

# The Cancer Research Network • Connection

## In this issue...

CRN Science Update...page 2

Cancer Survivorship Research...page 4

Recent Findings from CRN Scientists...page 4

Welcome to Two New CRN Site Pls ...page 5

CRN Pilot Funds Program Awards ...page 5

Communications & Collaborations Committee Profile ...page 6

CCRC Interactive Forum...page 6

Request for CRN Pilot Proposals ...page 6



*The Cancer Research Network (CRN) is a collaboration of 14 non-profit HMOs committed to the conduct of high-quality, public domain research in cancer control. The CRN is a project of NCI and AHRQ.*

## News from Ed, Larry, and Mark

### *Update from the CRN Executive Committee*

One of the aims of the CRN is to increase collaborations between CRN sites and investigators at the NCI, cancer centers and other academic centers. CRN Scientific Interest Groups (SIGs) foster such collaborations. The CRN Cancer Survivorship SIG, led by Larissa Nekhlyudov (HPHCI) was highlighted at the 5th Biennial Cancer Survivorship Research Conference in June. Bob Croyle, Director of the

DCCPS at NCI, gave a plenary presentation on NCI research priorities. He devoted considerable attention to promoting the Cancer Research Network as a strategic asset for advancing survivorship research. He pointed out Dr. Nekhlyudov in the audience and urged conference participants to talk with her about opportunities for research collaborations. During the conference, she took the opportunity to meet with

non-CRN members and invited them to join the CRN Cancer Survivorship SIG. At the August call, the group decided to increase the frequency of conference calls from quarterly to monthly in response to this high level of interest. A list of CRN-related posters presented at the conference is on page 4 of this issue.

*-Ed Wagner (GHC), Mark Hornbrook (KPNW), Larry Kushi (KPNC)*

## News from NCI

### *Update from the CRN Program Director*

We are pleased to announce that Nobel Prize-winning researcher, former NIH Director and President of Memorial Sloan-Kettering Cancer Center Dr. Harold Varmus was sworn in on July 12 as Director of the National Cancer Institute. In his inaugural address to an NCI town hall meeting, Dr Varmus said he hopes to “change the ways we think about the scientific problems that we are trying to solve.” He told the audience, “We need to think a little more clearly about how we frame the questions that we’re trying to answer, so we know what we’re actually

trying to achieve.” Rather than posing overly general, perhaps unanswerable questions, he said NCI needs to help researchers focus “with a new specificity, based on new developments in our science, and look at questions that are not pie-in-the-sky, but have a substantial prospect of answerability in the foreseeable future.” We believe that the CRN is the kind of research enterprise that has, and will continue to meet the challenge put forward by Harold [yes, he said “my name is Harold, not Dr. Varmus”] to formulate, address, and answer specific

and substantial questions in cancer control research. One way of beginning to do this is through CRN pilot studies. We are pleased that we have been able to increase support for this important CRN activity in recent years. We encourage all CRN investigators and their collaborators from within and outside of CRN to take advantage of this opportunity, which provides a unique source of support for the development of proposals to build toward an increasing CRN portfolio of competitively funded grants.

*-Martin Brown (NCI)*

# CRN Science Update

*Newly-funded studies by CRN and CRN-affiliated investigative teams*

## Developing Melanoma Screening in Primary Care

### Quick Facts:

- Two-year Team Science Award funded by the Melanoma Research Alliance
- Start date: January 2010
- Investigative team:  
Martin A. Weinstock, PI (Rhode Island Hospital and Brown University)  
Maryam Asgari (KPNC)  
Melody Eide (HFHS)  
Suzanne Fletcher (HPHCI)  
Alan Geller (Harvard School of Public Health)  
Allan Halpern (Memorial Sloan-Kettering Cancer Center)

**W**ith increasing melanoma incidence and limited effectiveness of therapy for advanced disease, effective early detection in primary care is our best hope for

cutting melanoma deaths by at least half in the near future. Conventional education programs such as lectures and articles have not been effective in reducing mortality. Today, knowledge and skills for early detection of melanoma remains low in primary care, as does performance of clinical skin examinations and thorough skin self-examination.

