This annual report identifies approved clinical research activities conducted at WRAMC (during FY89) which were approved and reviewed annually by the Human Use Committee/Institutional Review Board or the Animal Use Committee as appropriate. A detailed summary for each protocol, a list of publications and presentations are enclosed.
REPORT DATE: 07/09/89

DETAIL SUMMARY SHEET

TITLE: Characterization of Ventilatory Patterns, Ventilatory Requirements and Oxygen Consumption During Uncomplicated Labor in Normal Parturients

KEYWORDS: labor, oxygen, consumption

PRINCIPAL INVESTIGATOR: Phillips, Yancy LTC MC

DEPARTMENT: Department of Medicine
SERVICE: Pulmonary Disease Service

STATUS: Ongoing
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $ 721
Previous FYs: $ 0
Total: $ 721

STUDY OBJECTIVE
To measure the oxygen consumed, carbon dioxide produced, and ventilatory patterns of normal pregnant women in labor.

TECHNICAL APPROACH
Healthy women aged 18 to 36, in the 38th to 41st week of gestation, will be recruited during a routine visit to OB clinic. A baseline measurement of ventilatory parameters are made at rest. Repeat studies are performed (10 min procedure) during brief portions of stage I and II of labor.

PRIOR AND CURRENT PROGRESS
Twelve subjects have been enlisted. Only seven reported for baseline measurements. Five of the seven had successful measurements made during labor. No complications have occurred. Goal is 26 subjects.

CONCLUSIONS
Continued data collection is ongoing.
TITLE: Cold Air Inhalation in Patients with Raynaud’s Phenomenon

KEYWORDS:

PRINCIPAL INVESTIGATOR: McManigle, John MAJ MC

DEPARTMENT: Department of Medicine
SERVICE: Pulmonary Disease Service

STATUS: Terminated
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
ADMINISTRATIVE TERMINATION

TECHNICAL APPROACH
ADMINISTRATIVE TERMINATION

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED

CONCLUSIONS
ADMINISTRATIVELY TERMINATED
TITLE: Pleural Pressure Measurements in Normal Healthy Volunteers During the Administration of Nasal Continuous Positive Airway Pressure (NCPAP)

KEYWORDS: nasal CPAP, pleural pressure, esophageal pressure

PRINCIPAL INVESTIGATOR: Derderian, Sarkis LTC MC

DEPARTMENT: Department of Medicine
SERVICE: Pulmonary Disease Service

STATUS: Ongoing
APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 924 Previous FYs: $ 0 Total: $ 924

STUDY OBJECTIVE
The objective of this pilot study is to quantify the increase in pleural pressure due to nasal NCPAP. This will be accomplished by measuring pleural pressure at several levels of nasal NCPAP in normal health volunteers.

TECHNICAL APPROACH
To measure pleural pressure at different levels of nasal CPAP using the esophageal balloon technique and continuously recording chest/wall and abdominal motion in addition to pleural pressure.

PRIOR AND CURRENT PROGRESS
One patient has been studied to date. The study has not progressed further because of an attempt to automate the recording process. We would like to be able to put this data on magnetic media in order to better analyze the relationships.

CONCLUSIONS
None to date.
TITLE: An Experimental Model of Seronegative Lupus - A Study of Biological Role of Anti-Ro/SSA and La/SSB Antibodies

KEYWORDS: Ro, La, SSA SSB, autoantibodies, sero-negative lupus

PRINCIPAL INVESTIGATOR: Tesar, Joseph MD
ASSOCIATES: Molina, Rudolph MD Rheumatologist, Andrews AFB

DEPARTMENT: Department of Medicine
SERVICE: Rheumatology Service

STATUS: Ongoing
APPROVAL DATE: May 1984

FUNDING: Current FY: $ 5,439 Previous FYs: $ 6,584 Total: $ 12,023

STUDY OBJECTIVE
To develop an in vitro, experimental model of cutaneous manifestations of seronegative and neonatal lupus using anti-Ro/SSA and anti-La/SSB antibodies and a cultured, epithelial cell line (Hep-2). The study also has implications for the clinical subset of subacute cutaneous lupus which is similar to neonatal lupus and is characterized by annular skin lesions and circulating anti-Ro/SSA and anti-La/SSB antibodies.

TECHNICAL APPROACH
The study will define the effect of immune complex formation in situ at the surface of epithelial cells. The effect of environmental agents, such as UV radiation on release of Ro and La antigens from epithelial cells will be studied using immunofluorescent techniques. An animal model of cutaneous and neonatal lupus will be developed using the above immunological reagents.

PRIOR AND CURRENT PROGRESS
1. Development of methods for isolation and quantitation of Ro and La antigens and antibodies. 2. Demonstration of release of Ro and La antigens from epithelial cell line by UV radiation and adenoviral agents. Formation of immune complexes in the presence of homologous antibodies was also demonstrated. 3. Immune complexes of IgG anti-SSA/SSA and anti-SSB/SSB composition activate human complement as demonstrated by fixation of C3 at the cell surface by immunofluorescent technique. 4. A new type of neonatal lupus with cutaneous manifestations associated with RNP and Sm antibodies was demonstrated.

CONCLUSIONS
Complement activating immune complexes were induced on the surface of epithelial cells (Hep-2) UV radiation or by adenoviruses in the presence of anti-Ro and La nuclear antibodies and complement. A similar process is probably occurring in the skin of photosensitive individuals with SLE and neonatal lupus.
TITLE: Effects of Recombinant Human Y-Interferon (Y-IFN) Human B-Cell Responses to Soluble Activators

KEYWORDS: human, B cell proliferation, biochemical events

PRINCIPAL INVESTIGATOR: Katona, Ildy CDR MC USN
ASSOCIATES: Rehe, Greg MAJ MC

DEPARTMENT: Department of Medicine
SERVICE: Rheumatology Service

STATUS: Ongoing
APPROVAL DATE: Oct 1986

FUNDING: Current FY: $7,813
Previous FYs: $0
Total: $7,813

STUDY OBJECTIVE
To study early intracellular biochemical events that occur following human B cell stimulation with soluble activators, such as anti-IgM antibodies, Staphylococcus aureae Cowan-A I and phorbol esters.

TECHNICAL APPROACH
After B cell activation the following parameters will be studied: 1) changes in intracellular ionized calcium (by measuring indo-1 fluorescence with a fluorescence activated cell sorter); 2) kinetics of intracellular phosphatidyl inositol-4, 5 biphosphate hydrolysis; 3) effect of protein kinase C activators on the above two parameters; 4) cellular proliferation.

PRIOR AND CURRENT PROGRESS
All three type of interferons (IFN-α, IFN-β, and IFN-γ) have important immunoregulatory roles in human B cell activity, and their ability to enhance or suppress B cell activation depends on the nature of mitogenic stimulus. After depletion of detectable cellular stores of protein kinase C, anti-IgM antibody is still capable of delivering a proliferative signal to human B cells.

CONCLUSIONS
Our findings suggest that anti-immunoglobulin signaling of human B cells may occur via other pathways in addition to the phosphatidylinositol system of calcium influx and protein kinase C activation. Identification of these additional pathways could lead to a better understanding of B cell function.
DETAIL SUMMARY SHEET

TITLE: Anticardiolipin Antibodies in Patients with SLE

KEYWORDS:

PRINCIPAL INVESTIGATOR: Baunchalk, James CPT MC

DEPARTMENT: Department of Medicine
SERVICE: Rheumatology Service

STATUS: Terminated
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $6,732 Previous FYs: $7,442 Total: $14,17-

STUDY OBJECTIVE
Determine the frequency of anticardiolipin antibody production in B-cells of patients with SLE. Establish a monoclonal BS cell culture producing anti-phospholipid antibody.

TECHNICAL APPROACH
Mononuclear cells are separated from heparinized peripheral blood using gradient centrifugation. The cells cultured and the supernates are collected using standard techniques. The supernates are then assayed for anticardiolipin antibody using ELISA determinations. The cultures will be done with poke weed mitogen as a stimulant.

PRIOR AND CURRENT PROGRESS
To date 10 samples of SLE mononuclear cells and 10 normal controls have been collected and cultured. Supernates have been collected and ELISA assays have been performed after initial control testing was done. The assays have yielded results suggesting low levels of anticardiolipin are being produced in the SLE samples but not in the controls.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
DETAILED SUMMARY SHEET

TITLE: Comparative Open Label Clinical Trial of Sulfasalazine and Auranofin in the Treatment of Active Rheumatoid Arthritis

KEYWORDS: sulfasalazine, auranofin, rheumatoid arthritis

PRINCIPAL INVESTIGATOR: Strickland, Roger MAJ MC
ASSOCIATES: Klipple, Gary COL MC

DEPARTMENT: Department of Medicine
SERVICE: Rheumatology Service

STATUS: Ongoing
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To compare the therapeutic efficacy of sulfasalazine versus auranofin in the treatment of patients with definite or classical active rheumatoid arthritis in a six month open trial. b) To compare the incidence and severity of side effects and complications among the treatment groups.

TECHNICAL APPROACH
Patients with active or classical active rheumatoid arthritis are entered into a 26 week open label, randomized, single blinded, parallel trial of sulfasalazine (1500mg bid) and auranofin (6mg qd). The study is conducted in cooperation with the Rheumatology service at William Beaumont Army Medical Center, El Paso, Texas.

PRIOR AND CURRENT PROGRESS
Fourteen patients have been enrolled in the study. Two were dropped from the study because of side effects. One had gastrointestinal discomfort and another had rash. One stopped because of lack of efficacy. Nine other patients have completed the study.

CONCLUSIONS
No conclusions can be drawn at this time due to the small number of patients.
TITLE: Autoimmune Phenomena in Patients with Inflammatory Osteoarthritis and Primary Nodal Osteoarthritis

KEYWORDS: autoimmunity, osteoarthritis

PRINCIPAL INVESTIGATOR: Strickland, Roger MAJ MC
ASSOCIATES: Riordan, Kathryn MD

DEPARTMENT: Department of Medicine
SERVICE: Rheumatology Service

STATUS: Ongoing
APPROVAL DATE: May 1988

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine the extent of autoimmune features with inflammatory osteoarthritis and primary nodal osteoarthritis.

TECHNICAL APPROACH
One hundred forty caucasian patients with primary nodal osteoarthritis or inflammatory OA will be screened with Xrays and laboratory tests for evidence of autoimmune disease.

PRIOR AND CURRENT PROGRESS
Nine patients have been enrolled in the study.

CONCLUSIONS
No conclusions can be drawn at this time.
TITLE: Evaluation of the Effectiveness of Trihexyphenidyl as an Adjunct Drug for Treatment of Epilepsy

KEYWORDS: trihexyphenidyl, epilepsy, anticholinergic therapy

PRINCIPAL INVESTIGATOR: Jabbari, Bahman COL MC
ASSOCIATES: Gunderson, Carl COL MC

SERVICE: Neurology Service

STATUS: Completed
APPROVAL DATE: Feb 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To investigate effectiveness of the anticholinergic medication trihexyphenidyl, as an adjunct drug in intractable epilepsy.

TECHNICAL APPROACH
Ten patients with intractable epilepsy (seizure frequency more than four months) will be studied. The patients will record the frequency of their seizures over two months prior to administration of the drug and for 3 months following taking maximum dosage. Pattern of seizures, their frequency and EEG will be recorded before and after treatment on eight channel ambulatory EEG and Video EEG unit. Trihexyphenidyl will be started as 1 mg daily and increased to 20 mg over 2 weeks.

PRIOR AND CURRENT PROGRESS
A total of 10 patients has been studied. Seven patients had partial complex epilepsy and three had generalized seizures with atonic spells. In the first group one patient improved significantly. Two did not respond and one slightly worsened. Three patients of the group could not tolerate the medication because of side effects (blurring of vision, forgetfulness). In the second group, all three patients improved significantly.

CONCLUSIONS
Trihexyphenidyl appeared effective against generalized seizure with atonic clinical features as an adjunct medication. The role of this drug in complex partial epilepsy deserves further investigation.
TITLE: Measurement of Arachidonic Acid Metabolites in the Cerebrospinal Fluid of Patients with Central Nervous System Cancer

KEYWORDS: CNS Cancer, prostaglandins

PRINCIPAL INVESTIGATOR: Scherokman, Barbara MD
ASSOCIATES: Giora, Feuerstein MD

SERVICE: Neurology Service

STUDY OBJECTIVE
To test the hypothesis that the levels of arachidonic acid metabolites are significantly elevated in the CSF of patients with both primary and secondary cancer of the CNS in comparison to normals and patients with non-neoplastic neurologic diseases.

TECHNICAL APPROACH
Two cc of CSF will be obtained and levels of metabolites of arachidonic acid will be determined by radioimmunassays. There have been no modifications to the original protocol.

PRIOR AND CURRENT PROGRESS
1) Total enrollment since 1985: Controls 12; Neurologic 38; Cancer 56 2) There have been no serious or unexpected adverse reactions. 3) There has been no benefit to patients.

CONCLUSIONS
In the final analysis of data patients with cancer do not have significantly elevated PGE2 levels in their CSF when compared to controls and patients with non-neoplastic neurologic diseases.
DETAIL SUMMARY SHEET

TITLE: A Comparison of Intramuscular ACTH Alone vs. Intrathecal Interferon and Intramuscular ACTH in the Treatment of Acute Exacerbations of Patients with Multiple Sclerosis

KEYWORDS: ACTH, intrathecal interferon, multiple sclerosis

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Completed

APPROVAL DATE: May 1985

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the effectiveness of intrathecal interferon versus ACTH alone in a multicenter trial.

TECHNICAL APPROACH
ACTH with or without interferon will be administered to patients with acute exacerbation of MS.

PRIOR AND CURRENT PROGRESS
A total of four patients have been entered in the study to date at WRAMC. Fourteen patients have been entered in the study overall. Since the onset of this study, however, the results of a larger, multicenter study by our group has demonstrated a significant benefit of intrathecal interferon when administered over a six-month period to patients with exacerbating-remitting MS. We are currently planning a confirmatory follow-up study (approved by WRAMC HUC, January 1988). However, patients who have participated in the current acute exacerbation study (WR#7124) will be excluded from the upcoming study. Given our current knowledge, it is likely that the dosage schedule in the current protocol may not be sufficient to produce significant benefit, and we thus believe that it may not be proper to enter any further patients in this study if it will deny them a chance to participate in the upcoming study. We are thus considering termination of this study.

CONCLUSIONS
There were no significant adverse side effects of the medication encountered. No further patients are being entered into this protocol. Please terminate the protocol.
TITLE: Development and Standardization of Tests of Cognitive Function for Dementia: Normal Volunteer Studies

KEYWORDS: cognition, psychometrics, normals

PRINCIPAL INVESTIGATOR: Martin, Alex PhD
ASSOCIATES: Kampen, Diane; Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Terminated
APPROVAL DATE: Jun 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
1. To establish a mechanism for developing norms and standardizing new neuropsychological tests for dementing illnesses.
2. To develop and standardize tests which may further delineate the qualitatively distinct patterns of impairment among patients with probable Alzheimer's disease.

TECHNICAL APPROACH
Paper and pencil tests of different cognitive abilities have been developed. They are being administered to 60 normal, healthy adults. Normal changes in test performance with age will be assessed via analysis of variance and correlational procedures. The effects of dementing illnesses on performance will be determined by comparing these normal control scores with those obtained from Alzheimer's patients (companion protocol #7119).

PRIOR AND CURRENT PROGRESS
Two elderly subjects have been run, and five subjects who only completed some of the tests have returned to complete the battery. There have been no unexpected or adverse reactions. Subjects continue to feel that an assessment of their cognitive abilities is helpful to them.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
DETAIL SUMMARY SHEET

TITLE: Evaluation of the Effectiveness of Metoclopramide (Reglan) in Involuntary Movement Disorders

KEYWORDS: metoclopramide, movement disorder, dopamine antagonist

PRINCIPAL INVESTIGATOR: Jabbari, Bahman COL MC
ASSOCIATES: Bartoszek, David CPT MC

SERVICE: Neurology Service

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To investigate effectiveness of dopa antagonist drug metoclopramide in different movement disorders.

TECHNICAL APPROACH
Subjects of the study consist of patients with involuntary movements who are younger than 70 years. Before treatment each patient will have a five minute videotape of the movements and the severity of the movements will be rated according to Jankovic’s hyperkinesia scale. Metoclopramide will be administered first 10mg p.o. B.I.D. to be gradually increased to 160mg over a period of two weeks. A repeat videotape and neurological examination will be obtained at the time of maximum or effective dosage.

PRIOR AND CURRENT PROGRESS
A total of 14 patients have been studied. Eight patients had spasmodic torticollis, two had Tourette Syndrome and each one of the other four patients had the following diagnosis: Huntington Chorea, focal dystonia, generalized dystonia, Meige Syndrome.

CONCLUSIONS
Both patients with Tourette Syndrome demonstrated significant improvement on 80 and 100 mg of metoclopramide daily. No improvement was noted in the other categories of movements.
TITLE: Evaluation of the Effects of Anticholinergic, Dopamine Antagonist and GABA Agonist Medications on Brain Electrical Activity and Nerve Fiber Conduction in the Central Nervous System

KEYWORDS: brain electrical mapping, evoked potentials, anticholinergics

PRINCIPAL INVESTIGATOR: Jabbari, Bahman COL MC
ASSOCIATES: Lipps, David CPT MC

SERVICE: Neurology Service

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To investigate the effect of Anticholinergic, Dopamine antagonist and GABA agonist medications on brain electrical activity and nerve fiber conduction in the Central Nervous System.

TECHNICAL APPROACH
Study group consisted of patients with movement disorders in whom initial evoked potential studies and brain electrical activity mapping disclosed no abnormality-patients consented to have a repeat of these studies at the time of their maximum daily dosage of these medications (determined by their primary care physicians). Central conduction times and EEG frequency patterns will be compared before and after taking medications.

PRIOR AND CURRENT PROGRESS
We have studied a total of 28 patients. All patients took medications for treatment of torticollis. Twenty patients took anticholinergic medication trihexyphenidyl, six patients took dopamine antagonist metoclopramide and two patients took GABA agonist valproic acid. The maximum daily dose used for trihexyphenidyl, metoclopramide and valproic acid was 40mg, 160mg and 2g respectively. The morphology, latency and central conduction time of evoked potentials did not change after taking these medications. Brain electrical potentials did not change after taking these medications. Brain electrical activity mapping was performed only on four patients and showed not change.

CONCLUSIONS
This study indicates that high doses of trihexyphenidyl, metoclopramide and valproic acid do not change morphology and latency of conventional visual, auditory, somatosensory evoked potentials. No significant effect was noted over brain electrical activity mapping. However, the number of the studied patients was too small to be conclusive.
TITLE: Investigation of the Yield of Somatosensory Evoked Potential Test and Magnetic Resonance Imaging in Myelopathies

KEYWORDS: myelopathy, magnetic resonance, somatosensory-potential

PRINCIPAL INVESTIGATOR: Jabbari, Bahman COL MC
ASSOCIATES: Geyer, Carl MAJ MC

SERVICE: Neurology Service

STATUS: Completed
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To investigate the yield of Somatosensory Evoked Potential Test and compare that with the yield of Magnetic Resonance Imaging in Myelopathies.

TECHNICAL APPROACH
The results of Somatosensory Evoked Potential (SEP) and MR are compared in the patients with the clinical diagnosis of Myelopathy. SEP study is performed on a tech neur-Lab and MR on a 1.5 tesla equipment. Patients are divided into 5 groups: Spinal Cord Tumor, Syringomyelia, Spondylitis, Demyelinating disorders, and miscellaneous. Central condition time abnormalities in SEP and T1, T2 or balanced MR image abnormalities in MR are compared in the different patient groups of this study.

PRIOR AND CURRENT PROGRESS
A total of 95 patients have been studied. The study group consists of 25 patients with intraspinal neoplasms, 24 patients with syringomyelia, 25 patients with spondylitic myelopathy, ten patients with multiple sclerosis and eleven with other myelopathies. All patients had both median and posterior tibial SEP as well as MR studies of the spinal cord.

CONCLUSIONS
Somatosensory Evoked Potential study was abnormal in 76% of the patients with intraspinal neoplasms. SEP abnormality suggested spinal cord pathology in 44% of the patients in whom clinical examination was either normal or disclosed vague non-localizing signs. SEP findings strongly correlated with MR findings in patients with spinal neoplasms or multiple sclerosis.
DETAIL SUMMARY SHEET

TITLE: Human Fibroblast Interferon Vs. Hydergine in the Treatment of Alzheimer's Disease

KEYWORDS:

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Completed

APPROVAL DATE: Aug 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
Study Closed.

TECHNICAL APPROACH
Study Closed.

PRIOR AND CURRENT PROGRESS
The study was not approved by Health Service Command. No patients have been entered. The investigator plans to submit a new protocol and requests that the study be terminated.

CONCLUSIONS
Study Closed.
DETAIL SUMMARY SHEET

TITLE: Presence of an Endogenous Anticonvulsant Substance in Human Cerebrospinal Fluid Following a Seizure

KEYWORDS: seizure, CSF, anticonvulsant

PRINCIPAL INVESTIGATOR: Martinez, Arizala MAJ MC

SERVICE: Neurology Service

STATUS: Ongoing

APPROVAL DATE: Sep 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To test for the presence of endogenous anticonvulsant substances in human cerebrospinal fluid obtained from patients who have experienced a seizure.

TECHNICAL APPROACH
Obtain CSF from seizure patients and from controls. The fluid is tested for anticonvulsant activity in a rat seizure model available in the Dept of Medical Neurosciences at WRAIR.

PRIOR AND CURRENT PROGRESS
CSF from 4 patients was obtained. No seizure CSF has been obtained.

CONCLUSIONS
More fluid need to be collected.
DETAIL SUMMARY SHEET

TITLE: Beta Interferons in Multiple Sclerosis: A Randomized, Double Blind, Placebo Controlled Multicenter Study of the Relative Efficacies of Three Experimental Treatments as Prophylaxis Against Multiple Sclerosis Exacerbations

KEYWORDS: multiple sclerosis, b-interferons

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Completed

ACCOUNTING DATE: Dec 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the relative efficacy of various routes of administration of B-IFN in multiple sclerosis.

TECHNICAL APPROACH
Both natural and recombinant B-interferon were to be administered intramuscularly, intrathecally or intravenously to patients with exacerbating remitting multiple sclerosis.

PRIOR AND CURRENT PROGRESS
No patients accessed. Funding not obtained from NINDS.

CONCLUSIONS
Request that this protocol be terminated. A revised version has been submitted. After approval at Walter Reed Army Medical Center, this protocol was submitted to NINDS/NIH for funding. The study was not funded by NINDS as written. However, it was requested that revisions be made, particularly with simplification of the treatment regimens, and the study be resubmitted. We have since rewritten the protocol with only two arms: Intramuscular B-interferons and placebo.
DETAIL SUMMARY SHEET

TITLE: An Investigation of Frontal Lobe Mediated Knowledge Representation

KEYWORDS: cognition, frontal lobe

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Ongoing

APPROVAL DATE: Feb 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
1) To develop face valid tests of executive functions in frontal lobe patients.
2) To obtain normal control data on these tests.
3) To study and refine our model of executive (frontal lobe) functions.

TECHNICAL APPROACH
Various standard and experimental neuropsychological tests are administered to patients with frontal lobe disease, as well as to certain normal and nonfrontal patients.

PRIOR AND CURRENT PROGRESS
Five patients enrolled. No new patients have been seen due to lack of funds.

CONCLUSIONS
Although this protocol was approved at Walter Reed Army Medical Center, it was not funded. Thus, only a few patients have been evaluated (in collaboration with Dr. Jordan Grafman, NINDS/NIH).
TITLE: Patterns of Cerebral Blood Flow Determined by Iodoamphetamine SPECT in Sjogren's Syndrome and Systemic Lupus Erythematosus: A Pilot Study

KEYWORDS: SPECT, Sjogren's syndrome, erythematosus

PRINCIPAL INVESTIGATOR: Labutta, Robert CPT MC

SERVICE: Neurology Service

STATUS: Ongoing

APPROVAL DATE: Mar 1988

FUNDING: Current FY: $ 0
Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To prospectively correlate Neurologic/Neuropsychiatric function with Spect and MRI scanning in patients with Sjogren's Syndrome and SLE. To identify possible regional defects in cerebral blood flow and correlate these defects with the measurable degree of CNS dysfunction.

TECHNICAL APPROACH
A total of forty (40) patients, twenty (20) with Sjogren's Syndrome and 20 with SLE will be identified as having evidence of Central Nervous System dysfunction or the lack there of. Then all patients, regardless of status will receive a Spect and MRI scan. Added during this past year was an addendum to the protocol calling for prospective Neuropsychiatric testing in these patients to identify any subtle cognitive dysfunction not recognized by the initial clinical Neurologic examination. The Radiologists and Clinical Psychologist are blind to the patient's entry status.

PRIOR AND CURRENT PROGRESS
A total of seven (7) patients have been entered into the study as of this date. There have been no adverse reactions and no patients have withdrawn from study. There have been no tangible benefits accrued by the entered patients.

CONCLUSIONS
The study took about 6 months to start up but is now proceeding nicely. Preliminary analysis of data is presently inconclusive and will await greater numbers of completed patients over the next year to reach significant conclusions.
TITLE: Investigation of the Usefulness of Motor Evoked Potentials in Neurological Disorders

KEYWORDS: motor evoked potentials, magnetic, motor system

PRINCIPAL INVESTIGATOR: Jabbari, Bahman COL MC

SERVICE: Neurology Service

STATUS: Ongoing

APPROVAL DATE: May 1988

FUNDING:

STUDY OBJECTIVE
The objective of this study is to evaluate the yield of the newly invented magnetic evoked potentials in neurological disorders. This test can non-invasively measure the conduction times in the motor pathways of the brain and the spinal cord.

TECHNICAL APPROACH
Focal magnetic stimulation to the neural tissue is provided by a Nicolet 2000 unit. On each patient the response will be recorded for the abductor pollicis and anterior tibialis muscles and the nervous system will be stimulated at the wrist, Erb's point (brachial plexus, C6 cervical level and scalp at the region of hand and leg motor cortex. Absolute latency values for the peripheral and central potentials and the central conduction times will be compared with the normal values for age and height provided in the literature. All patients will sign the informed consent prior to testing.

PRIOR AND CURRENT PROGRESS
The patient population includes all patients suspected of having central nervous system disorders, especially those suspected of having multiple sclerosis (MS) or amyotrophic lateral sclerosis (ALS) which selectively involves the motor pathways. We will also study patients with brachial plexopathies, i.e. certain types of peripheral lesions. To date a total of 35 patients have been tested. The group is heterogeneous and included 4 patients with ALS, 5 patients with suspected MS and a variety of sporadic and familial CNS diseases. The preliminary data shows prominent abnormalities in all ALS and MS patients.

CONCLUSIONS
Motor evoked potentials may prove to be a major diagnostic test in evaluation of the patients suspected to have amyotrophic lateral sclerosis or multiple sclerosis.
DETAIL SUMMARY SHEET

TITLE: Anatomical and Functional Sequelae of Head Injuries Incurred in Vietnam

KEYWORDS: penetrating head injury, posttraumatic epilepsy, neuropsychological outcome

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STATUS: Ongoing

APPROVAL DATE: Jun 1980

FUNDING: Current FY: $ 6,875

Previous FYs: $ 0

Total: $ 6,875

STUDY OBJECTIVE

To examine selected veterans who received head injuries in Vietnam, plus Vietnam veterans who received no head injuries as a control group.

TECHNICAL APPROACH

Each subject received a neurological exam, CT scan, speech pathology exam, motor exam, audiology exam, electrophysiology battery, and neuropsychological exam. In addition, an American Red Cross caseworker has interviewed each subject and family to complete a field study.

PRIOR AND CURRENT PROGRESS


CONCLUSIONS

The VHIS data base represents an invaluable asset on computer tape and microfiche that will continue to provide room for analysis for years to come. While many of the questions posed in the original protocol have already been answered, new and often more exciting questions have arisen and will continue to arise as investigators explore the data.
TITLE: Poly ICLC in the Treatment of Chronic Guillain-Barre Syndrome

KEYWORDS: Guillain Barre, poly ICLC, interferon

PRINCIPAL INVESTIGATOR: Salazar, Andres COL MC

SERVICE: Neurology Service

STUDY OBJECTIVE
To determine the therapeutic usefulness of Poly ICLC in chronic Guillain-Barre syndrome.

TECHNICAL APPROACH
IV or IM administration of Poly ICLC weekly, and then monthly for two or more months, depending on the initial response. Chronic administration as needed to maintain improvement.

PRIOR AND CURRENT PROGRESS
Five patients with this very rare condition have been treated to date on this protocol. Two have shown definite improvement and two have shown only minor gradual improvement and decided to discontinue chronic therapy. No new patients have been entered in the study in 1988.

CONCLUSIONS
Poly ICLC appears to be well tolerated in patients with chronic relapsing polyneuropathy (chronic Guillain-Barre syndrome), and sustained remission with marked return of function has been seen in the one patient who received chronic treatments. Poly ICLC has a beneficial effect in certain patients with chronic Guillain-Barre syndrome, "CRIP" (chronic recurrent idiopathic polyneuritis). Poly ICLC may be beneficial in acute Guillain-Barre syndrome.
REPORT DATE: 01/05/89

DETAIL SUMMARY SHEET

TITLE: Relaxation with Imagery: An Adjunctive Treatment for Nausea and/or Vomiting

KEYWORDS: relaxation w/imagery, anticipatory, nausea and/or vomiting

PRINCIPAL INVESTIGATOR: Rikli, Patricia LTC AN
ASSOCIATES: Carty, John LTC

DEPARTMENT: Department of Nursing

STUDY OBJECTIVE
This study will compare the effectiveness of relaxation with imagery (RI) and the institution’s standard anticipatory nausea and vomiting (ANV) treatment in decreasing the frequency, severity and duration of ANV and anxiety.

TECHNICAL APPROACH
An experimental two group design with random group assignment will be utilized consisting of 30 subjects per group. Subjects will be referred from WRAMC and Naval Hospital-Bethesda health care providers. The RI group subjects will be taught via use of an audiotape RI procedure and will practice with the tape 3 times a day at home. Each subject will complete the MANE and STAI questionnaires at the first interview and at the third interview. Analysis of covariance will be utilized to assess data. The protocol was expanded to include subjects with lung and breast cancer and adriamycin.

PRIOR AND CURRENT PROGRESS
Thirty-six subjects have been accessed, 14 from WRAMC and 22 from Naval Hospital. No statistical analysis has been done at this point. Progress is noted and, as expected, is consistent but slow. No adverse reactions noted. Significant benefits cannot be stated at the present time. It can be noted that 15 of the 18 RI subjects have reported a decrease in anxiety, frequency, severity and duration of ANV. Five of the comparison group subjects who have completed the study and been taught the RI procedure have similar responses as the RI group.

CONCLUSIONS
No conclusions of any statistical significance can be drawn at this time. A general trend based on health care provider remarks and participant’s comments provide a positive response to the RI treatment.
REPORT DATE: 05/19/89

DETAIL SUMMARY SHEET

TITLE: A Comparison of the Effectiveness of Two Tracheobronchial Suctioning Techniques

KEYWORDS: endotracheal, suctioning

PRINCIPAL INVESTIGATOR: Biskey, Valerie LTC AN
ASSOCIATES: Taylor, Andrea MAJ AN

DEPARTMENT: Department of Nursing

STATUS: Completed
APPROVAL DATE: Jun 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This study was designed to examine one aspect of the endotracheal suctioning procedure, rotation of the suction catheter as negative pressure is applied on withdrawal, and to determine its effect on efficacy in secretion removal, oxygenation and trauma inflicted on the tracheobronchial tree.

TECHNICAL APPROACH
A within subjects experimental drug was used, with each subject receiving both treatments: a) suctioning with no rotation of the catheter on withdrawal; b) suctioning with catheter rotation on withdrawal. Treatment order was randomly assigned. Secretions recovered were weighed to determine efficacy and hemetested for blood as a measure of trauma. Arterial blood gas samples were obtained and PO2 values compared to monitor oxygenation.

PRIOR AND CURRENT PROGRESS
Thirty subjects were enrolled last year for a total of thirty subjects in the study. There were no adverse reactions. One subject was dropped from the study due to copious pulmonary secretions which necessitated suctioning intervention prior to the planned protocol suctioning. There was no benefit to subjects other than that usually encountered with endotracheal suctioning.

CONCLUSIONS
There was a difference in secretion recovery between the rotational and nonrotational withdrawal techniques, with the rotational technique found to be more efficacious. There was evidence suggesting that the rotational withdrawal technique was less traumatic, though results were not significant. There was no statistically significant difference in oxygenation between the two techniques.
REPORT DATE: 01/01/89

DETAIL SUMMARY SHEET

TITLE: Cooperative Gynecologic Oncology Group

KEYWORDS: gynecologic, oncology, group

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing

APPROVAL DATE: Jan 1974

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Walter Reed section of Gynecologic Oncology is involved with the nationally organized Gynecologic Oncology Group which consists of 37 major medical centers in the country which are interested in the area of gynecologic tumors and treatment of gynecologic cancer. The GOG is recognized and funded through the National Cancer Institute.

TECHNICAL APPROACH
Walter Reed is active in approximately 40 GOG protocols. Presently, there are 87 protocols that are either active or continue to provide significant data. These protocols involve treatment of ovarian carcinoma, cervical carcinoma, adenocarcinoma of the endometrium, uterine sarcoma, vulvar carcinoma and gestational trophoblastic disease.

PRIOR AND CURRENT PROGRESS
Approximately 671 patients have been entered into GOG protocols from Walter Reed. There have been 37 patients entered since the last report.

CONCLUSIONS
Detailed in individual reports.
STUDY OBJECTIVE
To evaluate various parameters of immune function in patients with endometriosis. We limited our evaluation to the lymphocyte populations in peritoneal fluid.

TECHNICAL APPROACH
Peritoneal fluid and peripheral blood was obtained from infertile patients and fertile controls undergoing laparoscopy. The lymphocyte phenotypes were identified with monoclonal antibodies against cell surface antigens and evaluated with the FACStar flowcytometer. The patients were segregated into control, endometriosis, and miscellaneous infertility. The data were expressed as percent of lymphocytes. Statistical analysis was done using Mann-Whitney U test and Kruskall-Wallis test.

