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Introducing the 1st Issue of NCI CAM News

The Office of Cancer Complementary and Alternative Medicine (OCCAM) is pleased to announce the first issue of its biannual newsletter NCI CAM News. OCCAM, located within the Office of the Director at the National Cancer Institute (NCI), serves to coordinate and stimulate complementary and alternative medicine (CAM) research across all divisions of the Institute. We have created this newsletter to bring you the latest on NCI-sponsored research, funding opportunities, meetings and workshops, as well as educational information on cancer and CAM. While this issue was designed to introduce OCCAM's programs and highlight our activities, future issues will feature cancer CAM projects from the full range of NCI's activities in addition to OCCAM program updates.

What is OCCAM?

Established in October 1998, OCCAM is responsible for NCI's growing research agenda in CAM as it relates to cancer prevention, treatment, symptom management, and rehabilitation. OCCAM also acts as NCI's primary link to CAM communities and cancer researchers regarding CAM and cancer. OCCAM is directed by Dr. Jeffrey D. White, a medical oncologist with a background in laboratory and clinical cancer research.

OCCAM has been building bridges between CAM practitioners and the cancer research community, creating additional funding opportunities to test CAM approaches using scientifically rigorous research methods, working with other NCI programs to facilitate the testing of CAM approaches to cancer management, helping CAM researchers with the grant application process, and investigating research challenges unique to CAM approaches. In addition, OCCAM has collaborated with other nongovernmental and governmental organizations, such as the National Center for Complementary and Alternative Medicine (NCCAM), on cancer CAM issues. Through its activities and those of many other programs at the Institute, NCI's

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

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research expenditures for CAM have more than quadrupled (fiscal year 1998 - \$28.2 million, fiscal year 2004 - \$129 million).

Research Development and Support Program

The Research Development and Support Program (RDSP) is directed by OCCAM Deputy Director Dr. Wendy B. Smith, M.A., Ph.D., B.C.I.A.C., a research psychologist with advanced training in hypnosis and a nationally certified biofeedback therapist. Dr. Smith joined NIH in 1990 as a research psychologist with the Anesthesiology and Neurobiology Branch of the National Institute of Dental and Craniofascial Research. She came to OCCAM in 2000 to lead RDSP.

This program was established to help investigators by identifying and creating funding opportunities and providing assistance in the pre- and postreview periods of grant application. Working to stimulate research in cancer CAM, RDSP staff design activities that will develop the foundation of science in this area of medicine. RDSP hosts a series of Expert Panels in Cancer CAM Research, the Invited Speakers Series, and workshops to help investigators prepare grant applications in cancer CAM.

Practice Assessment Program

The Practice Assessment Program (PAP) is directed by Dr. White and coordinated by Commander (CDR) Colleen Lee, RN, M.S., AOCN®, a certified advanced practice oncology nurse and a commissioned officer in the US Public Health Service. Prior to coming to OCCAM in 2001, CDR Lee was a clinical research nurse in the Nursing Department at the National Institutes of Health (NIH).

PAP reviews retrospective and some prospective data on cancer patients treated with alternative therapies. The NCI Best Case Series Program, the most wellknown component of PAP, provides an opportunity for CAM practitioners to submit medical data regarding their cancer CAM treatments. Practitioners are asked to submit patient records for evaluation by experts in clinical assessment and cancer treatment research. Results of the NCI Best Case Series Program include recommendation for NCIinitiated research and the sharing of well-documented best cases with interested members of the scientific community in order to stimulate research.

Communications and Outreach Program

The Communications and Outreach Program (COP) is directed by Dr. White and coordinated by Shea Buckman, M.A., a health communication professional who recently joined OCCAM after serving as both a media specialist and the exhibit program coordinator for NCCAM.

COP disseminates information about NCI program initiatives and funding opportunities, workshops and other events, and educational materials through OCCAM's Web site and publications. In addition, COP assesses the opinions, interests, and informational needs of cancer researchers, CAM practitioners, and cancer patients regarding CAM research via surveys and focus groups. Results from these explorations are used to guide outreach efforts to these communities.

