questions by the advocates. The Committee continues to monitor two breast studies that address support issues in S9832 and long-term cardiac toxicity in SWOG-9342. The CWSP is evaluating for future studies several treatment interventions for problems related to a woman’s health during or after participating in a clinical trial.

**Program Subcommittee**

One-hundred six members attended the Nurse Oncologist Committee plenary session “Future Agents – Future Regulations.” The program reviewed the Health Insurance Portability Act (HIPAA), medical privacy legislation and its potential impact on clinical research; targeted molecular agents EGF and VEGF receptor inhibitors; and unique neurologic and cutaneous toxicities associated with new chemotherapeutic agents. Program evaluations were very positive. Continuing Education Credits were provided through the Oncology Nursing Society and the Society of Clinical Research Associates.

**Research Subcommittee**

Ten nurses participated in the Research Subcommittee meeting where conducting nursing research within the cooperative group setting was discussed. Included was a very brief review of the Southwest Oncology Group organizational structure, focus and funding priorities for disease-specific clinical research, emergence of behavioral outcomes research including quality of life and symptom management, and the role of nursing in the Group. A review of current/proposed studies with significant nursing focus and/or coordination was presented, including S9908, A Double-Blind, Placebo-Controlled Trial to Study the Efficacy and Safety of L-Glutamine (in AES0014 Delivery Vehicle) Upon Radiation Therapy-Induced Oral Mucositis in Head and Neck Cancer Patients, Phase III; S9802, Phase III Trial: Smoking Cessation Intervention for Completely Resected Stage I and II Non-Small Cell Lung Cancer Survivors Who are Current Smokers, and the pulmonary rehabilitation study still in development.

Two new NOC proposals were discussed. Based on observations of nursing Executive Committee members and participants in Research Subcommittee meetings over recent years, the need for a more formalized overview of nursing research role and responsibilities and opportunities within the Group was identified. A proposed one-hour workshop entitled, “Research 101” will be introduced at the Spring Group Meeting, targeting nurses new to cooperative groups. Issues and topics planned include a brief introduction to Phase I/II/III studies, the Group organizational structure, differences between therapeutic and behavioral outcomes studies, nursing roles and responsibilities.

The second project involves the development of a cadre of nurses with enhanced training in quality of life (QOL) measures who would serve as nurse coordinators for QOL studies. The QOL study nurse coordinators will be required to complete the Southwest Oncology Group Study Coordinator training as well as a more in-depth training.

Continued on the next page.
on QOL measures, clinical application within studies and logistical issues related to implementation and completion. The Research Subcommittee will work with Carol Moinpour of the Behavioral and Health Outcomes Subcommittee to develop QOL training.

Group discussion regarding nursing research opportunities in symptom management resulted in a proposal for a Group-wide survey of the Group’s nurses to identify successful nursing interventions for peripheral neuropathies associated with administration of taxanes and oxaliplatin. A working group met to design the survey and establish a timeline for distribution. The survey will be mailed in early January with survey results slated for presentation at the Spring meeting. A proposal for a comparative study of two interventions for peripheral neuropathy identified through the survey will be developed during the Research Subcommittee meeting in the spring. Be on the lookout for the survey in January. Please complete and send back by February 1, 2002. The survey working group includes Maggie Ramsey (LSU), Jeannie Sixta (Loyala), Susie Lamb (VAMS, Little Rock), Terrie Durr (Cleveland Clinic) and Connie Kishbaugh (UC Davis).

A second issue of concern involved data management for studies using oral medications. Major concerns included toxicity assessments (time, frequency), compliance with dose/schedule, and dose modifications, particularly already-dispensed medications with administration instructions on the label that are changed verbally without changing the label or container. These concerns will be forwarded to the Disease and Discipline and Education Subcommittees to determine if nurse liaisons and/or Education Subcommittee members might develop nursing guidelines for inclusion in studies involving oral medications.