We are developing an early detection training program that is web-based for widespread interactive use, grounded in the realities of primary care delivery, allowing for different learners to use different educational tracks, and which includes a deeper image database. This training will incorporate dermoscopy (rarely used in primary care today despite its proven ability to improve accuracy of the clinical examination). We

assembled a diverse team (from Brown University, Harvard University, and Memorial Sloan-Kettering Cancer Center, in collaboration with CRN Scholars at Henry Ford and Kaiser Permanente) to develop this program. We will optimize the program based on feedback from physicians at two CRN sites. We will test their knowledge and skills, all to improve the practice of CRN physicians and clinicians generally. We expect the resulting product to be an important tool for reducing death from melanoma in patients at CRN sites and beyond.



Martin Weinstock

*-Martin Weinstock (Brown University)*

## Community Breast MRI Screening: Clinical and Economic Implications

### Quick Facts:

- Five-year Mentored Research Scholar Grant funded by the American Cancer Society
- Start date: January 2010
- Investigative team:  
Natasha Stout, PI (HPHCI)  
Suzanne Fletcher, mentor (HPHCI)  
Advisory committee:  
Dennis Ross-Degnan (HPHCI)  
Larissa Nekhlyudov (HPHCI)  
Marjorie Rosenberg (University of Wisconsin)  
Sue Goldie (Harvard School of Public Health)  
Diana Buist (GHC)

**T**he objective of this project is to characterize the use, clinical outcomes and economic consequences of magnetic resonance imaging (MRI) for breast cancer

screening in the community. Recent clinical guidelines have expanded recommendations for screening breast MRI potentially affecting over one million women. Screening breast MRI offers higher sensitivity compared with mammography but lower specificity and much higher cost. Originally studied in high-risk groups and controlled settings, MRI performance may differ dramatically when used in broader populations.

Our research aims to: 1) Characterize over a decade of screening breast MRI use in a community setting; 2) Quantify clinical outcomes and use of follow-up testing; and 3) Evaluate the economic consequences of screening breast MRI. We will analyze electronic health data from women receiving breast MRI from 2000-2013 at Atrius Health, a large multi-center

group practice in Massachusetts serving nearly 600,000 patients. Results will be integrated into a decision-analytic simulation model of breast cancer epidemiology to assess the cost-effectiveness of screening breast MRI as practiced in the community. Analysis of population-based electronic health data combined with decision-analytic modeling provides a powerful means to address important and timely questions in cancer prevention and control.



Natasha Stout

*-Natasha Stout (HPHCI)*

## Outcomes of Prostate Cancer Androgen Deprivation Therapy

### Quick Facts:

- Three-year R01 funded by NCI
- Start date: April 2010
- Investigative team:  
Arnie Potosky, PI (Georgetown University and Lombardi Comprehensive Cancer Center)  
Reina Haque (KPSC)  
Stephen Van Den Eeden (KPNC)  
Andrea Cassidy (HFHS)  
Marianne Ulcickas Yood (HFHS)

**H**ormonal therapy for prostate cancer has become increasingly popular over the past decade. However, there is no proof that this therapy can prolong survival

from the disease, and there are several potentially serious long-term unintended consequences from its use. These adverse effects include bone fractures, cardiovascular disease, and diabetes. Randomized controlled trials are not planned to evaluate these issues. Given the aging of the population, and the use of hormonal therapy in an estimated 100,000 new men each year, there is an urgent need for better information on outcomes to inform treatment decisions. Our study will quantify the mortality benefits and adverse effects of hormonal therapy for prostate cancer. To perform this study we will

use a detailed clinical database containing extensive information on 45,000 men diagnosed in 1995-2007 in three large health plans. Our results will provide new information to help men make more informed decisions about starting hormonal therapy.



Arnie Potosky

*-Arnie Potosky (Georgetown University)*

## Mental Health Research Network

### Quick Facts:

- One-year administrative supplement to the CRN funded by NCI
- Start date: June 2010
- Investigative team:  
Greg Simon, PI (GHC)  
Steve Soumerai (HPHCI)  
Leif Solberg (HPRF)  
Arne Beck (KPCO)  
Bob Davis (KPGA)  
Enid Hunkeler (KPNC)  
Frances Lynch (KPNW)  
Karen Coleman (KPSC)

**T**he HMORN Mental Health Research Network (MHRN) is developing its research infrastructure to improve the efficiency, reach, and public health impact of mental health research within the HMORN. Planned infrastructure development will:

- Evaluate and document the availability and quality of existing VDW data regarding mental health diagnoses, treatments, and sentinel events
- Develop new data resources specific to mental health

- conditions and treatments
- Develop a shared measurement infrastructure to increase the efficiency of outcome assessment in multi-site mental health research
- Identify and disseminate best practices to protect the rights of research participants and increase the efficiency of IRB review