Contact Information

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CRTA Fellow
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CRTA Fellow

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OCCAM Staff 2005

First row from left: CDR Colleen Lee, Dr. Jeffrey White, Dr. Wendy Smith.

Second row: Dr. Libin Jia, Dr. Oluwadamilola Olaku, Christina Armstrong, Dr. Phil Tonkins, Jr..

Third row: Tai Baker, Ashanti Certain, Elisabeth Beaver, Shea Buckman, Karen Alladin. Not pictured: Dr. Dan Xi

Would you briefly describe your educational and professional background?

I have a bachelors of science in Applied and Engineering Physics from Cornell University, and my M.D. is from Howard University. My internal medicine, hematology, and medical oncology training was all done at the Washington Hospital Center here in D.C., and I am board certified in Internal Medicine and Medical Oncology. I came to NCI in 1990 as a Medical Staff Fellow in the Metabolism Branch. There I was involved in pre-clinical and clinical Immunology research with a focus on monoclonal antibody therapies for leukemias and lymphomas, predominantly adult T-cell leukemia/lymphoma. In 1997, I became the director of the Branch's Clinical Trials and Clinical Care Program.

Since you have a conventional medicine background, how did you become involved in CAM? Did you have an interest in this area?

I developed a personal interest in nutrition as an undergraduate. I began reading lay nutrition literature, which often addresses CAM issues, as well as some nutrition research findings. My interest in this area eventually led me into the field of medicine. Throughout the early years of my career, I was not able to find an outlet for these interests. However, in 1992, I noticed the establishment of the NIH's Office of Alternative Medicine (OAM), now NCCAM, and got to know its first interim director, Dr. Stephen Groft. From 1995 to 1998, I was a consultant on oncology research issues to Dr. Wayne Jonas, then director of OAM. Then, in the summer of 1998, Dr. Robert Wittes, who then was NCI's Deputy Director for Extramural Science, began talking with me about the Institute's need for a more focused activity in CAM, and together, we conceptualized OCCAM. I was appointed as the director of this office and have been serving in this position since its establishment.

What are OCCAM's mission and operating philosophy?

This office was established within NCI's Office of the Director to augment the activities of the different divisions at NCI that were already supporting CAM research. Our mission is to



OCCAM Director Dr. Jeffrey D. White

promote and support research of CAM modalities with respect to the prevention; diagnosis; and treatment of cancer, cancer-related symptoms, and side effects of conventional treatment. We are also charged with coordinating NCI's CAM research and information activities, as well as NCI's interactions with other governmental and nongovernmental organizations on CAM cancer issues. In addition, we provide an interface for the Institute with healthcare practitioners and researchers regarding CAM cancer issues.

Our philosophy is to assist in the growth of CAM research within NCI by increasing the capacity of the various relevant programs to

support that research and keep it integrated throughout NCI. We feel that much of CAM research relates very closely to certain conventional areas of research—the broad ones being nutrition, natural products, and psychology/behavioral medicine. These topics are represented in many programs within NCI, and so NCI's CAM portfolio is distributed throughout those programs.

Rather than segregate this research by pulling all grants categorized as CAM research together into one portfolio in any one office, we think the research will best flourish when it is being managed by people with the expertise in the specific cancer activities and science areas that I mentioned. OCCAM can be supportive of the growth of this research by adding the expertise in helping investigators look at some of these challenging areas. We are also working to attract more experienced investigators to either take up research in this area or to contribute their knowledge in important ways such as through methodology working groups.

What CAM topics are most interesting to NCI?

NCI is interested in the full spectrum of CAM therapies. We

are looking at the field as potentially having many scientific opportunities rather than assuming that those opportunities are in any one particular area. So far, we have focused on being responsive to the research community's interests by providing support mechanisms that are open to a wide range of cancer CAM research topics. The majority of what NCI funds in CAM is from investigatorinitiated research. One of OCCAM's responsibilities is to identify and explore areas within cancer and CAM that might warrant specific initiatives. This is an area that we hope to be exploring more in the coming years.