Disease and Discipline Subcommittee

There are still two openings for nurse liaisons to the Brain and Leukemia Committees. Individuals who have experience and interest in either of these two areas should contact Deb Ward at 313-993-0559 or Carolyn Schmidt at 313-916-7277. Nurse liaisons play a vital role in development of new protocols by providing nursing expertise. In addition, they are involved in an exciting new project of developing protocol fast fact sheets for each new Southwest Oncology Group protocol. Thus far, over 250 fact sheets have been developed and are either incorporated into newly activated protocols or are awaiting protocols still under development. Future projects for this Subcommittee include the development of a nurse mentorship in conjunction with the Oncology Nursing Society (ONS) Clinical Trials SIG (Special Interest Group) and the opportunity to assist with the coordination of quality-of-life studies in conjunction with the Nurse Oncologist Research Subcommittee. Our nurse liaisons are working diligently and are to be commended for their efforts — thanks to all of you.

Cancer Control Nurse Liaison

The Cancer Control Committee featured a provocative presentation entitled “Cancer Pharmacogenetics: A Molecular Epidemiologic Perspective” by Dr. Christine Ambrose. The data shared by Dr. Ambrose illuminated potential theories regarding how detoxifying enzymes and radical oxygen species inactivation enzymes might affect patients’ responses to cancer treatment. Training sessions were held for S0002, the smoking cessation study, and for S9908, the Glutamine study for radiation therapy related mucositis. S0002 should be activated in the next month and S9908 was activated on November 1, 2001. Both studies carry cancer control credits for CCOPs.

Education Subcommittee

It was the first Group Meeting for about half of the ten nurses attending the Education Subcommittee meeting. Dorothy Coleman, Co-Chair, explained the organizational structure of the Nurse Oncologist Committee. Posters and the Group’s newsletter and web site were discussed.

Dorothy talked about the Drug Manual, a Pharmacy/Nurse Oncologist Committee collaboration and asked for volunteers for the Subcommittee. She reported that all drugs will be reviewed every two years and new monographs will be added as needed. Drug Manual updates will be included into the bi-monthly table of contents of updates on the Group web site. All nurses were urged to attend the BSE workshops and orientations for new nurses at the Nurse Plenary Session. Another Education Subcommittee contribution is the Nursing Manual which will be updated annually.

New projects include nurse auditors with interested nurses being asked to submit an application. An auditor manual is a proposed project. Collaboration with the CRA Committee, “Partnership for Life,” is in its early development. This project had been piloted by J. Hilger of the CRA Committee.

The new HIPAA regulations and their impact on research were discussed with further discussion planned for the next meeting. Nurses were urged to bring ideas/tools to the next Subcommittee meeting. Karen Mack, the new program co-chair, was introduced. Suggestions were exchanged for possible future programs. Two nursing poster sessions were displayed at the Fall 2001 Group Meeting — one on the Nurse Oncologist/Pharmacy Committee Drug Manual and another on the upcoming Oral Mucositis-Glutamine Study.

CCOP Nursing Subcommittee Report

Updates pertaining to SELECT, cancer control study opening updates and attendance at the Cancer Control Committee meeting were discussed. Everyone was again encouraged to enroll patients to the S9917, the high-grade PIN study using Selenium vs. placebo. Local issues pertaining to study recruitment and enrollment were discussed. Members present felt there were difficulties with the trial, but accrual was beginning to increase. The possibility of workshops specific to pathologist training were discussed and very positively received.

Marge Good presented information shared at the recent Summit on Clinical Trials held in Washington D.C., October 3 – 5, 2001. Nursing input into clinical trials research and conduct were emphasized as being very important to the clinical trial process and was often an important factor resulting in increased accrual as well as quality data. As a result of this discussion it was felt that a survey of various needs including accrual issues, job role delineation, nurse retention, adequate salary compensation, workload, consent translation for special populations and pharmacy concerns was needed. Marge will develop the survey with assistance from volunteers from various CCOPs and have the survey distributed to SWOG CCOPs initially. The survey will be completed by administrators as well as non-administrative nursing staff involved in the clinical trial arena. Results will be compiled and presented in a poster session at the 2002 Spring Group meeting as well as at the Spring CCOP Nurse Subcommittee meeting and in The Group Newsletter. The survey may also be sent to other research base nurses as a means of obtaining a broader perspective of current issues within the CCOP structure. If you have additional comments or additions you would like to have included in the survey please contact Marge Good at (316)268-5696 or marge_good@via-christi.org.
The Southwest Oncology Group extends special thanks to the following for their support of the Fall 2001 Group Meeting in Chicago, Illinois