PRIOR AND CURRENT PROGRESS
We have evaluated 11 fertile controls, 12 endometriosis, and 11 miscellaneous infertile patients. The results showed no difference between any group in peripheral blood or peritoneal fluid. When comparing peripheral blood to peritoneal fluid in each group there were significant differences in the following categories: fewer total T cells, increased activated (DR+) cells, decreased helper cells, helper suppressor ratio and natural killer cells.

CONCLUSIONS
Although previous studies have shown increased total macrophage counts and activated macrophages in the peritoneal fluid of endometriosis patients, we found no such changes in lymphocyte subsets. There appears to be a non-specific difference in the lymphocyte subsets of peritoneal fluid when compared to peripheral blood of all patients.
REPORT DATE: 10/04/89

DETAIL SUMMARY SHEET

TITLE: Gonococcal Adherence-Human Cervical Receptor Studies

KEYWORDS: adherence, human, cervical

PRINCIPAL INVESTIGATOR: Tramont, Edmund COL MC
ASSOCIATES: McChesney, Daniel CPT MS; Cobey, Elwood LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Completed

APPROVAL DATE: Nov 1986

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
a) To identify and characterize the receptor molecules on human cervical cells to which N. gonorrhoeae attach in vitro; b) to determine if these receptors are the same as the receptors on human buccal epithelial cells; c) to determine if there variations among individuals.

TECHNICAL APPROACH
Cells from volunteers undergoing a normal PAP smear or cells from the hysterectomized tissue of volunteers undergoing a hysterectomy will be collected and the ability of these cells to bind gonococcal pili or an antibody resembling the binding domain of gonococcal pili will be determined in vitro.

PRIOR AND CURRENT PROGRESS
No patients were studied due to the departure of the PI before the project could begin.

CONCLUSIONS
There is no other investigator able to conduct the study. Project terminated.
DETAIL SUMMARY SHEET

TITLE: Longitudinal Studies of Natural Killer Cells in Pregnancy and the Postpartum Period

KEYWORDS: immunity, pregnancy, post-partum

PRINCIPAL INVESTIGATOR: Opsahl, Michael LCDR MC USN
ASSOCIATES: Klein, Thomas COL MC

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing

APPROVAL DATE: Jan 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To study longitudinal changes in natural killer cell structure and function during and after pregnancy.

TECHNICAL APPROACH
Blood will be obtained at intervals throughout pregnancy and for up to one year postpartum. The mononuclear cells will be separated by centrifuging the blood over Lymphocyte Separation Media. The isolated mononuclear cells will be evaluated for natural killer cell activity by measuring cytotoxicity to K562 human myeloid leukemic cells. T cell subset determination will be performed by labelling the mononuclear cells with fluorescently labelled monoclonal antibodies and then measuring specific subsets, with the use of the Fluorescent Activated Cell Sorter.

PRIOR AND CURRENT PROGRESS
Fifteen subjects have been enrolled in this study. Each subject has had one specimen drawn prior to pregnancy, and all are currently attempting pregnancy. There have been no serious or unexpected adverse reactions. No patients have been withdrawn from the study. At this time there has been no benefit to the patients.

CONCLUSIONS
No conclusions can be made at this time.
DETAIL SUMMARY SHEET

TITLE: Cross Sectional Studies of Natural Killer Cells in Pregnancy and the Postpartum Period

KEYWORDS: immunity, pregnancy, post-partum

PRINCIPAL INVESTIGATOR: Opsahl, Michael CDR MC USN
ASSOCIATES: Klein, Thomas COL MC; Hansen, K. LCDR MC USNR

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing

APPROVAL DATE: Jan 1987

FUNDING: Current FY: $ 2,330 Previous FYs: $ 511 Total: $ 2,841

STUDY OBJECTIVE
To evaluate changes in Natural Killer cell function during pregnancy and the postpartum period using a cross-sectional study design.

TECHNICAL APPROACH
A cross-sectional sample of patients will be sampled at intervals during pregnancy and up to one year post-partum. The mononuclear cells will be separated by centrifuging the blood over Lymphocyte Separation Media. The isolated mononuclear cells will be evaluated for Natural Killer cell activity measuring cytotoxicity to K562 human myeloid leukemic cells. T cell subset determination will be performed by labelling the mononuclear cells with fluorescently labelled monoclonal antibodies and then measuring specific subsets, with the use of the Fluorescent Activated Cell Sorter.

PRIOR AND CURRENT PROGRESS
Fortytwo subjects have been studied during pregnancy. No postpartum samples have been obtained. There have been no serious or unexpected adverse reactions. No patients have been withdrawn from the study. At this time there has been no benefit to the patients.

CONCLUSIONS
It appears the Natural killer cell activity is decreased in pregnancy as compared to nonpregnant controls. It appears that the number of Natural Killer cells during pregnancy and the postpartum period, before a complete statistical analysis can be performed.
TITLE: The Effect of Vaginal Lubricants on Sperm Motility in the Postcoital Test

KEYWORDS: lubricants, sperm, motility

PRINCIPAL INVESTIGATOR: Opsahl, Michael LCDR MC USN
ASSOCIATES: Klein, Thomas COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
STATUS: Ongoing
APPROVAL DATE: Feb 1987

FUNDING: Current FY: $ 50 Previous FYs: $ 0 Total: $ 50

STUDY OBJECTIVE
Determination of sperm motility in vivo following the use of vaginal lubricants. The use of vaginal lubricants occasionally becomes an issue for infertile couples. We seek to determine if in vivo use of lubricants is likely to affect sperm cervical mucus interaction.

TECHNICAL APPROACH
The sperm-cervical mucus interaction will be assessed after a standard post-coital test (PCT). The results of the tests will be compared from each couple after a PCT with and one without the use of vaginal lubricants. The physician will be blinded to the patients use of lubricant.

PRIOR AND CURRENT PROGRESS
Unfortunately, little progress has been made. One patient from WRAMC has been studied. The PI completed his fellowship at WRAMC and moved to NNMC Bethesda. Efforts are currently underway to complete the study at NNMC. The protocol has been submitted for approval at NNMC and will be presented to WRAMC for joint approval and function in the next month. We hope to complete the study by summer 1989.

CONCLUSIONS
None at present due to lack of data.
DETAIL SUMMARY SHEET

TITLE: Detection of Herpes Simplex and Human Papillomaviruses in Exfoliated, Cervical Epithelial Cells by Means of In Situ Hybridization with Biotinylated DNA Probes

KEYWORDS: herpes simplex virus, human papillomavirus, in-situ hybridization

PRINCIPAL INVESTIGATOR: O'Conner, Dennis LTC MC
ASSOCIATES: Marsella, Richard LTC MC; Woodward, Joan MAJ MC

DEPARTMENT: Department of Obstetrics and Gynecology
STATUS: Ongoing
APPROVAL DATE: Nov 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The detection of Human Papillomaviruses and/or Herpes Simplex virus genetic material in exfoliated cervical epithelial cells by in-situ DNA hybridization performed directly on Pap smears.

TECHNICAL APPROACH
An evaluation of women at risk-for harboring Herpes Simplex and/or Human Papillomavirus infections was initiated. In this study women in a variety of health status categories are being evaluated by means of Pap smears, immunoperoxidase, in-situ hybridization and vaginal cultures for the presence of cellular Herpes Simplex and Human Papillomavirus antigens, nucleic acids and the existence of cellular atypias which may indicate predisposition to neoplastic transformation at some future date.

PRIOR AND CURRENT PROGRESS
Preliminary data is presently available on 400 patients. Cytologic findings documented the presence of Papillomavirus associated changes in 48 cases and in 3 cases of Herpes Simplex virus infections. Cell culture studies identified active Herpes Simplex virus infection in a total of six patients and the asymptomatic shedding of cytomegalovirus in one patient. Immuno-peroxidase technique utilized in staining tissue sections for Herpes viral antigens is currently the preferred procedure for adaptation directly to cytologic material. We have successfully demonstrated Herpes viral antigens in cytologic materials utilizing this technique. A modified in-situ hybridization technique presently utilized to detect Papillomavirus nucleic acid in tissue sections is being evaluated.

CONCLUSIONS
An indepth evaluation of a modified, direct Pap smear, in-situ hybridization procedure for Herpes virus DNA has demonstrated extreme cytoplasmic and nuclear distortion secondary to the heating phase of this technique. Additional modifications in this procedure are currently being evaluated.
DETAIL SUMMARY SHEET

TITLE: The Noninvasive Determination of Fetal Heart Rate Variability - Pilot Study

KEYWORDS:

PRINCIPAL INVESTIGATOR: Ambrose, Anthony COL MC
ASSOCIATES: Skiba-Powell, Helen RN; Thomas, Frank PhD

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing
APPROVAL DATE: Feb 1988

FUNDING: Current FY: $ 500 Previous FYs: $ 0 Total: $ 500

STUDY OBJECTIVE
To assess a new, non-invasive means of determining the fetal electrocardiogram, fetal heart rate, and fetal heart rate variability.

TECHNICAL APPROACH
The fetuses of 5-10 gravida patients not in labor will be monitored noninvasively with the investigational unit to determine optimum lead placement and allow for "fine tuning." Thereafter, 20-25 patients in labor already undergoing direct monitoring of the fetal heart will simultaneously be monitored externally with the investigational unit, and results will be compared.

PRIOR AND CURRENT PROGRESS
To date five patients have been monitored externally with mixed but encouraging results. Following each event, modifications of the monitoring system were made. The sixth patient will be monitored shortly, and if this event is satisfactory Phase II will commence. No adverse reactions have been noted to date. No fetal complications have been noted, and thus patients have benefited from participation.

CONCLUSIONS
Progress has been slower than anticipated because of the need for equipment modification. Once this is no longer required, the remaining monitoring events should be accomplished quickly.
TITLE: The Utility of Leopold's Maneuvers in Determining Fetal Presentation at 36 Weeks Gestation

KEYWORDS:

PRINCIPAL INVESTIGATOR: Ambrose, Anthony COL MC
ASSOCIATES: Bettencourt, Elizabeth CPT MC

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing

APPROVAL DATE: Feb 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To evaluate the accuracy of Leopold's Maneuvers, a traditional series of examinations involving abdominal palpation, in determining fetal presentation at 36 weeks gestation.

TECHNICAL APPROACH
All OB patients at WRAMC are evaluated by Leopold's Maneuvers at 36 weeks gestation. Study participants undergo an ultrasound evaluation of the accuracy of the presentation as determined by the maneuvers.

PRIOR AND CURRENT PROGRESS
As of 31 December 1988 a total of 92 patients have participated in the study, and there has been a very high correlation between presentation as determined by the maneuvers and as determined by ultrasound examination. No adverse reactions have been noted. Patients have benefitted in that fetal presentation has been confirmed.

CONCLUSIONS
To date it seems that Leopold's maneuvers are a reliable means to determining fetal presentation at 36 weeks gestation. A preliminary statistical review of this data will be presented at this department's Resident's Day activities in June 1989.
TITLE: A Multicenter Randomized Trial of Adjuvant Cisplatin/Bleomycin Plus Whole Pelvis Irradiation Vs. Cisplatin/Bleomycin Alone in High Risk Stage IB and IIA Carcinoma of the Cervix

KEYWORDS: carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology

STATUS: Ongoing

APPROVAL DATE: May 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To evaluate the effect of adjunctive pelvic irradiation added to adjunctive chemotherapy for high risk Stage IB and IIA cervical cancer as measured by progression-free interval and survival; b) to compare the relative toxicities of the two regimens with respect to serious complications and/or side effects.

TECHNICAL APPROACH
To be eligible, patients must have had a radical hysterectomy with pelvic and para-aortic lymphadenectomy for Stage IB or IIA cervical carcinoma. They must have one or more of the following poor prognostic signs: nodal metastasis, parametrial involvement, positive surgical margin, tumor diameter greater than 4 cm, deep cervical invasion, adenocarcinoma, adenosquamous carcinoma, or small cell histologic type. Patients are randomized to receive post-operative chemotherapy alone or chemotherapy plus pelvic irradiation.

PRIOR AND CURRENT PROGRESS
To date, twenty-five patients have been entered into this study. Walter Reed has entered four patients. No significant toxicity has been reported thus far. There is no information concerning patients withdrawn from the study. There is no information concerning benefit to patients at this point.

CONCLUSIONS
Too early.
DETAIL SUMMARY SHEET

TITLE: GOG 40: A Clinical-Pathological Study of Stage I and II Uterine Sarcomas

KEYWORDS: uterus, sarcoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Mar 1979

FUNDING: Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
To determine the incidence of pelvic and aortic lymph node metastasis associated with Stage I and II uterine sarcomas and the relationship of these node metastases to other important prognostic factors such as mitotic indices of the tumor and complication rate of the procedures.

TECHNICAL APPROACH
All patients with histologically proven uterine sarcoma, clinically Stage I and II, who are medically suited for hysterectomy and lymphadenectomy are eligible. The patients will undergo at a minimum an extrafascial hysterectomy, BSO and selective pelvic and para-aortic lymphadenectomy. Peritoneal cytology will be obtained. All histologic types of uterine sarcomas are acceptable.

PRIOR AND CURRENT PROGRESS
There are currently 530 patients entered into this protocol from the entire GOG, of whom 282 are evaluable. Walter Reed has entered 14 patients, of whom 13 can be evaluated. Among all the patients entered into this study, one had Grade II hematologic toxicity, one had Grade III GI, and one had Grade IV cutaneous adverse effects; two patients died due to surgical complications.

CONCLUSIONS
The rate of lymphatic node metastasis is low while the recurrence rate is 4%. Adverse prognostic factors include node metastasis, adnexal involvement. Histologic grade appears more significant than the mitotic index. The type of heterologous element is not significant. There have been four serious adverse effects, with two post-operative deaths reported.
DETAIL SUMMARY SHEET

TITLE: GOG 41: Surgical Staging of Ovarian Carcinoma

KEYWORDS: staging, ovarian, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Completed
APPROVAL DATE: Mar 1979

FUNDING:
Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
To determine the spread of ovarian carcinoma to intraperitoneal structures and retroperitoneal lymph nodes by direct examination, cytologic sampling and biopsies. To establish a surgical protocol for patients entered into GOG ovarian cancer treatment protocols. To determine the complication rate of procedures outlined.

TECHNICAL APPROACH
All patients explored in the Principal Investigator’s institution and found to have Stages II or III (optimal) ovarian carcinoma (FIGO Staging), all histologic types and differentiation (including borderline lesions), epithelial tumors, germ cell tumors, stromal tumors, and all others are acceptable.

PRIOR AND CURRENT PROGRESS
There have been 355 patients entered into this study from the entire GOG, 282 of whom can be evaluated. There have been 34 patients entered from Walter Reed, of whom 31 are able to be evaluated. As of 12 February 1987, this protocol was closed to all entries.

CONCLUSIONS
The study demonstrates the value of omentectomy, lymph node excisions, and diaphragm biopsy in epithelial ovarian tumors. Still to be determined is the value of these procedures in sex cord, stromal and germ cell tumors.

276
DETAIL SUMMARY SHEET

TITLE: GOG 26C: A Phase II Trial of Cis-platinum in the Treatment of Advanced Gyn Cancer

KEYWORDS: cis-, diamminedichloroplatinum, gynecologic cancer

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Mar 1979

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of Cis-platinum in the treatment of advanced or recurrent gynecologic cancers. A rejection type design will be used involving the fixed sample size of 25 disease patients per disease site per drug or drug use in the study. The design allows replacement of ineffective regimens by newer agents or combinations.

TECHNICAL APPROACH
Cis-platinum appears to exert its cytotoxic action by cross-linking DNA and thus acting in a manner similar to the bifunctional alkylating agents. It has demonstrated activity in animal studies against transitional cell carcinoma in mice. Toxicity in animals reveals myelosuppression, lymphoid atrophy, hemorrhagic enterocolitis, renal tubular necrosis, and cochlear damage, as well as some degree of immunosuppression.

PRIOR AND CURRENT PROGRESS
There have been 542 patients entered into this protocol for the entire GOG; Seven have been entered from Walter Reed. Combinations of cis-platinum and other chemotherapeutic agents are in the process of being tested in other GOG protocols. This protocol is closed to patients with squamous cell carcinoma of the cervix, epithelial carcinoma of the ovary, endometrial adenocarcinoma, non-squamous carcinoma of the cervix, carcinoma of the vagina, carcinoma of the vulva, carcinoma of the uterus, and uterine sarcomas (first line).

CONCLUSIONS
Cis-platinum has marked activity as first-line chemotherapy in squamous cell carcinoma of the cervix, endometrial cancer, and mixed mesodermal sarcomas of the uterus, and is active as second-line therapy for advanced ovarian adenocarcinoma and mixed mesodermal sarcoma of the uterus at the dose and schedule tested. The drug seems to be inactive as second-line therapy for leiomyosarcoma of the uterus. It may have limited activity in treating cervical adenocarcinomas.
DETAIL SUMMARY SHEET

TITLE: GOG 54: Treatment of Women with Malignant Tumors of Ovarian Stroma with Combination Vincristine, Dactinomycin, and Cyclophosphamide (Phase III), and Phase II Evaluation of Adriamycin in Malignant Tumors of Ovarian Stroma Refractory to Primary Chemotherapy

KEYWORDS: ovarian, stromal, tumors

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Completed
APPROVAL DATE: Jan 1981

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the effectiveness of Vincristine, Actinomycin-D and Cyclophosphamide (VAC) in the treatment of malignant tumors of the ovarian stroma. To confirm completeness of response to VAC therapy with restaging laparotomy. To evaluate the response to Adriamycin in patients who fail primary treatment with VAC.

TECHNICAL APPROACH
Patients with stages II, III and IV and incompletely resected recurrent disease of the ovarian stroma will be eligible. The patients will receive three cycles of VAC therapy. If response is evident, the VAC will be continued for a total of ten cycles. Restaging laparotomy will be performed if concomitant endometrial adenocarcinoma will be eligible for this protocol. As of 7/23/83, the salvage arm of Adriamycin was deleted.

PRIOR AND CURRENT PROGRESS
There have been 45 entries into this protocol from the entire GOG, of whom 27 are able to be evaluated. Walter Reed has entered 4 patients to this protocol. Three patients have developed Grade III stomatitis, otherwise none have developed other Grade III or Grade IV toxicities.

CONCLUSIONS
Completed.
TITLE: GOG 26N: A Phase II Trial of Dihydroxyanthracenedione (DHAD) in Patients with Advanced Pelvic Malignancies

KEYWORDS: dihydroxyanthracenedone, pelvic, malignancy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Apr 1981

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of DHAD in treating patients with advanced pelvic malignancies.

TECHNICAL APPROACH
Patients with histologically-confirmed advanced, recurrent, persistent, metastatic, or local gynecologic cancer with documented disease progression are eligible.

PRIOR AND CURRENT PROGRESS
A total of 185 patients have been entered into this protocol. Walter Reed has entered no patients into this study. The protocol is closed to patients with non-squamous carcinoma of the cervix, carcinoma of the vulva/vagina; it is closed to patients with mixed mesodermal tumors (sarcoma), and patients with leiomyosarcomas. Among all the patients entered into this study, only one has experienced Grade IV hematologic toxicity.

CONCLUSIONS
The data includes minimal activity with DHAD in patients with ovarian cancer who have previously received doxorubicin. In patients with previously treated advanced carcinoma of the cervix, this drug also shows minimal activity. Patients with non-squamous carcinoma of the cervix, endometrium, vulva, vagina, and uterine sarcomas likewise had minimal response to DHAD.
TITLE: GOG 26-0: A Phase II Trial of Aziridinylbenzoquinone (AZQ) in Patients with Advanced Pelvic Malignancies

KEYWORDS: aziridinylbenzoquinone, pelvic, malignancies

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Nov 1981

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of AZQ in treatment of advanced pelvic malignancies.

TECHNICAL APPROACH
Patients with histologically confirmed, advanced, recurrent persistent metastatic or local gynecologic cancer with documented disease progression, not amenable to higher priority protocols or standard regimens of therapy are eligible.

PRIOR AND CURRENT PROGRESS
There have been a total of 152 patients entered into this protocol from the entire GOG. There have been 6 patients entered from Walter Reed and its affiliates. The protocol was closed to epithelial ovarian carcinoma on 1 February 1983, and closed for patients with ovarian carcinoma who are ineligible for GOG protocol 26-N2 (DHAD) because of the cumulative dose of prior Doxorubicin exceeding 400mg./m2. No Grade IV toxicities have been reported.

CONCLUSIONS
AZQ has little, if any, efficacy in squamous cell carcinoma of the cervix or epithelial carcinoma of the ovary.
STUDY OBJECTIVE
To evaluate the sensitivity and specificity of non-invasive procedures such as sonography, CT scans, and lymphangiography to detect metastases. To better understand the significance of various surgical and pathological factors involved in staging and therapy for "advanced" cervical cancer. The accumulated clinical/surgical/pathological data may then play a role in modification or design of future protocols.

TECHNICAL APPROACH
Patients will undergo non-invasive staging procedures as mentioned (CT scan, sonogram, and lymphangiogram). They will be evaluated by fine needle para-aortic biopsy or para-aortic lymphadenectomy if found to be suspicious or positive at time of non-invasive staging. Patients with primary, previously untreated, histologically confirmed invasive carcinoma of the uterine cervix (clinical Stages II-B through IV-A), all cell types, are eligible.

PRIOR AND CURRENT PROGRESS
There have been 320 patients entered into this protocol for the entire GOG, 266 of whom are able to be evaluated. Walter Reed has entered 38 patients into the study, 31 of whom are able to be evaluated. Among all the patients entered into this study, 5 have experienced Grade IV hematologic adverse effects, 6 Grade III cutaneous, and two Grade III cardiovascular adverse effects. This protocol was closed to patient entry in February 1988.

CONCLUSIONS
Study closed.
TITLE: GOG 64: A Randomized Comparison of Rapid Vs. Prolonged (24 Hour) Infusion of Cisplatinum in the Therapy of Squamous Cell Carcinoma of the Cervix (Phase III)

KEYWORDS: cis-platinum, carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Completed
APPROVAL DATE: May 1982

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
The objective of this study is to determine if the frequency and duration of objective response of squamous cell carcinoma of the cervix is significantly altered by prolonging the infusion of cisplatin to 24 hours, as compared to a rate of mg./minute and to determine if continuous (24 hour) infusion of a dose of cisplatin alters the frequency and/or severity of drug-related nausea and vomiting, as compared to a rate of 1 mg./minute.

TECHNICAL APPROACH
Patients with histologically confirmed, locally advanced, recurrent, persistent, or metastatic squamous cell carcinoma of the cervix that is resistant to cure with surgery or radiation therapy will be eligible for randomization to cisplatin 50mg./m2 IV at 1 mg./min. every three weeks, or cisplatin 50mg./m2 IV over 24 hours every three weeks.

PRIOR AND CURRENT PROGRESS
There have been 380 patients entered into this protocol from the entire GOG, 336 of whom are able to be evaluated. Of all the patients entered into this study, one experienced grade IV neurotoxicity from continuous infusion; no patients experienced Grade IV adverse effects from rapid infusion. This protocol was closed to new patient entry on 20 July 1985, but remains open for follow-up data.

CONCLUSIONS
There is not a 15% difference in response rate between the two regimens of this protocol. During the 24 hour infusion regimen fewer patients experienced nausea and vomiting on the first course of therapy. There is no difference in survival or progression-free interval between the two regimens used in this study.
DETAIL SUMMARY SHEET

TITLE: GOG 66: Ultrastructural Staging and Therapeutic Considerations in Small Cell Carcinoma of the Cervix

KEYWORDS: staging, carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology

SERVICE: Gynecologic Oncology Group

STATUS: Completed

APPROVAL DATE: Jun 1982

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine the incidence of neuroendocrine carcinoma of the cervix in cases which are histologically classified as small cell carcinomas; b) to determine the response rate to combination chemotherapy in patients with Stage IV-B small cell carcinoma of the cervix and in patients with progressive local disease after radiation therapy.

TECHNICAL APPROACH
Staging studies having been completed, electron micrographic studies will be performed on the histologic samples of this disease process. Stages I to IV-A will be treated with standard therapy. Stage IV-B will be treated with a combination of Vincristine, Doxorubicin, and Cyclophosphamide. Those who fail on these drugs will be offered VP-16.

PRIOR AND CURRENT PROGRESS
A total of 35 patients have been entered into this protocol from the entire GOG. No patients have been entered from Walter Reed. Three Grade IV toxicities have been reported. No treatment related deaths have been reported. More than one response to therapy has been noted.

CONCLUSIONS
This study was terminated by the GOG in May 1988.
TITLE: GOG 26Q: A Phase II Trial of Aminothiadiazole in Patients with Advanced Pelvic Malignancies

KEYWORDS: aminothiadiazole, pelvic, malignancy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jan 1983

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This protocol will constitute a Phase II design to determine the efficacy of Aminothiadiazole in treating advanced pelvic malignancies.

TECHNICAL APPROACH
Aminothiadiazole (A-TD) will be administered at a dose of 125 mg/m2 IV per week. All patients will continue to receive A-TD until progression of disease is documented or adverse effects prohibit further therapy.

PRIOR AND CURRENT PROGRESS
There have been 110 patients entered into this protocol through the entire GOG. One patient has been entered from Walter Reed. The protocol has been closed to epithelial tumors of the ovary, squamous cell carcinoma of the cervix, non-squamous cell carcinoma of the cervix, and endometrial adenocarcinoma. There have been 2 Grade IV hematologic toxicities reported.

CONCLUSIONS
Aminothiadiazole used in this dose and schedule has minimal activity in previously treated patients with ovarian carcinoma and squamous cell carcinoma of the cervix, non-squamous carcinoma of the cervix and endometrial adenocarcinomas.
TITLE: GOG 71: Treatment of Patients with Suboptimal Stage IB Carcinoma of the Cervix (Phase III)

KEYWORDS: carcinoma, cervix, hysterectomy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Apr 1983
FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
Evaluation of adjunctive extravascular hysterectomy in the treatment of suboptimal Stage I-B carcinoma of the cervix with negative para-aortic and high common iliac nodes, as well as evaluation of survival and pattern of failure in "bulky" Stage I-B cervical cancer are objectives for this study. Evaluation of the prognostic value of various surgical/pathological characteristics in suboptimal Stage I-B carcinoma.

TECHNICAL APPROACH
Patients will be randomized after non-invasive evaluation of para-aortic and high common iliac nodes is completed. If nodes are negative, randomization to radiation therapy alone versus radiation therapy plus extrafascial hysterectomy will be performed. If non-invasive evaluation of nodes reveals suspicious positive nodes, fine needle aspiration will be attempted. If needle aspiration is negative, treatment will be given at the discretion of the principal investigator.

PRIOR AND CURRENT PROGRESS
There have been 162 patients entered into this study for the entire GOG, 119 of whom are able to be evaluated at the time of the latest statistical review. Walter Reed has entered nine patients into this study. Of the 162 patients accepted, one experienced Grade II hematologic adverse effects, two experienced Grade IV gastrointestinal effects, one Grade III pulmonary, and one Grade IV cardiovascular adverse effects.

CONCLUSIONS
Too early.
REPORT DATE: 05/01/89

DETAIL SUMMARY SHEET

TITLE: GOG 75: Postoperative Pelvic Radiation in Stage I and II Mixed Mesodermal Sarcomas of the Uterus

KEYWORDS: mesodermal, sarcoma, uterus

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology

SERVICE: Gynecologic Oncology Group

STATUS: Completed

APPROVAL DATE: Jan 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine whether post-operative radiation therapy will decrease local and regional recurrence rates and improve median progression free interval in patients with stage I and II mixed mesodermal sarcomas of the uterus.

TECHNICAL APPROACH
Following total abdominal hysterectomy/bilateral salpingoophorectomy and surgical staging for Stage I and II mixed mesodermal tumors of the uterus, patients will be randomized to receive either postoperative radiation therapy (5040 rads), or no further therapy. This study was closed by GOG in June 1988.

PRIOR AND CURRENT PROGRESS
There have been 54 patients entered into this protocol for the entire GOG. No patients have been entered from Walter Reed.

CONCLUSIONS
Too early.
TITLE: GOG 70: A Randomized Comparison of Single Agent Chemotherapy, Methotrexate and Methotrexate with Folinic Acid Rescue in "Good Prognosis" Metastatic Gestational Trophoblastic Disease

KEYWORDS: methotrexate, trophoblastic, disease

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Completed
APPROVAL DATE: Jan 1984
FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To judge the relative efficacy of scheduling variation in chemotherapeutic management of "good prognosis" metastatic gestational trophoblastic disease. To ascertain the relative adverse effects of the two regimens involved in this study.

TECHNICAL APPROACH
Patients with metastatic gestational trophoblastic disease who are considered "good prognosis" may be randomized to regimen (1), consisting of methotrexate 0.4mg/kg. up to 25mg. a day for 5 days; this will be repeated every 12 days. They may be randomized to regimen (2) consisting of methotrexate 1mg/kg. IM on days 2,4,6,8; this regimen will be repeated for 14 days.

PRIOR AND CURRENT PROGRESS
There are 33 patients entered into this protocol for the entire GOG. No patients have been entered into Walter Reed. One patient was reported to have developed a Grade IV GI toxicity.

CONCLUSIONS
Study completed.
DETAIL SUMMARY SHEET

TITLE: COG 26L: A Phase II Trial of Tamixifen in Patients with Advanced Epithelial Ovarian Carcinoma

KEYWORDS: ovarian, carcinoma, tamoxifen

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Completed
APPROVAL DATE: Jan 1984

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of Tamoxifen in the treatment of patients with advanced epithelial ovarian carcinoma.

TECHNICAL APPROACH
Patients with epithelial ovarian carcinoma who have progressed on first line combination chemotherapy regimen consisting of at least two drugs with or without the addition of immunotherapy will be eligible for treatment with this drug. Patients must have been off previous hormonal therapy for at least three weeks.

PRIOR AND CURRENT PROGRESS
There have been 166 patients entered into this protocol from the entire GOG. There are 69 patients selected for evaluation. Two patients were entered into this protocol from Walter Reed. This study was terminated by GOG in November 1986.

CONCLUSIONS
Tamoxifen did not reveal any activity in patients with advanced or recurrent adenocarcinoma, adenosquamous carcinoma of the endometrium if they did not have a known hormonal receptor status. Tamoxifen shows definite activity as a second line treatment for epithelial carcinoma of the ovary with overall response rate of 15% and 10% complete response rate. This study is now closed.
TITLE: GOG 73: A Clinicopathologic Study of Primary Malignant Melanoma of the Vulva Treated by Modified Radical Hemivulvectomy

KEYWORDS: melanoma, vulva, hemivulvectomy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jan 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the relationship of histopathologic parameters (including microstaging of primary malignant melanoma of the vulva) to FIGO staging, and ultimate prognosis. To ultimately recommend appropriate therapy for malignant melanomas of the vulva based on histopathologic and microstaging data.

TECHNICAL APPROACH
All patients receiving primary therapy for primary malignant melanoma of the vulva, including all histopathologic types and differentiation, and all FIGO stages are eligible. All patients must have at least a modified radical hemivulvectomy. All patients must be entered within 8 weeks of initiation of primary therapy.

PRIOR AND CURRENT PROGRESS
A total of 57 patients have been entered into this protocol for the entire GOG, of which 47 have been selected for evaluation. One patient has been entered from Walter Reed. No deaths have been reported resulting from complications of this therapy.

CONCLUSIONS
Too early.
DETAIL SUMMARY SHEET

TITLE: GOG 74: Early Stage I Vulvar Carcinoma Treated with Ipsilateral Superficial Inguinal Lymphadenectomy and Modified Radical Hemivulvectomy

KEYWORDS: vulva, lymphadenectomy, hemivulvectomy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Feb 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To document the rates and patterns of recurrence of patients with early Stage I vulvar carcinoma treated with ipsilateral superficial inguinal lymphadenectomy and modified radical hemivulvectomy. To document the survival and recurrence free interval in the same group of patients.

TECHNICAL APPROACH
All patients with primary, untreated, histologically confirmed squamous cell carcinoma of the vulva, Stage I, will be eligible for surgical treatment as "early, superficially invasive carcinoma of the vulva" if protocol criteria are met.

PRIOR AND CURRENT PROGRESS
There have been 111 entries into this protocol, of which 16 patients have been declared ineligible and 77 were able to be evaluated. Walter Reed has entered two patients into this protocol. No deaths have been reported resulting from complications of this therapy.

CONCLUSIONS
Too early.
TITLE: GOG 26R: A Phase II Trial of Progesterone in the Treatment of Advanced or Recurrent Epithelial Ovarian Cancers that have failed Combination Chemotherapy

KEYWORDS: progesterone, ovarian, cancer

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

 STATUS: Completed
APPROVAL DATE: May 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The objective of this study is to determine the efficacy of progesterone in the treatment of advanced or recurrent epithelial ovarian cancers that have failed combination chemotherapy.

TECHNICAL APPROACH
Patients with epithelial ovarian carcinoma are eligible who have progressed on a first-line combination chemotherapy regimen consisting of at least two drugs with or without additional immunotherapy. Estrogen and progesterone assays are required.

PRIOR AND CURRENT PROGRESS
There have been 28 patients entered into this study from the entire GOG, 21 of whom were able to be evaluated. Walter Reed has entered no patients into this study. This protocol was closed on 01 September 87 to new patient entry, but remains open for collection of follow-up data. No significant toxicities have been reported with this study.

CONCLUSIONS
GOG #26-R is completed.
DETAIL SUMMARY SHEET

TITLE: GOG 72: Ovarian Tumors of Low Malignant Potential: A Study of the Natural History and a Phase II Trial of Melphalan and Secondary Treatment with Cisplatin in Patients with Progressive Disease

KEYWORDS: ovary, malignant, potential

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The objective of this study is to evaluate the biologic behavior of ovarian tumors of low malignant potential; to evaluate the effectiveness of chemotherapy against this disease (initially a Phase II study of Melphalan); to evaluate the response rate to cisplatin in melphalan failures.

TECHNICAL APPROACH
All patients with ovarian tumors considered to have a pathologic classification of low malignancy potential by a study reference pathologist will be eligible. Patients must have undergone adequate surgical staging procedures. Patients may have any stage of disease (from I-IV).