How does OCCAM collaborate with other NCI offices?

One example is our work with the Office of Centers, Training and Resources (OCTR), specifically with its Cancer Centers Branch. The first NCI-sponsored CAM research initiative was started in Fiscal Year 2001 and involved the solicitation and competitive review of applications from NCIsponsored cancer centers for supplemental funding. The supplemental funding was to be used to establish CAM research components within these centers. We also collaborated with NCCAM on this project and were able to fund six of these supplements at centers around the country. Each of these centers was funded for three years at up to \$400,000 per year. Goals for the centers included obtaining pilot project data that could then be used to generate R01 applications, increasing opportunities for collaboration between cancer center investigators and CAM practitioners, and finally, establishing foci of cancer CAM activity that could develop into a continuing program.

What would you like to see more of in the area of CAM?

One of the good things about this field is that there is a lot to do in it. I think there is need for more of everything really—more research, more high-quality information resources, more dialog between the conventional and CAM practice and cancer research communities. So, all of those things need to be addressed in one way or another.

Where do you see OCCAM in five years?

OCCAM has grown substantially since it was established in the fall of 1998. The scope of our activities has expanded, as has our

ability to generate new initiatives, establish new collaborations with members of the research and practitioner communities, and expand NCI's role in CAM research and information.

We are now very involved in cataloging and analyzing what the Institute has accomplished in CAM. To this, we will add information that we are gathering about ongoing CAM practices and other cancer CAM research. Then, we will be better able to define areas of opportunity, tackle challenges, and begin developing activities and initiatives specifically designed to address these issues. We will design these projects in collaboration with the relevant programs within NCI, thereby integrating our activities with the evolving priorities of the Institute. We will aggressively look for funding partners within and outside the government for the new funding initiatives related to these activities.

We have also started some outreach activities to learn better how to build effective collaborations between cancer researchers and CAM practitioners. As this work matures, we will be in a better position to support the important and necessary dialog between these communities.

One more area where we are planning increased activities in the coming years is in providing the conventional healthcare practitioners with good quality information on CAM approaches, packaged in a way that makes it

be involved in cancer research activities, regardless of the setting or their level of interest in CAM. Each intern will also work on a literature review project, mentored by a senior staff member, which will be submitted for publication.

"NCI is interested in the full spectrum of CAM therapies."

useful to their daily practice and decision making.

What is OCCAM's role in training researchers, CAM practitioners, and people working on cancer information programs?

We have recently begun hosting Cancer Research Training Award (CRTA) interns within the office. Our goal is to have two predoctoral interns here to learn about the grant process, explore approaches to building cancer CAM research, and help support investigators. In addition, this internship will give them experience in generating information resources and establishing research collaborations between CAM groups and conventional research groups. I think these experiences are relevant to people who want to We are also announcing an opening for a post-doctoral fellow who will work with me on some large scale literature reviews and have many of the same training experiences as the CRTA interns. The fellow will also be involved in the NCI Best Case Series Program.

Although we do not train practitioners to practice CAM, our Practice Assessment Program is involved in dialoging with them about gathering data, the value of independent review, and evaluation of their clinical observations. Also, through our Communications and Outreach Program, we contribute to the development of information resources about CAM practices commonly used by cancer patients. This information provides practitioners with an assessment of the evidence pertaining to these therapies. We also participate in NCI's Health Communications Internship Program.

Grant to Develop International Research Partnership

In October 2005, NCI awarded a \$2.15 million grant to build upon and support ongoing studies of the International Center of Traditional Chinese Medicine for Cancer. This grant continues the partnership between The University of Texas M. D. Anderson Cancer Center (MDACC) with the Cancer Hospital, Fudan University (CHFU) in Shanghai, China, which was formed as a result of a pilot grant awarded in 2003.