Patron
Aventis Oncology
Bristol-Myers Squibb
Glaxo-SmithKline

Centurion
Eli Lilly and Company
Genentech, Inc.
Pharmacia Corporation

Pacesetter
Agouron Pharmaceuticals, a Pfizer Company
Amgen
ImClone
Immunex
Novartis
Sanofi Synthelabo
Schering Oncology/Biotech
SuperGen

Supporter
AstraZeneca
Berlex Oncology
Chiron Therapeutics
IDEC Pharmaceuticals
Ligand Pharmaceuticals
MedImmune Oncology, Inc.
Oncotech
Ortho-Biotech
PerMedics
Roche Laboratories, Inc.
Wyeth/Genetics Institute

CRA Open Forum Update

Amalia Rincon, CTR, CCRP, and Linda Balla, CTR, CCRP, extend their thanks to all who attended the CRA Open Forum in Chicago. Your patience with program difficulties was especially appreciated. Attendance was down at this meeting, but this is understandable given the circumstances.

One of the new tables at this meeting featured “Before Hospice-Simultaneous Care,” a program that offers nursing and supportive care to patients who have a life expectancy of one year and who are still receiving treatment. Once again, the most popular topic was “Time Management Tools” with a total of 38 people in attendance. Other popular topics included “Surviving the IRB Process” and “Back to the Basics.” Twenty-one people filled out the evaluation form. Overall, the event was rated from Good (6) to Super (15). Everyone agreed that they would attend future CRA Open Forum roundtables.

Some new topics suggested for the 2002 Spring Group Meeting included roundtables dealing with the different chemotherapy side effects, tumor measurements, lymphoma staging, sentinel node biopsy, and increasing accrual. Linda and I will be working hard to fulfill your requests. Remember that this is your forum so please keep those suggestions coming. Also, if you know of anyone who is knowledgeable in a specific area of interest, please give us their name so we can contact them. If you would like to volunteer as a facilitator, please don’t hesitate to contact us by e-mail — I can be reached at arincon@mednet.ucla.edu. Linda can be reached at linda.balla@ucdavis.

We would like to give special thanks to the American Cancer Society for their continued participation at the Open Forum. A big “thank you” is also extended to all the facilitators who donated their time and expertise so others can benefit. A final thanks goes to Amgen for providing us with refreshments.

Remember that this is your Committee and it is through your participation and involvement that we will continue to flourish as professionals. Thank you and see you in Dallas. Remember to look in your registration packet for a complete agenda of what we have in store for you!

CRA Tools

- For ECOG and CALGB studies, you may submit your forms directly to ECOG or CALGB.
- You don’t need to send the Southwest Oncology Group Enrollment Worksheet to SWOG, ECOG, or CALGB.
- Don’t forget to delete or cover patient names when you are submitting pathology reports, operative reports or other reports that include the patient’s name. Use initials only. DO remember to include the Southwest Oncology Group or other group patient number and the study number on these forms. One simple way to accomplish this is to print out labels with the patient initials, Southwest Oncology Group or other group patient number, study number, and the Southwest Oncology Group institution name. The label can be used to mask the full patient name.
Clinical Research Associates Committee Update

Thank you to everyone for the warm welcome extended at the Chicago meeting to me (Jeana Cromer) as your new Chair. I am looking forward to a productive term and count myself very lucky to have the support of such talented and willing CRAs, especially on the Executive Board and serving as Chairs of our Subcommittees. Many thanks to all these individuals for their hard work before, during, and after our Group Meeting.

The Multiple Myeloma Workshop was very informative. The turnout was somewhat lower than in past months, probably due to travel cancellations as a result of the September 11 tragedy. However, we do have a video of this workshop and I encourage you to place an order (see the Videotape Order Form at the end of this newsletter) if you missed the Workshop, especially if you work closely with myeloma protocols. There are several new studies in the pipeline and I’m sure this Workshop will answer many questions and be very helpful.