Initial activities will be funded by a recently awarded one-year supplement to the CRN. We anticipate receiving long-term funding through a cooperative agreement from the National Institutes of Mental Health. This cooperative agreement will support four developmental research projects that will use the infrastructure described above. Those four projects will:

- Examine variation between providers, facilities, and health systems in the use of low- and high-value treatments for mood disorders
- Evaluate the feasibility and acceptability of a behavioral activation psychotherapy

- intervention for perinatal depression
- Develop a registry of children and adolescents receiving autism spectrum disorder diagnoses in order to evaluate variability in diagnostic practices and facilitate recruitment for future comparative effectiveness research
- Examine the impact of FDA advisories on prescribing of antidepressant drugs and frequency of suicide attempts

The long-term goal of the MHRN is to support multi-site collaborative research across the full range of mental health topics. All HMORN collaborators are welcome to participate in planning for future research. Contact Greg Simon at Group Health Research Institute ([simon.g@ghc.org](mailto:simon.g@ghc.org)).



Greg Simon

*-Greg Simon (GHC)*

# Cancer Survivorship Research in the CRN

The 5th Biennial Cancer Survivorship Research Conference, co-sponsored by the National Cancer Institute, the American Cancer Society, LIVESTRONG and the Centers for Disease Control and Prevention was held June 17-19, 2010 in Washington D.C. Members of the CRN Cancer Survivorship SIG who attended reported that the meeting was terrific and offered opportunities to learn about physical activity, health services research and communication. Attendees also learned that the CRN may be a great resource for electronic medical record-based interventions, system improvement and testing of interventions. Following is a list of topics presented at the conference by CRN-affiliated research teams.

## Breast Cancer Treatment Effectiveness in Older Women (BOW) Study Group

- The Interaction of Age and Comorbidity with Breast Cancer Severity - their Impact on Radiotherapy Utilization and Rate of Recurrence among Older Women with Early Stage Breast Cancer. Field TS, Bosco JLF, Prout MN, Gold HT, Chysna K, Pawloski PA, Ulcickas Yood M, Buist DSM, Quinn VP, Thwin S, Silliman RA.
- 10-Year Safety of Radiotherapy among Older Women Diagnosed with Breast Cancer. Haque R, Ulcickas Yood M, Buist DSM, Avila C, Shi J, Silliman RA, Quinn VP for the BOW Study Group.

## CRN Survivorship Scientific Interest Group

- Providing Care for Cancer Survivors in Integrated Delivery Systems: An Assessment of Current Practices and Future Opportunities. Chubak J, Hsu C, Tuzzio L, Kirlin B, Nekhlyudov L for the CRN Survivorship Interest Group.

## Colorectal Cancer Survivorship Research Team

- Addressing Age-Related Declines and Family Caregiving in Survivorship Care Planning for

Colorectal Cancer Survivors with Ostomies

- Health-Related Quality of Life in Colorectal Cancer Survivors (>5 years since Diagnosis) as Identified in Focus Groups
  - Caregiver Advocacy for the Ostomy-Related Health of Colorectal Cancer Survivors
  - Dietary and Behavioral Adjustments to Control Bowel Function for Long-term Colorectal Cancer Survivors
- Research team members

include: Krouse RS, Grant M, Wendel CS, McMullen C, Bulkley J, Ramirez M, Altschuler A, Coons SJ, Temple LK, Demark-Wahnefried W, Hornbrook MC, Herrinton LJ, Collins B, Schneider J, Liljestrand P, Mohler MJ, Baldwin CM.

To learn about joining the CRN Cancer Survivorship SIG, visit [www.crn.cancer.gov/collaboration/sigs.html](http://www.crn.cancer.gov/collaboration/sigs.html).

- Larissa Nekhlyudov (HPHCI)

## Recent Findings from CRN Scientists

In the March 2010 issue of *Public Health Genomics*, Sharon Hensley-Alford for the **Multiplex** study team reported that even among those with access to health care, African Americans were less likely to participate in the multiplex genetic susceptibility test, while those from higher education neighborhoods were more likely to participate. The authors suggest that large social groups will likely be underrepresented in research in personalized genomics even when robust population-based recruitment strategies are employed.

§

The **DCIS** study team reported that use of adjuvant therapy by minority women in three integrated health plan delivery sites based in California and Massachusetts is similar to that by non-Hispanic white women, although use was less among older women and among women who lived in poorer neighborhoods. Reina Haque led the paper, published in the May 2010 issue of the *American Journal of Managed Care*.