This four year U19 grant will support the ongoing investigation of three aspects of traditional Chinese medicine: herbal and natural treatments that target the disease and related symptoms; acupuncture for dealing with some side effects of cancer treatment; and the bio-behavioral effects of qigong and other mind/body-based interventions. While NCI has supported research of individual topics related to traditional Chinese medicine (such as acupuncture), this collaboration was the first of its kind and remains unique for NCI as the only international center devoted to cancer CAM research.

Dr. Lorenzo Cohen of MDACC is the principle investigator of this grant. Dr. Cohen is an Associate Professor, the Director of the Integrative Medicine Program, and the Chief of the Section of Integrative Medicine in the Departments of Behavioral Science and Palliative Care & Rehabilitation Medicine at the MDACC.



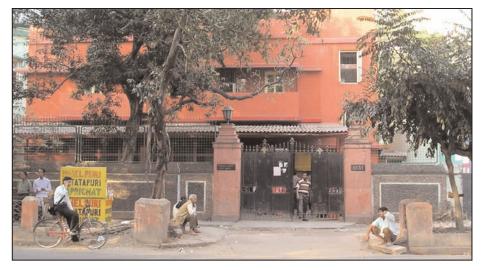
Dr. Lorenzo Cohen

CAM Practitioners Can Get Involved: The NCI Best Case Series Program

The NCI Best Case Series (BCS)
Program invites CAM
practitioners to submit
retrospective data on patients
(clinical history in addition to
radiographic and pathology
reports) that document significant
tumor reduction in response to an
alternative modality for cancer
treatment. Each case is reviewed
against the same rigorous
standards of evidence as novel

conventional cancer therapies. The NCI BCS Program offers practitioners who treat patients using CAM early, expert assistance in identifying and compiling persuasive case studies, as well as the opportunity to have their data evaluated at NIH. The primary goal of this program is to obtain and review sufficient information to determine if NCI-initiated research on a specific intervention is warranted.

An example of a completed NCI Best Case Series involves homeopathy at The P Banerji Homeopathic Research Foundation (PBHRF) in Calcutta, India. The Drs. Prasanta and Pratip Banerji presented cases of 4 patients (2 with lung cancer and 2 with esophageal cancer) treated with their specific approach to homeopathy who had radiographically documented improvement of their tumors while reportedly receiving only the homeopathic preparations prescribed at the PBHRF clinic. OCCAM is currently working with researchers at the All India Institute of Medical Sciences to obtain approval for a prospective outcomes monitoring and evaluation study (POMES) in Calcutta, India at the PBHRF Clinic. This study will provide a mechanism for independent, prospective documentation and assessment of the responses that



P. Banerji Homeopathic Research Foundation (PBHRF) in Calcutta, India

occur in at least 30 sequential new lung cancer patients treated in these clinics with the goal of determining if a prospective clinical trial could and should be done.

CAM practitioners interested in compiling case studies for the NCI BCS Program may obtain a submission packet by visiting the OCCAM Web site at http://www.cancer.gov/cam/attachments/2004_bcs_submission_packet.pdf.

Best/Worst Cases – International Workshop

In June 2005, the National Research Center in Complementary and Alternative Medicine (NAFKAM) hosted the

first international workshop on best and worst cases of patients' use of alternative treatment. Held in Tromsø, Norway, researchers from the United States, Germany, Denmark, Sweden, and Norway gathered with the purpose of exchanging knowledge, sharing experiences related to best and worst cases, and discussing joint efforts in the years to come. The themes of the workshop included terminology and definitions, best-cases and exceptional patients, procedures for registration of best- and worstcases, experience with procedures of medical assessment, and research projects on best-cases and exceptional patients.

The institutions and sessions included in the workshop were the following:

- NCI- NCI Best Case Series Program focusing on cancer
- Columbia University,
 Mailman School of Public
 Health a completed
 cancer best-case series
 review and a published
 report
- Klinikum Nurenberg in Germany -"Unconventional and Complementary Methods in Oncology" focusing on a best-case series (spontaneous remission of cancer), clinical research, and systematic reviewing
- Karolinska Institutet in Sweden - Best and Worst Case Series: Exploring Exceptional Experiences of Cancer Patients' Use of Complementary and Alternative Therapies
- University of Tromsø, NAFKAM - Exceptional Case History Register focusing on serious/chronic illnesses
- Multiple Sclerosis Society of Denmark - "Procedures for Registration of Bestand Worst-Cases"

An article is currently being written based on the workshop. In 2007, NCI will host a second international gathering of researchers focusing on best- and worst-cases.