PRIOR AND CURRENT PROGRESS
There have been 190 patients entered into this study, 82 of whom are able to be evaluated. Walter Reed has entered 13 patients into this study. No significant toxicities have been reported among the patients treated.

CONCLUSIONS
Too early.
REPORT DATE: 05/01/89  WORK UNIT # 4222

DETAIL SUMMARY SHEET

TITLE: GOG 26D: A Phase II Trial of VP-16 in Patients with Advanced Pelvic Malignancies

KEYWORDS: VP-16, pelvic, malignancy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology  STATUS: Ongoing
SERVICE: Gynecologic Oncology Group  APPROVAL DATE: Jul 1985

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
Patients with histologically confirmed advanced, recurrent, persistent metastatic or local gynecologic cancer with documented disease progression are eligible for this study.

TECHNICAL APPROACH
VP-16 will be administered at a dose of 100mg./m2 IV on days 1, 3 and 5, to be repeated every 4 weeks, as toxicity permits.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 307 patients into this protocol. Walter Reed has entered one patient into this protocol. No grade IV toxicities have been reported. To date, entries to squamous carcinoma of the cervix, epithelial carcinoma of the ovary, endometrial adenocarcinoma, non-squamous carcinoma of the cervix, carcinoma of the vagina, carcinoma of the vulva, and uterine sarcoma groups are closed.

CONCLUSIONS
VP-16 appears to have minimal activity against ovarian adeno-carcinoma, and insignificant activity against squamous carcinoma of the cervix and endometrial adenocarcinoma. Also, VP-16 appears to be inactive in advanced or recurrent non-squamous cell carcinoma of the cervix. Insufficient numbers of cases have been entered into other tumor categories and the study continues.
TITLE: GOG 268: A Phase II Trial of Teniposide (VM-26) in Patients with Advanced Pelvic Malignancies

KEYWORDS: teniposide, pelvic, malignancy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1985

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the efficacy of VM-26 in the treatment of patients with advanced pelvic malignancies. Patients with histologically confirmed advanced, recurrent, persistent metastatic or local gynecologic cancer with documented disease progression are eligible for treatment.

TECHNICAL APPROACH
The treatment consists of VM-26, 100mg./m2 IV every week until progression of disease, or the evidence of adverse effects prohibits further therapy.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 117 patients into this protocol. Walter Reed has entered no patients into this protocol. Entry is now closed to patients with ovarian epithelial, squamous cell carcinoma of the cervix, and non-squamous. Two grade IV toxicities were reported, granulocytopenia.

CONCLUSIONS
Teniposide produced only modest activity in previously treated patients with epithelial ovarian cancer or squamous cell carcinoma of the cervix.
TITLE: GOG 71: Treatment of Patients with Suboptimal (Bulky) Stage IB Carcinoma of the Cervix: A Randomized Comparison of Radiation Therapy Vs. Radiation Therapy plus Adjuvant Extralaminar Hysterectomy, Phase III

KEYWORDS: suboptimal, carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jul 1985

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
Evaluation of the role of adjunctive extralaminar hysterectomy in the treatment of suboptimal STAGE IB carcinoma of the cervix with negative paraaortic and high common iliac nodes. Evaluation of the survival and pattern of failure in suboptimal STAGE IB cancer.

TECHNICAL APPROACH
Patients with untreated, histologically confirmed STAGE IB barrel carcinoma of the cervix will undergo evaluation of paraaortic or high common iliac nodes by CT, lymphangiogram or sonogram. If the nodes are suspicious or positive, they will be evaluated by surgery of fine needle aspiration. If surgically, cytologically or negative by extrinsic evaluation, the patients will be randomized to receive radiation alone, or radiation followed by extralaminar hysterectomy.

PRIOR AND CURRENT PROGRESS
The total number of patients entered into this protocol is 162 for the entire GOG. Walter Reed has entered 7 patients. Three grade IV toxicities have been reported from among 119 patients.

CONCLUSIONS
Too early.
TITLE: GOG 86A: Master Protocol for Phase II Drug Studies in Treatment of Advanced or Recurrent Carcinoma of the Endometrium

KEYWORDS: advanced, carcinoma, endometrium

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Apr 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This study seeks to identify additional active agents for treating advanced or recurrent endometrial adenocarcinoma by studying single new drugs in patients with this disease who have not been previously exposed to chemotherapy.

TECHNICAL APPROACH
Patients must have histologically confirmed advanced, persistent or recurrent endometrial carcinoma with documented disease progression after local therapy. All patients must have measurable disease. Patients must have failed local therapeutic measures or must be considered incurable with local therapy.

PRIOR AND CURRENT PROGRESS
GOG #86-A is a master protocol. See individual protocols.

CONCLUSIONS
See Individual protocols.
REPORT DATE: 04/01/89

DETAIL SUMMARY SHEET

TITLE: GOG 87A: Master Protocol for Phase II Drug Studies in the Treatment of Recurrent or Advanced Uterine Sarcomas

KEYWORDS: advanced, uterus, sarcoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology

SERVICE: Gynecologic Oncology Group

STATUS: Ongoing

APPROVAL DATE: May 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To allow the best possible chance for a new cytotoxic agent to demonstrate activity, this study constitutes a Phase II design in a population of patients who have had no prior drug therapy. The study design will involve treating an average sample size of 30 patients per drug studied for each of the following cell categories: mixed mesodermal tumor, leiomyosarcoma, and other sarcomas.

TECHNICAL APPROACH
Patients will have histologically confirmed advanced, persistent, or recurrent uterine sarcoma with documented disease progression after appropriate local therapy. Each patient will receive a chemotherapeutic regimen as outlined in each segment of the protocol.

PRIOR AND CURRENT PROGRESS
There have been 68 patients entered into the GOG #87-B section of this protocol; five patients have been entered into this study from Walter Reed. Of all the patients entered into GOG #87-B, eight experienced Grade IV leukopenia, one Grade IV thrombocytopenia, six Grade IV granulocytopenia, and two Grade IV neurotoxic effects. There has been one death reported believed related to the therapy. GOG #87-B was closed for MMT on 3/7/88. There have been 22 patients entered into GOG87-C; no patients have been entered from WRAMC. One patient had a grade IV leukopenia.

CONCLUSIONS
Too early.
REPORT DATE: 04/01/89

DETAIL SUMMARY SHEET

TITLE: GOG 87B: A Phase II Trial of Ifosfamide and the Uroprotector, Mesna, in the Treatment of Recurrent or Advanced Uterine Sarcomas

KEYWORDS: ifosfamide, mesna, sarcoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
This study is designed to allow the best possible chance for a new cytotoxic agent to demonstrate activity, constituting a Phase II design in a population of patients who have no prior drug therapy. The study design will involve treating an average sample size of 30 evaluable patients with Ifosfamide for each of the following cell type categories: mixed mesodermal tumor, leiomyosarcoma and other sarcomas.

TECHNICAL APPROACH
Patients will have histologically confirmed advanced, persistent, or recurrent uterine sarcoma with documented disease progression after appropriate local therapy. Each patient will receive Ifosfamide and Mesna for five days every four weeks until disease progression or adverse effects prohibit further therapy.

PRIOR AND CURRENT PROGRESS
There have been 68 patients entered into this protocol for the entire GOG, 56 of whom are able to be evaluated. Walter Reed has entered 5 patients into this study. Of all the patients treated on protocol #87-B, 8 experienced Grade IV leukopenia, one experienced Grade IV thrombocytopenia, 6 experienced Grade IV granulocytopenia, one experienced Grade IV thrombocytopenia, 6 experienced Grade IV granulocytopenia, and 2 experienced neurotoxic effects.

CONCLUSIONS
Too early.
REPORT DATE: 06/28/89

DETAIL SUMMARY SHEET

TITLE: GOG 26U: A Phase II Trial of Ifosfamide and the Uroprotector, Mesna, in Patients with Advanced Pelvic Malignancies

KEYWORDS: ifosfamide, MESNA, malignancy

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Aug 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The objective of this study is to determine the efficacy of chemotherapeutic agents in patients whose advanced malignancies have been resistant to higher priority methods of treatment. A "rejection"-type design will be used involving a fixed sample size of 25 patients per disease site per drug or combination of drugs studied.

TECHNICAL APPROACH
Ifosfamide, like cyclophosphamide requires activation by a hepatic microsomal NADPH-dependent mixed-function oxidase system. A bi-ability to crosslink and fragment DNA is produced. Mesna has been shown to acceptably reduce the urothelial toxicity of Ifosfamide in several European studies. All patients must have biopsy proven advanced pelvic malignancy to be eligible.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 112 patients into this study. Walter Reed has entered no patients. There has been 5 grade IV toxicities for ovarian sarcoma: Leukopenia 2, Granulocytopenia 2, and Renal 1. For non-squamous cell carcinoma, 7 grade IV toxicities: Leukopenia 3, Thrombocytopenia 1, and Granulocytopenia 1. The study was closed 2/26/86 to patients with epithelial tumors of the ovary; reopened 12/1/86; closed 6/1/87. The study was closed 6/1/87 to patients with squamous cell carcinoma of the cervix.

CONCLUSIONS
Ifosfamide is an active Phase II drug in relapsed epithelial ovarian carcinoma although nephro-toxicity is a limiting factor in this patient population. Ifosfamide possesses minimal activity in previously treated squamous carcinoma of the cervix.

299
TITLE: GOG 83: A Clinico-Pathologic Study of Simultaneous Endometrial and Ovarian Carcinomas

KEYWORDS: endometrial, ovarian, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Sep 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine the natural history of patients with synchronous adenocarcinoma presenting in both the endometrium and the ovary and to obtain estimates of mortality at five years.

b) To determine whether histologic criteria or pattern of spread can be used to distinguish subsets of patients with differing prognoses.

TECHNICAL APPROACH
Simultaneous endometrial and ovarian carcinomas are defined for the purpose of this protocol as cancers occurring in those 2 sites which have been diagnosed within 8 weeks of each other. To be eligible patients must have undergone surgical and pathological procedures outlined in the protocol, after which they will be followed to determine the natural history of this disease process.

PRIOR AND CURRENT PROGRESS
Thus far, 34 patients have been entered into this study by the entire COG. Walter Reed has not entered patients. No toxicity has been reported.

CONCLUSIONS
Too early for analysis.
TITLE: GOG 26V: A Phase II Trial of N-Methylformamide in Patients with Advanced Pelvic Malignancies

KEYWORDS: N-methylformamide, pelvic, malignancies

PRINCIPAL INVESTIGATOR: Barnhill, Danny, LTC MC
ASSOCIATES: Park, Robert COL, MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Oct 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the efficacy of N-Methylformamide in the treatment of advanced or recurrent pelvic malignancies.

TECHNICAL APPROACH
Patients who have histologically confirmed recurrent or metastatic gynecologic cancer which is refractory to curative therapy or established treatments are eligible.

PRIOR AND CURRENT PROGRESS
The GOG has entered 66 patients into this study. Of those entered, 41 are able to be evaluated. Three patients have shown a partial response, 15 have stable disease, and 20 have increasing disease. Walter Reed has not entered patients into this study. One Grade IV toxicity has been reported.

CONCLUSIONS
NMF has minimal activity in both epithelial ovarian and squamous cervix tumors.
DETAIL SUMMARY SHEET

TITLE: GOG 85: A Randomized Comparison of Hydroxyurea Vs. 5-FU Infusion and Bolus Cisplatin as an Adjunct to Radiation Therapy in Patients with Stage IIB, III, and IVA Carcinoma of the Cervix

KEYWORDS: chemotherapy, carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Nov 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To determine whether hydroxyurea or the combination of 5 fluorouracil and cisplatin is superior as a potentiator of radiation therapy in advanced cervical carcinoma; b) to determine the relative toxicities of hydroxyurea versus the combination of 5 fluorouracil and cisplatin when given with radiation therapy.

TECHNICAL APPROACH
Eligible patients include those with primary, previously untreated histologically confirmed invasive squamous cell carcinoma, adenocarcinoma or adenosquamous carcinoma of the uterine cervix (Stages II-B, III-A, III-B, and IV-A), with negative para-aortic nodes. Patients who have had para-aortic lymphadenectomy and intraperitoneal exploration with cytologic washings, as outlined in the protocol are also included.

PRIOR AND CURRENT PROGRESS
To date 132 patients have been entered into this study. Seven patients have been entered from Walter Reed. Three patients have experienced a Grade 4 hematologic toxicity. No patients have died from treatment toxicity.

CONCLUSIONS
Too early.
TITLE: GOG 90: Evaluation of Cisplatin, Etoposide and Bleomycin (BEP) Induction Followed by Vincristine, Dactinomycin and Cyclophosphamide (VAC) Consolidation in Advanced Ovarian Germ Cell Tumors, Phase II

KEYWORDS: ovarian, germ cell, tumors

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Mar 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The objective of this study is to evaluate the effect of induction chemotherapy with cisplatin plus etoposide plus bleomycin, followed by consolidation with vincristine plus dactinomycin plus cyclophosphamide in previously untreated patients with advanced ovarian germ cell tumors.

TECHNICAL APPROACH
Eligible patients include those with histologically confirmed malignant germ cell tumors of the ovary who have incompletely resected Stage II, III, or IV disease. Patients who have previously received pelvic radiation therapy will be eligible, but initial dose of etoposide will be reduced 20%.

PRIOR AND CURRENT PROGRESS
To date, 22 patients have been entered into this protocol by all GOG member institutions. No patient has been entered from Walter Reed. Seven patients have experienced Grade IV granulocytopenia. One patient has developed a Grade IV GI toxicity, and one patient has developed a Grade IV dermatologic toxicity.

CONCLUSIONS
Too early.
TITLE: GOG 97: A Phase III Randomized Study of Cyclophosphamide and Cisplatin in Patients with Suboptimal Stage III and IV Epithelial Ovarian Carcinoma Comparing Intensive and Non-Intensive Schedules

KEYWORDS: epithelium, ovarian, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Apr 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This protocol seeks to determine response rate, response duration and survival in suboptimal Stage III and Stage IV ovarian carcinoma treated with cyclophosphamide and cisplatin, administered by two different schedules, one intense and the other standard.

TECHNICAL APPROACH
Eligible patients include those with established ovarian epithelial cancer, sub-optimal (more than 1 cm in diameter) Stages III and IV. All patients must have optimal surgery ovarian carcinoma, with an exploratory laparotomy and appropriate tissue for histologic evaluation.

PRIOR AND CURRENT PROGRESS
There have been 266 patients entered into this study for the entire GOG, 199 of whom are able to be evaluated. Walter Reed has entered 5 patients into this study. Of all the patients entered into this study, 49 experienced Grade IV hematologic adverse effects, two experienced Grade IV GI effects, and three experienced Grade IV renal effects.

CONCLUSIONS
Too early.
TITLE: GOG 94: A Phase II Study of the Treatment of Papillary Serous 
Carcinoma of the Endometrium Stage I and II and Maximally Debunked 
Advanced Endometrial Carcinoma with Total Abdominal Radiation Therapy

KEYWORDS: papillary, carcinoma, endometrium

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology 
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Apr 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This protocol is designed to determine the survival and progression-free 
interval of patients with maximally debulked advanced endometrial carcinoma 
treated with abdominal radiation therapy.

TECHNICAL APPROACH
All patients with primary endometrial carcinoma, clinical and surgical Stages 
III and IV disease (all histologic types), all clinical and surgical stages of 
clear cell carcinoma, and all clinical and surgical stages of papillary serous 
carcinoma are eligible. Tumor must be maximally debulked at 2 cm or less.

PRIOR AND CURRENT PROGRESS
There have 68 patients entered into this study from the entire GOG; Walter Reed 
has entered 3 patients. Two Grade IV GI toxicities have been reported among the 
68 patients.

CONCLUSIONS
Too early.
REPORT DATE: 04/01/89

DETAIL SUMMARY SHEET

TITLE: GOG 95: Randomized Clinical Trial for the Treatment of Women with Selected Stage IC and II (A,B,C) and Selected Stage IAi and IBi and IAii and IBii Ovarian Cancer, Phase III

KEYWORDS: randomized, ovarian, cancer

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert COL MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This study seeks a) to compare the progression-free interval and overall survival between P32 and a combination of cyclophosphamide and cisplatin for patients with early ovarian cancer; and b) to determine the patterns of relapse for each form of therapy.

TECHNICAL APPROACH
All patients must have a histopathic diagnosis of epithelial ovarian cancer of each histologic cell type: serous mucinous; others include endometoid, transitional mesonephroid (clear cell), adenocarcinoma (endometoid with squamous metaplasia), mixed epithelial, unclassifiable (undifferentiated).

PRIOR AND CURRENT PROGRESS
There have been 40 patients entered into this study from the entire GOG; Walter Reed has entered 3 patients. Four patients have developed Grade IV leukopenia.

CONCLUSIONS
Too early.
REPORT DATE: 05/01/89  WORK UNIT # 4249

DETAIL SUMMARY SHEET

TITLE: GOG 79: Single Agent Weekly Methotrexate Therapy in the Treatment of Nonmetastatic Gestational Trophoblastic Disease, Limited Accession Phase II Trial

KEYWORDS: methotrexate, gestational, trophoblastic

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology  STATUS: Completed
SERVICE: Gynecologic Oncology Group  APPROVAL DATE: Jun 1987

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
a) To determine the efficacy of weekly methotrexate therapy for "good prognosis" metastatic gestational trophoblastic disease; b) to ascertain the toxicity of this regimen; c) to demonstrate the cost effectiveness of this regimen.

TECHNICAL APPROACH
Patients with good prognosis metastatic gestational trophoblastic disease with antecedent molar, post-abortal or ectopic pregnancy are eligible. Also eligible are those who have had pelvic ultrasound to exclude intra-uterine pregnancy.

PRIOR AND CURRENT PROGRESS
To date, 139 patients have been entered into this protocol from the entire GOG. No patients have been entered from Walter Reed. No grade IV toxicities have been reported.

CONCLUSIONS
This study was terminated by the GOG in July 1988. Weekly intramuscular injection of methotrexate 30 mg./m2 is efficacious, minimally toxic, and cost effective.
TITLE: GOG 88: A Randomized Study of Radical Vulvectomy and Bilateral Groin Dissection Vs. Radical Vulvectomy and Bilateral Groin Radiation, Phase III

KEYWORDS: radical, vulvectomy, radiation

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To evaluate the comparative efficacy and morbidity of groin radiation therapy in lieu of groin dissection for selected patients with invasive squamous cell carcinoma of the vulva; b) to monitor patterns of recurrence and survival of patients treated with groin radiation therapy in lieu of groin dissection.

TECHNICAL APPROACH
Eligible patients include those with primary previously untreated histologically confirmed invasive squamous cell carcinoma of the vulva clinically determined to be stage I through III that radical vulvectomy would suffice to remove all of the primary lesion.

PRIOR AND CURRENT PROGRESS
To date the entire GOG has entered 35 patients into this protocol. Walter Reed has entered no patients into this protocol. No grade IV toxicities have been reported.

CONCLUSIONS
Too early.
REPORT DATE: 05/01/89

DETAIL SUMMARY SHEET

TITLE: COG 26W: A Phase II Trial of Echinomycin in Patients with Advanced Pelvic Malignancies

KEYWORDS: echinomycin, pelvic, malignancies

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the efficacy of echinomycin in the treatment of advanced or recurrent pelvic malignancies.

TECHNICAL APPROACH
Eligible patients include those who have histologically confirmed recurrent or metastatic gynecologic cancer which is refractory to curative therapy or established treatments. All patients must have measureable disease.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 55 patients into this study to date. Walter Reed has entered 4 patients. One grade IV thrombocytopenia has been reported. This study has been closed to patients with epithelial ovarian carcinoma or squamous cell carcinoma but remains open to patients with other types of GYN malignancy.

CONCLUSIONS
Echinomycin displays minimal activity in patients with squamous carcinoma of the cervix and ovarian epithelial carcinoma who have had prior chemotherapy.
TITLE: GOG 81A-E: Phase II Trial of Medroxyprogesterone Acetate in Patients with Advanced or Recurrent Endometrial Carcinoma; 81B: Pos for Estrogen or Progesterone Receptors, 81C: Neg for Receptors; 81D: Pos for Either, not Both, 81E: With Unknown Receptors

KEYWORDS: medroxyprogesterone, endometrial, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the relative efficacy of two dose schedules of oral MPA in the management of advanced or recurrent endometrial carcinoma.

TECHNICAL APPROACH
Eligible patients include those who have histologically confirmed, advanced persistent, or recurrent endometrial carcinoma with documented disease progression after local therapy. All patients must have measurable disease. Patients must have had no prior systemic therapy for endometrial carcinoma.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 276 patients into this study to date. Walter Reed has entered ten patients. No grade IV toxicity has been reported.

CONCLUSIONS
Too early.
DETAIL SUMMARY SHEET

TITLE: GOG 81F: A Phase II Trial of Tamoxifen Citrate in Patients with Advanced or Recurrent Endometrial Carcinoma Responsive to Progestins

KEYWORDS: tamoxifen, endometrial, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine whether patients with endometrial carcinoma who have responded to medroxyprogesterone acetate and then progressed will respond to a second hormonal manipulation in the form of tamoxifen citrate.

TECHNICAL APPROACH
To be eligible, patients must have histologically confirmed, advanced, persistent or recurrent endometrial carcinoma with documented disease progression after local therapy. Patients must have measurable disease. Patients must have been treated with medroxyprogesterone acetate and have been partial responders.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered two patients into this study to date. Walter Reed has entered no patients. No grade IV toxicities have been reported.

CONCLUSIONS
Too early.
TITLE: GOG 93: Evaluation of Intraperitoneal Chromic Phosphate Suspension Therapy Following Negative Second-Look Laparotomy for Epithelial Ovarian Carcinoma, Stage III, Phase III

KEYWORDS: chromic phosphate, ovarian, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To evaluate the role of intraperitoneal chromic phosphate suspension therapy in patients with stage III epithelial ovarian carcinoma who have no detectable evidence of disease at the second-look laparotomy.

TECHNICAL APPROACH
To be eligible, patients must have histologically confirmed primary epithelial carcinoma of the ovary and be in complete clinical remission. Patients must have a diagnosis of FIGO stage III ovarian carcinoma.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 18 patients into this study. Walter Reed has entered no patients. No grade IV toxicities have been reported.

CONCLUSIONS
Too early.
TITLE: GOG 78: Evaluation of Adjuvant Vinblastine, Bleomycin and Cisplatin Therapy in Totally Reducing Choriocarcinoma, Endodermal Sinus Tumor or Embryonal Carcinoma of the Ovary, Pure and Mixed with Other Elements, Phase II

KEYWORDS: VP-16, bleomycin, cisplatin

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the effect of adjuvant VP-16, bleomycin and cisplatin chemotherapy in patients with endodermal sinus tumor, choriocarcinoma, embryonal carcinoma and Grade II and III immature teratoma of the ovary after removal of all gross tumors.

TECHNICAL APPROACH
Eligible patients include those with histologically confirmed Stage I choriocarcinoma, endodermal sinus tumor, embryonal carcinoma and Grade II and III immature teratoma. Patients with Stage II and III disease are also eligible if all gross tumor is removed. Serum AFP and beta-HCG levels should be normal.

PRIOR AND CURRENT PROGRESS
To date 59 patients have been entered into this study from the entire GOG. Walter Reed has entered one patient. Four patients have had Grade IV leukopenia. One patient had a Grade IV GI toxicity and one patient had a Grade IV dermatologic toxicity.

CONCLUSIONS
Too early for analysis.
TITLE: GOG 86E: A Phase II Trial of Vincristine Given as a Weekly Intravenous Bolus in Advanced or Recurrent Endometrial Carcinoma

KEYWORDS: vincristine, endometrial, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
This protocol seeks to determine whether endometrial carcinoma which is refractory to progestogens or which is progressing after initial response to progestogens will respond to vincristine.

TECHNICAL APPROACH
Patients must have histologically confirmed advanced, persistent, or recurrent endometrial carcinoma with documented disease progression after local therapy. All patients must have measurable disease. It is required that patients have received no prior chemotherapy.

PRIOR AND CURRENT PROGRESS
To date, 34 patients have been entered into this study by the entire GOG. Walter Reed has entered one patient. No Grade IV toxicities have been reported. Grade III neurologic toxicity has been reported in 3 patients.

CONCLUSIONS
Too early for analysis.
REPORT DATE: 10/01/88

DETAIL SUMMARY SHEET

TITLE: GOG 99: A Phase III Randomized Study of Adjunctive Radiation Therapy in Intermediate Risk Endometrial Adenocarcinoma

KEYWORDS: radiation, endometrial, adenocarcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Oct 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine if patients with intermediate risk endometrial adenocarcinoma who have no spread of disease to their lymph nodes, benefit from postoperative pelvic radiotherapy. To evaluate how the addition of pelvic radiotherapy will alter the site and rate of cancer recurrence in these intermediate risk patients.

TECHNICAL APPROACH
Patients with primary histologically confirmed Grades II and III endometrial adenocarcinoma are eligible. Patients must have had a total abdominal hysterectomy, bilateral salingo-oophorectomy, pelvic and para-aortic lymph node sampling, pelvic washings, and are found to be surgical Stage I. Patients must have myometrial invasion.

PRIOR AND CURRENT PROGRESS
Seventeen patients have been entered onto this protocol through the entire GOG. Walter Reed has entered no patients. No toxicity has been reported.

CONCLUSIONS
Too early.
TITLE: GOG 26Z: Phase II Trial of Leuprolide Acetate in Patients with Advanced Epithelial Ovarian Carcinoma

KEYWORDS: leuprolide acetate, ovarian, carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC M\(\text{d}\)
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Apr 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the efficacy of Leuprolide Acetate in the treatment of advanced epithelial ovarian carcinoma and low malignant potential tumors.

TECHNICAL APPROACH
Patients with histologically confirmed gynecologic cancer either recurrent or advanced on initial presentation are eligible.

PRIOR AND CURRENT PROGRESS
There have been 27 patients entered into this protocol, 15 evaluable, 12 too early and 1 ineligible (wrong primary). Walter Reed entered 1 patient into this study. It was closed to patients with an epithelial ovarian carcinoma in June 1988, however it remains open to other tumor types. There have been no Grade IV toxicities reported.

CONCLUSIONS
Too early.
TITLE: GOG 26X: A Phase II Trial of Gallium Nitrate in Patients with Advanced Pelvic Malignancies

KEYWORDS: gallium nitrate, pelvic, malignancies

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jun 1988

FUNDING: Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
To determine the efficacy of Gallium nitrate in the treatment of advanced or recurrent gynecologic cancers.

TECHNICAL APPROACH
Patients will have histologically confirmed recurrent or metastatic gynecologic cancer which is refractory to curative therapy of established treatments.

PRIOR AND CURRENT PROGRESS
To date, 12 patients have been entered into this protocol from the entire GOG. No patients have been entered from Walter Reed. No toxicities have been reported.

CONCLUSIONS
Too early.
TITLE: GOG 26Y: A Phase II Trial of Vinblastine in Patients with Advanced Pelvic Malignancies

KEYWORDS: vinblastine, advanced, pelvic malignancies

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of Vinblastine in the treatment of advanced or recurrent gynecologic cancers.

TECHNICAL APPROACH
Patients with histologically confirmed gynecologic cancer either recurrent or advanced in initial presentation are eligible.

PRIOR AND CURRENT PROGRESS
To date, 58 patients have been entered into this protocol from the entire GOG, 31 of whom are able to be evaluated, 2 of whom are not able to be evaluated (never treated), and 5 too early to assess. Walter Reed has entered 2 patients into this study. There have been Grade IV toxicities: 3 Leukopenia, 4 Granulocytopenia, 1 GI and 1 Anemia. Additional follow-up is required on recently entered cases before response can be assessed.

CONCLUSIONS
Too early.
DETAIL SUMMARY SHEET

TITLE: GOG 102 A-B (Master Protocol): Intraperitoneal Administration of Cisplatin and 5-FU in Residual Ovarian Carcinoma, Phase II

KEYWORDS: cisplatin, 5-fluorouracil, ovarian carcinoma

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jun 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the activity of cisplatin and 5-fluorouracil when used by the intraperitoneal route in patients who have persistent minimal residual disease epithelial ovarian malignancies after standard therapy.

TECHNICAL APPROACH
Patients with primary histologically documented epithelial carcinoma of the ovary. Patients who have had partial or incomplete responses to combination chemotherapy and who have documented minimal residual disease (1.0 cm or less maximum tumor diameter) at second look laparotomy following chemotherapy. Patients with a history of complete response followed by a recurrence with no residual nodule greater than 1 cm in diameter are also eligible.

PRIOR AND CURRENT PROGRESS
There have been 33 patients entered into this protocol for the entire GOG. No patients have been entered from WRAMC.

CONCLUSIONS
Too early.

KEYWORDS: advanced, squamous cell carcinoma, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
Continued identification of new active drugs in the treatment of advanced or recurrent squamous cell carcinomas of the cervix so that combinations of cytotoxic drugs can be formed which might lead to an improved complete remission rate.

TECHNICAL APPROACH
Patients with histologically confirmed advanced, persistent or recurrent squamous cell carcinoma of the cervix with documented disease progression after local therapy.

PRIOR AND CURRENT PROGRESS
GOG#76-A is a Master Protocol. See individual protocols.

CONCLUSIONS
See individual protocols.
TITLE: GOG 761: A Phase II Trial of Ifosfamide and the Uroprotector, Mesna, in Patients with Advanced Squamous Cell Carcinoma of the Cervix

KEYWORDS: ifosfamide, mesna, cervix

PRINCIPAL INVESTIGATOR: Barnhill, Danny LTC MC
ASSOCIATES: Park, Robert MD

DEPARTMENT: Department of Obstetrics and Gynecology
SERVICE: Gynecologic Oncology Group

STATUS: Ongoing
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
The objective of the study is to continue identification of new active drugs in the treatment of advanced or recurrent squamous cell carcinomas of the cervix to that combinations of cytotoxic drugs can be formed which might lead to an improved complete remission rate.

TECHNICAL APPROACH
Patients with histological confirmed advanced, persistent or recurrent squamous cell carcinoma of the cervix with documented disease progression after local therapy. Patients must have a bilirubin, SGOT, and liver alkaline phosphatase less than or equal to 2 x normal.

PRIOR AND CURRENT PROGRESS
The entire GOG has entered 22 patients into this study. Walter Reed has entered no patients. There has been 2 grade IV toxicities, 1 Leukopenia, and 1 Neurotoxicity.

CONCLUSIONS
Too early.
SUMMARY SHEET

TITLE: Quantification of Leukocytes and Leukocyte Antigens in Various Red Cell Products

KEYWORDS:

PRINCIPAL INVESTIGATOR: Webster, Noel CPT MS
ASSOCIATES: Rickman, William MAJ MS

DEPARTMENT: Department of Pathology and Area Laboratories

STATUS: Completed

APPROVAL DATE: Aug 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the amounts of leukocytes by type remaining in various red cell products. Products include: Whole blood, packed red blood cells, buffycoat poor red cells, filtered red cells (Cepacell R500A Filter), frozen/deglycerolized red cells, filtered buffycoat-poor red cells, and frozen/deglycerolized buffycoat-poor red cells.

TECHNICAL APPROACH
Twenty units of volunteer donor blood were analyzed for leukocytes using flow cytometric immunophenotyping. Flow cytometry allows the researcher to determine types of leukocytes remaining in blood products by the use of monoclonal antibodies to specific leukocyte cell surface antigens. Blood products were made using standard procedures outlined by the transfusion service, DPALS, WEAC and/or manufacturer guidelines.

PRIOR AND CURRENT PROGRESS
Research was completed in June 1989. Antigens tested for were: CD45, CD14, CD3, CD4, CD8 and HLA-DR. Monoclonal antibodies used could differentiate leukocytes into granulocytes, monocytes, lymphocytes. Lymphocytes could be further differentiated into T helper/inducer, T suppressor and B cells.

CONCLUSIONS
All final products (Filtered red blood cells, Frozen/deglycerolized red blood cells, Filtered buffycoat-poor red blood cells and Frozen/deglycerolized buffycoat-poor red blood cells) meet the American Association of Blood Banks standards for leukocyte -oor blood. However, Frozen/deglycerolized buffycoat-poor blood was significantly better (p<0.05). This product may prevent or delay alloimmunization to human leukocyte antigens.
DETAIL SUMMARY SHEET

TITLE: Fibrinogen Concentration in Two Methods of Cryoprecipitate Preparation

KEYWORDS: cryoprecipitate, fibrinogen, factor VIII

PRINCIPAL INVESTIGATOR: Dillon, Ruth CPT USAF BSC
ASSOCIATES: Lippert, Lloyd LTC MS

DEPARTMENT: Department of Pathology and Area Laboratories
STATUS: Ongoing

APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE

a) To determine if a relationship exists between loss of fibrinogen and factor VIII and the volume of supernatant plasma removed during the preparation of cryoprecipitate from fresh frozen plasma; b) if a relationship exists, what the relationship is and whether the information could be used to improve yield of fibrinogen and factor VIII in cryoprecipitate.

TECHNICAL APPROACH

Collect aliquots of supernatant plasma as predetermined intervals as the supernatant plasma was removed. Measure fibrinogen and factor VIII content of these aliquots and compare to the content in the starting plasma and final product. Two methods of cryoprecipitate preparation were studied and compared. Utilize linear regression to determine if linear relationship exists between constituent and volume of supernatant plasma.

PRIOR AND CURRENT PROGRESS

Total of 123 units of cryoprecipitate were prepared, 62 by the slow thaw method and 61 by quick thaw method. Results indicate a significant difference between the two methods in fibrinogen and factor VIII yield and final volume. An inverse linear relationship existed between fibrinogen loss and supernatant plasma volume in quick thaw method, however, the relationship too small to be of practical value. No linear relationship established between supernatant plasma volume and fibrinogen in slow thaw method or factor VIII in quick thaw method. Data suggest possible linear relationship or significant proportion between fibrinogen and factor VIII and final 10-15% of supernatant plasma volume. Future studies will investigate this possibility.

