FROM THE CO-CHAIRS
PETER J. O’DWYER, MD (LEFT), AND MITCHELL D. SCHNALL, MD, PhD
OCTOBER 2019

Who gets cancer? Cancer risk is clearly not uniformly distributed across our society. Similarly, for patients who are diagnosed with cancer, survival appears to be determined in part by environmental issues. The patient’s living conditions, income, resources for support, and nutrition may all influence both cancer risk and outcomes of treatment. In ECOG-ACRIN, under the leadership of Melissa Simon, MD and Edith Mitchell, MD, we address some of these issues as they relate to race and ethnicity. We are now ready to build upon this work, and to embark upon a broadening of this inquiry to consider the larger topic of “Social Determinants of Health.”

In this new focus we are fortunate to have the involvement of one of the most influential thinkers in the field of cancer causation, Otis Brawley, MD. From an eleven-year stint as the Chief Medical and Scientific Officer and Executive Vice President of the American Cancer Society, Dr. Brawley has recently joined the faculty of Johns Hopkins University, with an appointment as a the Bloomberg Distinguished Professor in both the School of Public Health and the Kimmel Cancer Center. Bringing together leaders from the Health Equity, Prevention, and Cancer Care Delivery Research Committees, along with academic and community oncologists, we will develop research objectives and specific questions over the next several months. Dr. Brawley will also bring forward some perspectives to guide the dialogue during the General Session of our Fall Group Meeting, October 24 – 26, 2019 in Fort Lauderdale, Florida. The General Session, open to all attendees, takes place Friday, October 25 from 6:00 – 7:30 PM. We hope that your participation and feedback in this forum will help to guide this new direction.

We also announce new leadership of the Prevention Subcommittee. Ably directed by Raymond Bergan, MD, the subcommittee has been successful in the approval of a new chemoprevention trial to investigate the protective effects of green tea, a topic of substantial scientific and popular interest. This is a remarkable development in that it represents the first new study in this field in several years. Upon Dr. Bergan’s resignation to devote more time to his own research at Oregon Health & Science University (OHSU), we seek to maintain this momentum, and have appointed John Kirkwood, MD of the University of Pittsburgh Medical Center (UPMC), who has graciously accepted this role. We thank Dr. Bergan for his accomplishments, and look forward to his continued involvement. In a future issue we will outline Dr. Kirkwood's plans for Prevention, and the further development of this field.

Finally, we want to remind you of an update to the structure of our semi-annual meetings, beginning with our Fall Group Meeting. Going forward, our meetings will begin with the Robert L. Comis Translational Science Symposium, a focused examination of a field of scientific opportunity. Open to all attendees, this fall’s program will address a topic that resonates throughout our activities in ECOG-ACRIN: the promise and the pitfalls of artificial intelligence (AI) and big data. Symposium speakers such as Lawrence N. Shulman, MD, Deputy Director for Clinical Services, and Director of the Center for Global Cancer Medicine, at the Abramson Cancer Center, University of Pennsylvania (who directs the National Cancer Database), and Neal J. Meropol, MD, Vice President of Research Oncology at Flatiron Health, will present data-rich sources of information and their use. We hope to see you at this special session.
EA RECOGNIZES 16 MEMBER INSTITUTIONS FOR OUTSTANDING PERFORMANCE ON THE 2019 INSTITUTION EVALUATION

ECOG-ACRIN Cancer Research Group conducts an annual evaluation of its member institutions. This annual review is intended to inform the principal investigator about the many components that comprise ECOG-ACRIN’s membership expectations, compare overall performance among all ECOG-ACRIN institutions, and ensure that our institutions maintain ECOG-ACRIN's high standards of clinical trials participation. Member institutions of ECOG-ACRIN are primarily evaluated in the following areas:

- Accrual
- Clinical Data Timeliness
- Clinical Data Quality
- Lab Sample and Imaging Submission Compliance
- Scientific and Administrative Participation
- Compliance with Group and NCTN Policy, as assessed through the audit process

On an annual basis, a review team is assembled, comprised of representation from the Principal Investigator Committee and ECOG-ACRIN Leadership (Group Co-Chairs, Executive Officer, Executive Director, Deputy Executive Director, Senior Directors, and Directors). The review committee is blinded to the identity of the institutions reviewed, in order to eliminate any potential bias. Final evaluations are based on the objective data as well as committee assessment and discussion.