Plans are already under way for the next Continuing Education Workshop. The focus will be Breast Cancer and we are planning an excellent agenda that potentially will include topics such as sentinel lymph node biopsies, new advances in therapy, and new imaging radiological techniques. Please mark your calendars and plan to attend.

The CRA Plenary Session on the Genetics was also well received. Preliminary plans for the next Group Meeting include topics such as breast cancer survivors and breast reconstruction. We welcome your suggestions for future topics and potential speakers.

The Head CRA Subcommittee meeting was very productive. This meeting is open to all CRAs that serve as the head CRA at their institution, whether you are from a member, CCOP, or affiliate institution. Please make plans to attend this meeting if you can as very useful information that you need to share with your colleagues is discussed, including updates from both the Operations Office and the Statistical Center. The major focus of the Head CRA Subcommittee at this time is to plan an educational program for Head CRAs and Principal Investigators. If you would like to be involved, please contact one of the new Co-Chairs for this Subcommittee: Phyllis Stein at Grand Rapids CCOP, or Gina Gregovich at the University of Utah.

Plans are to offer the SoCRA (Society of Clinical Research Associates) examination at every Group meeting if there is enough interest. If you are interested in taking the exam, please refer to the information included elsewhere in this newsletter.

Again, thanks to everyone for helping to make the CRA Committee a success and an important part of the Southwest Oncology Group.

CRA Plenary Session CEUs Available Via Internet

For everyone who attended the CRA Plenary Session on October 25, CEU’s are now available. You may download your certificate for 2.75 Continuing Education Credits from the Southwest Oncology Group web site at http://www.swog.org. Go to the “Members” section and click on “Bulletin Board.”

The Fall CRA Plenary Session was very informative. Dr. Marie Wood explained who should receive genetic counseling, when it should be done, and some of the complications associated with testing. After Dr. Marilyn L. Slovak’s talk on “The Essentials of Classic Cancer Cytogenetics,” all of us can probably now read and understand a cytogenetic report. I personally will not forget that the short arm of the chromosome is p (petite) and the long arm is q.

Who would ever believe that a talk entitled “A Colorful Approach to Analysis: Basic FISH Technology in Molecular Genetics,” as presented by Dr. Arthur R. Brothman, could be both informative and humorous. Thank you, Dr. Brothman, for such an enjoyable talk. Oncogenes, gene amplification, and growth factor are no longer just words that are often heard, but rarely understood. Dr. Diane L. Persons’ presentation “DNA Alterations in Cancer,” helped all of us have a better understanding of cell growth.

Dr. Jacqueline Batanian, with her presentation “From Chromosome Translocations to Drug Discovery,” managed to tie the program together extremely well! If you need to refresh your memory, you can download Dr. Batanian’s slide presentation from the Southwest Oncology web site. You’ll find it by going to the Members section and clicking on Bulletin Board.

CRA Reps Needed

CRA representatives are needed for the GYN and Leukemia Committees. The CRA representative is responsible for reviewing protocols before they are activated and making suggestions for improvements. CRA representatives are also needed for the Affiliate Program and Pharmacy Committees. With these two committees, you will be providing input on CRA issues. The affiliate representative should be from an active affiliate institution. If you have an interest in one of these areas and you have experience working with these sites or areas, please contact Beth Davis at 510-204-3428 or by email at bdavis@salick.com.

CRA Tools

Do you have any tools you have developed to make a job or a task easier to manage at your institution? If so, please consider sharing your tools with other CRAs. The CRA Communications Subcommittee plans to have a “Tool Table” at the next Southwest Oncology Group Meeting in Dallas. Please contact Beth Davis at 510-204-3428 or by email at bdavis@salick.com to let her know what you can bring to the meeting or send prior to the meeting.
Cytogenetics Committee Update

Co-Chair Announcement: Sandra R. Wolman, M.D., has agreed to function in the capacity of Co-Chair for the Cytogenetics Committee. She may be reached at 301-571-1880 or 301-983-0698, or email wolmans@erols.com or swolman@pathol.faseb.org.