CONCLUSIONS

No significant relationship exists between supernatant plasma volume range of 80-20% of total volume and fibrinogen and factor VIII. Potential relationship could prove beneficial in improving final yield of constituent in cryoprecipitate.
DETAIL SUMMARY SHEET

TITLE: Detection and Quantitation by Flow Cytometry of Opsonic Protein Binding to Erythrocytes in a Simulated Incompatible Transfusion

KEYWORDS:

PRINCIPAL INVESTIGATOR: Ferguson, Dale 1LT USAF

DEPARTMENT: Department of Pathology and Area Laboratories

STATUS: Terminated

APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 1,720  Previous FYs: $ 0  Total: $ 1,720

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED

CONCLUSIONS
ADMINISTRATIVELY TERMINATED
TITLE: Collection and Cryopreservation of Spleen Cells for the Production of Monoclonal Antibodies

KEYWORDS: spleen, cryopreservation, lymphocytes

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Apr 1983

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To use cryopreserved spleen cells from a bank as a source of growth factors and tumor monoclonal antibodies.

TECHNICAL APPROACH
After splenectomy, spleen is dissected and single cell suspensions are made. These cells are cryopreserved in liquid nitrogen for later use.

PRIOR AND CURRENT PROGRESS
No additional splenic cells added during reporting year. Extensive hybridoma work has been performed on cells from a single spleen to date.

CONCLUSIONS
Study should remain open.
TITLE: C-Reactive Protein in Childhood Malignancies

KEYWORDS: C-reactive protein, malignancy, children

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Feb 1984

FUNDING: Current FY: $ 4,278 Previous FYs: $22,305 Total: $26,583

STUDY OBJECTIVE
a) to study the value of C-reactive protein in the diagnosis of bacterial and fungal infections in the neutropenic child with cancer; b) to determine the influence of chemotherapy on the acute phase reactants as compared to other reactants.

TECHNICAL APPROACH
Patients who present with fever will have CRP determination at hours 6, 12, 24, 48, 72, 96, and at 7 days. CBC will be monitored daily. CRP determination will be done by nephelometry.

PRIOR AND CURRENT PROGRESS
This was an ongoing study with 506 specimens analyzed through July 1989. The study was placed on hold for rest of fiscal year 89 pending clarification of benefit to registrant. It will hopefully be reopened in FY 90.

CONCLUSIONS
If reopened, will continue to accrue in some subgroups and be finalized shortly.
DETAIL SUMMARY SHEET

TITLE: Q-Angles: Their Measurement, Normals and Variations Related to Tanner Staging and the Incidence of Knee Complaints

KEYWORDS: q-angle, knee pain, Tanner staging

PRINCIPAL INVESTIGATOR: Figelman, Alan LTC MC

DEPARTMENT: Department of Pediatrics

STATUS: Completed

APPROVAL DATE: Mar 1984

FUNDING: Current FY: $3,846 Previous FYs: $2,649 Total: $6,495

STUDY OBJECTIVE
a) To establish normal range for Q-Angle measurement related to each different Tanner Stage; b) to test whether the chief complaint of "knee problems" is related to an abnormal Q-Angle in adolescents.

TECHNICAL APPROACH
The physician will complete a short questionnaire included in this protocol followed by a physical exam, Tanner Staging and Q-Angle measurement. The control group will include children age 10-18 years. The knee complaint group will include adolescents ages 12-18 years.

PRIOR AND CURRENT PROGRESS
During 1987, an adequate number of controls were still not available to complete the study. Although 320 controls have been enrolled, 30 more patients (all Tanner II females) need to be included. We are making a charge so that the Adolescent Clinic can accommodate these patients, many of whom would otherwise still be seen in the pediatric clinic. We fully expect study completion within this year.

CONCLUSIONS
Study is complete.
STUDY OBJECTIVE
To evaluate the effectiveness of intravenous immunoglobulin (IVIG) with titer to known disease producing types of group B streptococci (GBS) in preventing GBS disease in high risk neonates.

TECHNICAL APPROACH
Patients eligible will receive IVIG or placebo over 2 hours at a dose of 500mg/kg via an IV. The patient will have several samples drawn and observed for sepsis over eight weeks.

PRIOR AND CURRENT PROGRESS
Patient entry for this multicenter (9) study has been completed effective 9 April 1989, with 158 patients entered at Walter Reed and 753 entered in the study overall. Patient entry was stopped after a review by an FDA sponsored independent panel of data from the first 500 patients which indicated that further patient entry would not be necessary. No toxicity was noted by the panel, but other results still remain blinded pending final analysis. We hope to have final clinical and laboratory analyses completed within 12 months.

CONCLUSIONS
None.
DETAIL SUMMARY SHEET

TITLE: Breast Milk Antibody to Group B Streptococcus (GBS)

KEYWORDS: breast milk, antibody, group B streptococcus

PRINCIPAL INVESTIGATOR: Weisman, Leonard LTC, MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Oct 1984

FUNDING:

Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
a) To determine if GBS-specific IgG and IgA antibodies are present in human milk. To determine if a relationship exists between GBS-specific IgG and IgA antibodies in maternal serum and in breast milk; b) to determine if GBS-specific IgG and IgA antibodies in human milk are functional; c) to determine if GBS-specific IgG and IgA antibodies survive passage through the gastrointestinal tract of the neonate and retain their functional activity.

TECHNICAL APPROACH
Maternal blood, cord blood, breast milk, and non-meconium stool were obtained for analysis of IgG, IgA by RID, IgG and IgA GBS-specific antibody by ELISA, and functional activity of antibody by Opsonophagocytosis.

PRIOR AND CURRENT PROGRESS
Forty-four patients have been entered. RID and ELISA data have been obtained in the laboratory. Analysis on this data is nearing completion.

CONCLUSIONS
None.
DETAIL SUMMARY SHEET

TITLE: Phase II Oral Colonization and Systemic Group B Streptococcal (GBS) Disease in a Suckling Rat Model

KEYWORDS: streptococcus, suckling rat, oral colonization

PRINCIPAL INVESTIGATOR: Weisman, Leonard LTC MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Jun 1985

FUNDING: Current FY: $ 6,251 Previous FYs: $ 15,400 Total: $ 21,651

STUDY OBJECTIVE
a) Compare death rate of our oral colonization suckling rat model for systemic GBS disease with subcutaneous colonization model; b) Determine the effect of asphyxia or/and hypothermia on this disease process.

TECHNICAL APPROACH
Newborn Wistar rats are colonized orally or subcutaneously with a specific strain of GBS. They are then observed for survival, stool and blood culture clearance of the organism, effect on CBC, bone marrow, pathology and various antibody assays.

PRIOR AND CURRENT PROGRESS
Work on the sera samples generated by the animal data continued.

CONCLUSIONS
None at this time.
REPORT DATE: 10/16/89

DETAIL SUMMARY SHEET

TITLE: Effect of Adrenarchal Stage on Treatment of Precocious Puberty with Leuprolide, a GnRH Analogue

KEYWORDS: precocious puberty, GnRH, adrenarche

PRINCIPAL INVESTIGATOR: Poth, Merrily MD
ASSOCIATES: Francis, Gary MD; Newman, Robert MD

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing
APPROVAL DATE: Nov 1985

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
The objective of this study is to determine whether the adrenarcheal stage of the patient at the time of institution of treatment for precocious puberty is important to the outcome of therapy.

TECHNICAL APPROACH
Patients with central precocious puberty who are designated for GnRH therapy have adrenarcheal staging done using physical examination (Tanner Staging) and serum DHEAS level. During therapy the effects of treatment, i.e. the cessation of pubertal progression, suppression of gonadotropin and bone age and growth rate with consequent change in projected adult height are determined. Analysis will be made to determine whether lateness of adrenarcheal stage compromises the effectiveness of therapy with GnRH analogues.

PRIOR AND CURRENT PROGRESS
Currently twenty patients have been enrolled in the protocol. Analysis of data has led to one presentation at national meeting and our data, combined with that of others, have been published.

CONCLUSIONS
The project is to continue as all patients are doing well. It is confirmed that GnRH analogue therapy is an effective treatment for most patients with precocious puberty. The effect of treatment on final adult height and how to predict this is a major question.
REPORT DATE: 05/31/89

DETAIL SUMMARY SHEET

TITLE: Response to Combination Meningococcal Vaccine in Children

KEYWORDS: splenectomy, infection, meningococcal vaccine

PRINCIPAL INVESTIGATOR: Hastings, Constance COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: May 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To conduct a safety and antigenicity study of a new meningococcal vaccine in the pediatric patient who is splenectomized or who is to be splenectomized.

TECHNICAL APPROACH
Patients will be given vaccination of recently developed meningococcal vaccine, and blood will be assayed for antibody production (1) pre-vaccination, (2) two weeks post-vaccination, and (3) six months post-vaccination.

PRIOR AND CURRENT PROGRESS
The protocol was approved by the Surgeon General's Human Subjects Research Review Board on 8 Mar 89 with stipulation that revisions be made to the protocol and consent form. Since the protocol involved an investigational vaccine, TSGO held the IND on it. The revisions were submitted 23 May 89; verbal concordance has been received; written acceptance is pending. Since the HSRRB 8 Mar meeting, the bactericidal levels achieved with the vaccine in Phase I study have not been felt to be satisfactory for proceeding with the proposed study in children. The adult volunteers were immunized with a lot containing less lipopolysaccharide. A new production protocol is already underway on a vaccine containing more lipopolysaccharide. This lot is expected to be ready for use in children in mid 1990. At that time appropriate revisions to protocol and consent form will be resubmitted. Meanwhile, this investigator requests that this protocol be kept on file.

CONCLUSIONS
The clinical protocol that offers B group meningococcal protection for first time to children in America is approved for use. It is this investigator's choice to request delay in implementing the study pending production of an even more satisfactory lot of vaccine.
DETAIL SUMMARY SHEET

TITLE: The Effect of Maternal Group B Streptococcal Vaccination on Neonatal Mortality Using a Rat Model

KEYWORDS: group B streptococcus, immunization, maternal-fetal immunity

PRINCIPAL INVESTIGATOR: Heiman, Howard MAJ MC
ASSOCIATES: Weisman, Leonard LTC MD

DEPARTMENT: Department of Pediatrics

STATUS: Completed

APPROVAL DATE: Aug 1986

FUNDING: Current FY: $ 2,719  Previous FYs: $ 3,453  Total: $ 6,172

STUDY OBJECTIVE
Produce vaccine induced group B streptococcal (GBS) antibody in rat dams above the level which protects suckling rats. Determine whether maternal vaccine induced GBS type III transferred prenatally or postnatally would affect suckling rat survival after GBS infection.

TECHNICAL APPROACH
Three vaccine schedules were studied using various booster intervals for rat dams. Immunized pregnant rat dams were matched to non-immunized dams and their litters were cross-suckled. The pups were then orally inoculated with GBS. Their survival measured. Type-specific opsonic antibody was studied in dam serum and milk, and in pup serum.

PRIOR AND CURRENT PROGRESS
Animal vaccine schedules were studied using various booster intervals for rat dams. Immunized pregnant rat dams were matched to non-immunized dams and their litters were cross-suckled. The pups were then orally inoculated with GBS. Their survival measured. Type-specific opsonic antibody was studied in dam serum and milk, and in pup serum.

CONCLUSIONS
Study closed.
TITLE: The Impact of Maternal Protein-Calorie Deprivation During Late Gestation and in the Early Postpartum Period on Infection Related Mortality after Colonization with Orally Administered Type III Group B Streptococci in the Suckling

KEYWORDS: infection, nutrition, neonate

PRINCIPAL INVESTIGATOR: Keith, Julian LCDR MC USN
ASSOCIATES: Weisman, Leonard LTC MC

DEPARTMENT: Department of Pediatrics
STATUS: Completed
APPROVAL DATE: Aug 1986

FUNDING: Current FY: $5,600  Previous FYs: $0  Total: $5,600

STUDY OBJECTIVE
To study the impact of intrauterine/postnatal nutritional (protein) deprivation in gravid Wistar rats and the response (bacteremia/death) of their offspring to group B streptococcus (GBS) infection.

TECHNICAL APPROACH
Wistar rat dams are assigned to normal or protein-deficient diets during the last trimester of pregnancy. Nutritional and pregnancy outcome criteria as well as mortality and bacteremia were followed over the first 7 days and thereafter all liveborn pups infected with GBS orally after birth were followed.

PRIOR AND CURRENT PROGRESS
Animal work has been completed. Seventyfive percent of the laboratory work is completed. Final laboratory work should take place this year. One publication based on the completed work is under review and another will follow pending completion of data collection and analysis.

CONCLUSIONS
Study closed.
TITLE: Effects of Etiocholanolone on Thyroid Hormone Metabolism and Response to Cold Stress in Zucker Obese Rats

KEYWORDS: obesity, adrenal steroids, DHEAS

PRINCIPAL INVESTIGATOR: Rogers, William MD
ASSOCIATES: Poth, Marrily, MD

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Sep 1986

FUNDING: Current FY: $ 1,509 Previous FYs: $ 5,829 Total: $ 7,338

STUDY OBJECTIVE
The objective of this study is to determine the mechanisms of the anti-obesity effects of adrenal steroids using the Zucker fatty rat as a model.

TECHNICAL APPROACH
We found in the first year of this project that DHEA administration activated brown adipose tissue and that this activation was antagonized by glucocorticoids. At the present time we are exploring the interactions of DHEA and glucocorticoids using receptor kinetic methodology as well as assays for post-receptor effects.

PRIOR AND CURRENT PROGRESS
We have found that: 1) DHEA treatment of rats results in down regulation of glucocorticoid receptors in rat liver with a significant decrease in the number of receptors with no change in the binding affinity of the receptors. 2) DHEA does not compete for binding in the glucocorticoid receptor assay. 3) DHEA pretreatment protects thymocytes from lysis by glucocorticoids in vitro and in vivo.

CONCLUSIONS
We have compelling evidence that DHEA has potent anti-glucocorticoid effects in several systems, including brown adipose tissue, liver and thymus. We are exploring the mechanisms of this inhibition at the present time.
DETAIL SUMMARY SHEET

TITLE: Measurement of Fecal Alpha-1-Antitrypsin Excretion in Newborns at Risk for Necrotizing Enterocolitis

KEYWORDS:

PRINCIPAL INVESTIGATOR: Young, Elizabeth CPT MC

DEPARTMENT: Department of Pediatrics

STATUS: Terminated

APPROVAL DATE: Sep 1986

FUNDING: Current FY: $588 Previous FYs: $0 Total: $588

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
DETAIL SUMMARY SHEET

TITLE: Malondialdehyde Production by Neonatal Erythrocytes

KEYWORDS: vitamin E, free radicals, neonates

PRINCIPAL INVESTIGATOR: Poth, Merrily MD

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Sep 1986

FUNDING: Current FY: $3,031 Previous FYs: $0 Total: $3,031

STUDY OBJECTIVE
The objective of this study is to determine whether free radical production of red blood cell membranes of neonates would reflect vitamin E deficiency in this population.

TECHNICAL APPROACH
Neonatal red blood cells were exposed to hydrogen peroxide and malondialdehyde (MDA) production measured to attempt to determine whether this measure of vitamin E sufficiency/deficiency would help to resolve the questioned need for vitamin E supplemental of newborns, individually or as a group.

PRIOR AND CURRENT PROGRESS
Newborns as a group did show mean malondialdehyde production consistent with vitamin E deficiency. However a wide range of values was seen in newborns and values did not appear to correlate with gestational age or patient’s feeding history. Numbers for analysis were severely limited by the need for many infants of interest to have received red blood cell transfusions. Further data will be needed to determine whether morbidity theoretically associated with vitamin E deficiency was increased in patients with high MDA release.

CONCLUSIONS
Malondialdehyde release of neonatal red blood cells was increased, consistent with vitamin E deficiency neonates as a group. It remains to be determined whether high values correlate with an increased susceptibility to disease in these patients.
STUDY OBJECTIVE
The objective of this study is to determine if rapid diagnostic assays could be valuable in identifying Group B streptococcal amniotic fluid infection or vaginal colonization in high risk pregnancies.

TECHNICAL APPROACH
Amniotic fluid and/or cervical vaginal fluid specimens are obtained from pregnant women considered high risk for infection with Group B Streptococcus. Specimens are cultured and rapid latex agglutination assays are used to detect Group B streptococcal antigens. The sensitivity and specificity of three commercially available latex particle agglutination kits are being compared with culture results as the gold standard. These three kits are PathoDx (PD) Diagnostic Products Corporation, Bactigen (BG) Wampole, and fast Trak (FT) Wampole Labs.

PRIOR AND CURRENT PROGRESS
In the first year of the study 29 patients were enrolled. Now the study has been completed and 92 patients have been enrolled. There have been no serious or unexpected adverse reactions, and no patients have withdrawn from the study. The prevalence of Group B strep colonization in the study population was 12%. The sensitivity, specificity, positive and negative predictive values of the three latex particle agglutination kits have been summarized. There was no direct patient benefit from this study.

CONCLUSIONS
The sensitivity of latex particle agglutination assays is relatively low compared to their high specificity. Of the three kits tested, FT offered the best combination of high positive and negative predictive values. It was also technically easier to perform, because it did not require rocking on a serologic rotator, making it more practical for the labor and delivery suite area than the other kits.
STUDY OBJECTIVE
To characterize granulocyte and megakaryocyte progenitors in the preterm and term infant.

TECHNICAL APPROACH
Cord blood is collected and the mononuclear cells are used for progenitor assays or measurement of interleukin 1.

PRIOR AND CURRENT PROGRESS
Results thus far from 10-15 cord blood (CB) samples have shown increased numbers of megakaryocyte progenitors (CFU-meg) compared to adult blood and bone marrow. The CFU-meg in CB also appears less responsive to megakaryocyte colony stimulating factor than adult CFU-meg. Collaborative work on megakaryopoiesis will continue with Dr. Olson who has ETS'd and is currently at Ohio State University. Plan to begin granulopoiesis work soon.

CONCLUSIONS
Study should remain open at least one year for sample collection and laboratory studies.
REPORT DATE: 06/06/89

WORK UNIT #: 6062

DETAIL SUMMARY SHEET

TITLE: Sexual Dimorphism of the Human Corpus Callosum: Evaluation by Nuclear Magnetic Resonance Imaging

KEYWORDS:

PRINCIPAL INVESTIGATOR: Wilson, Bruce LTC MC

DEPARTMENT: Department of Pediatrics

STATUS: Completed

APPROVAL DATE: Dec 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE

TECHNICAL APPROACH

PRIOR AND CURRENT PROGRESS
This study has been cancelled, as the Principal Investigator (Dr. Bruce Wilson) has left Walter Reed and active duty military service. There was no one with appropriate interest or skills to assume investigatorship. Discontinued in July, 1988. No equipment was ordered, no part of the investigation was performed, and no presentations or publication were generated.

CONCLUSIONS
REPORT DATE: 01/06/89

TITLE: The Effect of Mestinon on Growth in Non-growth Hormone Deficient Short Children

KEYWORDS: short stature, growth hormone

PRINCIPAL INVESTIGATOR: Crudo, David MAJ MC
ASSOCIATES: Poth, Merryl MD

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing
APPROVAL DATE: Feb 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine whether Mestinon (pyridostigmine) has physiological effect on growth hormone secretaion and hence on growth.

TECHNICAL APPROACH
Mestinon, 60 mg (or placebo) given at bedtime each night to short, non-growth hormone deficient children. Growth rate, and serum somatomedin C levels will be compared for placebo versus drug treatment time periods.

PRIOR AND CURRENT PROGRESS
Five children have been enrolled in the study. No analysis of data is yet available. No adverse reactions have been reported. No benefit yet noted for patients.

CONCLUSIONS
No conclusions are possible.
TITLE: Perinatal Hyperviscosity

KEYWORDS: hyperviscosity, perinatal

PRINCIPAL INVESTIGATOR: Weisman, Leonard LTC MC

DEPARTMENT: Department of Pediatrics

STATUS: Completed

APPROVAL DATE: Mar 1983

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
Objective is to determine whether there is an association between neonatal and maternal blood viscosity.

TECHNICAL APPROACH
Blood viscosity of neonates and their mothers will be compared in those pregnancies complicated by maternal diabetes mellitus, pre-eclampsia, or intrauterine growth retardation. These are maternal conditions known to be associated with a high incidence of neonatal hyperviscosity. Blood viscosity will be measured with a Wells-Brookfield microviscometer. Measurements will be made on maternal blood, umbilical cord blood, and neonate's blood (heelstick) at 6 hours of age. The babies will directly benefit from the study.

PRIOR AND CURRENT PROGRESS
Fifteen mother-infant pairs have been studied. Personnel changes have delayed completion. Earlier, equipment problems had plagued project completion. Continued personnel and equipment problems plague completion of this project. No other investigators wish to assume responsibility for project and the PI cannot devote any more time to it's completion. We are terminating the project at this time before completion.

CONCLUSIONS
None.
REPORT DATE: 12/28/88

DETAIL SUMMARY SHEET

TITLE: POG 8616 Intensive Chemotherapies for Stage III Diffuse Undifferentiated Lymphoma (DU NHL Burkitt and Non-Burkitt), A Randomized Phase III Study

KEYWORDS: lymphoma, diffuse, undifferentiated

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Jan 1987

FUNDING: Current FY: $ 0

Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE

a) To achieve chemotherapeutic cure in a majority of patients with Stage III DV-NHL; b) to compare two regimens for efficacy and toxicity; c) to study correlation between treatment/response and LDH.

TECHNICAL APPROACH

Registrants must be 21 years old or less, previously untreated, and Stage III. Randomization is at diagnosis between "Total B" regimen and a high dose cytoxan/methotrexate regimen.

PRIOR AND CURRENT PROGRESS

As of August 1988, thirtyseven registrants groupwide. One of two WRAMC registrants died shortly after start of treatment of disease-related causes. Response overall was good (72% CR, 75% event-free survival), and toxicity was acceptable.

CONCLUSIONS

Pending.
DETAIL SUMMARY SHEET

TITLE: The Enteral Absorption of Human IgG by the Neonatal Guinea Pig and Its Retention of Opsonic Activity Type III Group B Streptococcus

KEYWORDS: immunoglobulin, enteral absorption, guinea pig

PRINCIPAL INVESTIGATOR: Jesse, Steven CPT MC
ASSOCIATES: Weisman, Leonard LTC MC

DEPARTMENT: Department of Pediatrics
STATUS: Ongoing
APPROVAL DATE: May 1988

FUNDING: Current FY: $2,248 Previous FYs: $0 Total: $2,248

STUDY OBJECTIVE
The human newborn has been classically described as a "nonabsorber" of breastmilk antibody. Using an animal model which resembles the human neonate, (in a GI sense), we are attempting to demonstrate the absorption of Human IgG via the gut after gavaging the subject with a known amount of IgG shortly after birth. We also hope to identify variables which may influence enteral absorption of IgG.

TECHNICAL APPROACH
Vaginally delivered Hartley Guinea Pig pups are gavaged with a 10% Human IgG preparation shortly after birth. Cohorts receive either 5 gm/kg or 1 gm/kg PO either once or x3. Controls receive wither 5 gm/kg or 1 gm/kg IP xl. Serial blood samples, (0.3cc), are then obtained via a femoral cutdown at 24, 48, 72hrs; and at 1 and 2 weeks after IgG administration. Pups remain with their dam and suckle ad lib; all being euthanized after 2 weeks. A Competitive Inhibition Enzyme Immunoassay is being used to compare serum Human IgG levels in all animals, over time and between 5g/kg & 1g/kg groups.

PRIOR AND CURRENT PROGRESS
Currently, we are completing enrollment in an attempt to achieve 7 samples at each time interval in both the single and multi-dose 5 gm/kg & 1 gm/kg groups. The successful use of the femoral cut-down, allowing repeated samples from the same subject, should permit conclusion of this phase of the study by June, 1989. Preliminary results demonstrate enteral absorption of Human IgG in all subjects tested to date. The absorption of IgG does appear to be dose dependent.

CONCLUSIONS
Using an animal model which, like the human newborn, has been classically described as a nonabsorber of breastmilk antibody, we have demonstrated the enteral absorption Human IgG. We are currently evaluating the effect of total dose on the oral absorption of IgG. Future investiation will focus on gestational age and function of the IgG.
TITLE: Chronic Stress, Change in Social Support, and Uncertainty

KEYWORDS: chronic stress, reactions to stress

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: Jul 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To evaluate psychological, physiological, and behavioral responses to ongoing chronic stress; b) to examine the role of change in the stress-social support relationship; and c) to determine the role of ambiguity or uncertainty in stress.

TECHNICAL APPROACH
A multi-modal (endocrine, hematologic, psychiatric, immunologic) evaluation is used for family members of children with malignancies. This study is in conjunction with the Department of Psychiatry, USUHS. Families are screened by a hematology-oncology nurse specialist.

PRIOR AND CURRENT PROGRESS
Nine families have been registered since January 1989. Database and tracking methods have been established.

CONCLUSIONS
Study should remain open.
REPORT DATE: 05/23/89

DETAIL SUMMARY SHEET

TITLE: Etiology of Chronic Lymphadenopathy in Children and Adolescents

KEYWORDS: lymphadenopathy, chronic, etiology

PRINCIPAL INVESTIGATOR: Margileth, Andrew MD
ASSOCIATES: English, Charles BS

DEPARTMENT: Department of Pediatrics
ST'TUS: Ongoing
APPROVAL DATE: Jun 1980

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
We propose to continue our studies using PPD-Battey, PPD-T and cat scratch antigen skin tests to help determine the etiology of chronic adenopathy in children and adolescents.

TECHNICAL APPROACH
The cat scratch bacillus has been identified and isolated. After confirmation of this finding by others we will attempt to develop a diagnostic serologic test. We also plan to test a filtered extract of the Gram negative bacillus in guinea pigs to ascertain possible skin test reactivity. We then plan to develop a purer skin test antigen for human use. Subsequently we would determine its sensitivity and specificity of PPD-Battey and standard PPD-T antigens in healthy patients and those with chronic adenopathy.

PRIOR AND CURRENT PROGRESS
In 1988 all 288 patients benefited from their skin test results since diagnosis could be made and appropriate therapy was provided by their referring physician. No serious or unexpected adverse reaction was noted in 239 patients. No patients withdrew from the study.

CONCLUSIONS
Active research continues to use the newly isolated cat scratch bacillus as a cat scratch antigen. Dr. Wear and LT Cdr English at AFIP have cultured a Gram negative bacillus from tissue biopsy material from patients with CSD. (JAMA 1988; 259:1347-1352). They are developing a serologic diagnostic test for CSD. Correlation of the positive PPD skin test reaction with mycobacteria cultured from lymph nodes or other tissue is ongoing.
REPORT DATE: 10/13/88

DETAIL SUMMARY SHEET

TITLE: Modified Immune Serum Globulin in Neonates

KEYWORDS: immunoglobulin, neonates, pharmacokinetics

PRINCIPAL INVESTIGATOR: Weisman, Leonard LTC MC
ASSOCIATES: Fisher, Gerald COL MC

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing
APPROVAL DATE: Nov 1980

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To evaluate kinetics and safety of modified immune serum globulin (MISG) in neonates.

TECHNICAL APPROACH
Infusion of MISG in neonates.

PRIOR AND CURRENT PROGRESS
We have to date entered 42 patients using two products at two infusion rates and three doses. No new developments have occurred which might influence a subject’s participation. We, in conjunction with Sandoz, have developed a hyperimmune product. We have received approval from Sandoz and Swiss Red Cross to study this hyperimmune product. The FDA has approved our IND request for this high titer IVIG (hyperimmune product). We have recently amended the protocol to allow 3 doses of this product and 1 dose of standard IVIG to be evaluated and to eliminate the controls. This has been reviewed and approved by the CIC and HUC/IRB at WRAMC. We are awaiting HSC review.

CONCLUSIONS
None since last year.
TITLE: POG 7799 Rare Tumor Registry

KEYWORDS: rare tumors, tumors, pediatric tumors

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jan 1980

FUNDING:
Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
To accumulate natural history data on malignancies which occur so rarely that larger series of cases cannot be accumulated at any single institution.

TECHNICAL APPROACH
Registry with pathology review of patients with rare tumors; annual reporting of status of patients.

PRIOR AND CURRENT PROGRESS
Group-wide 742 cases to date; 22 in the past year. None from WRAMC.

CONCLUSIONS
One publication in Cancer, 1986. Case compilation still ongoing. Study should remain open.
REPORT DATE: 12/28/88

TITLE: POG 8158 NWTS Long Term Follow-up Study

KEYWORDS: Wilm's tumor, treatment complications

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

SERVICE: Pediatric Oncology Group

STATUS: Ongoing

APPROVAL DATE: Feb 1982

FUNDING: Current FY: $0

Previous FYs: $0

Total: $0

STUDY OBJECTIVE

To gather epidemiological and late effects data on Wilm's Tumor patients.

TECHNICAL APPROACH

Data sent to coordinator to evaluate effects of the cancer and its treatment.

PRIOR AND CURRENT PROGRESS

There have been 157 patients registered groupwide, none from WRAMC. Of 1806 patients eligible groupwide (including 18 from WRAMC) that have had data submitted through the National Wilms' Tumor Study Data Center, 7 secondary malignancies, 277 cases of scoliosis, and 554 total medical conditions (30.7%) have occurred to date.

CONCLUSIONS

Study still in progress.
TITLE: POG 8104 Comprehensive Care of the Child with Neuroblastoma: A Stage and Age Oriented Study, Phase III

KEYWORDS: neuroblastoma, stage IV-S, cis-platinum

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STUDY OBJECTIVE
To prospectively evaluate the prognostic import of stage, using a pathological staging system.

TECHNICAL APPROACH
Patients are treated with a variety of therapies according to their age and the stage of their disease.

PRIOR AND CURRENT PROGRESS
Several arms of POG 8104 now closed - only open for Stage A, Stage C >365 days, and Evans Stage IV-S (observation only). A total of 150 was registered groupwide as of May 1988. Total of 52 Stage C > 365 days patients registered groupwide assay 1988. WRAMC registered a total of 9 patients, four were referred following recurrence for BMT (1 post-BMT long term survivor). The other five patients are disease free. Biology study 8105 has accrued a total of 544 patients groupwide as of May 1988. WRAMC has accrued ten patients as of May 1988.

CONCLUSIONS
Data partially evaluated and presented. Stage A registrants will be accrued, as this arm will remain open.
TITLE: POG 8304 Combination Chemotherapy for Remission Induction and Maintenance for Recurrent Childhood Lymphocytic Leukemia and Children with Occult Testicular Lymphocytic Leukemia, Phase III

KEYWORDS: testicular leukemia, recurrent leukemia, lymphocytic leukemia

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jul 1983

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To compare the effectiveness of two regimens of cyclic maintenance therapy for children relapsing at any site six months or more after elective cessation of therapy for acute lymphocytic leukemia.

TECHNICAL APPROACH
All patients receive a common induction chemotherapy followed by randomization to one of two maintenance regimens. Those with testicular or CNS involvement will also receive radiation therapy.

PRIOR AND CURRENT PROGRESS
As of November 14, 1988, there have been 285 registrants groupwide, none in the past two years from WRAMC. Accrual objectives for marrow and testicular disease strata have been met and are closed to further registration. Isolated CNS disease stratum accrual has also been met; however, the stratum remains open to new registrants. Nearly all patients have a complete response during induction. Patients with marrow disease have a probability of 55% for disease-free survival at 3 years, with a significant risk for relapse after this time period. Isolated CNS disease had a 3 year disease-free survival of 47% with apparent low hazard for relapse after three years. Comparisons for other strata remain masked.

CONCLUSIONS
Study should remain open.
TITLE: POG 8451 Intergroup Rhabdomyosarcoma III

KEYWORDS: rhabdomyosarcoma, cis-platinum, radiotherapy

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Dec 1984

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) to compare the effectiveness of various drug therapies in each clinical group, including the use of salvage chemotherapy, to evaluate prognostic factors; b) to determine if second and third look surgery will improve local disease control; c) to attempt to devise a pre-operative staging classification.

TECHNICAL APPROACH
Following complete surgical and medical staging and histologic subclassification, patients will be randomized to receive a specific chemo/radiation regimen, including salvage chemotherapy for advanced stages. Second and third look surgery will be used in some cases.

PRIOR AND CURRENT PROGRESS
Through September of 1988, 922 registrants are on study, 350 from POG, and one from WRAMC. No serious toxicities at WRAMC. Fourteen fatal non-hematologic toxicities have occurred, which is acceptable by protocol standards. Major cause of toxicities have occurred, which is acceptable by protocol standards. Major cause of toxic deaths is infection. The WRAMC patient is off treatment as is doing well. Overall survival appears at least as good as IRS-II at 1 & 3 years, however, data is not mature enough to draw conclusions. Strata for clinical group IV, III (except favorable histology, orbit, and head), and special pelvic cases was closed on 10-7-88.

CONCLUSIONS
Although most strata are closed, study should remain open until accrual is completed. The study results will remain blinded until one year after closure.
REPORT DATE: 04/10/89

DETAIL SUMMARY SHEET

TITLE: POG 8346 Comprehensive Therapy for Ewing's Sarcoma: Tailored Vs. Standard Radiation Therapy, Phase III

KEYWORDS: Ewing's sarcoma, tailored radiation

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To improve disease-free survival in patients with Ewing's sarcoma.

TECHNICAL APPROACH
Initial reduction of tumor by chemotherapy will be followed by radiation therapy with small field (tumor plus margin), aimed at decreasing morbidity and maintaining function and cosmesis. Local surgical removal of tumor per protocol (only if surgery does not lead to mutilation or loss of function).

PRIOR AND CURRENT PROGRESS
There have been 80 registrants groupwide. All five WRAMC registrants reported last year have remained alive with no evidence of disease. Because of excellent response to tailored radiation, POG 8346 is now a single arm study. Using this modality 91% of the non-metastatic patients were converted from partial response to complete response by radiation therapy. Seventy-eight percent of the metastatic patients were converted to complete response by radiation therapy. Low white cell counts were the most common toxicity.

CONCLUSIONS
Study should remain open to study tailored XRT further.
REPORT DATE: 04/03/89

DETAIL SUMMARY SHEET

TITLE: POG 8552 A Case-Control Study of Childhood Rhabdomyosarcoma

KEYWORDS: rhabdomyosarcoma, sarcoma, genetics

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1985

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the relationship between environmental exposures, gestational factors and genetic factors and childhood rhabdomyosarcoma. To develop new methods for using subjects from collaborative cancer clinical trials for etiologic research.