California Health Interview Survey & CAM

NCI's Division of Cancer Control and Population Sciences Applied Research Branch staff is using data from the California Health Interview Survey (CHIS) to examine the use of CAM in preventing and treating cancer and other chronic illnesses. This study, called CHIS-CAM, is a collaborative effort between NCI and the UCLA Center for Health Policy Research. With more than 9,000 respondents, it is the largest statewide population-based survey to document the use of CAM services. The study focuses on a wide-range of CAM modalities, including: alternative healthcare providers, unconventional cancer therapies, special diets, dietary

supplements and vitamins, mind-body techniques (such as relaxation), spiritual/religious therapies, exercise and physical training, and support groups. The results of the first analysis of this study were published in the December 2005 issue (Volume 2, Number 4) of the journal *Evidence-based Complementary and Alternative Medicine*.

For more information about CHIS-CAM, please visit http://appliedresearch.cancer.gov/surveys/cam/.

Funding Opportunities

New Broad Agency Announcements

NCI has issued two Broad Agency Announcements (BAA) soliciting projects that will enhance the state of the science of cancer treatment and CAM. The NCI Best Case Series (BCS) Program is designed to seek out alternative approaches to cancer treatment and these announcements will support the development of quality BCS submissions as well as additional research when warranted.

The BAAs will act as mechanisms to provide funding support for the joint development of BCS and

prospective research projects by CAM practitioners and cancer researchers. These announcements are intended to foster collaborative activities between CAM practitioners and more traditional cancer researchers who might otherwise not be aware of the opportunity to apply their expertise to alternative cancer treatments.

The first announcement, BAA N01-CO-57034-48, supports contracts that have two distinct funding phases. Phase I of the contract will provide limited support funds to prepare a submission to NCI's BCS

Program and develop partnerships between researchers and alternative medicine practitioners. This part of the contract would support travel, documentation development, and staff necessary to complete the submission process. The anticipated product of a successful Phase I would be the documentation of a series of patients that fully meet the NCI BCS Program criteria. A proposal with budget for an appropriate prospective research project (preclinical, clinical, or both) would also be submitted for review prior to Phase II funding. Phase II support may be released to conduct specific types of studies

OCCAM Seeks Postdoctoral Fellow

Through the Clinical Research Training Award (CRTA) program, OCCAM seeks a Postdoctoral Fellow to work on literature review projects with regards to CAM as it applies to prevention, treatment, and the symptom management of cancer. This training opportunity is a chance to gain continuing education and experience within NCI's various organizational components under the guidance of OCCAM.

To be eligible for this fellowship, you must be a medical doctor, bachelor of medicine/bachelor of surgery, or doctor of osteopathy with oncology subspecialty training. Fellowship stipend range is commensurate with level of experience.

For more information about this opportunity, please e-mail ncioccam-r@mail.nih.gov.

on a successful Phase I series that has persuasive evidence warranting further study with NCI resources.

The second announcement, BAA N01-CO-57035-48, solicits proposals for contracts to support prospective research (pre-clinical, clinical, or both) on alternative medicine approaches for which an NCI BCS has been completed and a determination made that NCI-initiated prospective research is warranted.

For more information about the Broad Agency Announcements, please send an e-mail to ncioccam-r@mail.nih.gov.

Current Funding Announcements

Grant applications about cancer CAM topics may be considered responsive to many NCI and NIH funding announcements, regardless of whether the announcements specifically mention CAM. Applicants are strongly encouraged to contact program staff to determine if a specific topic would be considered appropriate. Program staff members are available and can assist investigators throughout the application process.

The following is a list of several research funding opportunities in cancer CAM. Please visit http://www.cancer.gov/cam/research_funding.html for a complete list.