The **Multiplex** study team reported in the June 2010 issue of *Annals of Behavioral Medicine* that study participants' interest in behavioral information was higher than in genetic information. As behavioral risk factors increased, inclination toward genetic explanations increased; interest in how health habits affect disease risk decreased. The authors suggest that those at greatest need for behavior change may hold attributions that diminish interest in information for behavior change. Suzanne O'Neill led the paper.

§

In the June 2010 issue of the *American Journal of Preventive Medicine*, a **caBIG** writing team described how the application of bioinformatics systems can accelerate population health research across the continuum from prevention to detection, diagnosis, treatment, and outcome. Michele Forman led the paper.

The CRN Connection is a publication of the CRN intended to inform and occasionally entertain CRN collaborators. It is produced with oversight from the Communications & Collaborations Committee. Please send comments and suggestions on this newsletter to Sarah McDonald, [mcdonald.sj@ghc.org](mailto:mcdonald.sj@ghc.org)

# Welcome to Two New CRN Site PIs

CRN Site Principal Investigators (PIs) serve as conduits for new research opportunities to other cancer researchers at their sites and local academic centers. They champion the CRN agenda at their sites and nationally, communicate CRN decisions and policies to local staff, and are accountable for meeting CRN scientific and administrative commitments in their sites. As members of the CRN Steering Committee, site PIs review and approve CRN pilot proposals, monitor the progress of the CRN infrastructure, ensure consistency of the CRN research agenda with NCI priorities and determine future directions and priorities for the CRN. The CRN Steering Committee is deeply grateful to Maggie Gunter and Cheri Rolnick for their years of excellent leadership, looks forward to continued collaborations with Maggie and Cheri, and is delighted to welcome two new site PIs.

## *Bert Davis, PhD LCF Research*



Bert succeeded Maggie Gunter, PhD as the CRN Site PI for LCF Research (formerly Lovelace Clinic Foundation.) Bert's background is in statistics, and his previous positions include Associate Professor of Mathematics at UNM, original Chief of Biometry at UNM Cancer Research and Treatment Center and Senior Statistician at InLight Solutions. He was co-founder and Chief Technical Officer at VisionQuest Biomedical, where he led projects on telemedicine-based approaches to detecting diabetic retinopathy, macular degeneration or glaucoma; real-time calibration of fMRI brain scans; development of a low-cost high-resolution fundus camera; and a functional scanning laser

ophthalmoscope. He has worked on a variety of biostatistical and statistical applications including an epidemiological study of cancer risks from exposure to ionizing radiation. As one of LCF's Senior Research Scientists, Bert will initiate new cancer research studies including the treatment of chronic myeloid leukemia and cancer surveillance. Bert holds an adjunct professorship in the Epidemiology and Biostatistics Division at the UNM School of Medicine.

## *Thom Flottesmesch, PhD HealthPartners Research Foundation*



Thom succeeded Cheri Rolnick as the CRN Site PI for HPRF. His background is in economics and statistics. He has worked on research projects related to tobacco use, dental care, hospital costs, and chronic disease care and has developed expertise in the areas of cost effectiveness analysis, econometric methods, operations/decision modeling and health information technology (HIT). He led a project to examine the impact of emergency department crowding on hospital costs and resource utilization throughout the entire care cycle of each patient. His current interests are in modeling the cost-effectiveness of preventive services, developing robust measures of primary care efficiency, and determining the impact of HIT on quality of care and provider performance. As CRN Site PI for HPRF, Thom plans to work more closely with Regions Hospital Registrars to enhance HPRF's ability to conduct cancer-related research.

---

## CRN Year 12 Pilot Awards

The CRN Steering Committee selected five proposals for funding by the CRN Developmental Pilot Funds Program. These one-year pilot studies started May 1, 2010.

