SWOG S2104 Social Media Toolkit: How to Use This Toolkit

For 2 weeks after activation, SWOG will promote its new trials through its Twitter account. SWOG also encourages study chairs, other members of the trial team, and the clinical sites that open studies to use Twitter and other social media channels to promote their trials – when those studies launch and while they accrue patients.
This toolkit will help you promote your trial with ready-made tweets and graphics. All materials were custom-made for your trial. They're approved by the Central Institutional Review Board (CIRB) for the National Cancer Institute and meet SWOG brand and style guidelines. No need to write or design anything. No need to secure permissions. Just use the posts and graphics as is.

Here are some tips for using this toolkit:

- **Use the samples and graphics.** All tweets in this kit meet the 280-character count for tweets – and the language has been approved by the NCI CIRB. Graphics are custom sized for Twitter, though they can also be used on other social media platforms such as Facebook. Using these tools will make trial promotion easy. When you post a tweet, include one of the attached graphics to attract greater attention. All graphics are also available as individual .jpg images packaged in a single ZIP file at swog.org/clinical-trials/S2104.
- **Use hashtags.** Hashtags can also capture attention, and they're searchable on Twitter. Common cancer hashtags include #BCSM for breast cancer social media and #LCSM for lung cancer social media. For a full list of hashtags, visit the Symplur.com website.
- **Tag your friends and partners.** Using handles (Twitter account names) will get your posts in front of more people – and the right ones. For example, you could tag @theNCI or @SWOG or tag your home institution, such as @UMRogelCancer. Tag individual members of the trial team, or advocacy groups that focus on the cancer type your trial is addressing. Use the "Search Twitter" feature on the site to find the handles you're looking for.
- **Don't sell. Educate.** Note that the tweets below don't directly sell the trial. Instead, they inform readers about the trial's goals and importance. "This trial is testing immunotherapies to see if they can shrink rare tumors" is better than "Ask your doctor today about enrolling on this rare cancers trial!"
- **Use a call to action.** These tweets send readers to SWOG.org to learn more. All new trials will have patient-directed information at swog.org/SXXXX to complement the provider-directed information at swog.org/clinical-trials/SXXXX. They use NCI Contact Center information – 1-800-4-Cancer as well. Readers can also be pointed to the Contact Center's website at cancer.gov/contact for phone, live chat, and email contact information.
- **Ask for help.** Ask your hospital's communications office to promote your trial on Twitter. Ask your committee's patient advocate for help, or approach advocacy groups that engage the patients you're seeking.

For sites opening the trial to enrollment:

- The final tweet in this packet is for use by individual sites on their own social media accounts to announce that they have opened the trial to enrollment. Simply replace the content in brackets with your institution's name, leaving the remaining text unchanged.

Questions? Contact SWOG Communications Manager Frank DeSanto at fdesanto@swog.org.

SWOG S2104 Tweets

Week 1: Patient-Focused Tweets (one per day, Monday through Friday)

Study S2104 is for people who had surgery to remove a high-risk #pancreatic #neuroendocrine tumor (#pNET). It asks if chemotherapy after surgery can lower the chance of tumors coming back. Learn more at SWOG.org/S2104. Or call 1-800-4-CANCER. #NETcancer #pancsm @PanCAN

Did you have a high-risk #pancreatic #neuroendocrine tumor removed in the past 3 months? #clinicaltrial S2104 may be a treatment option for you. It tests #chemo after surgery to help keep these tumors from returning. Learn more at SWOG.org/S2104. Or call 1-800-4-CANCER. #NETsm

There is no proven treatment after surgery for high-risk #pancreatic #neuroendocrine tumors. Study S2104 aims to find out if chemotherapy can help keep these tumors from returning. Learn more at SWOG.org/S2104. Or call 1-800-4-CANCER. @CarcinoidNETs #raredisease #pancsm

S2104 is a study to find out if people benefit from further treatment after surgery for high-risk pancreatic #neuroendocrine tumors. It tests chemotherapy using capecitabine and temozolomide. Learn more at SWOG.org/S2104. Or call 1-800-4-CANCER. @netcancerfound #pancsm

High-risk #pancreatic #neuroendocrine tumors are more likely to come back after surgery. Study S2104 asks if chemo after surgery can lower the chance of tumors returning and help patients live longer. Learn more at SWOG.org/S2104. Or call 1-800-4-CANCER. @letswinpc #pancsm