- Diet-Induced Changes in Inflammation as Determinants of Colon Cancer (PA-05-125)
- Quick Trials for Novel Cancer Therapies: Exploratory Grants (PA-04-155)
- Developmental Projects in Complementary Approaches to Cancer (PA-04-053)
- NCCAM Exploratory/ Developmental Grant for Clinical Studies (PA-03-152)
- Basic and Preclinical Research on CAM (PA-05-141)

Help for Grant Applicants

On June 27 and 28, 2005, OCCAM hosted a technical assistance workshop Strategies for Success: How to Write a Grant in Cancer CAM. Researchers interested in CAM research were provided opportunities to learn about Federal and private grant application processes, participate in a mock grant review, and network with representatives from funding and matchmaking organizations. This was the second such workshop hosted by OCCAM.

OCCAM Director Dr. Jeffrey D. White gave an overview of OCCAM and its structure, functions, and opportunities for research funding. Dr. Wendy B. Smith, Deputy Director of OCCAM, presented an overview of the Federal grants process, types of grant mechanisms available, review board operation and organization, and the appeal process. Other presenters included representatives from numerous NIH institutes and centers in addition to private funding organizations such as the Oncology Nursing Society, Cancer Research and Prevention Foundation, American Cancer Society, and the American Society for Therapeutic Radiology and Oncology.

Workshop participants were given an applicant's perspective on

developing cancer CAM research proposals by Andrew Vickers, D.Phil., a successful research methodologist at Memorial Sloan-Kettering Cancer Center (MKSCC). Dr. Vickers described MKSCC's Integrative Medicine Service, which provides cancer patients with massage therapy, acupuncture, music therapy, meditation, hypnosis, yoga, tai chi, and nutritional counseling. He also provided insights into the application and research process through lessons learned from his own career.

During a mock-review session, participants observed the process and also learned of the many challenges and potential solutions for developing competitive cancer CAM grant proposals.

For information on future workshops, please visit OCCAM's Web site at *http://cancer.gov/cam*.

Addressing Methodological Challenges in CAM Research

OCCAM has a publication Expert Opinions on Methodology:
Development of Cancer CAM
Symptom Research available on its
Web site for researchers.
(http://www.cancer.gov/cam/attach
ments/expert-panel-report.pdf)
This publication is based on the
first of OCCAM's series titled

Expert Panels in Cancer CAM Research: Developing the State of the Science in Research Methodologies which explores the major research methodology challenges faced by investigators interested in studying CAM approaches to cancer.

At this first expert panel discussion held in November 2001, experts—researchers, physicians, statisticians, and nurses from leading cancer research and treatment centersreviewed the state of the science in CAM cancer symptom management. Panelists discussed the research design and methodology issues that often cause CAM grant applications to perform poorly during the review process. Other topics discussed included the development of appropriate shams or controls for CAM interventions, development of tools and measurement issues, and ethical and statistical concerns. Scientific papers prepared on these topics can be found in Expert Opinions on Methodology: Development of Cancer CAM Symptom Research.

The second expert panel is scheduled for early 2006. For more information, please check the OCCAM Web site for updates regarding the second Expert Panels in Cancer CAM Research at http://cancer.gov/cam.

Research Highlights

Ginger Treatment For Cancer-Related Nausea and Vomiting

Reprinted from the NCI Cancer Bulletin, May 24, 2005

http://www.cancer.gov/ncicancerb ulletin/NCI_Cancer_Bulletin_05
2405/page8

Nausea and vomiting are among the most distressing and feared side effects of cancer and cancer treatment. Beyond being unpleasant, the nausea and vomiting associated with cancer and its treatment can lead to serious and life-threatening complications, such as nutritional depletion, metabolic imbalance, esophageal damage, expulsion of oral chemotherapy agents, and withdrawal from potentially curative treatment. Thus, effective treatment for nausea and vomiting is critical to the care of cancer patients.