TECHNICAL APPROACH
A telephone questionnaire (after consent is obtained) is undertaken for patients undergoing treatment on protocol and for a matched control group.

PRIOR AND CURRENT PROGRESS
Study has accrued sixty-five registrants groupwide as of May 1988. To date, one patient has been registered at WRAMC.

CONCLUSIONS
Study should remain open.
TITLE: POG 8493 Infant Leukemia Protocol, Group-Wide Pilot

KEYWORDS: leukemia, infant

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Completed
APPROVAL DATE: Jun 1985

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) to estimate survival in this high-risk patient group (infant leukemics); b) to establish qualitative and quantitative toxicity of this regimen and establish criteria for modifying dosages; c) to estimate rate of response.

TECHNICAL APPROACH
Combination chemotherapy with four-drug induction since these patients do not usually respond to standard drugs. Addition of VM-26 and Ara-C to maintenance dosage.

PRIOR AND CURRENT PROGRESS
Study has accrued 73 eligible patients groupwide through November 1988. No WRAMC patients are under study. Although initial results show promise (27% 2 year disease-free survival), historical comparison of this study to other infant leukemia studies cannot be viewed as definitive. Considerable toxicity has occurred (neutropenia, fever, fungal and bacterial infection). Higher white count patients appear to have inferior prognosis. As accrual goals have been met, the study is closed further registration.

CONCLUSIONS
Study should be terminated at WRAMC as no patients have been registered, and the study has been closed.
DETAIL SUMMARY SHEET

TITLE: POG 8315 Laboratory Study and Subclassification of Non-Hodgkin's Lymphoma, A Non-therapeutic Study

KEYWORDS: lymphoma, Non-Hodgkin’s, immunophenotyping

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1985

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
a) to study the biologic characteristics of lymphoma cells; b) to seek correlates of biological characteristics with histopathology clinical presentation and end results of protocol therapies; d) to develop a comprehensive classification of Non Hodgkin’s Lymphoma.

TECHNICAL APPROACH
Require submission of tumor cells for cytogenetics, DNA content by flow cytometry, immunology, and cell banking.

PRIOR AND CURRENT PROGRESS
As of March 1, 1989, there have been 157 patients registered groupwide. WRAMC registered no patients in this reporting year. No further data are available.

CONCLUSIONS
Study should remain open.
TITLE: POG 8532 Treatment of Intracranial Ependymomas, A Pediatric Oncology Group Phase III Study

KEYWORDS: ependymomas, chemotherapy, tumors

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group
STATUS: Ongoing
APPROVAL DATE: Jan 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To estimate the occurrence of seeding of IVth ventricular ependymomas in the CNS after surgery and irradiation to study survival and relapse patterns.

TECHNICAL APPROACH
Careful testing to assess extent of disease after surgery (CT, myelogram, psychological testing, etc.). Testing is repeated after radiation and at 4 to 6 month intervals for 2 years.

PRIOR AND CURRENT PROGRESS
As of May 1988 thirty-three subjects were registered groupwide, none from WRAMC. Toxicity was tolerable; response was masked.

CONCLUSIONS
None yet; subject are accruing well.
DETAIL SUMMARY SHEET

TITLE: POG 8600 Laboratory Methods for POG 8600 ALinC 14 Classification (C) Portion, Laboratory Manual, A Non-Therapeutic Study

KEYWORDS: lymphocytic leukemia, leukemia classification, ALL

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

SERVICE: Pediatric Oncology Group

STATUS: Ongoing

APPROVAL DATE: Apr 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine subgroup classification of Acute Lymphocytic Leukemia (ALL) at the time of diagnosis using a variety of laboratory methods.

TECHNICAL APPROACH
Specimens of blood and/or bone marrow are sent to reference laboratories to accurately diagnose a child’s leukemia.

PRIOR AND CURRENT PROGRESS
As of May 9, 1988 a total of 1,164 patients have been enrolled on POG study 8600. WRAMC has registered 13 patients as of April 7, 1989. Two WRAMC patients have registered in the last year; both are alive and disease-free; both are still on therapy. Ploidy seems to be an important independent prognostic factor in non-T, non-B ALL. In addition, MY10 and BAl show potential utility, but further maturity of data is needed. To date, pre-B patients have not fared significantly worse than early pre-B patients.

CONCLUSIONS
Study should remain open.
REPORT DATE: 04/03/89

DETAIL SUMMARY SHEET

TITLE: POG 8602 Evaluation of Treatment Regimens in Acute Lymphoid Leukemia of Childhood (ALinC14), A POG Phase III Study

KEYWORDS: lymphocytic leukemia, childhood leukemia, methotrexate

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STUDY OBJECTIVE
To treat patients with lymphocytic leukemia in order to provide optimal opportunity for possible cure.

TECHNICAL APPROACH
A comparison of regimens to determine if intermediate dose methotrexate (IDM) and Ara-C in consolidation is superior to IDM + L-asparaginase and if pulses of IDM/Ara-C at three week intervals is superior to 12 week intervals.

PRIOR AND CURRENT PROGRESS
Study has accrued 819 patients groupwide as of May 1988. Of the 12 patients registered at WRAMC, 2 were registered during 1988. There have been no additional deaths since the last report. In evaluation of patients registered to date, there has been 80% event-free two year survival. Induction response is better than 95% overall. Preliminary data evaluation shows event-free survival is better than 95% for good risk groups. To date, 17 patients group wide have been excluded from the study for toxicities; this is acceptable by protocol standards.

CONCLUSIONS
Study should remain open.
REPORT DATE: '03/89

DETAIL SUMMARY SHEET

TITLE: POG 8601 ALinCl4 Pharmacology, A POG Non-Therapeutic Study

KEYWORDS: acute lymphocytic leukemia, methotrexate, folate

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

SERVICE: Pediatric Oncology Group

DEPARTMENT: Department of Pediatrics

STATUS: Ongoing

APPROVAL DATE: May 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine levels of RBC methotrexate (MTX) and folate in patients on therapy for Acute Lymphocytic Leukemia (ALL) to correlate with remission induction.

TECHNICAL APPROACH
Patients already on treatment protocols have several blood samples sent to Johns Hopkins for analysis. Blood is drawn when routine bloods are needed.

PRIOR AND CURRENT PROGRESS
Study has accrued 819 registrants group-wide as of May 1988, twelve of whom were registered at WRAMC. Results are pending.

CONCLUSIONS
Study should remain open.
TITLE: POG 8561 Phase II Study of 6-Mercaptopurine Administered as an Intravenous Infusion for Malignant Solid Tumors and Acute Leukemia

KEYWORDS: 6-mercaptopurine, recurrent acute leukemia

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Completed
APPROVAL DATE: May 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine response rate to a regimen of IV 6-MP in children with advanced malignant disease for whom no effective treatment is known.

TECHNICAL APPROACH
6-Mercaptopurine is given intravenously for two days continuously, then repeated every 21 days.

PRIOR AND CURRENT PROGRESS
Study has accrued 93 registrants groupwide as of May 1988. WRAMC has not registered any patients. Response thus far is masked; toxicity has been tolerable. There has been sufficient patient accrual.

CONCLUSIONS
Recommended termination as patient accrual has been sufficient groupwide, and there have been no patients accrued locally.
TITLE: POG 8625/8626 Combined Therapy and Restaging in the Treatment of Stages I, IIA, IIIA Hodgkin's Disease in Pediatric Patients, A Phase II Study

KEYWORDS: Hodgkin's disease, radiation, MOPP-ABVD

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1986

FUNDING: Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
To treat Hodgkin's disease in patients staged as I, IIA, and IIIA.

TECHNICAL APPROACH
Effectiveness and toxicities of three cycles of MOPP-ABVD are compared with two cycles MOPP-ABVD plus radiation.

PRIOR AND CURRENT PROGRESS
As of November 1988, eighty-two patients have been registered on POG 8625. After completion of two cycles of MOPP/ABVD, there has been a 100% complete response rate for registrants with stage I disease, 57% for stage II, and 58% for Stage III. Toxicity has been mostly hematologic and tolerable. Post-randomization responses will remain masked while the study remains open. No WRAMC participants have been registered.

CONCLUSIONS
Study should remain open.
REPORT DATE: 06/09/89

DETAIL SUMMARY SHEET

TITLE: POG 8653/8654 A Study of Childhood Soft Tissue Sarcoma Other Than Rhabdomyosarcoma and Its Variants, A POG Phase III Study

KEYWORDS: soft tissue, synovial cell, sarcoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) to collect data on tissue sarcomas other than rhabdomyosarcoma and Ewings' and b) to treat with surgery, chemotherapy and radiation.

TECHNICAL APPROACH
Comparison of VACA to VACAD (VACA plus, DTIC) chemotherapy regimens via randomization. (protocol 8654)

PRIOR AND CURRENT PROGRESS
As of November 14, 1988, there have been 22 patients registered groupwide. None are from WRAMC. Treatment-specific results are masked, including disease free survival. For both treatment arms combined, the disease-free survival has been estimated to be 44.5% probability (out to 27 months). Toxicity has been tolerable.

CONCLUSIONS
Study should remain open.
REPORT DATE: 06/09/89

DETAIL SUMMARY SHEET

TITLE: POG 8498 Treatment of Children with Newly Diagnosed Acute Nonlymphoblastic Leukemia Using High-Dose Cytosine Arabinoside and Etoposide + Azacytidine for Intensification of Early Therapy, A POG Pilot Study

KEYWORDS: leukemia, non-lymphocytic, cytosine arabinoside

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Completed
APPROVAL DATE: Jul 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To treat children with non-lymphocytic leukemia, using High-dose Ara-C and Etoposide plus 5-Azacytidine.

TECHNICAL APPROACH
Sequential high-dose Ara-C, Etoposide, and 5-Azacytidine are used following remission induction with Daunomycin, Ara-C, and 6-Thioguanine.

PRIOR AND CURRENT PROGRESS
Accrual through July 7, 1988 was 310 patients groupwide. No new WRAMC patients were registered in this reporting period. One previous WRAMC registrant is alive with no evidence of disease after completing treatment, one completed treatment and had relapsed post-BMT, and one died early in the treatment course. The study has been completed, and data were reported at the International Society of Pediatric Oncology SIOP XX, August 22-26, 1988. There were no statistical differences in induction rates between the two treatment arms. White blood cells greater than or equal to 100,000 were correlated positively with poor prognosis. Complete continuous remissions were estimated to be 32.5% probability for DAT arm (out 3.5 years). These results were not, as of yet, statistically different from the HDA arm. Since last April, fungemia infections have not been a prominent complication.

CONCLUSIONS
See above; study completed.
TITLE: POG 8653 Study of Childhood Soft Tissue Sarcomas Other than Rhabdomyosarcoma and Its Variants, A POG Phase III Study

KEYWORDS: soft tissue sarcoma, synovial cell sarcoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Aug 1986

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
a) to collect data on tissue sarcomas other than rhabdomyosarcoma and Ewings'; and b) to treat with surgery, chemotherapy, and radiation.

TECHNICAL APPROACH
To use adjuvant chemotherapy with vincristine, Adriamycin, cyclophosphamide, and actinomycin D (VACA) after surgery with or without postoperative radiation (POG 8653).

PRIOR AND CURRENT PROGRESS
As of November 1988, there were 35 patients registered groupwide. Accrual is behind schedule. No WRAMC registrants. Response and disease-free survival is masked. Treatment has generally been well tolerated.

CONCLUSIONS
Study should remain open.
TITLE: POG 8622 Evaluation of Retinoic Acid in Pediatric Patients with Acute Non-lymphocytic Leukemia, A POG Phase II Study

KEYWORDS: retinoic acid, vitamin A, non-lymphocytic leukemia

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the effectiveness and toxicity of retinoic acid in the treatment of acute non-lymphocytic leukemia.

TECHNICAL APPROACH
To give retinoic acid orally, daily for four weeks, then assess effect by checking bone marrow. This will be repeated as long as there is a response.

PRIOR AND CURRENT PROGRESS
As of November 1988, there were 29 registrants groupwide. Five additional patients were registered through February of 1989. There were no new WRAMC patients. Response is still masked. There have been few toxicities, mostly hematologic.

CONCLUSIONS
Study is closed to further accrual on July 11, 1989, as there was a sufficient number of registrants. Data are under review; publications are pending.
REPORT DATE: 09/01/88

DETAIL SUMMARY SHEET

TITLE: POG 8650 National Wilm's Tumor Study - 4; A POG Phase III Study

KEYWORDS: Wilm's tumor, renal tumor, nephroblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Oct 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) to gather data on morphology and to correlate this with treatment and clinical outcome; b) to refine clinical trials to reduce therapy to simpler and shorter regimens.

TECHNICAL APPROACH
Give the usual 5-day course on one day (has been done with other tumors) and examine results in randomized trial with current therapies.

PRIOR AND CURRENT PROGRESS
In November 1987, the protocol was amended to include Stages II-IV anaplastic patients and dosage modifications were made for actinomycin because of recognition of a new hepatic toxicity in young registrants. The informed consent was modified, the revised protocol IRB approved in April 1988. One new registrant at WRAMC; all 4 registrants doing well.

CONCLUSIONS
None as yet.
TITLE: POG 8662 Phase II Trial of Mitoxantrone (DHAD) in ALL

KEYWORDS: mitoxantrone, DHAD, relapse

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Nov 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine response rate for mitoxantrone (DHAD) administered to children who have failed Acute Lymphocytic Leukemia (ALL) chemotherapy.

TECHNICAL APPROACH
DHAD is given intravenously five times daily and repeated every 3 weeks.

PRIOR AND CURRENT PROGRESS
Groupwide 28 patients through November 1987; none at WRAMC.

CONCLUSIONS
Too early. Toxicity was mild myelosuppression.
DETAIL SUMMARY SHEET

TITLE: POG 8651 Osteosarcoma Study 2: A Randomized Trial of Pre-Surgical Chemotherapy Vs. Immediate Surgery and Adjuvant Chemotherapy in the Treatment of Non-Metastatic Osteosarcoma, A POG Phase III Study

KEYWORDS: osteosarcoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jan 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To determine whether pre-surgical chemotherapy will improve survival of subjects with non-metastatic osteosarcoma of the extremity or resectable bone compared to up-front surgery; b) to determine the impact of this approach on limb-sparing procedures; c) to evaluate the relationship of pre-surgery response with prognosis; d) to study the tumor DNA content as a prognostic factor.

TECHNICAL APPROACH
Eligibility includes age less than 30 years; time less than 3 weeks from diagnosis, no prior history of cancer and no prior therapy. The tumor must be biopsy-proven high-grade, resectable, and non-metastatic. Chemotherapy includes high-dose methotrexate, adriamycin, cis-platinum, bleomycin, cytoxan and Actinomycin D. Pre-surgical chemotherapy randomization lasts 7 weeks.

PRIOR AND CURRENT PROGRESS
Groupwide accrual of 31 patients occurred through May 1988. Two registrants from WRAMC are thus far doing well. Data remains masked, but toxicity has been acceptable.

CONCLUSIONS
Pending.
TITLE: POG 8615 A Phase III Study of Large Cell Lymphomas in Children and Adolescents, A Comparison of Two Treatment Regimens, ACOP+ Vs. APO

KEYWORDS: lymphoma, large cell

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group
STATUS: Ongoing
APPROVAL DATE: Feb 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To determine the influence of cytoxan therapy in advanced-stage large cell lymphomas in children and adolescents by comparing in a randomized prospective study the efficacy and toxicity of the above two modified regimens; b) to study these two regimens without adjuvant XRT and with only 12 months of therapy; c) to study the clinical and biologic characteristics of these large cell lymphomas.

TECHNICAL APPROVAL
Children less than 21 years old with histologically confirmed large cell lymphomas of Murphy Stage III and IV are eligible. Randomization is at the start of therapy. Modified ACOP+ uses a Vincristine/Cytoxan/Adriamycin/Prednisone induction followed by 1 year of multiagent maintenance therapy. Modified APO has a similar induction minus cytoxan and a similar 12 month maintenance. Both arms are given IT MTX.

PRIOR AND CURRENT PROGRESS
As of February 15, 1989, thirty-nine patients have been accrued groupwide, none are from WRANC. Accrual completion is expected by 1992. Comparison of efficacy between arms remains masked. Toxicity is tolerable.

CONCLUSIONS
Study should remain open to allow completion of patient accrual.
TITLE: POG 8617/8618 Therapy for B-Cell Acute Lymphoblastic Leukemia and Advanced Diffuse Undifferentiated Lymphomas, A Phase II Study

KEYWORDS: B-cell leukemia, lymphoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Feb 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To estimate CR rate and disease-free survival in patients with Stage IV diffuse undifferentiated (DU) NHL and B-ALL; b) to estimate reinduction rate and DFS for patients in relapse with NHL.

TECHNICAL APPROACH
For POG 8617, children with untreated B-ALL, Stage IV DU-NHL, or diffuse lymphoma, non-lymphoblastic histology, in first relapse are eligible. For POG 8618, CNS relapse for NHL with non-lymphoblastic NHL, and isolated CNS relapse of 8617 registrants. Regimen involves initial Vincristine/Cytoxan/Adriamycin with intrathecal chemo, followed by IV MTX-ARA-C. Thio-Tepa is substituted for IT MTX/ARA-C on 8618. The consolidation phase uses the same regimen in 3 more courses.

PRIOR AND CURRENT PROGRESS
Study accrued 34 patients of which two have died and five have recurred. No WRAMC registrants. Toxicity remains severe but is considered manageable. Study remains open.

CONCLUSIONS
Pending.
TITLE: POG 8633/8634 The Treatment of Children Less Than Three Years of Age with Malignant Brain Tumors Using Postoperative Chemotherapy and Delayed Irradiation, A POG Phase II Study

KEYWORDS: medulloblastoma, brain irradiation, infant brain tumor

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STUDY OBJECTIVE
a) To determine if postoperative chemotherapy in children < 3 years old with brain tumors will allow delay of cranial irradiation; b) to assess the response and toxicity rates.

TECHNICAL APPROACH
After surgery infants are given four drugs over 2 months. If a good response occurs, this is continued for 2 years and then radiation is given. If there is not a complete response, radiation is given earlier.

PRIOR AND CURRENT PROGRESS
As of August 1988, there have been 104 patients registered on POG 8633, which is near the accrual objective. WRANC registered two patients over the last year; one is alive and in stable condition; one was transferred following registration. Nine patients were excluded from study analysis as they had complete resection following chemotherapy. It is still too early to estimate response rates as a large number of patients are to be assessed after surgery and several subjects have not completed chemotherapy long enough for response evaluation. Preliminary results show that for at least 50% of patients aged 2 to 3 years, it may be appropriate to delay radiation treatment for one year. Data on POG 8634 are still pending.

CONCLUSIONS
Study should remain open while remaining patients are accrued and data are evaluated.
REPORT DATE: 04/10/89

DETAIL SUMMARY SHEET

TITLE: POG 8741/8742 Treatment of Stage D Neuroblastoma in Children Greater than 365 Days at Diagnosis, A POG Phase II/III Study

KEYWORDS: neuroblastoma, ifosfamide, metastatic neuroblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Apr 1987

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
To evaluate response rates in poor prognosis neuroblastoma with phase II chemotherapy prior to conventional therapy.

TECHNICAL APPROACH
Cycles of phase II drugs are given to evaluate their potential use against neuroblastoma. The first drug is Ifosfamide. The response is evaluated; then conventional chemotherapy is given.

PRIOR AND CURRENT PROGRESS
Registrants on POG 8341 are currently being randomized between CHIP and CBDCA as the ifosfamide arm has closed. Accrual groupwide has been 64 as of May 9, 1988, with at least 4 partial responses on each arm (including IFOS). WRAMC has registered 3 patients since the approval date. Groupwide, there have been 57 patients registered on the CECA arm of POG 8742 and 29 on the HDP/VP/CA arm. One WRAMC patient recurred while on POG 8742. One is being considered for BMT and the other has completed BMT. WBC.ANC count lowering have been the most common toxicity on both stratum.

CONCLUSIONS
Study is to remain open. Adria laboratories will no longer be responsible for monetary compensation. The company has also requested access to patient data.
TITLE: POG 8638: Randomized Phase II Study of Carboplatin Vs. CHIP in the Treatment of Children with Progressive or Recurrent Brain Tumors

KEYWORDS: brain tumors, platinum

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine the effectiveness of carboplatin (CBDCA) and CHIP in the treatment of children with progressive or recurrent brain tumors; b) to compare the toxicities associated with each agent.

TECHNICAL APPROACH
Children less than 21 years of age at initial diagnosis with recurrent or progressive brain tumors are eligible if not previously on more than one phase II new agent study and have had no previous treatments with either drug. Patients are randomized to CHIP or CBDCA, and receive two courses followed by evaluation for response. Chemotherapy is continued for 3-4 weeks if response occurs.

PRIOR AND CURRENT PROGRESS
Groupwide accrual of 126 patients occurred as of May 1988. WRAMC has registered two patients, one of whom had progressive disease and subsequently died two months after two courses of therapy. The other patient has begun to show progressive disease after four months of therapy. No severe toxicities have been noted. Data evaluation is pending.

CONCLUSIONS
Study should remain open.
REPORT DATE: 04/03/89

DETAIL SUMMARY SHEET

TITLE: POG 8743: Treatment in "Better Risk" Neuroblastoma, POG Stage B (All Ages), And POG Stage C,D, and DS (IVS) Less Than 365 Days, A POG Phase III Study

KEYWORDS: neuroblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group
STATUS: Ongoing
APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To identify patients who fail to achieve CR with Cytoxan/Adriamycin and delayed surgery; b) to alter therapy in patients using CDDP & VM-26, and to evaluate their CR/survival rate; c) to evaluate survival in "better risk" and Stage IV-S patients, when randomized between observe only and CYC/ADR chemo; d) to evaluate the prognostic value of LDH, N-MYC, NSE and serum ferritin obtained at diagnosis.

TECHNICAL APPROACH
The patients eligible are all Stage B < 21 years and Stage C, D or DS (IVS) < 365 days. Subjects with recurrent disease, Stage A and Stage DS < 365 days are also eligible. The above lab parameters are mandatory. All patients receive one course of Cytoxan/Adriamycin followed by continued induction depending on age and on tumor mitotic index.

PRIOR AND CURRENT PROGRESS
Through May 1988, there were 49 patients registered groupwide. One registrant is from WRAMC and is disease-free. Toxicity has been tolerable. Response and survival data are still masked.

CONCLUSIONS
Study should remain open.
REPORT DATE: 05/11/89

DETAIL SUMMARY SHEET

TITLE: "OG 8704: T-Cell #3 Protocol, A POG Phase III Study

KEYWORDS: leukemia, T-cell

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine a) the efficacy of a multi-agent regimen against childhood T-cell leukemia and advanced T-cell Lymphoma, b) the advantage gained with addition of high does-L-asparaginase to the regimen, and c) the biology of these diseases.

TECHNICAL APPROACH
Children aged 12 months to 21 years are eligible. Simultaneous registration occurs on POG 8600 (leukemia classification protocol). No prior therapy is allowed. The Lymphoma must be advanced stage. Pathology review required. Treatment was randomized to yes or no L-asp during maintenance which lasts 90 weeks. CNS irradiation occurs for high white counts and CNS disease.

PRIOR AND CURRENT PROGRESS
Through November of 1988, 182 patients have been registered groupwide, none of whom are from WRAMC. Toxicity has been considerable, but reversible. Induction response has been excellent (99% in T-ALL and 95% in T-NHL).

CONCLUSIONS
Study should remain open until accrual is met.
REPORT DATE: 05/11/89

DETAIL SUMMARY SHEET

TITLE: POG 8631: Medulloblastoma Favorable Prognosis: Randomized Study of Reduced Dose Irradiation to Brain and Spinal Contents Vs. Standard Dose Irradiation, A POG Phase III Study in Conjunction with CCSG

KEYWORDS: medulloblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jun 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine patterns of recurrence, disease-free survival and survival; and b) to prospectively evaluate CNS functions of patients with favorable prognosis medulloblastoma given standard versus reduced dose radiotherapy.

TECHNICAL APPROACH
Children aged 3 to 21 years with diagnosed medulloblastoma are eligible. Total or almost total resection must have been accomplished, and no dissemination beyond the posterior fossa documented. No prior chemotherapy. Registrants on either arm will receive 5400 R to posterior fossa, but cerebrum and spine will receive either a standard 3600 R or reduced 2340 R.

PRIOR AND CURRENT PROGRESS
As of November 1988, there have been forty-four patients registered groupwide, and there have been no WRAMC patients registered. On June 7, 1988, the eligibility requirements were changed to include patients with stage T3A medulloblastoma. Recurrence and survival statistics remain blinded.

CONCLUSIONS
Study should remain open.
TITLE: POG 8695: A POG Pilot Study of Front-Loading Chemotherapy in Children with Increased Risk Medulloblastoma

KEYWORDS: medulloblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To evaluate feasibility and toxicity of pre-XRT chemotherapy in treating newly diagnosed increased-risk medulloblastoma; b) to measure response to the regimen of Cis-platinum, vincristine, and high dose cytoxan prior to irradiation; c) to evaluate the feasibility of centralized rapid neuroradiology review of pre-study CT scans and myelographic in determining patient eligibility.

TECHNICAL APPROACH
Children between 3 and 21 years with advanced medulloblastoma are eligible. Treatment must begin within 4 weeks of initial surgery/biopsy. No previous chemotherapy is allowed. Drugs are given IV over first 60 days, followed by irradiation at 180 rad/day to cranium and spine with boost to posterior fossa. Evaluation for response occurs at 6 and 9 weeks into therapy.

PRIOR AND CURRENT PROGRESS
As of November 1988, there were 26 registrants groupwide, none from WRAMC. Accrual has been satisfactory and toxicity tolerable. Most notable toxicity is severe leukopenia and moderately severe nausea and vomiting. Delays in XRT delivery have occurred because of tumor-induced clinical instability and toxicities from chemotherapy. It is too early for efficacy and survival conclusions. Study appears to be feasible without further amendment.

CONCLUSIONS
Study should remain open.
REPORT DATE: 06/09/89

DETAIL SUMMARY SHEET

TITLE: POG 8739: Evaluation of Alpha Interferon in the Treatment of Recurrent Brain Tumors in Children, A POG Phase II Study

KEYWORDS: interferon (IFN), brain tumors

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of <IFN in children with brain tumors resistant to standard therapy in regard to response rate with different histologic subtypes and duration of response to <IFN.

TECHNICAL APPROACH
Registrants are less than 21 years old with measurable tumors, having not received chemotherapy in preceding 2 weeks or radiation therapy in the preceding 3 months. Ten megaunits of IFN are given IV 5 dys/week for 4 weeks, and if responsive, subjects receive subsequent 4 week courses. Evaluation of response is at 4 weeks, or every other subsequent course.

PRIOR AND CURRENT PROGRESS
There have been 15 patients registered groupwide since August of 1988 and there have been no WRAMC registrants. As of yet, no analysis of data has been reported.

CONCLUSIONS
Study should remain open; results are pending.
DETAIL SUMMARY SHEET

TITLE: POG 8661: Evaluation of CHIP in Malignant Solid Tumors, A POG Phase II Study

KEYWORDS: CHIP, solid tumors, POG

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the response rate to CHIP in patients with recurrent malignant tumors resistant to conventional therapy and evaluate toxicity of CHIP in these patients.

TECHNICAL APPROACH
Registrants are children < 21 years with tumors not amenable to standard therapy with no prior Phase I therapy trials and no more than 2 Phase II chemotheraphy trials. CHIP, a platinum analog is given IV, followed by evaluation. Those responding or not progressive continue on therapy and on the study.

PRIOR AND CURRENT PROGRESS
As of November 1988 there have been 55 registrants groupwide. Stratum 11 (patients with rhabdomyosarcoma, Wilm's tumor, and osteosarcoma) has been closed due to lack of response to CHIP. No subjects have been registered at WRAMC to date.

CONCLUSIONS
Study should remain open.
TITLE: POG 8751: Low Dose Methotrexate in the Treatment of Rhabdomyosarcoma, A POG Phase II Study

KEYWORDS: methotrexate (MTX), rhabdomyosarcoma, POG

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
To determine a) the response rate and duration of response to children with rhabdomyosarcoma treated with low-dose methotrexate (LD MTX) given every 6 hours for 6 doses, and b) the type and duration of toxicity of low dose sustained oral methotrexate.

TECHNICAL APPROACH
This is a single armed Phase II study of children with biopsy-proven rhabdomyosarcoma unresponsive to standard therapy. Patients cannot have had previous exposure to MTX. MTX is given orally every 6 hrs for 6 to 8 doses per course and designed to sustain MTX levels of 0.5 uM for > 36 hours per pulse.

PRIOR AND CURRENT PROGRESS
Through November 1988, there have been 16 registrants on study, none of whom were WRAMC registrants. MTX levels have been greater than 0.5 uM in 22 out of 24 courses with a median of 0.9 uM and a range of 0.2-3.1 uM. Toxicities have mostly been hematologic and are tolerable. Response is masked so far.

CONCLUSIONS
Study should remain open.
TITLE: POG 8759: The Effectiveness of Phase II Agents in Untreated Metastatic Osteosarcoma or Unresectable Primary Osteosarcoma Vs. Previously Treated Recurrent Osteosarcoma, POG Phase II/III Study

KEYWORDS: osteosarcoma, recurrent, primary

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To study the response rate to ifosfamide in newly diagnosed metastatic unresectable osteosarcoma or in osteosarcoma presenting as a second malignancy to study the addition of the agent to a standard treatment regimen for effectiveness a toxicity; b) to gain biologic information about the tumor.

TECHNICAL APPROACH
Eligible new patients (biopsy proven) will be treated with two courses of ifosfamide up front, evaluated for response (including biopsy and a surgical excision) and then continued on standard chemotherapy and ifosfamide. Those registrants having recurred will continue, if responsive, on ifosfamide only.

PRIOR AND CURRENT PROGRESS
Recently, one patient was registered from WRAMC (there are, as of June 1989, no others). There are 51 registrants groupwide (as of November 1988). It is too early to judge response and overall toxicity for strata 1 and 3. For stratum 2, there were 30 patients: 2 had CR, 1 mixed, 13 NR, and 14 have PD. Various toxicities have been noted on stratum 2, and these have been tolerable.

CONCLUSIONS
Stratum 1 and 3 should remain open for further patient accrual.
DETAIL SUMMARY SHEET

TITLE: POG 8763: Evaluation of Response and Toxicity of Ifosfamide and VP-16-213 in Children with Resistant Malignant Tumors, A POG Phase II Study

KEYWORDS: solid tumors, ifosfamide/VP16

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the antitumor activity and toxicity of ifosfamide (IFX) plus VP-16 against a spectrum of childhood malignant solid tumors resistant to conventional chemotherapy.

TECHNICAL APPROACH
Registrants must be less than 21 years with confirmed and measurable solid tumor and off therapy. VP-16 and IFX are given in 3 day courses 3 weeks apart, for 18 months if response occurs.

PRIOR AND CURRENT PROGRESS
There have been 5 WRAMC registrants thus far (through June 1989), two registered in the last year. Two patients have progressed and died, and three are stable. Groupwide, there have been 231 registrants. Response in the three strata were closed to further accrual (Ewing's sarcoma, neuroblastoma, and soft tissue sarcoma) has been approximately 25% (CR/PR). Toxicity has not caused significant interference with therapy.

CONCLUSIONS
Remaining strata should remain open.
TITLE: POG 8719: Trial of Shortened Therapy without Maintenance for the Treatment of Localized Non-Hodgkin's Lymphoma, A POG Phase III Study

KEYWORDS: non-Hodgkins lymphoma, localized

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
a) to compare the survival and disease-free survival in patients receiving 9 weeks of induction/consolidation versus patients receiving similar 9 weeks + 24 weeks of maintenance; and b) to continue cancer biopsy studies of POG #8315.

TECHNICAL APPROACH
Children under 21 years with no prior therapy are eligible. Induction/consolidation therapy is with Cytoxan/Adriamycin/Vincristine and Prednisone with intrathecal medications for head and neck primaries only. Maintenance therapy uses oral 6MP/MTX.

PRIOR AND CURRENT PROGRESS
Accrual is above the expected rate (62 registrants groupwide; 44 are fully able to be evaluated) with no WRAMC registrants. Toxicity is unremarkable. Response is 92% CR for 54 patients. There have been 6 treatment failures (4 induction failures, 2 relapses).

CONCLUSIONS
Accrual objectives should be met by August 1991--(one year ahead of schedule). Study should remain open until accrual completed.
DETAIL SUMMARY SHEET

TITLE: POG 8693: VP-16, AMSA + 5-Azacytidine in Refractory Acute Nonlymphocytic Leukemia A POG Pilot Study

KEYWORDS: acute nonlymphocytic, leukemia, VP-16

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Completed
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the toxicity of VP-16/AMSA combination on patients with refractory Acute Nonlymphocytic Leukemia, followed by same evaluation of the 3 drug regimen.

TECHNICAL APPROACH
All recurrent ANLL patients under age 21 years, except those with local CNS or extramedullary recurrences. Treatment I: AMSA plus VP-16, Treatment II: AMSA plus VP-16 plus 5-AZA.

PRIOR AND CURRENT PROGRESS
Groupwide, there have been 61 registrants as of December 1, 1988 with none from WRAMC. The study was closed to further accrual as of November 7, 1988 due to sufficient registrant accrual. Toxicities included pancytopenia and infection (resuaths) that required blood products and antimicrobial agents. Other significant toxicities were mucositis, nausea, and vomiting. There were 13 CRs out of 35 registrants on treatment arm I and 7 CRs out of 16 registrants on treatment arm II (significant response rates). Randomized treatment developed from this pilot is ongoing (POG 8820).

CONCLUSIONS
Study closed to further accrual. Publications on toxicity pending.
TITLE: POG 8726: Alpha-Interferon in Histiocytosis X and Other Non-Malignant Histiocytic Disease, A POG Phase II Study

KEYWORDS: histiocytosis X, interferon

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine a) the disease-free response of patients with histiocytosis X (HX) and related diseases to treatment with alpha-interon (<-IFN) and b) the toxicities of <-IFN in children with HX and related diseases.