Week 2: Provider-Focused Tweets (one per day, Monday through Friday)

.@SWOG trial S2104 randomizes patients with high-risk #pancreatic #neuroendocrine tumors to capecitabine + temozolomide vs. observation only. Primary endpoint: recurrence-free survival. #pNET
PI: @helops79 @huntsmancancer
SWOG.org/clinical-trials/S2104

1%-2% of #pancreatic tumors are #neuroendocrine tumors (#pNETs). Surgery is the only curative treatment, but the disease will recur in many patients. S2104 tests whether adjuvant #chemo extends RFS and OS.
Co-PI: @SyedAAhmad5 @uc_health
SWOG.org/clinical-trials/S2104

S2104 is the 1st prospective study of adjuvant cytotoxic #chemotherapy for patients w well-differentiated #pNETs w high-risk features. Patients within 90 days of R0 or R1 resection may be eligible.
Co-PI: Mary Kay Washington, MD @VUMC_Cancer
SWOG.org/clinical-trials/S2104

The @SWOG S2104 trial is enrolling patients with high-risk #pancreaticneuroendocrinetumors:
- localized resected #pNETs
- Zaidi score 3+
- Ki-67 result 3% to 55%, inclusive
- PS = 0-2
@NRGonc Champion: @RamnaraignMD @URHealthCenter
SWOG.org/clinical-trials/S2104

There's little data on whether adjuvant therapy benefits patients w high-risk well-differentiated #pNET. @SWOG S2104 is generating that data.
Compares adjuvant CAPTEM to observation.
@Alliance_org Champion: Nitya P. Raj, MD @MSKCancerCenter
SWOG.org/clinical-trials/S2104

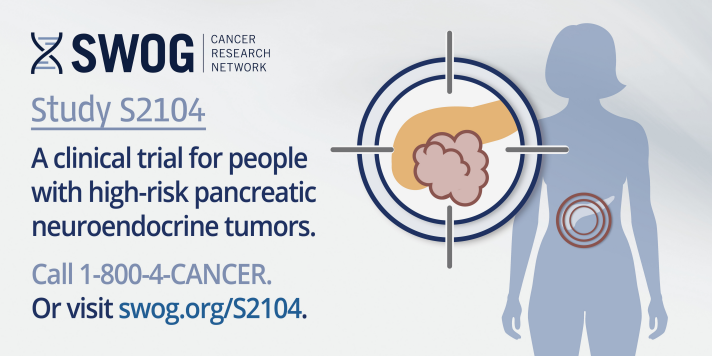
S2104 enrolls patients with high-risk well-differentiated #pNETs within 90 days of surgery.
Tests post-surgery capecitabine + temozolomide vs. current standard of care: observation.
@eaonc Champion: Sameer Patel, MD @uc_health
SWOG.org/clinical-trials/S2104

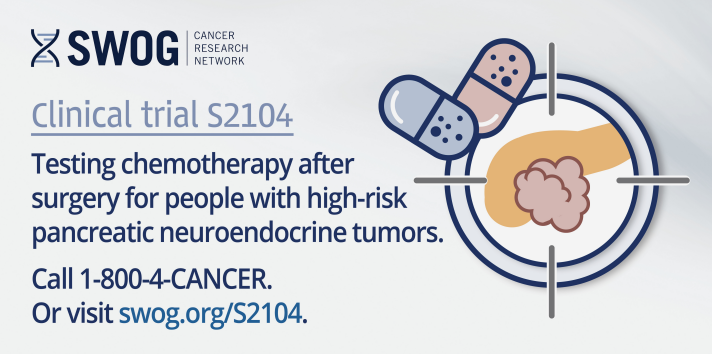
Tweet for Clinical Sites Announcing New Trial Locations

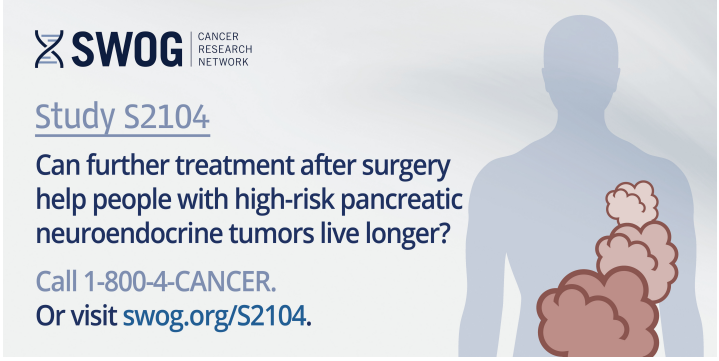
The tweet below is for use by individual sites on their own social media accounts to announce that they have opened the trial to enrollment. Simply replace the content in brackets with your institution's name, leaving the remaining text unchanged.