This past month, the ECOG-ACRIN Institution Evaluation Committee met and reviewed the performance of 150 Main Member and Special Participant member sites. The committee voted to commend the following sites for Outstanding Performance in 2019.

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<th>2019 Institution Evaluation</th>
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<tr>
<td>Sites Receiving Commendations for Outstanding Performance</td>
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<tr>
<td>Carle Cancer Center NCORP</td>
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<td>Delaware/Christiana Care NCORP</td>
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<td>Duke University Medical Center</td>
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<td>Heartland Cancer Research NCORP</td>
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<td>Indiana University/Melvin and Bren Simon Cancer Center</td>
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<td>Johns Hopkins University/Sidney Kimmel Cancer Center</td>
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<td>Memorial Sloan Kettering Cancer Center</td>
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<td>Metro Minnesota Community Oncology Research Consortium</td>
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**EYE ON THE COMMUNITY: REPOSITIONING THE COMMUNITY CANCER COMMITTEE**

MATTHIAS WEISS, MD, PhD
CHAIR, COMMUNITY CANCER COMMITTEE

Changes are afoot in the Community Cancer Committee, and I am looking forward to productive discussions at our upcoming Group Meeting in Fort Lauderdale. During our time together, we will hone in on “big picture” questions about how best to move forward in 2020 and beyond. Lynne Wagner, PhD, Mike Thompson, MD and I have discussed with EA leadership a number of ways to change the dialogue within the committee so that community-based concerns and serious research ideas emanate more frequently in our group.

For example, there seems to be some redundancy between the Community Cancer Committee and NCORP Community Advisory Committee. Are there ways to reduce this that result in better engagement of community-based sites across the NCTN and NCORP? We will explore whether to combine the two sessions at the Spring 2020 Group Meeting with an agenda that would start with community topics, move to crossover topics, then end with NCORP-related topics.

The Community Cancer Committee will likely benefit from having a core committee, so we will discuss this topic as well. Furthermore, we want to facilitate communication between community site investigators, EA research staff and within the various committees. Are we taking full advantage of existing tools like the newsletter, webinars, ecog.announce, and Twitter? Should we explore an “EA app”?

You won’t want to miss this meeting if it is important to you that EA expand the number of community-based individuals who become engaged and make EA part of their professional family.

Please attend the Community Cancer Committee session on Friday, October 25th, 7:30 — 9:30 AM EDT. If unable to attend in person, join by webinar: [Link](http://coccg.adobeconnect.com/comcancer/ Phone: 1-888-858-6021 Code: 143-9108)

**EA THORACIC COMMITTEE CO-CHAIR HEATHER WAKELEE, MD BECOMES PRESIDENT-ELECT OF INTERNATIONAL ASSOCIATION FOR THE STUDY OF LUNG CANCER (IASLC)**

Dr. Heather Wakelee, Professor of Medicine in the Division of Oncology at Stanford University and faculty director of the Stanford Cancer Clinical Trials Office, was recently elected to become the President-Elect of IASLC, the only global network dedicated to the study and eradication of lung cancer and other thoracic malignancies. After two years in this role with active work on the Executive Committee, she will become President in 2021. She previously served on the IASLC Board of Directors, as Chair of the Communications Committee, as a USA Regent and as Co-Chair of the NACL (formerly Chicago Multidisciplinary Symposium in Thoracic Oncology).

Dr. Wakelee is a graduate of Princeton University and Johns Hopkins University School of Medicine and completed her post-graduate training at Stanford University. She has authored or co-authored over 200 medical articles on lung cancer and other thoracic malignancies, including thymic malignancies, and is involved in dozens of clinical trials related to lung cancer therapy and diagnostics in addition to collaborative efforts in population sciences. Dr. Wakelee is passionate about mentorship and is dedicated to multidisciplinary care. She is delighted to work with an amazing team of nurses, advanced practice providers, clinical research coordinators and physician colleagues.

Dr. Wakelee has been an active ECOG-ACRIN investigator for her entire academic career. Many of her early publications were secondary analyses of EA trials. She was the study chair of E1505, a phase III trial involving 1500 patients who received adjuvant therapy after resection of early stage non-small cell lung cancer. Though the trial was negative, important biomarker analyses are ongoing. She is currently the Thoracic Committee Co-Chair and a member of the EA Executive Committee. In 2015 she was awarded the EA Young Investigator Award. Dr. Wakelee is also active in the American Society of Clinical Oncology (ASCO) and received the Fellow of ASCO (FASCO) award in 2019.