New Cytogenetics Committee Data Coordinator: Marie Kyle, B.A., has accepted the position as the Cytogenetics Committee Data Coordinator. Her office is located at City of Hope National Medical Center. She may be reached at 626-930-5385, fax 626-930-5390, or email mkyle@coh.org. Her mailing address is City of Hope National Medical Center, Cytogenetics Laboratory, Northwest Building, Room 2255, 1500 East Duarte Road, Duarte, CA 91010.

The Committee welcomes each of these new additions/changes. If either of these two individuals can be of any assistance, please do not hesitate to contact them directly.

CTSU Creates Handy Checklist to Smooth Registration Process

What do you have to do to register your site and/or your patient with Clinical Trials Support Unit (CTSU)? Consult the CTSU Process Checklist.

What’s the CTSU Web address? Refer to the CTSU Process Checklist.

What’s the Help Desk number? Look on the CTSU Process Checklist.

Just what is this CTSU Process Checklist?

According to Dennis DeRycke, CTSU Data Operations Manager, “It contains the important steps you need to follow to register a site or patient with the CTSU; to select and download protocols and other material; and to enroll patients. It also contains important contact information. If the sites follow this checklist, and have all the approvals ready, the process of registering your site or enrolling a patient will go very smoothly and a lot quicker.”

The registrars were receiving a large volume of calls from the sites all with the same questions about how to register and enroll patients on CTSU trials. To respond to this need, the CTSU Process Checklist was developed.

To find the checklist, just go to the CTSU member’s side of the Web site (http://members.ctsu.org) and print out the “CTSU Process Checklist.” Keep this handy checklist on your bulletin board.

The CTSU Process Checklist was posted on the Web site in mid-July. “We’re very eager to hear if this list is helpful,” said DeRycke. Send your feedback about the form, and any other suggestions to the CTSU, by calling the CTSU Help Desk (1-888-823-5923) or via e-mail at CTsucontact@westat.com.

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— HOLIDAY SCHEDULE —

Statistical Center and CRAB Offices
Christmas Eve and Christmas Day, Monday and Tuesday, December 24 & 25, 2001
New Year’s Day, Tuesday, January 1, 2002
Martin Luther King Day, Monday, January 21, 2002
President’s Day, Monday, February 18, 2002

Operations Office
Christmas Eve and Christmas Day, Monday and Tuesday, December 24 & 25, 2001
New Year’s Day, Tuesday, January 1, 2002
Operations Office Staff News

**Larissa S. Rios** has joined the Operations Office staff as Protocol Coordinator for the Leukemia, Myeloma, Pathology, Bone Marrow Transplantation, and Immunomolecular Therapeutics Committees. Larissa’s previous work experience included laboratory research of environmental toxins and water quality analysis.

Statistical Center Staff News

We are pleased to welcome two new statisticians to the Statistical Center staff. **Caroline Jiang**, M.S., received her degree from the University of Washington this summer. Caroline worked at the Southwest Oncology Group Statistical Center as a Research Assistant during her training. She has joined the statistical team of the GYN and Breast Committees. **Jim Faulkner**, M.S., is the newest member of the GU Committee. Jim has recently relocated from Corvallis, Oregon, where he received his degree from Oregon State University.

**Katie Gower** joined the statistical team for both the Prostate Cancer Prevention Trial and SELECT. Katie finished her Master’s Degree in Biostatistics from the University of Washington in September under the guidance of Donna Pauler, Ph.D. Katie’s statistical skills will be put to good use on both trials.

**Jennie Barrett** joined the SELECT team as a Data Control Technician in October. She was previously the Fileroom Specialist for the Statistical Center. Jennie is trained as a culinary arts specialist and is pursuing a degree in behavioral science.

Royce and Remi Gallevo celebrated the arrival of their new baby girl at 4:00 am on October 5. Dominique weighed in at a healthy 7 pounds, 9 ounces. Congratulations to the Gallevo family!

Pharmacy Committee News

1) **Membership Application Information**
You are invited to join us! All applications for membership in the Pharmacy Committee should be addressed to Dr. Charles A. Coltman, Jr., at the Southwest Oncology Group Operations Office. The application must include a letter of recommendation from the Principal Investigator of the institution and the curriculum vitae of the applicant. For pharmacists who are already Group members, a letter of interest in joining the Pharmacy Committee may be sent directly to Dr. Siu-Fun Wong or to Dr. Coltman.