### **Establish a Prospective Cohort to Investigate Obesity, Diabetes and the Metabolic Syndrome as Risk Factors in Young Adult Cancer**

Corinna Koebnick, PI (KPSC)  
Larry Kushi (KPNC)

### **Does Weight Loss among Postmenopausal Women Decrease Risk of Breast Cancer?**

Heather Feigelson, PI (KPCO)  
Cynthia Nakasato (KPH)  
Tom Vogt (KPH)  
Diana Buist (GHC)  
Sharon Hensley Alford (HFHS)  
Steve Waring (MCRF)

### **Lymph Node Examination in Colorectal Cancer: Predictors of Adequate Staging and Its Influence on Cancer Survival in Community Practice**

Adedayo Onitilo, PI (MCRF)  
Jessica Engel (MCRF)  
Po-Huang Chyou (MCRF)

### **Studying Communication over the Cancer Care Continuum: A Feasibility Study**

Kathleen Mazor, PI (MPCI)  
Gwen Alexander (HFHS)  
Sarah Greene (GHC)  
Douglas Roblin (KPGA)  
Tom Gallagher (University of Washington/GHC)

### **Non-melanoma skin cancer ascertainment in the HMO setting**

Melody Eide, PI (HFHS)  
Christine Cole Johnson (HFHS)  
Mark Tuthill (HFHS)

# CRN Communications and Collaborations Committee

The CRN Communications & Collaborations Committee identifies ways to build relationships across and within the CRN and with collaborators, promotes and disseminates information about CRN activities and accomplishments to internal and external audiences, and develops and provides guidance on “rules of engagement” for collaboration with the CRN.

With support from the CRN PI Office, this committee develops several communication vehicles:

- **Monthly News Email:** Calls for papers and proposals, upcoming conferences and other news of interest to cancer researchers
- **Quarterly Newsletter** (the one in your hand): Reports from CRN studies, profiles of member sites, staff, committees, Scientific Interest Groups (SIGs) and working groups
- **Monthly Scientific Webinars:** Reports from CRN studies and works-in-progress
- **CRN Orientation Guide:** Policies, procedures and resources for CRN staff
- **Password-protected Web Portal:** Contacts lists, meeting schedules, working documents for CRN project teams, information on data resources and CRN infrastructure
- **NCI CRN Public Web Site** ([www.crn.cancer.gov](http://www.crn.cancer.gov)): Policies and procedures for CRN collaborators, information about active and completed studies, publications and CRN member sites

Highlights of the committee’s recent work include:

- ✓ Developed standard process for external investigators to initiate collaboration with CRN via Web Inquiry Form on NCI’s CRN Web site
- ✓ Developed guidelines for membership and activities of SIGs
- ✓ Created searchable databases of CRN projects and publications on NCI’s CRN Web site

- ✓ Created CRN Orientation Guide, a print document intended to help investigators and project staff at all sites learn about CRN resources and procedures
- ✓ With the NCI, created booklets highlighting the history, research capacity and opportunities the CRN offers
- ✓ Discovered issues encountered in engaging delivery system leaders and presented learnings in “Engaging Stakeholders in Research” theme issue of CRN Connection (June 2010)
- ✓ Revised the process for reviewing CRN pilot proposals. The improved process seemed to make reviews clearer and more useful. One applicant wrote: *The clear time and thought [the reviewers] put in to their constructive comments is extremely helpful for a*

*junior investigator and very appreciated. If all review committees took the same approach, grant-writing would be the learning experience it should be.*

A current focus of the committee is improving use and usability of the CRN’s password-protected Web Portal which is one of the CRN’s multi-site, multi-project resources.

Committee Membership:

Deb Ritzwoller, co-chair (KPCO)  
Cheri Rolnick, co-chair (HPRF)  
Martin Brown (NCI)  
Terry Field (MPCI)  
Alyssa Grauman (NCI)  
Reina Haque (KPSC)  
Sarah McDonald (GHC)  
Nirav Shah (GHS)  
Leah Tuzzio (GHC)  
Ed Wagner (GHC)  
Robin Yabroff (NCI)

## Announcing the CRN Cancer Communication Research Center (CCRC) Interactive Forum!

Each forum will consist of an update about opportunities and activities from the CRN CCRC, a guest presentation on a research or practice topic, and discussion. Example research topics are:

- Patient and provider knowledge and beliefs about genetic testing
- The medical home in relation to cancer patients and care teams;
- The relationship between

marketing campaigns and tobacco quitline services

- Social media and cancer prevention messages

Schedule: 3rd Thursdays at 3pm Eastern, every other month starting October 21.

Visit [www.crn-ccrc.org](http://www.crn-ccrc.org) to learn about upcoming topics and how to join.

### Request for CRN Pilot Proposals

The CRN invites proposals for developmental pilot studies and activities during CRN’s Year 13, May 1 2011-April 30 2011.

- Abstracts due **September 13, 2010**
- Proposals due **October 18, 2010**

Visit [www.crn.cancer.gov/news.html](http://www.crn.cancer.gov/news.html) for more information and application instructions.