TECHNICAL APPROACH
Registrants < 21 years of age with biopsy-proven recurrent HX after conventional therapy with one or more boney lesions, or recurrent HX variants. No concurrent chemotherapy in prior <-IFN.

PRIOR AND CURRENT PROGRESS
There are seven registrants groupwide through April 1989, none from WRAMC. Responses noted were 1CR, 2PR. No new toxicities.

CONCLUSIONS
Study should remain open through September 1989. Manuscript is pending.
REPORT DATE: 08/22/89

DETAIL SUMMARY SHEET

TITLE: POG 8761: A Phase II Study of Homoharringtonine for the Treatment of Children with Refractory Nonlymphoblastic Leukemia

KEYWORDS: nonlymphoblastic leukemia, leukemia, homoharringtonine

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics

SERVICE: Pediatric Oncology Group

STATUS: Ongoing

APPROVAL DATE: Sep 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the efficacy of homoharringtonine (HHT) for the therapy of refractory acute non-lymphoblastic leukemia (ANLL) in children, and further assess the toxicity of HHT.

TECHNICAL APPROACH
Registrants must be a) less than 21 years; b) in relapse, with recovery from prior therapy; c) with no current therapy, and with no CNS disease. Treatment is 10 day continuous IV courses, given every 21 days.

PRIOR AND CURRENT PROGRESS
Groupwide, there have been 11 registrants; none are from WRAMC. Toxicity has been acceptable (mostly hematologic) and response is still masked.

CONCLUSIONS
Study should remain open.
TITLE: POG 8731: A Phase II Study of Low-Dose "Continuous" Oral Methotrexate in the Treatment of Children with Progressive or Recurrent Brain Tumors

KEYWORDS: methotrexate, brain tumors

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the effectiveness of this regimen, and evaluate toxicity.

TECHNICAL APPROACH
Eligibility criteria include age less than 21 years old with recurrent or progressive brain tumor no more than one previous phase II agent for treatment, and measurable residual tumor.

PRIOR AND CURRENT PROGRESS
Response data are too preliminary. Toxicity was significant, particularly in those heavily pretreated registrants. Seven accrued registrants groupwide through March 1988, none at WRAMC.

CONCLUSIONS
Protocol should stay open for accrual.
TITLE: POG 8764: Chemotherapy Regimen for Early and Initial Induction Failures in Childhood Acute Lymphoblastic Leukemia, A POG Phase II Study

KEYWORDS: leukemia, lymphoblastic

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Oct 1987

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
a) To use a continuous infusion ARA-C/VM-26 induction regimen to assess remission rate and one year DFS; b) To use CDNA and oncogene probes for characterizing the unique subpopulation.

TECHNICAL APPROACH
Eligible patients must have residual disease following conventional induction therapy or have relapsed within 6 weeks after initial remission induction.

PRIOR AND CURRENT PROGRESS
No data to date. No registrants as yet at WRAMC.

CONCLUSIONS
Study should remain open.
TITLE: POG 8823/24: Recombinant Alpha Interferon in Childhood Chronic Myelogenous Leukemia, Phase II

KEYWORDS: leukemia, chronic myeloid, interferon

PRINCIPAL INVESTIGATOR: Maybee, David COL MC
ASSOCIATES: Hastings, Constance MD

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group
STATUS: Ongoing
APPROVAL DATE: Dec 1987

FUNDING: Current FY: $2,116 Previous FYs: $0 Total: $2,116

STUDY OBJECTIVE
To determine a) toxicity, rate and duration of response to therapy with recombinant alpha-interferon (a-IFN) for newly diagnosed "adult" CML and for "juvenile" CML occurring within the first two decades of life; b) obtain prospective clinical, laboratory, and genetic data on cases of ACML and JCML treated with recombinant a-IFN.

TECHNICAL APPROACH
Qualified registrants must be 21 years of age or less, no previous treatment except for emergency lowering of tumor burden. All subjects must meet appropriate specific physical and laboratory eligibility criteria for AMCL or JMCL. Monitoring of biologic markers will be performed at several reference labs, including WRAMC Department of Pediatrics lab (serum IFN, B12, LAP, fetal Hb, and muramidase). Patient cells will be separated and cryopreserved at WRAMC and marrow morphology reviewed. IFN will be given as IV daily for 14 day induction followed by a subcutaneous IFN injection three times a week for maintenance therapy for a minimum of 18 months, according to response.

PRIOR AND CURRENT PROGRESS
Nine patients are registered groupwide through April 1, 1989, none of whom are WRAMC registrants. Patients registered on this study are being monitored closely for toxicity, as one death due to apparent vascular leak with pulmonary edema and severe toxicity with nephric vasculitis has occurred in two JCML patients.

CONCLUSIONS
Study should remain open.
REPORT DATE: 05/11/89

DETAIL SUMMARY SHEET

TITLE: POG 8696/97: Treatment of Hepatoblastoma (HB) with Surgery, Chemotherapy, and Radiation Therapy

KEYWORDS: hepatoblastoma

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Apr 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To obtain data on natural disease course in completely resected, favorable histology HB with surgery alone; b) to evaluate toxicity of and response to DDP + VCR + 5-FU used in conjunction with surgery and used for those with residual disease the addition of radiation therapy.

TECHNICAL APPROACH
Patients 21 years of age or younger diagnosed with HB, previously untreated except by surgery (entry within 4 weeks post-surgery). POG 8696 is stage I disease, which is observed after surgery, and POG 8797 is for disease that has advanced and includes induction therapy (DDP x 2 weeks, DDP + VCR + 5-FU x 5) and radiation therapy for more advanced disease.

PRIOR AND CURRENT PROGRESS
As of January 16, 1988, there have been 5 patients registered on POG 8696 and 54 patients registered on POG 8697. All patients except one have had some response to chemotherapy. Toxicity has been acceptable. No WRAMC subjects have entered the study.

CONCLUSIONS
Study should remain open to further patient accrual.
TITLE: POG 8710: Protocol for Second Induction and Maintenance in Childhood Acute Lymphoblastic Leukemia (SIMAL #5), A POG Phase III Study

KEYWORDS: lymphoblastic leukemia

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: May 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To compare DFS of a regimen including MTC/VM-26 with a control regimen; b) to compare DFS of a regimen including IFN with a control regimen; c) to estimate and compare remission duration and toxicity in patients receiving either MTX/VM-26 or IFN as continuous therapy components. d) to determine the prognostic value of clinical and biological features at relapse, including immunophenotyping and cytogenetics in all patients, IFN receptors and oncogene profile in IFN patients.

TECHNICAL APPROACH
Patients are 21 years or younger diagnosed with non-T, non-B acute lymphoblastic or undifferentiated leukemia on initial classification or non-Hodgkin's lymphoma with first marrow relapse (more than 25% blasts), first hematologic relapse, or first overt extramedullary relapse (CNS disease excluded) while receiving chemotherapy, or within 6 months of stopping therapy. Patients are not eligible for higher priority protocol. Induction is given over 4 weeks (PBDA/TTT); then the patient's treatment is randomized between the 3 arms described in the above objective.

PRIOR AND CURRENT PROGRESS
As of November 1988, 75 patients have been registered groupwide; none from WJAMC. Data from 44 patients shows that 32 patients achieved marrow remission following the 4 week induction. Eleven patients failed induction and one patient was removed from study for CNS toxicity.

CONCLUSIONS
Study should remain open until patient accrual goals are met.
TITLE: POG 8725: Randomized Study of Intensive Chemotherapy (MOPP/ABVD Plus/Minus Low Dose Total Nodal Radiation Therapy in the Treatment of Stages IIB, IIIA2, IIIB, IV Hodgkin's Disease in Pediatric Patients, Phase III

KEYWORDS: Hodgkin's disease, nodal radiation, MOPP/ABVD

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine in a randomized study whether the addition of low dose total nodal irradiation to 4 courses of MOPP/ABVD combination chemotherapy will improve the duration of complete remission and survival when compared with patients who have had chemotherapy only.

TECHNICAL APPROACH
Patients are 21 years and younger who have previously untreated, histologically proven Hodgkin's disease (stage IIB, IIIA2, IIIB, and IV).

PRIOR AND CURRENT PROGRESS
Patient accrual groupwide has been excellent (38 patients as of November 1988). Preliminary data show that chemotherapy is well tolerated and most patients respond well. It is too early for toxicity data related to the addition of radiation therapy. No WRAMC registrants are present.

CONCLUSIONS
Study should remain open.
STUDY OBJECTIVE
The purpose of this study is to evaluate the separate and combined contributions of three individual difference factors (private self-consciousness, self-efficacy, and anxiety) and two experimental treatment conditions (nicotine chewing gum and relapse prevention training) on two outcome measures (smoking status and persistence in treatment).

TECHNICAL APPROACH
Controlling for private self-consciousness, subjects will be randomly assigned to one of four treatment levels in order to analyze the effects of nicotine chewing gum and/or relapse prevention training on outcome and persistence in treatment. Analysis will be conducted using logistic regression analysis in order to assess whether a significant amount of the total variation of each dependent measure (smoking status and persistence) is due to its regression on the 5 covariate predictors (private self-consciousness, self-efficacy, anxiety, a nicotine dependence measure and sex) and treatment conditions.

PRIOR AND CURRENT PROGRESS
Since the study was approved in January, 1988, eighty-four subjects have participated in the study. There have been no adverse reactions to the use of Nicorette reported by subjects assigned to the group utilizing pharmacologic means as an adjunct to treatment. It is premature to assess the statistical significance of the stated hypotheses due to an insufficient number of subjects to date. However, in pooling the groups for a preliminary estimate of outcome, it appears that approximately 42% of the subjects have reportedly quit smoking at 3 months.

CONCLUSIONS
It is premature to draw any conclusions at this time.
TITLE: POG 8821: Intensive Multiagent Therapy Vs. Autologous Bone Marrow Transplant Early in First CR for Children with Acute Myelocytic Leukemia - A Phase III Study

KEYWORDS: autologous bone marrow, transplant, acute myelocytic leukemia

PRINCIPAL INVESTIGATOR: Maybee, David COL MC

DEPARTMENT: Department of Pediatrics
SERVICE: Pediatric Oncology Group

STATUS: Ongoing
APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine DFS with intensive chemotherapy using non-cross resistant drug pairs; b) To determine if short-term intensive therapy with autologous bone marrow transplant (with 4-Hydroperoxycyclophosphamide purge) is effective therapy and to compare the two regimens' results and to correlate outcome with clinical and laboratory features.

TECHNICAL APPROACH
Registrants are 21 years of age and younger with previously untreated AML. Induction for both arms uses intrathecal Ara-C; daunomycin; Ara-C; 6-TB; followed by high dose Ara-C. Patients are then randomized to receive either IT Ara-C, VP-16/5-AZA plus ABMT with 4-HC purge or IT Ara-C, HDAC/daunomycin, Ara-C/6-TG, VP-16/5-AZA.

PRIOR AND CURRENT PROGRESS
Through January 1989, 59 subjects were registered groupwide. Through 22 August 1989, there are 2 WRAMC registrants. The protocol was amended in June 1989 to clarify the randomization criteria. This included the section dealing with m3 marrow group's IT scheduled criteria and for beginning the second course of HDAC, and for assigning infants was changed after notable toxicity (3/5 initial infant registrants w/CNS toxicity) and new reports of neurotoxicity with HDAC appeared in the literature. No other major toxicities occurred. Response is still masked.

CONCLUSIONS
Accrual progress is high, but fewer number of patients are eligible for randomization than expected. Every effort should be made to increase the number of patients eligible for randomization. The study should remain open.
STUDY OBJECTIVE
The purpose of this study was to evaluate a stress management program and
determine overall effectiveness and cost efficiency.

TECHNICAL APPROACH
Two research hypotheses addressed effectiveness. The first, volunteers who
attended a stress management program and practiced relaxation on daily basis
and lower anxiety following treatment than volunteers who did not attend, and
second, had lower blood pressure. Cost efficiency was addressed by two research
hypotheses. The benefits of the stress management seminar for the employer and
second, benefits exceeded personal costs for the individual. Demand analysis
from economic theory served as the conceptual framework for the study.

PRIOR AND CURRENT PROGRESS
Subjects were enrolled in the Army’s FIT TO WIN program and targeted for the
stress management course. Prior to random assignment of subjects to group,
volunteers were stratified according to their level of external stressors.
Effectiveness was measured by examining state anxiety, stress related physical
symptoms and blood pressure, measured by the Dynamap automatic monitor. In
addition, state anxiety and blood pressure were monitored one month following
the intervention to examine the effect over a longer period of time. Cost
efficiency determinations utilized the variables of physical complaints and
blood pressure readings as compared to cost. Analysis of covariance was
utilized to address overall effectiveness with preintervention scores as
covariates. Effectiveness was supported by significant differences in stress
related physical symptoms for the treatment group.

CONCLUSIONS
The findings support the effectiveness of a stress management program as part
of a larger health promotion program. Results of cost evaluation demonstrate
the benefits from a program with relatively low overall costs. Study completed.
DETAIL SUMMARY SHEET

TITLE: The Effect of Two Types of Exercise Programs on Body Boundary in Patients Diagnosed with Schizophreniform Disorder

KEYWORDS: body boundary, schizophreniform

PRINCIPAL INVESTIGATOR: West, Pat DAC

DEPARTMENT: Department of Psychiatry

STATUS: Ongoing

APPROVAL DATE: Mar 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine if an exercise program and an exercise program delivered with focusing technique differentially effects changes in body boundary in patients diagnosed with schizophreniform disorder.

TECHNICAL APPROACH
No modifications have occurred to the original protocol. Subjects were randomly assigned to 3 groups (two treatment, one control). All subjects were pre and post-tested on Barrier and Penetration Subscale of the Body Distortion Questionnaire. Treatment duration was three weeks. Analysis of covariance will be performed.

PRIOR AND CURRENT PROGRESS
Twentyfive subjects were enrolled in the study during the current year bringing the total number of subjects enrolled in the project since September 1987 to 39. There have been no adverse reactions due to the study but a total of 12 subjects have been withdrawn due to discharge or transfer to a VA facility, leaving 27 study subjects. There have been no specific benefits to the subjects.

CONCLUSIONS
A single factor multivariate analysis of covariance (MANCOVA) with three criterion variables and six covariates has found no significant effect among groups. We are contemplating of completion of the study short of the projected 60 subjects.
REPORT DATE: 03/31/88

DETAIL SUMMARY SHEET

TITLE: Evaluation of Treatment Choices Used in Alcohol Rehabilitation Programs

KEYWORDS: alcohol, rehabilitation, treatment

PRINCIPAL INVESTIGATOR: Chermol, Brian COL MS
ASSOCIATES: Glenn, Hodges CPT

DEPARTMENT: Department of Psychiatry

STATUS: Ongoing

APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Examine the effectiveness of three treatment approaches with alcohol dependent patients in a military rehabilitation program.

TECHNICAL APPROACH
1) Arrange times with patients in order to minimize lost time from duty and not affect the treatment they are receiving from ADAPCP. 2) They are placed in one of 5 treatment research groups. 3) Assessment tools consist of: a) general mood indicator. b) self-esteem/communication evaluation, self-analysis by video tape.

PRIOR AND CURRENT PROGRESS
WRAMC allowed data collection to begin March, 1988 because: a) HSC needed special clearance from Deputy Chief of Personnel to allow the study to begin. b) WRAMC required additional certification in CPR before CPT Glenn could begin seeing patients as research subjects. Current data collection process is proceeding with a 50-60% participation rate.

CONCLUSIONS
Study has not been completed at this time. No additional elements or changes are required.
REPORT DATE: 06/07/89

DETAIL SUMMARY SHEET

TITLE: Anafranil Protocol 62, Humanitarian Use of Anafranil in Obsessive Compulsive Disorder

KEYWORDS: anafranil, clomipramine, obsessive

PRINCIPAL INVESTIGATOR: Rock, Nicholas COL MC
ASSOCIATES: Shearer, Robert Col MC

DEPARTMENT: Department of Psychiatry

STATUS: Completed
APPROVAL DATE: Jul 1987

FUNDING: Current FY: $ 2,500    Previous FYs: $ 0    Total: $ 2,500

STUDY OBJECTIVE
To evaluate the effectiveness of clomipramine (tricyline), serotonergic drug on the rituals (motor compulsions) and obsessive thoughts of subjects with the obsessive compulsive disorder (OCD).

TECHNICAL APPROACH
Increasing doses of medication (25 mg tablets) are planned to control the motor rituals and obsessive thought. The literature suggests 125 mg average dose. Length of time needed to permanently reduce the clinical problem is uncertain.

PRIOR AND CURRENT PROGRESS
Study was never implemented due to unforeseen difficulty with laboratory testing requirements from Ciba-Geigy also, Investigator has PCS'd in July 1988.

CONCLUSIONS
Discontinue protocol.
DETAIL SUMMARY SHEET

TITLE: Stability of Incidence of Head Injury in the U.S. Army

KEYWORDS: alcohol, rehabilitation, treatment

PRINCIPAL INVESTIGATOR: McCarroll, James LTC MS
ASSOCIATES: Glenn, Hodges CPT

DEPARTMENT: Department of Psychiatry

STATUS: Completed
APPROVAL DATE: May 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Examine the effectiveness of three treatment approaches with alcohol dependent patients in a military rehabilitation program

TECHNICAL APPROACH
1) Arrange times with patients in order to minimize lost time from duty and not affect the treatment they are receiving from ADAPCP. 2) They are placed in one of five treatment research groups. 3) Assessment tools consist of: a. general mood indicator. b. self-esteem/communication evaluation, self-analysis by video-tape. GRP 1. Btx + ST, 3. Btx + ST + RP, 4. Btx + ST + RP + FU, 5. Btx + FU

PRIOR AND CURRENT PROGRESS
Data analysis is completed and final copy being submitted to Clinical Investigation Research Committee for review. Data collection was completed by December 1988.

CONCLUSIONS
Treatment option provided to ADAPCP were helpful but did not produce a statistically significant difference in patient improvement scores.
TITLE: Visual Information Processing in Psychiatric Patients

KEYWORDS: vision, acuity, schizophrenia

PRINCIPAL INVESTIGATOR: Blair, Sidney CPT MC

DEPARTMENT: Department of Psychiatry

STATUS: Ongoing

APPROVAL DATE: Jul 1988

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
To compare vernier visual acuity in normal subjects and in psychiatric patients.

TECHNICAL APPROACH
Subjects attempt to discriminate computer-generated vernier stimuli. Responses are tallied and analyzed by computer.

PRIOR AND CURRENT PROGRESS
Prior progress showed that some psychiatric patients had marked right/left asymmetry in discrimination of vernier stimuli. Current results confirm that in normal subjects the experimental apparatus and procedure produce results comparable those seen in other studies of normal subjects.

CONCLUSIONS
Current progress indicates that the differences seen in prior work are not artifacts of the experimental apparatus and procedure.
TITLE: Differences in Proportions of Diagnosis Between Ethnic Groups: The Case of Puerto Rican Psychiatric Patients in the Military

KEYWORDS: Hispanic, diagnosis, Puerto Rican

PRINCIPAL INVESTIGATOR: Jones, Franklin MD
ASSOCIATES: Lazano, Mary PhD; Compton, Alan COL MC

DEPARTMENT: Department of Psychiatry

STATUS: Ongoing
APPROVAL DATE: Dec 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine whether Hispanic and other minority patients are diagnosed and manage differently from non-minority patients at WRAMC.

TECHNICAL APPROACH
Psychiatric records were reviewed for two years with sorting of all Hispanic surnamed patient in comparison with 100 randomly selected non-Hispanic Caucasian and 100 non-Hispanic Black patients. Demographic and symptom variables are collected and compared.

PRIOR AND CURRENT PROGRESS
Initial sorting data collection, and analysis of Hispanic patients has been accomplished, and a draft report has been written.

CONCLUSIONS
Hispanic patients are diagnosed and handled differently from other patients. There are more similarities between Insular and New York Puerto Ricans than differences.
DETAIL SUMMARY SHEET

TITLE: Intravenous Administration of I-131-6-B Iodomethylnorcholesterol for Adrenal Evaluation and Imaging

KEYWORDS: adrenal imaging, I-131 NP59

PRINCIPAL INVESTIGATOR: Anderson, Jay COL MC

DEPARTMENT: Department of Radiology

STATUS: Ongoing

APPROVAL DATE: Nov 1980

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Clinical evaluation of NP-59 as a diagnostic agent for the detection of cortical disorders. (This radiopharmaceutical is in the category of a Phase 3 IND radiopharmaceutical. Although these radiopharmaceuticals have been valuable in the evaluation of patients with Cushing's syndrome, primary aldosteronism, hypoandrogenism, radiopharmaceutical companies do not find it commercially profitable to seek an NDA.)

TECHNICAL APPROACH
The technical approach is unchanged. The radiopharmaceutical is obtained from the University of Michigan from Dr. Beierwaltes. The exam is only performed on those patients for whom the primary clinical physician believes potential information could be obtained and out weighs the potential risks.

PRIOR AND CURRENT PROGRESS
This radiopharmaceutical remains a valuable diagnostic tool. During this report period six studies were performed, and a total of 15 patients have been studied to date. There were no adverse reactions and no patient has withdrawn. All studies during this period have been clinically useful.

CONCLUSIONS
No conclusion can be made nor are any conclusions anticipated. Again, this is a standard IND to offer a diagnostic exam for patient benefit and not my benefit. In addition, this study saves WRAMC money because the patient is not referred to a civilian hospital to obtain the same exam.
DETAIL SUMMARY SHEET

TITLE: Technetium (Tc99m) Antimony Trisulfide Colloid - A Lymphoscintigraphic Agent

KEYWORDS: lymphoscintigraphy, antimony trisulfide, colloid

PRINCIPAL INVESTIGATOR: Anderson, Jay COL MC

DEPARTMENT: Department of Radiology

STATUS: Ongoing

APPROVAL DATE: Nov 1981

FUNDING: Current FY: $0  Previous FYs: $0  Total: $0

STUDY OBJECTIVE
Clinical evaluation of Tc99m Antimony Trisulfide Colloid in the evaluation of lymphnodes, lymphatics and/or bone marrow distribution. (This radiopharmaceutical is in the category of phase 3 IND radiopharmaceuticals.) Although these agents have been valuable in the evaluation of patients, radiopharmaceuticals companies do not find it commercially profitable to seek an NDA. As a result, in order to offer this diagnostic modality to the patients we serve, we must have a protocol

TECHNICAL APPROACH
The study is unchanged. The pharmaceutical is obtained from Cadema Company and labeled with the routine technetium 99m pertechnetate within our clinic. The exam is only performed on those patients for whom the primary clinical physician believes potential clinical information for the patient may be obtained. Any side effect is recorded on data sheets which are forwarded to the primary commercial company. The patient eligibility has been expanded to include pediatric patients and this change has been approved by the appropriate review boards.

PRIOR AND CURRENT PROGRESS
This radiopharmaceutical remains a valuable diagnostic imaging tool. Forty-nine patients were studied during this report year with an overall total of 187 patients. The number of studies reported to be effective on the physician form was forty-nine. No untoward effects have been observed.

CONCLUSIONS
None.
REPORT DATE: 08/25/89

DETAIL SUMMARY SHEET

TITLE: Diagnostic Imaging of Adrenal Medulla (Pheochromocytoma, Paragangliomas, and Neuroblastomas) with I-131 MIBG (Metaiodobenzylguanidine Sulfate)

KEYWORDS: pheochromocytoma, I-131 MIBG

PRINCIPAL INVESTIGATOR: Anderson, Jay COL MC

DEPARTMENT: Department of Radiology

STATUS: Ongoing

APPROVAL DATE: Sep 1984

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To evaluate the use of I-131 Metaiodobenzylguanidine Sulfate (I-131 MIBG) as an aid in the diagnosis, evaluation, and localization of pheochromocytomas, paragangliomas, neuroblastomas and/or adrenal medullary hyperplasia. This radiopharmaceutical has already been proven useful in the evaluation of disease noted above. Because no commercial company pursues approval by the FDA it remains in an IND status. To reduce cost, IND from FDA was obtained to offer scan at WRAMC.

TECHNICAL APPROACH
Since this protocol is to offer a diagnostic exam for the patient rather than to do a scientific study, no experimental design compilation of data, etc. will be done. All side effects are reported to the FDA. There is no modification to the original protocol.

PRIOR AND CURRENT PROGRESS
During the current reporting period of 21 July 1988 through 22 August 1989, seven (7) patients have had I-131 MIBG studies performed. This makes a total of 48 patients since the protocol was started in 1984. There have been no adverse reactions and no patient has withdrawn. Of the seven patients injected during this report period, all report having clinical utility.

CONCLUSIONS
No conclusions can be made nor are any conclusions anticipated. Again, this is a standard IND to offer a diagnostic exam for patient benefit. In addition, this saves WRAMC money because the patient is not referred to a civilian hospital to obtain the same exam.
TITLE: Strontium Sr-89 Chloride for Palliation of Bone Pain in Subjects with Metastatic Bone Disease

KEYWORDS: strontium 89, bone metastases, bone pain

PRINCIPAL INVESTIGATOR: Anderson, Jay COL MC

DEPARTMENT: Department of Radiology

STATUS: Completed

APPROVAL DATE: Jun 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To provide the isotope Sr-89 for the palliation of painful bone metastases in patients with prostate or breast carcinoma.

TECHNICAL APPROACH
No patients enrolled in the past year.

PRIOR AND CURRENT PROGRESS
This protocol is designed to allow the use of the investigational agent Sr-89 in the palliation of painful bone metastases. Although no patients have been treated under this protocol yet, the study will be kept open to allow for possible future treatments.

CONCLUSIONS
Amersham Corp the manufacturer and sponsor of this phase three IND has terminated WRAMC's participation in its geographically dispersed trial. No patients have been enrolled.
I

REPORT DATE: 08/04/89 WORK UNIT # 4535

DETAIL SUMMARY SHEET

TITLE: Pharyngeal and Esophageal Manifestations of Rheumatoid Arthritis

KEYWORDS: rheumatoid, arthritis, esophagus

PRINCIPAL INVESTIGATOR: Meglin, Allen CPT MC
ASSOCIATES: Dachman, Abraham MD

DEPARTMENT: Department of Radiology

STATUS: Ongoing
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To ascertain if there is a relationship between rheumatoid arthritis and esophageal disease. Similar diseases such as scleroderma are believed to have esophageal disease associated with it.

TECHNICAL APPROACH
Questionnaires and brief histories and physicals are performed to see if a patient has rheumatoid arthritis. Barium swallows are performed to see if the patient has esophageal disease. These two sets of data are then compared.

PRIOR AND CURRENT PROGRESS
At the time of this writing, barium swallows and histories and physicals have been performed on approximately 18 patients. Interpretation of the barium swallows and H&P data has not yet been accomplished.

CONCLUSIONS
The radiologist is blind to the rheumatoid disease state of the patient and therefore, conclusions regarding the relationship of rheumatoid arthritis to esophageal disease will not be known until completion of the study.
TITLE: The Relationship Between Father Involvement in Child Care and the Child's Development

KEYWORDS: father, child care, child development

PRINCIPAL INVESTIGATOR: Robichaux, Rene CPT MS

SERVICE: Social Work Service

STATUS: Terminated

APPROVAL DATE: Nov 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To describe the antecedents which contribute to increased father involvement in child care. To describe the linkage between father involvement in child care and the child's development.

TECHNICAL APPROACH
The initial design called for a sample drawn from six month well baby visits. This process proved to be too slow and the sample was drawn from labor and delivery birth records. Approximately 85 families were mailed volunteer agreements, and 50 were returned.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
TITLE: In Vitro Determination of the Response of Skeletal Muscle to Halothane, Caffeine and Halothane Plus Caffeine

KEYWORDS: skeletal muscle, halothane/caffeine, malignant hyperthermia

PRINCIPAL INVESTIGATOR: Karan, Steven CPT MC
ASSOCIATES: Muldoon, Sheila MD

DEPARTMENT: Department of Surgery
SERVICE: Anesthesia-Operative Service

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the response of halothane, caffeine, and halothane plus caffeine of skeletal muscle exposed to known concentrations of these agents and electrically stimulated. These tests will form the basis of normal controls for the malignant hyperthermia testing laboratory at USUHS, Department of Anesthesiology.

TECHNICAL APPROACH
No significant changes from original protocol. A small piece of skeletal muscle is removed from the paraspinal muscles in a patient undergoing lumbar laminectomy. This muscle is suspended in a Krebs-Ringer's solution and is exposed to different concentrations of halothane caffeine, and halothane plus caffeine. The response is compared to clinical diagnosis of malignant hyperthermia.

PRIOR AND CURRENT PROGRESS
A total of 6 patients have been studied. Good technical responses were obtained in all cases. Our results of normal controls compare favorably to other laboratories. More patients have not been studied due to the large volume of patients with suspected malignant hyperthermia that have had to be studied during the last year. We anticipate the need to study approximately 10-14 more patients.

CONCLUSIONS
Preliminary: The values for normal controls in these tests obtained from our laboratory compare favorably to other laboratories and are significantly different from patients with the clinical diagnosis of malignant hyperthermia.
DETAIL SUMMARY SHEET

TITLE: Absorption of Fentanyl by Silicone and Holofiber Membrane Oxygenators

KEYWORDS: fentanyl, membrane, oxygenation

PRINCIPAL INVESTIGATOR: Dewerd, Gregory MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Anesthesia-Operative Service

STATUS: Completed
APPROVAL DATE: Aug 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To see if fentanyl is absorbed by different membrane oxygenators during cardiopulmonary bypass.

TECHNICAL APPROACH
Inject 3%-6% of total fentanyl dose used during cardiopulmonary bypass. Take five measurements from the cardiopulmonary bypass circuit and assay for fentanyl concentrations.

PRIOR AND CURRENT PROGRESS
Unable to consistently make RIA work in measuring fentanyl levels.

CONCLUSIONS
Project terminated.
DETAIL SUMMARY SHEET

TITLE: The Use of Fetal Scalp Electrodes in Electrophysiologic Neurologic Monitoring

KEYWORDS:

PRINCIPAL INVESTIGATOR: Hall, Dennis MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Anesthesia-Operative Service

STATUS: Terminated
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
STUDY OBJECTIVE
To compare three different methods of pain control after thoracotomy and evaluate the effects on pulmonary function.

TECHNICAL APPROACH
Patients are randomized to receive epidural morphine, intercostal nerve blocks or interpleural local anesthetic for post-operative pain control. Patients are visited daily for three days and asked to perform bedside pulmonary function test and quantitate their pain using a visual analog pain scale.

PRIOR AND CURRENT PROGRESS
Thirty patients were studied during the previous year. Sixty more patients are expected to be enrolled in the study.

CONCLUSIONS
None to date.
TITLE: Incidence of EKG and Cardiac Enzyme Abnormalities as an Indicator of Ischemic Heart Injury in Vascular Patients Undergoing Surgery

KEYWORDS: ischemic heart injury, cardiac enzyme, surgery

PRINCIPAL INVESTIGATOR: Snyder, Richard MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Critical Care Medicine Service
STATUS: Ongoing
APPROVAL DATE: Apr 1985
FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
a) To determine whether Goldman and Cooperman preoperative predictors are useful in regard to vascular patients. What is the incidence of actual ischemic heart disease in postoperative vascular patients? b) To evaluate the outcome of vascular surgery patients who sustain a suspected perioperative MI; c) to better define the detection of a perioperative MI in these patients in whom blood tests for enzymes are too sensitive or not specific enough.

TECHNICAL APPROACH
Patients were interviewed prior to surgery and received both Cooperman and Goldman preoperative evaluations. Baseline EKG, CPK, and LDH isoenzymes were drawn as well as EKG, CPK, and LDH tests performed postoperatively and each day for seven days postsurgery.

PRIOR AND CURRENT PROGRESS
During the past year data were collected in approximately 20 patients. Of these the data were incomplete in almost 40%. Part of the difficulty arose from having serum enzyme analysis performed at the Department of Surgery, WRAIR lab. When we begin data collection again, I will include an Impact Statement to include enzyme analysis at the Walter Reed Clinical Pathology Lab.

CONCLUSIONS
There are no current conclusions.
TITLE: Absorption of Fentanyl by Intravenous Fluid Containers and Tubing

KEYWORDS:

PRINCIPAL INVESTIGATOR: Snyder, Richard MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Critical Care Medicine Service

STATUS: Terminated
APPROVAL DATE: Oct 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED

CONCLUSIONS
ADMINISTRATIVELY TERMINATED
REPORT DATE: 01/19/90

DETAIL SUMMARY SHEET

TITLE: Case Control Study of the Etiologic Role of Fecal Mutagens and Related Aspects of Diet in Colorectal Cancer

KEYWORDS: colorectal cancer, diet, fecal mutagens

PRINCIPAL INVESTIGATOR: Daniel, James MAJ MC
ASSOCIATES: Scheffman, Mark MD; Butest, Gerald MD

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Terminated
APPROVAL DATE: Mar 1985

FUNDING: Current FY: $0
Previous FYs: $0
Total: $0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
TITLE: The Role of Staging Laparotomy in Hodgkin's Disease - A Review of the WRAMC Experience

KEYWORDS:

PRINCIPAL INVESTIGATOR: Molloy, Mark CPT MC

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Terminated
APPROVAL DATE: Dec 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
REPORT DATE: 01/24/90

DETAIL SUMMARY SHEET

TITLE: Polyamine Levels in Recurrent Colon Cancer and Ulcerative Colitis

KEYWORDS:

PRINCIPAL INVESTIGATOR: Baska, Robert CPT MC

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Terminated
APPROVAL DATE: Dec 1987

FUNDING: Current FY: $ 772 Previous FYs: $ 0 Total: $ 772

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
TITLE: Serologic Analysis of Gastrointestinal Ischemia and its Relationship to Fecal Blood Loss During a One Hundred Mile Ultramarathon

KEYWORDS: gastrointestinal, bleeding, running

PRINCIPAL INVESTIGATOR: Baska, Robert

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Completed
APPROVAL DATE: Apr 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the incidence of gastrointestinal blood loss after a 100 mile race and examine training, dietary and symptomatology factors that may be related.

