CRO Communiqué Keeping you informed about CRO progress June 2012

Top Enrolling Physicians for May 2012

Physician	Patient	Treatment	Control	Total
	Registrations	Credits	Credits	Credits
Dr. Bonebrake	2	3.5	0	3.5
Dr. Biggers	3	0	3	3
Dr. Carlson	1	1	0.5	1.5
Dr. Ellis	2	2.3	0	2.3
Dr. Holden	2	2	0	2
Dr. Sciortino	1	1.3	0	1.3
Dr. Tummala	1	1	0	1
TOTALS	12	11.1	3.5	14.6

May 31, 2012 was the end of our grant year at CRO. We ended the year with 76.1 cancer control credits. This is 16.1 credits above our NCI assigned 60 credits. YEA! We earned 111.4 treatment credits which is 8.6 credits below our NCI's assigned 120 treatment credits. Thanks to all our investigators and staff for a wonderful grant year. A more detailed account of this past year activities will be coming out in our 2012 CRO Annual Report which will be distributed in a couple of weeks.

CRO Web based monthly Educational Conference

We were pleased with the attendance at our first monthly Educational conference. Our June meetings will be Monday, June 11 at 12noon and Tuesday, June 12 at 5pm. We highly encourage discussion and input from participants. Remember it is possible to login from home computers, iPhones, iPads, Blackberries and so on. CME's are available for attendance.

Alliance Membership approved

Our CCOP completed and submitted a Main Member application to Alliance, the merged group of NCCTG, CALGB and ACOSOG, on February 10, 2012. We were accepted as a member on May 4th. Our CCOP has had many enrollments to NCCTG and CALGB trials in the past. We look forward to giving our investigators access to these two groups' combined efforts through Alliance as well as providing more trials for our new surgical investigators.

Study Profile

NSABP B-49 "A Phase III Clinical Trial Comparing the Combination of Docetaxel Plus Cyclophosphamide to Anthracycline-Based Chemotherapy Regimens for Women with Node-Positive or High-Risk Node-Negative, HER2-Negative Breast Cancer" is our profile study this month. Patients must have unilateral invasive adenocarcinoma of the breast, be HER2-negative and undergone either a total mastectomy or breast-conserving surgery (lumpectomy). They must be randomized less than 84 day from surgery and have adequate cardiac, hepatic and kidney function.

RTOG Audit

On Wednesday, May 16th RTOG auditors were with us for their 3-year review of our documentation. No major deviations and only one minor deviation for late data submission was found. Yea! No corrective action plan is required.

SWOG Audit

CRO has been notified that SWOG will be here for their 3-year audit on August 22-23, 2012. This is our summer of research base audits. We are expecting GOG, MDAnderson, NSABP and Wake Forest to audit our charts before the year ends.

New Studies Approved in May 2012

Opened at Cox and Mercy Springfield

GOG 0280 A Phase II Evaluation of the Potent, Highly Selective Poly (ADP-Ribose)
Polymerase (PARP)-1 and -2 Inhibitor Veliparib (ABT-888) (IND#77840) (NSC #737664) in the Treatment of Persistent or Recurrent Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer Patients Who Carry a Germline BRCA1 or BRCA2 Mutation

NSABP B-49 A Phase III Clinical Trial Comparing the Combination of Docetaxel Plus Cyclophosphamide to Anthracycline-Based Chemotherapy Regimens for Women with Node-Positive or High-Risk Node-Negative, HER2-Negative Breast Cancer

SWOG S1105 Randomized Trial of Text-Messaging Intervention to Reduce Early Discontinuation of Adjuvant Aromatase Inhibitor Therapy in Women with Early Stage Breast Cancer

Studies Permanently Closed to Enrollment at Cox & Mercy in May 2012

<u>CALGB 70604</u> A Randomized, Phase III Study of Standard Dosing versus Longer Dosing Interval of Zoledronic Acid in Metastatic Cancer

Temporarily Closed to Accrual at Mercy & Cox

<u>CTSU NCCTG N0733</u> Randomized Phase II Trial of Capecitabine and Lapatinib With or Without IMC-A12 In Patients With HER2 Positive Breast Cancer Previously Treated With Trastuzumab and an Anthracycline and/or a Taxane

GOG 0260 A Phase II Evaluation of Eleschomol Sodium and Weekly Paclitaxel in the Treatment of Recurrent or Persistent Platinum-Resistant Ovarian, Fallopian Tube or Primary Peritoneal Cancer