2) **Welcome to our new NCI pharmacist liaison**
The Pharmacy Committee wishes to welcome our new National Cancer Institute pharmacist liaison, Matthew Boron. We also wish to send Dr. Aiman Shalabi our best wishes and sincere appreciation for his support and contribution to the Pharmacy Committee.

3) **Disease Committee Pharmacist Liaisons**
Pharmacist liaisons have been attending various disease committees at the Group Meetings. We are looking for more pharmacist liaisons. If you attend the Southwest Oncology Group Meetings on a regular basis and are interested in being a pharmacist liaison, please contact Dr. Siu-Fun Wong at (909)469-5591 or e-mail siuwong@westernu.edu.

4) **Investigational Drug Handling Workshop**
The workshop will continue to be offered at future Group Meetings. A new schedule is being considered at this time. Please look for an announcement before the next Group Meeting and mark your calendar.

5) **What’s happening?**
In addition to participation in various education programs, disease committees, and protocol drug information, we are working on obtaining Continuing Education accreditation for pharmacists, patient education monographs, investigational agent extravasation policy and procedures, and a Pharmacy Committee Reference Manual. Got any good ideas? Call us.

SELECT News

The second semi-annual SELECT Workshop & Poster Session was held October 24 and 25 in Chicago, Illinois. Approximately 300 Study Site staff attended this workshop. Breakout Sessions were introduced at this workshop covering hot topics such as funding issues, recruitment, study supplements and specimens, the new Alzheimer’s Disease ancillary study (PREADVISE), and much more.

The Statistical Center is currently reviewing the Evaluation Form distributed at the workshop to collect feedback on topics to incorporate in future workshops. If you were unable to attend the workshop but would like to submit suggestions, please send an email to: selecthelpdesk@koi.fhcrc.org.
Southwest Oncology Group
Future Meeting Dates

--- April 17 - 21, 2002 ---
Hyatt Regency Dallas Reunion
Dallas, Texas

--- October 23 - 27, 2002 ---
Hyatt Regency San Antonio Riverwalk
San Antonio, Texas

--- April 9 - 13, 2003 ---
Hyatt Regency San Diego
San Diego, California

--- October 1 - 5, 2003 ---
Sheraton Seattle Hotel & Towers
Seattle, Washington

Check the Southwest Oncology Group website for updates!
http://swog.org
(Meetings & Training Section)

Nevada Cancer Center PI Takes Wheel On Final Leg of 50-State Drive for Hope

Nevada Cancer Center Principal Investigator Nikolaos Touroutoglou, MD, PhD, (on the left), and Porsche Drive Team Leader Billy Edwards celebrate after driving from Flagstaff to Las Vegas to complete the final leg of the 2001 Drive for Hope. In recognition of the events of September 11 this year, Porsche and The Hope Foundation will donate 20 percent of all proceeds from the Drive to the New York Firefighters 911 Disaster Relief Fund. For more details of this event and other activities of The Hope Foundation go to www.thehopefoundation.org.

--- Coming to the 2002 Spring Group Meeting ---
Study Coordinators Workshop for Physician Investigators Planning to Conduct Clinical Trials With the Southwest Oncology Group

If you are a Southwest Oncology Group physician interested in conducting a Southwest Oncology Group-coordinated research trial, the Study Coordinators Workshop (SCWS) is designed just for you! The Study Coordinators Workshop is conducted only once a year at the Spring Group Meeting. Registration is required; however, there is no registration fee.

ALL physician investigators who have never served as a Southwest Oncology Group Study Coordinator and who wish to coordinate a Group protocol MUST attend the Study Coordinators Workshop. The primary objective of the SCWS is to provide the foundation necessary to perform your responsibilities as a Southwest Oncology Group Study Coordinator. Participants must attend the full course to receive approval to coordinate a Southwest Oncology Group research trial.

