



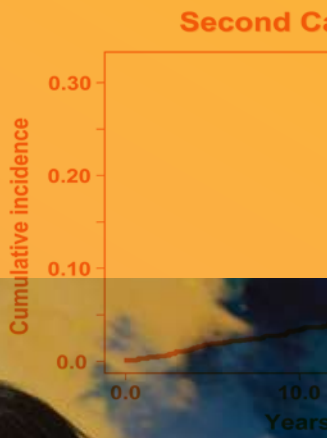
Upper left:  
Wendy Landier, R.N., M.S.N.,  
City of Hope

Center:  
City of Hope patients, like  
the young girl shown here,  
benefit from the collaboration  
between cancer researchers  
and clinical care providers.

Lower right:  
Smita Bhatia, M.D., M.P.H.,  
City of Hope



# COLLABORATIONS



**Cancer Survival, 0-14 Years of Age**  
SEER Program 1976-1997



# GUARDING YOUNG LIVES

CHILDREN'S ONCOLOGY GROUP

The diagnosis of cancer in a child is overwhelming to families. Even after successful treatment, fears remain. Will it return? Will a different cancer arise later in life? What side effects can be expected — and can they be avoided?

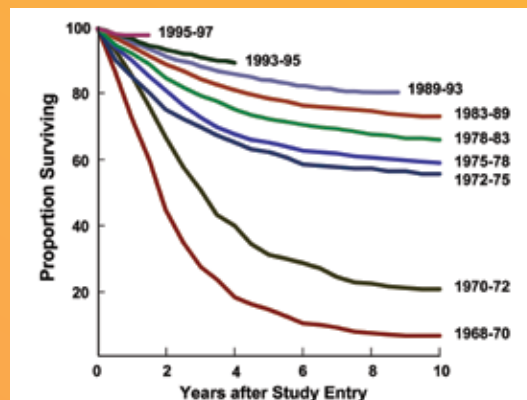
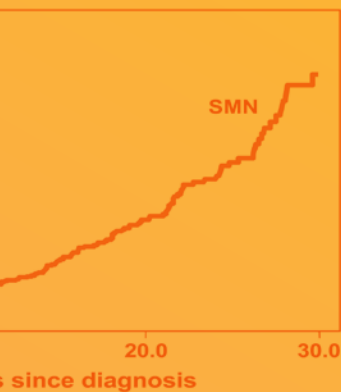
Research has dramatically improved survival rates for children with cancer, from less than 25 percent in the 1960s to nearly 80 percent today. More than 250,000 childhood cancer survivors are living in the United States alone. But as they mature, two-thirds will suffer chronic problems and long-term complications, such as issues related to growth and development; one-third will have a problem that can be life threatening. Many will develop secondary cancers, either due to cancer treatment or underlying causes.

Because “late effects” may not arise until decades after treatment, and because pediatric cancers are fortunately rare, researchers and care providers must pool their resources and share their experiences to improve long-term outcomes. City of Hope researchers are national leaders in this effort.

Smita Bhatia, M.D., M.P.H., chair of the Division of Population Sciences at City of Hope, and medical director, Center for Cancer

Survivorship, chairs the Late Effects Committee of the Children's Oncology Group (COG), a consortium funded by the National Cancer Institute.

Cancers in Survivors



COG brings together pediatric cancer experts from 238 hospitals in the U.S., Canada, Australia, New Zealand, the Netherlands and Switzerland. It facilitates the organization of large-scale, definitive multicenter research studies needed to improve treatments, practices and outcomes. Today, more than 90 percent of children with cancer in the U.S. are treated at COG-affiliated cancer centers, and about 70 percent participate in clinical trials.

Bhatia serves as principal investigator for a COG research study looking at key adverse events in childhood cancer survivors. Patients who develop a secondary cancer or other problem such as congestive heart failure or stroke are invited to participate in the study so that the causes of these complications can be investigated, potentially improving future treatments.

At City of Hope, cancer research is strongly integrated with clinical care, and nursing is a central focus of that strategy. Wendy Landier, R.N., M.S.N., serves as clinical director of the Center for Cancer Survivorship, and also leads the Nursing Clinical Practice/Survivorship Subcommittee of COG, where she serves as vice chair of the Nursing Discipline. As

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leaders within both City of Hope and COG, Landier and Bhatia have collaborated on landmark projects including the establishment of long-term follow-up guidelines for young cancer survivors and a resource guide for all COG centers to use in their own follow-up programs.

Participation in COG encourages alliances. Close ties have been established with researchers at St. Jude Children's Research Hospital, The Children's Hospital of Philadelphia, Memorial Sloan-Kettering Cancer Center and dozens of other institutions. A Web-based version of the long-term follow-up guidelines that can be tailored for individual patients will soon be launched in partnership with Baylor School of Medicine. As a pilot test center for the new system, City of Hope and its patients will benefit from instant access to the cumulative knowledge of pediatric cancer experts from around the world.



City of Hope pediatric patients benefit from the collaborative efforts of researchers at City of Hope and dozens of other institutions worldwide.