TECHNICAL APPROACH
Thirty four runners who completed in a 100 mile race saved stool specimens: three from before the race and the first three bowel movements after the race. They also completed pre and post-race questionnaires. An analysis of variance was then conducted.

PRIOR AND CURRENT PROGRESS
Eighty eight percent of the runners that did not have blood in their stools before the race did afterwards. This had a statistical correlation to the symptoms of nausea, diarrhea, cramping and bloating. A negative correlation was found with the uses of nonsteroidal anti-inflammatory agents.

CONCLUSIONS
Gastrointestinal bleeding is very common among very long distance runners as are gastrointestinal symptoms of lower gastrointestinal distress.
REPORT DATE: 01/30/90

DETAIL SUMMARY SHEET

TITLE: Breast Cancer in Women 35 and Younger

KEYWORDS:

PRINCIPAL INVESTIGATOR: Little, Julia CPT MC

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Terminated
APPROVAL DATE: Aug 1988

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
DETAIL SUMMARY SHEET

TITLE: Risks and Perioperative Complications of Insertion of Long Term Venous Access Devices

KEYWORDS:

PRINCIPAL INVESTIGATOR: Molloy, Mark CPT MC

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Terminated
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED.

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED.

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
REPORT DATE: 01/31/90

DETAIL SUMMARY SHEET

TITLE: Gastrointestinal Blood Loss During Marathon Running and the Effect of Cimetidine on its Prevention

KEYWORDS:

PRINCIPAL INVESTIGATOR: Baska, Robert CPT MC

DEPARTMENT: Department of Surgery
SERVICE: General Surgery Service

STATUS: Ongoing

APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Data unavailable at the time of publication.

TECHNICAL APPROACH
Data unavailable at the time of publication.

PRIOR AND CURRENT PROGRESS
Data unavailable at the time of publication.

CONCLUSIONS
Data unavailable at the time of publication.
STUDY OBJECTIVE
To evaluate intraocular lenses (IOL) with regard to safety in the treatment of aphakia. This study has been mandated by the Food and Drug Administration for all institutions seeking to implant intraocular lenses and is not unique to WRAMC.

TECHNICAL APPROACH
Intraocular lenses will be implanted in selected patients either at the time of cataract extraction or in a second operation following cataract extraction.

PRIOR AND CURRENT PROGRESS
During 1988, 226 implants were performed at Walter Reed Army Medical Center with no adverse effects directly related to the intraocular lens. Only 8 of the 226 intraocular lenses used were investigational.

CONCLUSIONS
There are several intraocular lenses on the market that are no longer investigational. In fact, the IOL used most often at WRAMC has obtained non-investigational status. Newer, improved intraocular lenses are being produced and we are using them when as appropriate. Excellent results have been obtained using IOL according to this protocol.
TITLE: Intraocular Irrigating Solutions: Effect on Corneal Endothelium

KEYWORDS: endothelial cells, cornea, glutathione

PRINCIPAL INVESTIGATOR: Kramer, Kenyon COL MC

DEPARTMENT: Department of Surgery
SERVICE: Ophthalmology Service

STATUS: Ongoing
APPROVAL DATE: Apr 1983

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the relative importance of Glutathione in intraocular irrigating solutions to the corneal endothelium during cataract surgery.

TECHNICAL APPROACH
Preoperative cell size measurements and corneal thickness measurements will be made. Subjects will randomly receive intraocular irrigating solutions with Glutathione or without. Similar measurements will be made postoperative and compared.

PRIOR AND CURRENT PROGRESS
Fifty one patients have been enrolled, 33 have yielded data for analysis. There is no statistically significant difference in cell size measurements between the two groups. Three patients from the non-Glutathione group with large cell size measurement created a trend in favor of the Glutathione group. The results were submitted for publication and returned for revision. Revisions have been made and the paper was resubmitted for publication.

CONCLUSIONS
The value of Glutathione in intraocular solutions for cataract surgery remains unproven.
TITLE: Use of Antilymphocyte Preparation in Renal Transplantation

KEYWORDS: antilymphocyte, renal, transplantation

PRINCIPAL INVESTIGATOR: Fernandez, Carlos MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Organ Transplant Service

FUNDING: Current FY: $376 Previous FYs: $0 Total: $376

STUDY OBJECTIVE
a) to improve allograft and patient survival in recipients of renal transplants; b) To determine whether ALG used as primary treatment for rejection is superior to ALG used as prophylaxis in the early post-transplant period to prevent rejection; c) to determine long term effectiveness of ALG used prophylactically versus ALG used for rejection reversal.

TECHNICAL APPROACH
Initially cadaver transplant recipients were randomized to receive ALG either as prophylaxis or therapy for rejection reversal based on the last digit of the SSN. Since the introduction of Cyclosporine A the use of ALG has been limited to patients who cannot tolerate and to CYA, patients with severe ATN with anuria or oliguria and severe acute CYA nephrotoxicity.

PRIOR AND CURRENT PROGRESS
Twenty two additional patients were given ALG prophylactically in FY89. Overall 83 patients have been treated prophylactically and 23 have received ALG for rejection reversal. Sixty nine of 83 (83%) have functioning kidneys in the reversal prophylactic group. Twelve of 23 (52%) have functioning kidneys in the reversal group. In the original protocol group (42 prophylaxis, 26 Rejection Reversal) there is no difference over the long term. The five year survival rate is 56% in the prophylaxis group, 42% in the reversal group.

CONCLUSIONS
Prophylactic ALG has been a valuable therapeutic addition in the treatment of patients on Cyclosporine A. All but 14 patients have functioning kidneys. Prophylactic ALG has been more effective than ALG used for rejection reversal in 1 year graft survival (84% to 74%) and a significant difference at 4 years (68% to 44% p < .05).
TITLE: Use of Cyclosporine A Levels in Determination of Therapeutic Dosages

KEYWORDS: cyclosporine, levels, dosages

PRINCIPAL INVESTIGATOR: Shaver, Timothy MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Organ Transplant Service

STATUS: Completed
APPROVAL DATE: Oct 1983

FUNDING: Current FY: $ 300 Previous FYs: $ 35,330 Total: $ 35,630

STUDY OBJECTIVE
Examine the validity of Cyclosporine A (CyA) blood levels as they relate to clinical immunosuppression of the transplant patient.

TECHNICAL APPROACH
One 3 cc green top tub. is obtained at the same time other routine blood samples are drawn on the patient. It is collected at least twice weekly as an inpatient and each time the patient comes to the outpatient clinic. Initially this will be twice weekly and as the patient stabilizes weekly. Levels will be determined by RIA method under FDA IND supplied, at cost, by Sandoz Incorporated. The dosages of CyA will be adjusted based only on the standard criteria presently used on the Organ Transplant Service WRAMC for determination of rejection. These criteria are: size of kidney, fever, urine output, blood pressure, body weight, BUN, serum creatinine, serum Beta-2-Microglobulin (B2M), U/A, renal scan, ultrasound.

PRIOR AND CURRENT PROGRESS
Cyclosporine A (CyA) levels were measured on 138 total patients. We attempted to adjust the CyA dose so that the CyA level remains between 200-600 Ng/Ml. Forty-three patients were switched to either standard immunosuppression (Imuran and Medrol) or a combination of standard immunosuppression and low dose CyA because of presumed toxicity to CyA. Thirty-one (72%) of these patients have functioning kidneys at this time. To analyze the correlation between CyA dose and CyA level we examined 61 steroid pulse episodes. We separated these episodes into 2 groups, Rejection (those who responded to Steriod Therapy) and Questionable (those who did not). We then plotted mean CyA dose and mean CyA level over a 3 week period from 7 days prior to therapy to 14 days after therapy.

CONCLUSIONS
We found very strong correlations between dose and levels in both groups. In the rejection group the correlation coefficient was very strong (R=0.77 P=0.001). In the questionable group the correlation was not as strong but still significant (R=0.45 P=0.36). This is good evidence that CyA levels can be used to adjust CyA dose.
TITLE: The Concomittant Use of Azathioprine and Pretransplant Transfusions

KEYWORDS: azathioprine, pretransplant, transfusions

PRINCIPAL INVESTIGATOR: Shaver, Timothy MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Organ Transplant Service
STATUS: Ongoing
APPROVAL DATE: Nov 1983

FUNDING: Current FY: $ 150 Previous FYs: $ 212 Total: $ 362

STUDY OBJECTIVE
To study the effectiveness of pretransplant Imuran in reducing the incidence of sensitization to pretransplant blood transfusions.

TECHNICAL APPROACH
Potential recipients will be given 5 pretransplant transfusions, 2 weeks apart, of stored (2 week old) packed blood cells. They will be given azathioprine (Imuran) 1Mg/Kg/Day (50 Mg/Day in children) starting 1 week prior to the first transfusion and continuing daily for 3 months after the final transfusion. One 7cc clot tube of blood will be examined for reactivity against a panel of random T and B lymphocytes.

PRIOR AND CURRENT PROGRESS
A total of 85 subjects have been transfused with 4 developing T cell antibody (4/83 5%). Patients were considered sensitized by transfusion if their antibody to T lymphocytes increased more than 15% over baseline. An additional group of 11 subjects received donor specific transfusions with Imuran and none were sensitized. Four of 6 additional patients whose Imuran was discontinued during transfusions became sensitized (67%). Four patients exhibited reactions to Imuran prior to transfusion and were excluded.

CONCLUSIONS
Pretransplant transfusions with concomittant low dose Imuran has produced a low level of sensitization without blunting the transfusion effect. Fifty nine of the 83 total patients in the study have been transplanted. One year actuarial graft survival was 85% (50/59).
TITLE: Development of an Extracorporeal Liver Support System

KEYWORDS: extracorporeal, liver failure

PRINCIPAL INVESTIGATOR: Fernandez, Carlos MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Organ Transplant Service

STATUS: Ongoing
APPROVAL DATE: Jan 1986

FUNDING: Current FY: $ 1,200  Previous FYs: $ 995  Total: $ 2,195

STUDY OBJECTIVE
To test an extracorporeal liver support system (ECLS) and develop SOP's for use in future clinical trials.

TECHNICAL APPROACH
Livers are removed from +10 kg pigs. The liver will be placed in the liver cassette system. The "donated" liver will be connected to a larger 20 Kg pig via vascular access for extracorporeal perfusion. The production of bile by the harvested liver will suggest that the system is functional.

PRIOR AND CURRENT PROGRESS
A total of 5 perfusions were accomplished: Perfusion #1 - failure inadequate hepatic artery perfusion, need for arterial pump established; Perfusion #2 - 50 minute perfusion, 5 cc bile produced; Perfusion #3 - Failure due to mechanical vena cava obstruction; Perfusion #4 - Perfusion 1 hour 45 minute, 10 cc bile; oxygen consumption at 15 into perfusion, hepatic artery P02 486, vena cava 57; Perfusion #5 - Perfusion 1 hour 30 minutes after 1 hour of perfusion hepatic artery P027, vena cava P02 64, bile produced during perfusion.

CONCLUSIONS
After 5 perfusions it is believed that the system needs some redesigning. In order to regulate pressures and flows into the liver, hydrostatic blood reservoirs filled by pumps will be used instead. Also a similar device for the vena cava is to be used so that vena cava pressures mimic central venous pressures. Another 5 perfusions (10 animals) are required for this second phase.
TREATMENT WITH LIVER TRANSPLANTATION AND HUMAN MONOCLONAL ANTI-HEPATITIS B VIRUS IgG OF A HEPATITIS B VIRUS CARRIER WHO HAS END STAGE CHRONIC ACTIVE HEPATITIS

KEYWORDS: antibody, monoclonal, transplantation

PRINCIPAL INVESTIGATOR: Shaver, Timothy MAJ MC
ASSOCIATES: Fernandez-Bueno, Carlos MD

DEPARTMENT: Department of Surgery
SERVICE: Organ Transplant Service

STUDY OBJECTIVE
To evaluate the effectiveness of a new human monoclonal antihepatitis B virus antibody in the prevention of recurrent hepatitis B infection following liver transplantation in chronic hepatitis B virus carriers with end stage chronic active hepatitis.

TECHNICAL APPROACH
Patients are initially entered into the study at the University of Pittsburgh based on the need for liver transplantation secondary to chronic active hepatitis from hepatitis B virus. Once these conditions have been satisfied, the patient is then presented with the above protocol. They are treated preoperatively with injections of the monoclonal antibody followed by liver transplantation and then ongoing treatment postoperatively. This postoperative treatment is continued indefinitely based on the demonstrated half life of the antibody in each patient. Once this is determined, they are then redosed on an every 2 to 4 week basis.

PRIOR AND CURRENT PROGRESS
Two patients have been entered in the study as outlined here at WRAMC. (Ten additional patients are being followed at the University of Pittsburgh and are not military beneficiaries). The first patient to receive the monoclonal antibody at the time of liver transplantation expired in August 1988; four months following liver transplantation, as a result of metastatic hepatocellular carcinoma (before the study could be completed). The second patient followed at WRAMC is currently continuing to receive the monoclonal antibody every 3 weeks based on the half life in his serum. He has recently begun to show evidence of recurrence of hepatitis B virus within his serum and on liver biopsy. The long term clinical importance of this is yet to be determined.

CONCLUSIONS
Based on the patient population entered on this study at WRAMC, the efficacy of the drug is yet to be determined. The additional patients entered at the University of Pittsburgh have currently not shown any evidence of recurrence of the virus. The long term efficacy of this drug in prevention of recurrence of hepatitis B virus following liver transplantation is yet to be determined; the study is ongoing.
REPORT DATE: 08/25/89

DETAIL SUMMARY SHEET

TITLE: Clinical and Biomechanical Investigation of Knee Ligament Laxity with Emphasis on Objective and Functional Short and Long-Term Results

KEYWORDS: biomechanics of the knee

PRINCIPAL INVESTIGATOR: Hopkinson, William LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service
STATUS: Completed
APPROVAL DATE: Sep 1980

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To investigate knee ligament laxity due to common injuries of the knee joint and to design a knee laxity machine to test knee laxity.

TECHNICAL APPROACH
Using an already designed device to measure knee laxity, sequential measurements of knee laxity using cadaver specimen will be studied. These experimental results will be corrected with in-vivo testing. The laxity measuring machine is interfaced with an Apple II computer.

PRIOR AND CURRENT PROGRESS
No further work has been performed on this protocol over the last year and in essence, the work is complete.

CONCLUSIONS
An investigational device to measure laxity of cadaver knees can be fabricated.
TITLE: Evaluation of Porous Coated Total Knee and Hip Prostheses in Achieving a Stable Prosthesis Bone Interface

KEYWORDS: porous, total joint, prosthesis

PRINCIPAL INVESTIGATOR: Hopkinson, William LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Evaluate the long term results of the use of uncemented hip and knee replacements.

TECHNICAL APPROACH
Ongoing yearly hip and knee rating (clinical) and radiographs which are the clinical standard with or without research.

PRIOR AND CURRENT PROGRESS
The first 100 consecutive uncemented hip replacements have been now been followed from 3 to 5 years. We have recently completed a four part analysis of these results which include: a) the clinical results; b) the analysis of the learning curve of the surgeons; c) comparison of the validity of different rating systems and review of the prospective consecutive series of the patients serial bone imaging which is work unit 2404. This combined analysis has recently won an award from the Eastern Orthopaedic Association and will be presented in October of 1989.

CONCLUSIONS
Early clinical results of this prosthesis has been quite encouraging, initial concern about thigh aches pain, radiographic findings have estabilized at three to five year intervals. Two mid and long-term followup is necessary and in demand from the orthopaedic community as to the long-term durability of this prosthesis.
DETAIL SUMMARY SHEET

TITLE: Characterization of the Postoperative Radionuclide Scan Patterns in Patients with Porous Coated Total Hip Protheses

KEYWORDS: total hip protheses, porous coated, radionuclide scan

PRINCIPAL INVESTIGATOR: Hopkinson, William LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

STATUS: Ongoing
APPROVAL DATE: Oct 1984

FUNDING:
Current FY: $  0
Previous FYs: $  0
Total: $  0

STUDY OBJECTIVE
To determine the natural history of bone scan patterns, both technetium and Indium-111 WBC, in patients undergoing uncemented total hip replacements.

TECHNICAL APPROACH
Thirty patients underwent bone technetium and indium-111 WBC scanning 7 days, 3 months, 6 months, 12 months and 24 months after uncemented total hip replacement. The scan, plain radiographs and clinical ratings were compared.

PRIOR AND CURRENT PROGRESS
All 30 patients have completed the serial scans. A paper concerning the first 20 patients was presented to the annual meeting of the American Academy of Orthopaedic Surgeons in February 1988, and a paper for publication in a peer-reviewed journal is presently under editorial review.

CONCLUSIONS
1) Technetium scans showed stabilization around acetabular components at one year. 2) Technetium scans remained active at the prosthesis tip in 95% at two years. 3) Indium-III WBC scans were less helpful.
TITLE: Selective Magnetic Resonance Imaging of the Knee Compared to Arthroscopy: A Large Scale Clinical Trial

KEYWORDS: knee, MRI, arthroscopy

PRINCIPAL INVESTIGATOR: Polly, David CPT MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To perform and correlate MRI scans with arthroscopic results of patients with suspected meniscal-cruciate pathology to obtain reasonable confidence intervals for the sensitivity, specificity and accuracy of this technique.

TECHNICAL APPROACH
Patients scheduled for arthroscopy of the knee receive a preoperative magnetic resonance imaging study of the knee. The sequence used is designed specifically to evaluate the menisci and the anterior and posterior cruciate ligaments. Results of the MRI and findings at arthroscopy are then compared. Arthroscopy is the accepted standard for the diagnosis of cruciate and meniscal abnormalities.

PRIOR AND CURRENT PROGRESS
This project was unable to be completed due to marked increased demand on the MRI scanner. The initial project was completed and resulted in a publication on file with DCI.

CONCLUSIONS
MRI is a very viable diagnostic tool for evaluating knee injuries. Unfortunately with our limited resources we are unable to use this on a routine basis.
TITLE: Retrospective Review of Indium-III White Blood Cell Scanning in Orthopedic Patients

KEYWORDS: indium, bone imaging

PRINCIPAL INVESTIGATOR: Callaghan, John MAJ MC
ASSOCIATES: Wukich, Dane

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

STATUS: Completed
APPROVAL DATE: Feb 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To determine the efficacy of Indium-III white blood cell scanning in identifying osteomyelitis and periprosthetic infections.

TECHNICAL APPROACH
Investigators reviewed clinical records, pathology specimens and nuclear technetium and Indium-III WBC scans in patients undergoing surgery to determine the efficacy of Indium-III scans in preoperatively identifying infection.

PRIOR AND CURRENT PROGRESS
Fifty cases have been reviewed and a manuscript was published.

CONCLUSIONS
Indium scanning is sensitive but not specific in identifying musculoskeletal infection. The use of combined and technetium scans improves the specificity.
TITLE: Creatine Phosphokinase and Lactic Dehydrogenase Elevations in Total Joint Arthroplasty, Anterior Spinal Fusion and Operative Treatment of Hip Fractures

KEYWORDS: creatinine phosphokinase, lactic dehydrogenase, total joint

PRINCIPAL INVESTIGATOR: Hopkinson, William LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
To determine baseline phosphokinase (creatinine) and lactic dehydrogenase elevations and baseline levels in patients undergoing total joint replacement, anterior spinal fusion and hip fractures fixation.

TECHNICAL APPROACH
Fifty patients undergoing total joint replacements, 20 patients undergoing anterior spine surgery and 20 patients undergoing hip fixation will have serial enzyme levels and EKG's to determine the natural levels of enzymes after these surgeries and to detect any postoperative cardiac ischemia.

PRIOR AND CURRENT PROGRESS
All patients have entered the study and all data gathering is complete.

CONCLUSIONS
Analysis is still ongoing with the hip fracture and spine patients.
DETAIL SUMMARY SHEET

TITLE: The Use of Arthroscopic Abrasion Chondroplasty in the Treatment of Osteoarthritis of the Knee

KEYWORDS: arthroscopic, chondroplasty, osteoarthritis

PRINCIPAL INVESTIGATOR: Hopkinson, William LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

STATUS: Ongoing
APPROVAL DATE: Aug 1987

FUNDING: Current FY: $7,995 Previous FYs: $0 Total: $7,995

STUDY OBJECTIVE
Evaluate the results of abrasion chondroplasty as a treatment for osteoarthritis of the knee.

TECHNICAL APPROACH
Forty patients with osteoarthritis of the knee will be randomized into 2 treatment groups. One group will have arthroscopy and knee debridement, the other group will have arthroscopy, knee debridement and abrasion chondroplasty. Annual knee rating, clinical exam and radiographs will be performed.

PRIOR AND CURRENT PROGRESS
The necessary current equipment for this study has been obtained. The patients are presently being evaluated for enrollment in the research protocol at present. Two patients have undergone surgical intervention and there are several other patients considering options at the present time.

CONCLUSIONS
None have been made at this time.
TITLE: Evaluation of Spinal Instrumentation in Posterior Spinal Fusion Using Radionuclide Imaging

KEYWORDS: spinal fusion, bone scan

PRINCIPAL INVESTIGATOR: Van Dam, Bruce LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Orthopedics Surgery Service

STUDY OBJECTIVE
To study the appearance of technecium and indium bone scans postoperatively at 1 week, 6 months and 1 year compared to preoperatively following posterior spinal fusion with instrumentation.

TECHNICAL APPROACH
Technetium and indium bone scans are performed preoperatively and at 1 week, 6 months and 1 year postoperatively in adults undergoing posterior spinal fusion and instrumentation.

PRIOR AND CURRENT PROGRESS
A total of 10 patients have thus far been entered into the study and are at various phases of follow-up scanning. Patients are still being enrolled in the study.

CONCLUSIONS
The most remarkable finding thus far is the relative photopenia noted on the postoperative scans. This is surprising given the expected inflammatory response around the fusion area.
REPORT DATE: 03/24/89

DETAIL SUMMARY SHEET

TITLE: Development of a Procedure for Assessing the Perceptual-Motor Control of Speech

KEYWORDS: speech, motor control, test development

PRINCIPAL INVESTIGATOR: Montgomery, Allen PhD
ASSOCIATES: Prosek, Robert PhD; Walden, Brian PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Completed

APPROVAL DATE: Jul 1984

FUNDING: Current FY: $ 0
Previous FYs: $ 0
Total: $ 0

STUDY OBJECTIVE
The objective of this project is to develop and evaluate an auditory-motor tracking task as a procedure for assessing the integrity of the motor systems controlling speech production in adults.

TECHNICAL APPROACH
The subject listened to a continuously varying series of vowel sounds and attempted to duplicate the vowels as quickly and accurately as possible. As the target vowel varied, the subject varied his vocal tract configuration to continue to match the target. The extent to which the acoustic characteristics of the target vowel and the produced vowel coincide across time provided an objective measure of the subject’s success in tracking the target vowels. Cross correlation was used to assess the speed of tracking, and analysis of variance was used to assess accuracy.

PRIOR AND CURRENT PROGRESS
Vowel sequences containing /u/ were eliminated from the analysis because the second format could not be unambiguously identified. Cross correlations showed that changes in the produced vowel occurred within 12 to 84 milliseconds of changes in the target vowel. The ANOVA results showed no significant difference in second formant frequency between the target and produced vowels. An expected difference in second formant frequency was significant among the various vowels. There was no significant interaction between the signals (target and produced) and vowels. The overall results indicate that normal talkers can quickly and accurately track a series of target vowels.

CONCLUSIONS
The results indicate that the procedures developed in this protocol may be useful in assessing the speech motor control exhibited by adult talkers. While further development of the technique is needed to measure the vowel /u/, the results show that it can begin to be used with patient populations.
TITLE: Parameterization of Electroglottographic Signals for Patients with Voice Disorders

KEYWORDS: FGG, electroglottograph, voice disorders

PRINCIPAL INVESTIGATOR: Prosek, Robert PhD
ASSOCIATES: Montgomery, Allen PhD; Walden, Brian PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

FUNDING: Current FY: $ 400  Previous FYs: $ 0  Total: $ 400

STUDY OBJECTIVE
To determine which aspects of the electroglottographic (FGG) signal can be used to differentiate the glottal activity associated with various voice disorders and to interpret these parameters in terms of vocal function.

TECHNICAL APPROACH
The subjects for this experiment are ten patients with vocal nodules, ten patients with unilateral vocal fold paralysis, and ten normal talkers. Each subject is required to participate in three speech tasks. During each of these tasks, the EGG signal and the glottal air flow will be recorded. The goal of this project is to optimize the parameters of the EGG signal and compare them to those of the glottal air flow signal in order to determine if the EGG contains information on vocal function.

PRIOR AND CURRENT PROGRESS
Repeated efforts to find subjects for the project during the past year were fruitless. These subjects simply have not been seen lately. Data are available for 10 normal talkers, 7 vocal nodule patients and 4 vocal fold paralysis patients. Because subjects are not being admitted to the project, it was decided to analyze the available data. Multiple Hotelling's T2 tests show significant differences between the normals and the paralysis patients, the normals and the nodule patients, but not between the paralysis and nodule patients. There is some evidence that the EGG signal will differentiate normal from abnormal talkers. The results must be tempered with the knowledge that a small number of subjects in the paralysis group was used.

CONCLUSIONS
The results indicate that normal/abnormal voice distinctions can be made on the basis of the parameters of the EGG signal. While the number of subjects in one of the groups is small, the overall results are encouraging enough to warrant investigating the GG as a clinical tool for voice remediation.
TITLE: Retest Reliability of the Communication Profile for the Hearing Impaired

KEYWORDS: retest reliability, aural rehabilitation, hearing

PRINCIPAL INVESTIGATOR: Erdman, Sue Ann MA
ASSOCIATES: Demorest, Marilyn PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Completed
APPROVAL DATE: Oct 1985

FUNDING: Current FY: $195 Previous FYs: $0 Total: $195

STUDY OBJECTIVE
To determine the retest reliability of the Communication Profile for the Hearing Impaired for patients attending the Aural Rehabilitation Program at the Army Audiology and Speech Center.

TECHNICAL APPROACH
Referring audiologists at outlying MEDDAC's administer the CPHI to individuals who are scheduled to attend the Aural Rehabilitation Program WRAMC. These individuals are retested upon arrival at WRAMC for their treatment. The intervening period eliminates the possibility of memory effect and permits reassessment prior to intervention.

PRIOR AND CURRENT PROGRESS
Retest stability of the Communication Profile for the Hearing Impaired was assessed in a sample of 101 active duty military personnel who attended the Aural Rehabilitation Program at WRAMC. Pretests were administered by referring audiologists; retests were administered from 6 to 40 weeks later, at the beginning of the rehabilitation program. Mean scores were calculated 5 to 40 weeks later, at the beginning of the rehabilitation program. Mean scores on 5 of the 25 scales of CPHI decreased significantly (p<0.01) over time, but the changes were small in magnitude. Distributions of retest-test differences were used to establish criteria for inferring significant improvement in scores over time. Retest correlations for individual scales of the CPHI ranged from r=0.28 to 0.78. Retest correlations were comparable for short versus long retest intervals, but varied as a function of military rank.

CONCLUSIONS
For most scales of the CPHI an improvement of 1 scale unit is large enough to be significant at the .05 level. Retest correlations were lower for the communication performance scales than for the remaining scales, but only for enlisted personnel. It is more likely that confusion occurred in the field setting than during the retests in the Aural Rehabilitation Program.
DETAIL SUMMARY SHEET

TITLE: Development of a Procedure to Determine the Intelligibility of Continuous Discourse Under Realistic Listening Conditions

KEYWORDS: hearing aid, continuous discourse, listening

PRINCIPAL INVESTIGATOR: Walden, Brian PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing
APPROVAL DATE: Oct 1985

FUNDING: Current FY: $ 600 Previous FYs: $ 360 Total: $ 960

STUDY OBJECTIVE
To determine the amount of benefit received from hearing aids by military personnel with hearing loss restricted to the high frequencies.

TECHNICAL APPROACH
The Communication Profile for the Hearing Impaired was administered to the subjects prior to their initial hearing aid fitting. The amount of real-ear gain provided by the hearing aid(s) was determined prior to subjects leaving WRAMC. After 6 months of hearing aid use, the Hearing Aid Performance Inventory was mailed to the subjects, completed and returned.

PRIOR AND CURRENT PROGRESS
Data collection has been completed on all 200 subjects. Eighty five percent of the subjects returned a completed Hearing Aid Performance Inventory. Data analysis has begun. There were no serious or adverse reactions from subjects, and no subjects withdrew from the study. There were no direct benefits to patients who participated in this study.

CONCLUSIONS
Data analysis is not yet completed.
STUDY OBJECTIVE
The purpose of this study is to determine if improvements in the quality of voice produced by laryngectomies using a typical electrolarynx can be obtained through activating the device with an electrical signal analogous to natural laryngeal output.

TECHNICAL APPROACH
In this study we evaluate whether it is possible to generate on a computer a more natural-sounding signal to replace the monotonous steady-state waveforms currently available in hand-held electrolarynges. Five laryngectomees experienced in using an electrolarynx produced speech with the experimental sound source and with three commercially available electrolarynges. The speech will be recorded and judged by trained listeners to determine if the experimental system is superior.

PRIOR AND CURRENT PROGRESS
The first year was devoted to software development. In the second year we encountered some technical difficulties in transducing the altered signal through the mechanical transducer of the electrolarynx selected for use as the experimental model. These problems were overcome by switching to a Cooper-Rand intra-oral model which effectively avoids the distortion introduced by the neck transducer contact. Three laryngectomees were tested in FY88 with the Cooper-Rand device.

CONCLUSIONS
Preliminary listening tests indicated that the sound quality of the experimental signal as transduced through the intra-oral device is definitely superior to the unaltered sound. Tape recordings of the three laryngectomees using the experimental and traditional electrolarynges were made and master type is being prepared for presentation to speech pathologists for judgments of quality and acceptability.
TITLE: Perceived Hearing Aid Benefit by Persons with High Frequency Hearing Loss

KEYWORDS: hearing aid, hearing loss, speech

PRINCIPAL INVESTIGATOR: Walden, Brian PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service
STATUS: Ongoing
APPROVAL DATE: Oct 1985

FUNDING: Current FY: $ 162 Previous FYs: $ 0 Total: $ 162

STUDY OBJECTIVE
To develop an assessment tool which would include realistic factors influencing communication. This tool would be used to assess hearing aid performance.

TECHNICAL APPROACH
An auditory-visual speech recognition test was developed using continuous discourse which was presented to normal and hearing impaired subjects in a reverberant room. Subjects were asked to estimate perceived intelligibility at various signal-to-noise ratios with auditory-only and auditory plus visual stimuli. Reliability was assessed.

PRIOR AND CURRENT PROGRESS
Data collection and analysis are completed for the 40 subjects who participated in this study. There were no serious or adverse reactions from subjects and no subjects withdrew from the study. There were no direct benefits to patients who participated in this study.

CONCLUSIONS
Test-retest reliability was good. This procedure was a sensitive and reliable measure of the contribution of visual cues. The addition of visual cues provided a 6dB improvement in S/N for both normal and hearing impaired subjects. Aided hearing impaired subjects required a 5-6dB improvement in S/N to perform at the same level as normals.
TITLE: Evaluation of a Model of Measurement Error for Retesting Speech Recognition

KEYWORDS: speech recognition, reliability, psychometric model

PRINCIPAL INVESTIGATOR: Fabry, David PhD
ASSOCIATES: Demorest, Marilyn PhD; Cord, Mary MS

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing
APPROVAL DATE: Apr 1986

FUNDING: Current FY: $ 750  Previous FYs: $ 0  Total: $ 750

STUDY OBJECTIVE
To determine the applicability of the binomial-error model when speech recognition in hearing impaired listeners is tested repeatedly.

TECHNICAL APPROACH
Subjects are hearing impaired patients attending the Aural Rehabilitation Program at AA&SC. Each individual is presented with a 200 word list of monosyllabic words on each of two occasions separated by at least two days. Retest variability in scores is subjected to a theoretical psychometric model based on the binomial distribution.

PRIOR AND CURRENT PROGRESS
Data collection was completed for all 80 experimental subjects in July, 1988. Some progress was made on data analysis, but since Dr. Demorest no longer comes to Walter Reed, further analyses will be conducted as her schedule permits. Additional data analysis will be conducted by Dr. Fabry to identify inter-subject word error patterns. The results of this analysis will yield a list of 200 words that are rank ordered for intelligibility across the 80 subjects who participated in this study. Ultimately, the most difficult words will be used clinically as a screening tool to identify with speech recognition. This analysis has not been completed at the present time.

CONCLUSIONS
Analysis of data from individual subjects suggest that test and retest responses from the same subjects are not independent but are correlated across test items. This violates one of the assumptions of the binomial model. Another hypothesis to be tested is that the binomial model overestimates test and retest variability when retesting occurs during a different test session. Data analysis from these subjects has not been completed.
STUDY OBJECTIVE
The purpose of this experiment is to determine the degree of redundancy between the effects of amplification and lipreading on the auditory consonant recognition ability of patients with sensorineural hearing impairments.

TECHNICAL APPROACH
Adult subjects with bilateral sensorineural hearing impairments are administered a 200 item consonant-vowel recognition test under four test conditions: unamplified auditory, plus lipreading, and amplified auditory plus lipreading. In addition, responses to the Hearing Aid Performance Inventory (HAPI) are obtained from each subject three months following administration of the consonant recognition tests. Log-linear analyses are used to compare patterns of consonant confusion under each of the four conditions of consonant recognition.

PRIOR AND CURRENT PROGRESS
Consonant recognition data have been obtained from 24 subjects and log-linear analyses of the consonant-vowel recognition data have been completed for all 24 subjects.

CONCLUSIONS
There is an orderly progression among the four test conditions from most difficult (unamplified auditory) to least difficult (amplified auditory plus lipreading). Lipreading plays a highly influential role in the auditory-visual speech recognition of persons with sensorineural hearing impairment in that consonant confusions can occur in auditory-visual speech recognition that would be unlikely occurrences if the stimuli were presented by audition only.
TITLE: Effects of Consonant/Vowel Intensity Ratio on Speech Loudness

KEYWORDS: loudness, speech, hearing aid

PRINCIPAL INVESTIGATOR: Montgomery, Allen PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing
APPROVAL DATE: Oct 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the relationship between loudness and sound pressure level (SPL) as the syllabic duration of words is reduced and as the consonant/vowel (C/V) ratio is varied in sentences.