Ginger root

In this trial, researchers are testing the ability of two different doses (lower vs. higher) of the herb ginger to treat delayed nausea and vomiting associated with chemotherapy. Ginger is believed to affect receptors in the digestive tract for the neurotransmitter serotonin. This action is similar to conventional antinausea drugs.

"Ginger has been shown to be effective in a number of clinical trials against nausea and vomiting associated with motion sickness, pregnancy, and postoperative recovery," said Dr. Zick. "With this trial, we hope to determine its efficacy and safety for chemotherapy-induced nausea and vomiting.

"We hope ginger will be effective for patients who continue to experience delayed nausea and vomiting despite treatment with other antinausea drugs," Dr. Zick added.

Researchers seek to enroll 180 cancer patients aged 18 or older who are undergoing chemotherapy and have experiences of nausea or vomiting during or following a previous treatment cycle.

For more information on CAM clinical trials, visit http://www.cancer.gov/cam/clinicaltrials_intro.html or call the NCI's Cancer Information Service at 1-800-4-CANCER (1-800-422-6237).

CAM Information

The Patient's Perspective: What Do Cancer Patients and Caregivers Want to Know?

In view of the large and growing use of CAM among cancer patients, three groups at NCI

(OCCAM, Office of Education and Special Initiatives, and Research and Evaluation Branch) worked with NCCAM to conduct focus groups with cancer patients and caregivers to explore their educational needs regarding CAM. Six 90-minute computerassisted telephone focus group

discussions were conducted with 52 patients and caregivers of patients who had undergone conventional treatment and used complementary medicine for their cancer. In addition, six in-depth telephone interviews were conducted with cancer patients

who used alternative therapy rather than conventional treatments.

This exploratory research with patients and caregivers from across the country found that these individuals often expected and experienced important benefits from seeking and using CAM. Likewise, they perceived important unmet needs for readily accessible, credible, relevant sources of CAM information. They expressed a need for more efficient, systematic, productive ways of finding

trustworthy, relevant sources of information. Typically, they have located information under conditions of great stress and uncertainty, and would welcome improvements in that process.

Results of this study guided the development of a booklet by NCI and NCCAM titled *Thinking about Complementary & Alternative Medicine*. For more information about cancer and CAM or to obtain a copy of the booklet, please call 1-800-4-CANCER (1-800-422-6237).

Finding CAM Information on the NCI Web Site

The public has questions about CAM and cancer. NCI has developed PDQ (Physician Data Query) Cancer Information Summaries on various CAM approaches. These summaries are written by the NCI PDQ Cancer CAM Editorial Board—experts in oncology, pharmacology, natural products, drug discovery and development, representatives from the cancer patient community, plus CAM therapies such as traditional

continued on next page

Looking for CAM Information?

- NCI Office of Cancer Complementary & Alternative Medicine (OCCAM) http://cancer.gov/cam
 - NCI's Cancer Information Service 1-800-4-CANCER
- National Center for Complementary and Alternative Medicine (NCCAM) http://nccam.nih.gov 1-888-644-6226
 - NIH Office of Dietary Supplements Database http://dietary-supplements.info.nih.gov
 - National Library of Medicine, Medline Plus http://www.nlm.nih.gov/medlineplus/
 - Food and Drug Administration http://www.fda.gov

Chinese medicine, acupuncture, and homeopathy. Updated regularly, each summary contains background information about the treatment; a brief history of its development; information about its proposed mechanism(s) of action; and information about relevant laboratory, animal, and clinical studies.

CAM PDQ Cancer Information Summaries are available via the Internet at http://www.cancer.gov/ cancertopics/treatment/cam or by calling the Cancer Information Service at 1-800-4-CANCER (1-800-422-6237).