The Study Coordinators Workshop is scheduled for Thursday, April 18, 2002, at the Spring Group Meeting in Dallas, Texas. Mark your calendar now! Complete information will be in the February 2002 Group Newsletter!
VIDEOTAPE ORDER FORM

CLINICAL RESEARCH ASSOCIATES COMMITTEE

__ GU Diseases: Renal Cancer Overview (4/98)
__ GU Diseases: Locally Advanced Bladder Cancer Overview (4/98)
__ GU Diseases: Advanced Bladder Cancer Overview (4/98)
__ Everything You Need to Know About Radiotherapy...But, Were Afraid to Ask (4/98)
__ Side Effects and Toxicities of Radiation Therapy (4/98)
__ Adrenal, Prostate & Testicular Cancer: Surgical Overview; Pathological Overview (10/98)
__ Adrenal, Prostate & Testicular Cancer: Radiation Therapy; Medical Oncology; Introducing CAPRI (Cancer of the Prostate Risk Index); Panel Discussion (10/98)
__ Head & Neck Cancer: Preneoplasia, Chemoprevention, Organ Preservation (10/99)
__ Head & Neck Cancer: Resectable Carcinoma, Adjuvant Therapy, Unresectable Disease (10/99)
__ Immunologic Therapy: Vaccine Therapy (4/00)
__ Immunologic Therapy: Antibody Based Therapies (4/00)
__ Immunologic Therapy: Intermediate Endpoints in Cancer Immunotherapy (4/00)
__ IRB Basics & Beyond (4/00)
__ Brain Tumors: Surgical management; Pathology (10/00)
__ Brain Tumors: Radiotherapy; Chemotherapy (10/00)
__ Federal Guidelines Governing Research and IRBs: Quality Improvement - Achieving Compliance; Hot Spots & Various Sundries (4/01)
__ Federal Guidelines Governing Research and IRBs: Common SWOG Audit Deficiencies; The IRB Decision Process (4/01)
__ Federal Guidelines Governing Research and IRBs: Misconduct in Clinical Research (4/01)
__ Multiple Myeloma: Myeloma Therapy, Past, Present, and Future; Overview of Myeloma (10/01)
__ Multiple Myeloma: Gene Expression Profiling; New and Improved Response Coding on SWOG Protocols (10/01)

MAIL TAPES TO:

NAME: ____________________________
ADDRESS: ____________________________ DEPT: ____________________________
CITY: ____________________________ STATE: ________ ZIP CODE: ____________________________
TELEPHONE: (__) __________________ AFFILIATION/INSTITUTION: ____________________________

_____ I assume responsibility for the prompt and safe return of all tapes requested. There will be a $10 replacement fee for damaged or lost tapes. There is a maximum three (3) week loan period.

SIGNATURE: ____________________________

NOTE: If several tapes are ordered, it may take up to several months to complete the order.

MAIL ORDER FORM TO: Jeana Cromer, Myeloma Institute for Research and Therapy, University of Arkansas for Medical Sciences, 4301 West Markham, Slot 815, Little Rock, AR 72205. Or, you may fax the form to (501) 686-5831, attention: Jeana Cromer.
The Society of Clinical Research Associates (SoCRA) CRA certification examination will be offered at the Southwest Oncology Group meeting in Dallas, TX. The examination, conducted by SoCRA, will be Wednesday, April 17, 2002. The deadline for application is February 27, 2002.

The purpose of the certification program is to create an internationally accepted standard of knowledge, education, and experience by which clinical research associates will be recognized as professionals in medical research. Individuals achieving a passing score on the examination may use the title “Certified Clinical Research Professional” or the initials “C.C.R.P.” after their name.

Applicants must be current members of SoCRA in good standing and have been employed two of the last five years as a clinical research associate. You may apply for membership in SoCRA at the same time you apply for the certification examination.

The certification examination consists of five major areas of content: 1) conduct of clinical trials; 2) institutional review boards and regulations; 3) ethical issues; 4) ability to follow instructions; and 5) abstracting information from medical records. Applications for the certification examination and membership in SoCRA may be obtained by calling 1-800-SOCRA92 or 215-354-7749. Information and applications can also be obtained from the SoCRA Web site at the following address:

www.socra.org

The Southwest Oncology Group contact person is Jeana Cromer; she may be reached either by phone at (501) 296-1503, ext. 1441, or by email at CromerJeanaL@uams.edu.

See You
Next Year!