TECHNICAL APPROACH
Since loudness is affected by duration, it is important to establish the role that duration plays in loudness changes when the C/V ratio is held constant. In the first part of this phase of the protocol, the durations of each of the words "hiss", "sis", and "face" are to be reduced by 75%, 50% and 25% using interactive digital signal processing techniques. In the second portion of this phase of the project, the C/V ratios of selected words within sentences are to be altered in amplitude, again using interactive digital signal processing techniques. In each part of the experiment, the processed stimuli will be paired with a standard word or sentence and presented to listeners for loudness judgments.

PRIOR AND CURRENT PROGRESS
Using digital signal processing techniques, stimulus tapes have been generated which alter the duration of the test words which vary the amplitude of target words within sentence contexts. Currently subjects are being tested using each of the stimulus tapes. To date, eight hearing impaired and three normal subjects have been tested. Data acquisition will continue as subjects are available.

CONCLUSIONS
Not applicable at the present time.
STUDY OBJECTIVE
This course is designed to permit the student to become familiar with and practice techniques of foreign body extraction in the live animal. This skill is a necessary one to avoid potential complications in the actual clinical operating theater. The laboratory permits the students to encounter various foreign bodies, which would otherwise take years to experience in a clinical situation.

TECHNICAL APPROACH
A total of 30 students participated in this course. Purposebred canine animals were anesthetized, under the care of the Veterinary Service. Rigid foreign body instruments and various foreign bodies were placed into and extracted alternatively from the animals by the students. In 1988, there were no courses held at WRAIR. The last utilization of this course was held in 1987.

PRIOR AND CURRENT PROGRESS
Prior courses in 1985, 1986 and 1987 were held at WRAIR, and were well attended. There were 20 to 25 students in each course and at the end of the AFIP Basic Science Course, students rated the course 7 to 8 out of 10 overall. In 1988, a course was initiated at USUHS in conjunction with Dr. Carlos Gonzalaz in order to add laser experience to the format, a component not available at WRAIR.

CONCLUSIONS
This course was successful at WRAIR with good technical support and minimal complications. However, the availability of the laser work at USUHS represents an advantage which we feel is of significance. Therefore, I request that this course be changed to a status of completed.
TITLE: Comparison of Rigid Endoscopy with Flexible Endoscopy and Radiographic Studies in the Diagnosis of Pediatric Airway Obstruction

KEYWORDS: rigid endoscopy, flexible endoscopy

PRINCIPAL INVESTIGATOR: Mitchell, Deborah CPT MC
ASSOCIATES: Wood, Gordon; Gonzalez, Carlos

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service
STATUS: Ongoing
APPROVAL DATE: Jun 1987

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine: a) the incidence of correct diagnoses of airway obstruction made by flexible endoscopy and radiographic studies which were not altered by rigid endoscopic examination; b) the risk factors which may indicate a high probability for multiple airway lesions and thus indicate the need for rigid endoscopy.

TECHNICAL APPROACH
The records of all children with upper airway obstruction who underwent rigid endoscopy over the past 3 years will be reviewed. Only records which contain information on the radiographic studies, flexible, and rigid endoscopic findings will be entered into the review. A prospective evaluation of patients with stridor is planned to begin at the conclusion of the retrospective review using the newly obtained results.

PRIOR AND CURRENT PROGRESS
All records of the children who met the criteria for the study have been reviewed, and the data have been tabulated. The findings were presented as a poster presentation at the Annual Meeting of the American Society of Pediatric Otolaryngology. The manuscript for the paper is in its final form and will be submitted for publication soon.

CONCLUSIONS
The data have revealed that adequate workup using flexible endoscopy and radiographic studies of children with stridor will identify the pathologic process in the vast majority of cases, and that rigid endoscopy should be reserved for a select group of patients.
TITLE: The Effect of Skin Undermining and Skin Excision on the Degree of Decreased Wound Closing Tension with SMAS Plication in Fresh Cadavers

KEYWORDS: rhytidectomy

PRINCIPAL INVESTIGATOR: Casler, John CPT MC
ASSOCIATES: Kryzer, Thomas CPT MC; Burgess, Lawrence MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing
APPROVAL DATE: Nov 1987

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
To define the relationship between wound closing tension and flap undermining in face lift surgery, and how SMAS suspension affects both of these characteristics.

TECHNICAL APPROACH
To take wound closing measurement for different degrees of undermining, with and without SMAS suspension sutures utilizing fresh frozen cadavers as the model.

PRIOR AND CURRENT PROGRESS
We currently have obtained data for five sides in three cadavers, with five to six more sides in three cadavers remaining to be done. As we are utilizing fresh cadavers at USUHS when they become available we anticipate an additional 10 to 12 months for completion of the study.

CONCLUSIONS
Data collection is still continuing.
TITLE: The Role of Hearing Impairment in the Visual Biasing of Auditory Speech Perception

KEYWORDS: hearing impairment, lipreading, visual biasing

PRINCIPAL INVESTIGATOR: Walden, Brian PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

FUNDING: Current FY: $ 769  Previous FYs: $ 0  Total: $ 769

STUDY OBJECTIVE
To determine whether long-term hearing impairment accounts for the greater visual biasing of auditory speech perception that is observed in hearing impaired versus normal observers.

TECHNICAL APPROACH
Fourteen computer generated, five-format approximations of consonant vowel syllables forming a ba-da-ga continuum were presented to 15 normal subjects under various test conditions: auditory-only in quiet, auditory-only in a broad band noise at +10 signal-to-noise ratio, and in synchrony with natural visual articulations of the syllables ba and ga. Labeling functions were generated showing the percentage identification of each of the 14 stimuli as ba-da and ga. These data were compared with comparable data from a previous experiment using both normal and hearing impaired subjects.

PRIOR AND CURRENT PROGRESS
Complete data have been obtained from all 15 subjects. Data analysis is completed and a first draft of a manuscript based on this work has been prepared. After an internal review and revision of this manuscript, it will be submitted for publication to the Journal of Speech and Hearing Research.

CONCLUSIONS
The results of this experiment suggest that the greater susceptibility to visual biasing of auditory speech perception previously observed for hearing impaired subjects is attributable to an inherent propensity to rely on visual cues that develops as a result of long-term hearing impairment. All of the visual biasing effects observed in these subjects cannot be accounted for by the ambiguity that is introduced into the auditory channel by the hearing impairment.
REPORT DATE: 12/09/88

DETAIL SUMMARY SHEET

TITLE: Evaluation of Patients with Obstructive Sleep Apnea Syndrome Following Uvulopalatopharyngoplasty

KEYWORDS: obstructive sleep apnea, uvulopalatopharyngoplasty

PRINCIPAL INVESTIGATOR: Burgess, Lawrence MAJ MC

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing
APPROVAL DATE: Feb 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
The objective of the study is to determine the immediate postoperative risks to patients following uvulopalatopharyngoplasty. Various preoperative risk factors will be correlated with patients to determine if certain patients experience worsening of their obstructive sleep apnea in the immediate postoperative period. This will help to preoperatively select out patients who would need more intensive therapy and evaluation in the immediate postoperative period.

TECHNICAL APPROACH
After selection for the uvulopalatopharyngoplasty in the standard fashion, patients are admitted to the hospital and receive a sleep study on the preoperative night and on the first and second postoperative night. In addition, a sleep study is obtained three to four months following the surgery. Preoperative workup includes chest x-rays, EKG, CBC and chemistries, thyroid functions and full pulmonary functions.

PRIOR AND CURRENT PROGRESS
Four patients have currently been entered onto the protocol and data accumulation is continuing. A fifth patient is scheduled for entry this month. Benefits to the patients include thorough post-operative evaluations. There have been no significant difficulties with the protocol.

CONCLUSIONS
The protocol is being conducted as originally submitted without problems. After entry of an additional three to five patients, the data will be analyzed prior to entering other patients.
DETAIL SUMMARY SHEET

TITLE: Incidence of Maxillary Sinusitis in Nasally Intubated Patients

KEYWORDS: maxillary sinusitis, intubated

PRINCIPAL INVESTIGATOR: Mitchell, Deborah CPT MC

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service

STATUS: Ongoing

APPROVAL DATE: Mar 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the incidence of maxillary sinusitis in patients with a prolonged period of indwelling nasal tubes of varying sizes and functions.

TECHNICAL APPROACH
Patients in the ICU and on the ward with nasal endotracheal tubes and/or nasogastric tubes for greater than 3 days will be evaluated with weekly sinus x-rays, and biweekly sinus ultrasounds for evidence of maxillary sinusitis. If evidence is found, a sinus puncture will be done to determine the causative organism.

PRIOR AND CURRENT PROGRESS
Data are continuing to be collected. There have been many entrants secondary to the principal investigator rotating outside of Walter Reed for over 6 months during the past year.

CONCLUSIONS
None can be drawn at this time.
REPORT DATE: 03/01/89

DETAIL SUMMARY SHEET

TITLE: Acoustic Analysis of Normal and Abnormal Swallows

KEYWORDS: dysphagia, spectrographic, videofluoroscopic

PRINCIPAL INVESTIGATOR: Chi-Fishman, Gloria DAC
ASSOCIATES: Prosek, Robert PhD; Dachman, Abraham MD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service
STATUS: Ongoing
APPROVAL DATE: Apr 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the clinical value of real-time, high-resolution analyses of the acoustic properties of swallowing.

TECHNICAL APPROACH
Three groups of subjects (normals, radiographic normals and dysphagic patients) are randomly selected. Swallows of different, calibrated materials are recorded by specialized acoustic instrumentation. In addition, videofluoroscopic swallow studies are conducted on the radiographic normals and the dysphagic patients, and timing measures of a series of radiographically displayed oropharyngeal neuromuscular activities are made. The spectrographic and videofluoroscopic data are analyzed and compared. An addendum was submitted in June 1988, for elimination of subcategorization of dysphagic patients and was approved on 8 July 1988.

PRIOR AND CURRENT PROGRESS
Twenty one subjects (10 normals, 5 radiographic normals and 6 dysphagic patients have participated in the project to date. All were enrolled during the last year. There have been no adverse reactions or withdrawal requests from the participants. At this point, most of the data reduction tasks are complete, and analysis of data on the normal subjects is also near completion. This study has provided no direct benefits to patients.

CONCLUSIONS
No conclusions have been drawn to date.
DETAIL SUMMARY SHEET

TITLE: Post-treatment Utilization of the Communication Profile for the Hearing Impaired

KEYWORDS: hearing loss, aural rehabilitation, prognosis

PRINCIPAL INVESTIGATOR: Erdman, Sue Ann DAC

DEPARTMENT: Department of Surgery  SERVICE: Otolaryngology-Head & Neck Service  STATUS: Completed

APPROVAL DATE: Jun 1988

FUNDING: Current FY: $4,154  Previous FYs: $0  Total: $4,154

STUDY OBJECTIVE
The three objectives of this investigation were a) to develop interpretation guidelines for post-treatment CPHI scores based on normative data for the WRAMC aural rehabilitation program patient population, b) to assess aural rehabilitation program effectiveness; and c) to identify prognostic indicators based on analyses of databases for pre and post-treatment assessments.

TECHNICAL APPROACH
Approximately four months following their participation in the aural rehabilitation program at the Army Audiology and Speech Center (AA&SC), patients are mailed the Communication Profile for the Hearing Impaired (CPHI) with instructions to complete this paper and pencil inventory and return it to the AA&SC. The CPHI asks patients to rate how often they wear their hearing aids and the overall benefit derived from their hearing aids, as well as various characteristics of their communication handicap. Data were to be gathered on 500 patients in order to develop post-treatment norms.

PRIOR AND CURRENT PROGRESS
Because the principal investigator resigned her position with the Government in March 1989, only the first objective outlined above (i.e., development of interpretation guidelines for post-treatment CPHI scores) was pursued. The other two objectives, therefore, will not be systematically investigated under this protocol. Data from 127 patients who completed the post-treatment administration of the CPHI were obtained. There are no plans to gather additional data. Data are being analyzed and a manuscript will be prepared and submitted through channels at WRAMC.

CONCLUSIONS
None at present.
REPORT DATE: 07/10/89

DETAIL SUMMARY SHEET

TITLE: Hearing Loss and the Perception of Complex Sounds

KEYWORDS: resolution, harmonics, spectral

PRINCIPAL INVESTIGATOR: Leek, Marjorie PhD

DEPARTMENT: Department of Surgery
SERVICE: Otolaryngology-Head & Neck Service
STATUS: Ongoing
APPROVAL DATE: Aug 1988

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
This work unit is a grant proposal submitted to the National Institutes of Health to obtain funding. The goal of the grant is to determine how the impaired spectral and temporal processing accompanying sensorineural hearing loss interferes with the identification and discrimination of speech like sounds. The proposal includes seven studies, each of which will be submitted for approval as a separate protocol.

TECHNICAL APPROACH
Each of the proposed experiments includes measurements of frequency resolution and a measure of the internal representation of harmonic complexes. Frequency resolution will be assessed using a notched-noise threshold procedure which allows the tracing of the internal auditory filter. Measures of temporal and spectral processing of harmonic complexes will be made by asking subjects to identify sounds which are constructed to have some of the acoustic characteristics of speech. Confusions among selected stimuli will indicate the degree of impairment of the internal representations of those sounds, which will then be related to the measures of frequency resolution.

PRIOR AND CURRENT PROGRESS
This grant was approved by NIH in January 1989, and funding began April 1, 1989. None of the experiments has been initiated yet. Several pieces of experimental equipment have been purchased, and computer programming to support this research is currently underway. We have actively solicited applications from candidates for the position of Research Associate funded under this award. An individual has been identified, and, with cooperation from CPO, will be on board by August 1, 1989.

CONCLUSIONS
Each experiment proposed in this grant will be carried out under its own work unit number. Descriptions of progress and the use of human subjects will be submitted individually for each project.
TITLE: Normalization of Endothelial Phenotype on Vascular Grafts

KEYWORDS: endothelial cells, hyperplasia, vascular surgery

PRINCIPAL INVESTIGATOR: Sharefkin, John MD

DEPARTMENT: Department of Surgery
SERVICE: Peripheral Vascular Surgery Service

STATUS: Ongoing
APPROVAL DATE: May 1988

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To test the hypothesis that endothelial cell derived smooth muscle mitogens play an important role in the causation of smooth muscle hyperplasia at sites of blood vessel reconstruction.

TECHNICAL APPROACH
To employ cultures of adult human saphenous vein endothelial cells and adult human smooth muscle cells to study the effects of culture substrates and growth factors on endothelial cell mitogen gene expression and paracrine stimulation of smooth muscle cell mitosis.

PRIOR AND CURRENT PROGRESS
During the first project year the principal investigator has focused on spending most of his time in the laboratory of Dr. Esther Chang at USUHS to improve his knowledge of recombinant DNA methods for study of growth factor gene expression in endothelial cells. As a result of this collaboration oligonucleotide probes for the DNA and RNA of platelet derived growth factor have been designed and ordered. We plan to employ these in transcription measurements for these genes during the summer of 1989. Present plans to start these experiments should be facilitated by the planned hiring of two vascular surgical residents with prior cell culture experience during the summer and fall of 1989.

CONCLUSIONS
No conclusions have been reached from the above activities because they have consisted largely of the further training of the principal investigator in recombinant DNA methods for use in 1989-1990.
TITLE: Intracellular Studies with Epidermal Growth Factor

KEYWORDS: EGF, processing

PRINCIPAL INVESTIGATOR: Seyfer, Alan COL MC
ASSOCIATES: Schaudies, Paul CPT MS

DEPARTMENT: Department of Surgery
SERVICE: Plastic Surgery Service

STATUS: Ongoing
APPROVAL DATE: Mar 1988

FUNDING: Current FY: $ Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
a) To determine the effect of EGF on human breast cancer cell lines; b) to study interactions between growth factor and malignant cells.

TECHNICAL APPROACH
Attempt to establish malignant cell lines and to assay cells in terms of binding internalization, processing and growth responsiveness to EGF.

PRIOR AND CURRENT PROGRESS
Initial attempts to culture tissue yielded only normal fibroblasts. These cells bound EGF, but were not the targeted cells.

CONCLUSIONS
Shift emphasis in the direction of measuring growth factor levels in excised normal and malignant breast tissue.
TITLE: Adverse Reactions and Anti-Protamine Antibodies in Patients Undergoing Cardiopulmonary Bypass

KEYWORDS:

PRINCIPAL INVESTIGATOR: Graeber, Geoffrey LTC MC

DEPARTMENT: Department of Surgery
SERVICE: Thoracic Surgery Service

STATUS: Terminated
APPROVAL DATE: Apr 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
ADMINISTRATIVELY TERMINATED

TECHNICAL APPROACH
ADMINISTRATIVELY TERMINATED

PRIOR AND CURRENT PROGRESS
ADMINISTRATIVELY TERMINATED.

CONCLUSIONS
ADMINISTRATIVELY TERMINATED.
STUDY OBJECTIVE
To study the metabolic activation and deactivation of chemical carcinogens in cultured lung and colon explants. To study the capability of human lung and colon epithelium to metabolize chemical carcinogens to mutagens. To investigate biochemical differences of normal and tumor tissue.

TECHNICAL APPROACH
Lung and colon tissue removed at time of biopsy or resection are transported to NIH where tissue cultures will be established and cytochemical studies performed. These results will be compared to demographic and environmental profiles.

PRIOR AND CURRENT PROGRESS
We continue to obtain tissue samples and to transport them to NIH. Results have not yet been analyzed.

CONCLUSIONS
Ongoing.
REPORT DATE: 03/10/89
WORK UNIT #: 2814C

DETAIL SUMMARY SHEET

TITLE: NPCPP 900 A Comparison of Long-term Adjuvant Chemotherapy with Cyclophosphamide, Estracyt, or no Additional Treatment in Patients with Definitive Surgical Treatment for Adenocarcinoma of the Prostate

KEYWORDS: cyclophosphamide, estracyt, adenocarcinoma/prostate

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service
STATUS: Ongoing
APPROVAL DATE: Apr 1980

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To compare long-term adjuvant chemotherapy with Cyclophosphamide, Estracyt, or no additional treatment in patients with definitive surgical treatment for adenocarcinoma of the prostate.

TECHNICAL APPROACH
Patients are randomly selected to receive one of the above treatment regimens.

PRIOR AND CURRENT PROGRESS
Nineteen patients are still being followed in the Urology Clinic at WRAMC. These patients have prostate cancer and are being treated as their clinical situation dictates. Of the 19 patients being followed on this protocol only two patients have died from prostate cancer. The only incidence of unexpected adverse reaction seen has been progression of prostate cancer.

CONCLUSIONS
NPCPP protocol 900 is still in progress. We are just doing followup at this time. This protocol requires long-term followup which will be performed by those who were investigators in the group. The data are being managed by Dr. Bartolucci of the University of Alabama.
REPORT DATE: 03/10/89

DETAIL SUMMARY SHEET

TITLE: NPCPP 1000 A Comparison of Long-term Adjuvant Chemotherapy with Cyclophosphamide, Estracyt, or no Additional Treatment in Patients who had Definitive External Beam or Interstitial Radiotherapy for Adenocarcinoma of the Prostate

KEYWORDS: cyclophosphamide, estracyt, adenocarcinoma/prostate

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
Chemotherapy and Hormonal therapy in prostate cancer.

TECHNICAL APPROACH
Multi-institutional study of prostate cancer patients.

PRIOR AND CURRENT PROGRESS
Twenty-eight patients are still being followed in the Urology Clinic at WRAMC. These patients have prostate cancer and are being treated as their clinical situation dictates. Of the 28 patients being followed on this protocol five patients have died from prostate cancer and one was lost to follow-up. The only incidence of serious or unexpected adverse reactions has been progression of prostate cancer.

CONCLUSIONS
NPCPP protocol 1000 is still in progress. We are doing followup only at this time. This protocol requires long-term followup, which will be performed by those who were investigators in the Group. The data are being managed by Dr. Bartolucci of the University of Alabama.
TITLE: NPCPP 1700 A Comparison of Diethylstilbestrol (DES) or Orchiectomy vs. Buserelin vs.DES or Orchiectomy Plus Methotrexate in Newly Diagnosed Patients with Clinical Stage D Carcinoma of the Prostate who have not had Hormonal Treatment or Orchiectomy

KEYWORDS: DES (diethylstilbestrol), orchiectomy, buserelin

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To compare the efficacy of the LHRH analog Buserelin versus DES/Orchiectomy versus DES/Orchiectomy plus Methotrexate.

TECHNICAL APPROACH
Patients are randomized to one of the three treatment arms.

PRIOR AND CURRENT PROGRESS
We randomized 17 patients and still follow 5 patients. Since 1983 12 patients have died from prostate cancer.

CONCLUSIONS
A total of 265 patients entered the study from the United States. Ten complete regressions were reported. The analysis of survival by treatment indicates that 58 of the 261 patients (22%) have died. There is no difference in survival among the 3 treatment determined by the log rank statistic. In progression-free survival curves the analysis shows 136 of the 261 patients (52%) failed.
DETAIL SUMMARY SHEET

TITLE: NPCP 2200 A Comparison of Leuprolide with Leuprolide and Flutamide in Previously Untreated Patients with Clinical Stage D2 Cancer of the Prostate

KEYWORDS: leuprolide, flutamide, prostate Ca

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

STATUS: Ongoing
APPROVAL DATE: Feb 1985

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To try and determine if the antiandrogen Flutamide will increase the efficacy of Leuprolide.

TECHNICAL APPROACH
Patients are randomized to receive Leuprolide and Flutamide or Leuprolide and placebo. At the time of progression the blind is broken, and patients not receiving Flutamide will be given the drug.

PRIOR AND CURRENT PROGRESS
This study is a multiple group cooperative effort and accrual of 600 patients is expected. WRAMC randomized 24 patients to the protocol. Three patients are being followed on drug. Five patients are being followed off drug. Fifteen patients have died due to prostate cancer. One patient is lost to follow-up.

CONCLUSIONS
None at present.
TITLE: UCOG 100: A Phase II Trial of Interferon Alpha 2-b (INTRON A) as Adjunct Therapy in Resected Renal Cell Carcinoma at High Risk or Relapse

KEYWORDS: interferon alfa 2-b, intron A, renal cell Ca

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

STATUS: Ongoing
APPROVAL DATE: Feb 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To determine the efficacy of Intron A when given in an adjuvant setting to patients surgically cured of renal cell carcinoma at high risk of recurrence. The effect of Intron A on the frequency and sites of relapses shall be determined. Progression-free survival and overall survival will be the primary endpoints of the study.

TECHNICAL APPROACH
This is a multicenter, randomized phase III clinical trial in which patients rendered pathologically disease-free following resection of Stage III of non-Metastatic Stage IV tumor will receive either adjuvant Intron A three times a week (M,W,F) for 6 months or no further treatment.

PRIOR AND CURRENT PROGRESS
This is a multicenter study and accrual for the study is expected to total 100 patients. WRAMC has randomized 7 patients. Three patients are being followed on drug. Four patients are being followed off drug.

CONCLUSIONS
It is too soon to draw any conclusions.
TITLE: A Multicenter Fixed-Dose Study of the Safety and Efficacy of Terazosin in the Treatment of Patients with Benign Prostatic Hypertrophy

KEYWORDS: Terazosin, benign prostatic, hypertrophy

PRINCIPAL INVESTIGATOR: McLeod, David COL MC

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

STATUS: Completed
APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 
Previous FYs: $ 0 
Total: $ 0

STUDY OBJECTIVE
The objective of this study is to evaluate the safety and efficacy of three dosage levels of Terazosin versus placebo in the treatment of the symptoms of benign prostatic hypertrophy.

TECHNICAL APPROACH
This is a multicenter, Phase III, double-blind, parallel group, placebo controlled study of once-a-day administration of terazosin to patients with symptomatic BPH. The study will be divided into two parts: 1) A four week, single-blind, placebo lead-in period, and 2) A 12 week, double-blind treatment period.

PRIOR AND CURRENT PROGRESS
A total of 160 patients were to be studied. WRAMC was expected to accrue 24 patients. We were only able to obtain 1 patient for the trial. Due to our minimal enrollment we have elected to terminate the study with the sponsors permission.

CONCLUSIONS
None.
DETAIL SUMMARY SHEET

TITLE: North American Genitourinary Study Group

STUDY OBJECTIVE

This study was never funded by the National Cancer Institute (NCI). At the site visit, the group did not receive a high enough priority score to be funded by the National Cancer Institute.
DETAIL SUMMARY SHEET

TITLE: A Multicenter Comparison of the Safety and Efficacy of Lomefloxacin and Norfloxacin in the Treatment of Complicated Urinary Tract Infection

KEYWORDS: lomefloxacin, norfloxacin, urinary tract infection

PRINCIPAL INVESTIGATOR: McLeod, David COL MC
ASSOCIATES: Costabile, Raymond MD; Foley, Jack MD

DEPARTMENT: Department of Surgery
SERVICE: Urology Service

STATUS: Completed
APPROVAL DATE: Sep 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To compare the efficacy and safety of 400mg of lomefloxacin administered once daily and 400mg of norfloxacin administered twice daily in the treatment of adult patients with complicated urinary tract infections.

TECHNICAL APPROACH
This is a multi center, randomized, single-blind comparison of 400mg of lomefloxacin given once daily and 400 mg norfloxacin given twice daily in the treatment of complicated urinary tract infections.

PRIOR AND CURRENT PROGRESS
Approximately 220 patients will be enrolled in this study. Walter Reed Army Medical Center has enrolled 15 patients. There have been no complications reported for the patients on this study.

CONCLUSIONS
None as yet.
DETAIL SUMMARY SHEET

TITLE: Mouse Inoculation Test-Rabies Diagnosis

KEYWORDS: rabies

PRINCIPAL INVESTIGATOR: Mouer, Thomas DAC
ASSOCIATES: Choyce, Richard DAC

SERVICE: Veterinary Services

STATUS: Ongoing

APPROVAL DATE: Dec 1986

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
To establish and maintain a standing procedure for the mouse inoculation test as a means of diagnosis for rabies virus and as a confirming test for the fluorescent rabies antibody test (FRA).

TECHNICAL APPROACH
Inoculation of 3-4 week old mice with 10 percent suspension of the suspect animal brain tissue is utilized as a diagnostic method by veterinary and state and federal laboratories world-wide to confirm FRA tests.

PRIOR AND CURRENT PROGRESS
This test has provided this laboratory with confirming results for the past ten years.

CONCLUSIONS
The test is essential for confirming positive and negative FRA tests.
DETAIL SUMMARY SHEET

TITLE: Production of Positive and Negative Control Slides and Mouse Brain Suspension for Fluorescent Rabies Antibody Test

KEYWORDS: rabies

PRINCIPAL INVESTIGATOR: Mouer, Thomas DAC
ASSOCIATES: Choyce, Richard DAC

SERVICE: Veterinary Services

STATUS: Ongoing
APPROVAL DATE: Dec 1986

FUNDING: Current FY: $0 Previous FYs: $0 Total: $0

STUDY OBJECTIVE
The production of positive and negative control slides and the production of absorbing suspensions for specific rabies antigen identification are planned.

TECHNICAL APPROACH
Brain suspensions of normal and rabies infected mouse brain are used to identify rabies antigen in suspect brain tissue. Fluorescein labeled anti-rabies globulin is used for all positive, negative and suspect tissue.

PRIOR AND CURRENT PROGRESS
Veterinary laboratories and state and federal public health laboratories use the techniques for the production of diagnostic materials for FRA rabies testing.

CONCLUSIONS
No changes are anticipated. The need for the 3 to 4 week old mice for reagent production will not change in FY 1990.
REPORT DATE: 06/02/89

DETAIL SUMMARY SHEET

TITLE: The King Lær Test

KEYWORDS: lactate, exercise, ischemia

PRINCIPAL INVESTIGATOR: Fishbein, William MD

DEPARTMENT: Armed Forces Institute of Pathology
SERVICE: Biochemistry Division

STATUS: Completed

APPROVAL DATE: Nov 1985

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
Evaluation of neuromuscular function by a short and simple but carefully conducted and quantified ischemic exercise test.

TECHNICAL APPROACH
A dynamometer interfaced to a chart recorder/integrator is squeezed maximally every other second for two minutes. Then 5 blood samples are drawn under stasis at 2 minute intervals with computer analysis of work and impulse performed, and compared with blood ammonia and lactate responses over a 10 minute period.

PRIOR AND CURRENT PROGRESS
Over the last 18 months our tests have been confined primarily to referral cases with possible myopathy, rather than normal volunteers. Total enrollment, as of the end of May 89, is now 57 cases with 12 repeats. No further cases of syncope or other side-effects have been encountered.

CONCLUSIONS
This seems to be a useful provocative exercise test which should help in the characterization of neuromuscular disease, and point the way for further metabolic studies that might be of additional diagnostic value. Further tests will be performed under the AFIP HUC, under the same guidelines currently being used.
STUDY OBJECTIVE
To evaluate the correction of aphakia with intraocular lens implantation.

TECHNICAL APPROACH
a) Standard extracapsular extraction with posterior chamber lens implantation;
b) Anterior chamber lens implant for cases with break in posterior capsule or vitreous prolapse;
c) Secondary anterior chamber lens implant for patients with aphakia who could not tolerate glasses or contact lenses;
d) Secondary posterior chamber lens implant for patients with aphakia who could not tolerate glasses or contact lenses with intact posterior capsule.

PRIOR AND CURRENT PROGRESS
In 1987 all were primary implants: 26 posterior chamber and 3 anterior chamber implants. In 1988 all were primary implants: 37 posterior chamber and 1 anterior chamber implants. Since 1985 we used only one rigid anterior chamber lens which was Liske in 1985. Followup showed no side-effects on cornea or chamber angle or recurrent hyphema.

CONCLUSIONS
There were no serious or unexpected side-effects from cataract extraction and intraocular lens implantation. All cases were planned extracapsular extraction; 97.4% had posterior chamber lens implant. Extracapsular cataract extraction and intraocular artificial lens implants (especially posterior chamber lens) are continued as the best method of visual rehabilitation after cataract extraction for eligible patients.
TITLE: Utilization of Goats for Training of DOD Medical Department Officers During Conduct of the Advanced Trauma Life Support Course (ATLS) at the US Army Medical Dept Act, Ft Knox, KY

KEYWORDS:

PRINCIPAL INVESTIGATOR: Warncke, Ronald LTC MC

DEPARTMENT: ZArmy Community Hospitals

SERVICE: Ireland AH, Fort Knox, KY

STATUS: Ongoing

APPROVAL DATE: May 1987

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
Data unavailable at time of publication.

TECHNICAL APPROACH
Data unavailable at time of publication.

PRIOR AND CURRENT PROGRESS
Data unavailable at time of publication.

CONCLUSIONS
Data unavailable at time of publication.
STUDY OBJECTIVE
To determine whether commercially produced dental liquid products are acceptable to patients on a dental liquid diet following jaw injuries or other dental problems.

TECHNICAL APPROACH
Patients were asked to rate first the current hospital dental liquid diet and then the research diet using a 7 point hedonic scale. Dietitians also answered questionnaires on the research product. During the evaluation periods self reporting and dietitian evaluation of portions consumed were recorded. A repeated measure design was used.

PRIOR AND CURRENT PROGRESS
Ninety six patients participated in this triservice multicenter study. There were no adverse reactions or direct benefits to patients studied at WACH, Ft. Bragg, NC.

CONCLUSIONS
Dietitians preferred the new liquid products in comparison to the current products. Nutrient and calorie intake were sufficient for males but certain vitamin-mineral intakes were low for females. It may be beneficial to reduce portion size of the liquids while maintaining the nutrient content.
REPORT DATE: 01/16/90

DETAIL SUMMARY SHEET

TITLE: Clinical Testing of the Lightweight Special Forces X-Ray System

KEYWORDS: x-ray, testing

PRINCIPAL INVESTIGATOR: Dillis, Charlotte MAJ MC

DEPARTMENT: ZArmy Community Hospitals
SERVICE: Womack ACH, Fort Bragg, NC

STATUS: Completed
APPROVAL DATE: May 1988

FUNDING: Current FY: $ 0 Previous FYs: $ 0 Total: $ 0

STUDY OBJECTIVE
During the period from April-June 1989, the Special Forces x-ray system was tested on approximately 15 patients presenting for care at Womack Army Community Hospital and its troop medical clinics.

TECHNICAL APPROACH

PRIOR AND CURRENT PROGRESS
No patient complaints or adverse effects have been reported. Only extremity radiographs were obtained. These were all found to be of excellent diagnostic quality. Comparable to radiographs obtained with standard systems. Grid lines on the radiographs were quite prominent, potentially interfering with the detection of subtle fractures. The type of grid, however, could easily be altered. Due to the configuration of the equipment, the technicians experienced difficulty positioning patients for standard views, and thus a "lateral" unusual degree of obliquity. Geometric distortion due to the shortened source-film distance was less than expected, though most of our studies were of small body parts. This distortion would be expected to be much greater when radiologists. The importance of "standard" views would be even greater in a field situation where providers other than radiologists may be interpreting radiographs.

CONCLUSIONS
The Lightweight Special Forces X-Ray machine has the capability to produce diagnostic quality radiographs. There are, however, multiple problems associated with the machine's configuration. The Special Forces will have to determine whether or not these limitations are acceptable in light of their projected uses of the system.
TITLE: Acceptability of Spermicide-Lubricated Condoms Among U.S. Military Personnel

KEYWORDS:

PRINCIPAL INVESTIGATOR: Magruder, Charles CPT MC

DEPARTMENT: Z Army Community Hospitals
SERVICE: Womack ACH, Fort Bragg, NC

STATUS: Completed
APPROVAL DATE: Jun 1988

FUNDING: Current FY: $ 0  Previous FYs: $ 0  Total: $ 0

STUDY OBJECTIVE
To determine whether spermicide - lubricated condoms are more acceptable than lubricant - only condoms.

TECHNICAL APPROACH
The study has been temporarily discontinued due to personnel losses.

PRIOR AND CURRENT PROGRESS
The study has been temporarily discontinued due to personnel losses.

CONCLUSIONS
The study has been temporarily discontinued due to personnel losses.