PDQ CAM-related summaries and other NCI information products are available on the following topics:

- 714-X
- Acupuncture
- Antineoplastons

- Aromatherapy
- Cancell/Entelev
- Cartilage (Bovine and Shark)
- Coenzyme Q10
- Garlic and Cancer Prevention
- Gerson Therapy
- Gonzalez Regimen
- Hydrazine Sulfate
- Laetrile/Amygdalin
- Milk Thistle
- Mistletoe Extracts
- Tea and Cancer
 Prevention

Meetings

Society for Integrative Oncology Conferences

Formed in 2004, the Society of Integrative Oncology (SIO) serves as a scientific forum for complementary therapies used in cancer care. SIO consists of professionals who have a common goal of reducing symptoms and improving the quality of life for cancer patients internationally. SIO promotes the scientific evaluation of complementary modalities, shares study results, and encourages symptom control with therapies that are found to be beneficial.

In November 2004, the1st International Conference of the SIO brought together over 600 healthcare professionals dedicated to studying and facilitating the cancer treatment and recovery process through the use of integrated complementary therapies. There were 87 abstract presentations given during the conference. The keynote address was given by Larry Norton, MD, Memorial Sloan-Kettering Cancer Center. Proceedings are available in the December 2005 issue of the new publication Journal of the Society for Integrative Oncology.

The 2nd SIO International Conference took place at the Manchester Grand Hyatt Hotel in San Diego, California, from November 10-12, 2005. At the conference, Dr. Oluwadamilola Olaku, Scientific Program Analyst at OCCAM, presented selected results of two OCCAM surveys (one conducted with cancer researchers and the other with CAM practitioners) assessing the interests, perceived opportunities, and concerns regarding cancer CAM research.

For more information, visit http://www.integrativeonc.org.

OCCAM's Invited Speaker Series

OCCAM's Invited Speakers Series brings experts to NIH to present issues relevant to or the latest findings of cancer CAM research. On May 5th, 2005, Dr. Lorenzo Cohen of The University of Texas M.D. Anderson Cancer Center presented "Traditional Chinese Medicine for Cancer: The Road to China." Dr. Cohen described how the use of western medical tools. such as medical imaging studies, are guiding traditional Chinese medicine treatments at Fudan Cancer Hospital in Shanghai, China.

In addition to Dr. Cohen's presentation, previous presentations and summary documents of the Invited Speaker Series are available for view through the OCCAM Web site at http://www.cancer.gov/cam/research_invited_speakers.html.

Unique CAM Symposium Held in the United Kingdom

In June 2004, the research symposium Complementary Therapies and Cancer Care was hosted by the Complementary Cancer Care Charities Partnership and the National Cancer Research Institute, with financial support from OCCAM. Since no event of this kind had ever been held before in the United Kingdom, the primary goal of this symposium was to generate an achievable agenda for complementary therapies and cancer care research in the UK. Displaying his ongoing commitment to integrated healthcare, The Prince of Wales delivered the keynote address.

Researchers, health professionals, policy makers, consumers, as well as representatives from major cancer charities attended the symposium with the common goal of advancing the knowledge

of safe complementary therapies for cancer. The necessity for collaboration and communication across many fields and disciplines was a major theme that emerged from the forum. Likewise, participants also held a united belief that the goal of moving the science and practice forward was to benefit cancer patients and their families.

To download the final report from the Complementary Therapies and Cancer Care research symposium or to view a webcast of speakers' presentations, please visit

http://www.fihealth.org.uk/fs_conferences.html.



From left to right: Dr. Brian Berman, Prince Charles, Dr. Michelle Kohn, Dr. Jeffrey White, and Dr. Ricardo Cruciani

Featured Scientific Meetings

Date	Meeting	Location	OCCAM Speaker
February 27-28, 2006	European Organization for Research and Treatment of Cancer and the European School of Oncology: Controversies about Complementary and Alternative Medicine (CAM) in Oncology	Brussels, Belgium	Dr. Jeffrey D. White
April 1-5, 2006	American Association for Cancer Research Annual Meeting	Washington, D.C.	
May 4-7, 2006	Oncology Nursing Society Annual Congress	Boston, MA	CDR Colleen Lee
May 24-27, 2006	North American Research Conference on Complementary and Integrative Medicine	Edmonton, Canada	

To obtain a copy of this newsletter or for inquiries on cancer and CAM, please contact 1-800-4-CANCER (1-800-422-6237).