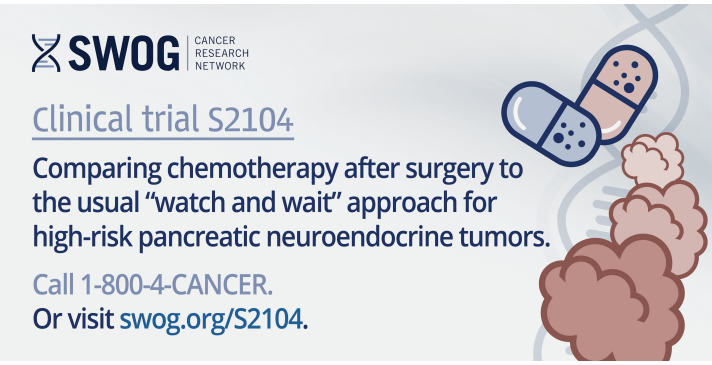
[insert site name] is now enrolling to S2104, a #clinicaltrial for people who had surgery to remove a high-risk #pancreatic #neuroendocrine tumor (#pNET).
Learn about the study at SWOG.org/S2104. Or call 1-800-4-CANCER.

S2104 social media graphics to accompany patient-directed tweets:
[text to appear on graphics]









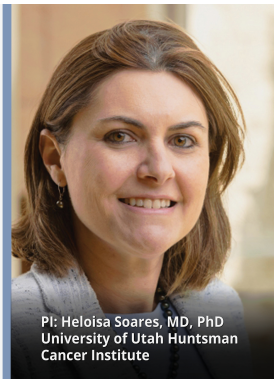
2104 social media graphics to accompany provider-directed tweets:
[text to appear on graphics]

SWOG CANCER RESEARCH NETWORK

Study S2104

Adjuvant capecitabine + temozolomide vs observation in high-risk well-differentiated pancreatic neuroendocrine tumors (pNETs)

swog.org/clinical-trials/S2104



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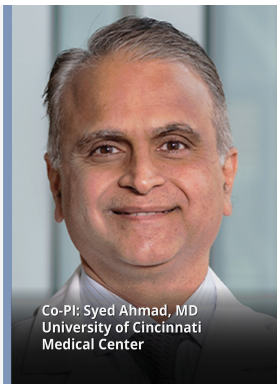

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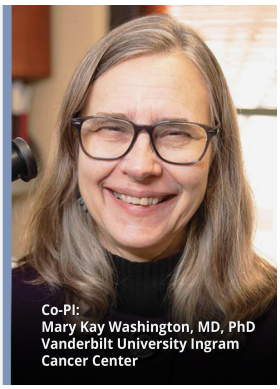

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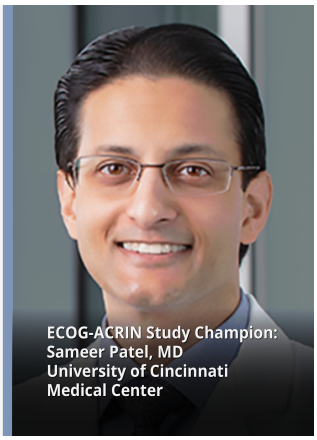

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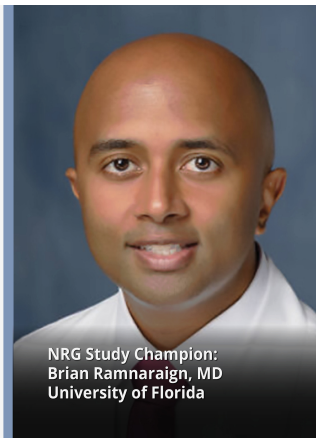

Study S2104

Patient with resected high-risk pancreatic neuroendocrine tumor

↓

2:1 randomization

↙ ↘

Arm 1
4 x 28-day cycle capecitabine + temozolomide

Arm 2
4 x 28-day cycle observation

↓ ↓

Off-treatment follow-up for 5 years

swog.org/clinical-trials/S2104

SWOG CANCER RESEARCH NETWORK