

# Summary Of The Workshop On Information Needs To Address Childrens Cancer Risk

Whispering the Strategies of Language: An Psychological Quest through **Summary Of The Workshop On Information Needs To Address Childrens Cancer Risk**

In a digitally-driven world where screens reign supreme and immediate transmission drowns out the subtleties of language, the profound techniques and emotional nuances hidden within phrases often get unheard. Yet, nestled within the pages of **Summary Of The Workshop On Information Needs To Address Childrens Cancer Risk** a captivating fictional treasure pulsating with fresh thoughts, lies a fantastic quest waiting to be undertaken. Composed by a skilled wordsmith, that enchanting opus invites viewers on an introspective journey, softly unraveling the veiled truths and profound influence resonating within the cloth of every word. Within the psychological depths of the emotional review, we can embark upon a honest exploration of the book is key styles, dissect their captivating publishing style, and yield to the powerful resonance it evokes strong within the recesses of readers hearts.

*Subject Index of Extramural Research  
Administered by the National Cancer Institute  
1978* Current information about research grants and contracts supported by the National Cancer Institute. Subject listing gives contract or grant number and topic. Investigator, grant number, and contract number indexes.

## **Summary of the Workshop on Information Needs to Address Childrens Cancer Risk**

Barry Leonard 2000-11-01 Report of a workshop held March 30-31, 2000. It focused on a discussion of children's cancer risk (CCR) assessment & related data needs to address issues that were raised during public review of the Agency's 1999 Draft Revised Guidelines for Carcinogen Risk. These issues include: characterizing the ideal data set to address CCR; & proposed approaches to using available data in the absence of ideal data set. The Workshop focused on four topic areas: Current & Proposed Approaches to Assessing CCR; Enhanced Use of Test Data Related to CCR; Future Directions for Toxicological Testing to Address CCR; & Epidemiological/Molecular Epidemiology Information to Address CCR. Charts & tables.  
*Rational Therapeutics for Infants and Children*  
Institute of Medicine 2000-04-07 The Institute of Medicine's (IOM's) Roundtable on Research and Development of Drugs, Biologics, and Medical Devices evolved from the Forum on Drug

Development, which was established in 1986. Sponsor representatives and IOM determined the importance of maintaining a neutral setting for discussions regarding long-term and politically sensitive issues justified the need to revise and enhance past efforts. The new Roundtable is intended to be a mechanism by which a broad group of experts from the public\* and private sectors can be convened to conduct a dialogue and exchange information related to the development of drugs, biologics, and medical devices. Members have expertise in clinical medicine, pediatrics, clinical pharmacology, health policy, health insurance, industrial management, and product development; and they represent interests that address all facets of public policy issues. From time to time, the Roundtable requests that a workshop be conducted for the purpose of exploring a specific topic in detail and obtaining the views of additional experts. The first workshop for the Roundtable was held on April 14 and 15, 1998, and was entitled Assuring Data Quality and Validity in Clinical Trials for Regulatory Decision Making. The summary on that workshop is available from IOM. This workshop summary covers the second workshop, which was held on May 24 and 25, 1999, and which was aimed at facilitating the development and proper use of drugs, biologics, and medical devices for infants and children. It explores the scientific

underpinnings and clinical needs, as well as the regulatory, legal, and ethical issues, raised by this area of research and development.

### **Research Awards Index** 1986

Designation of Smoking Areas in Federal Buildings United States. Congress. House.

Committee on Energy and Commerce. Subcommittee on Health and the Environment 1987

### **Annual Report, Intramural Activities**

National Cancer Institute (U.S.). Division of Cancer Etiology 1987

### **Integrating Large-Scale Genomic**

**Information into Clinical Practice** Institute of Medicine 2012-03-06 The initial sequencing of the human genome, carried out by an international group of experts, took 13 years and \$2.7 billion to complete. In the decade since that achievement, sequencing technology has evolved at such a rapid pace that today a consumer can have his or her entire genome sequenced by a single company in a matter of days for less than \$10,000, though the addition of interpretation may extend this timeframe. Given the rapid technological advances, the potential effect on the lives of patients, and the increasing use of genomic information in clinical care, it is important to address how genomics data can be integrated into the clinical setting. Genetic tests are already used to assess the risk of breast and ovarian cancers, to diagnose recessive diseases such as cystic fibrosis, to determine drug dosages based on individual patient metabolism, and to identify therapeutic options for treating lung and breast tumors, melanoma, and leukemia. With these issues in mind and considering the potential impact that genomics information can have on the prevention, diagnosis, and treatment of disease, the Roundtable on Translating Genomic-Based Research for Health hosted a workshop on July 19, 2011, to highlight and identify the challenges and opportunities in integrating large-scale genomic information into clinical practice.

Integrating Large-Scale Genomic Information into Clinical Practice summarizes the speaker presentations and the discussions that followed them. This report focuses on several key topics, including the analysis, interpretation, and delivery of genomic information plus workforce, ethical, and legal issues.

### **Federal Register Index**

*EPA National Publications Catalog* United States. Environmental Protection Agency

### **Comprehensive Cancer Care for Children and Their Families**

National Academies of Sciences, Engineering, and Medicine 2015-08-31

Childhood cancer is an area of oncology that has seen both remarkable progress as well as substantial continuing challenges. While survival

rates for some pediatric cancers present a story of success, for many types of pediatric cancers,

little progress has been made. Many cancer treatments are known to cause not only

significant acute side effects, but also lead to numerous long-term health risks and reduced

quality of life. Even in cases where the cancer is considered curable, the consequences of

treatment present substantial long-term health and psychosocial concerns for children, their

families, their communities, and our health system. To examine specific opportunities and

suggestions for driving optimal care delivery supporting survival with high quality of life, the

National Cancer Policy Forum of the Institute of Medicine and the American Cancer Society co-

hosted a workshop which convened experts and members of the public on March 9 and 10, 2015.

At this workshop, clinicians and researchers in pediatric oncology, palliative, and psychosocial

care, along with representatives from the U.S. Food and Drug Administration, National Cancer

Institute, Children's Oncology Group, pharmaceutical companies, and patient advocacy

organizations, discussed and developed a menu of options for action to improve research, quality

of care, and outcomes for pediatric cancer patients and their families. In addition, parents

of children with cancer and pediatric cancer survivors shared their experiences with care and

provided poignant personal perspectives on specific quality of life concerns and support

needs for children and families across the life spectrum. This report summarizes the

presentations and discussion of the workshop.

*Fiscal Year 2000 Budget Authorization Request*

United States. Congress. House. Committee on Science. Subcommittee on Energy and

Environment 1999

*Annual Report* National Cancer Institute (U.S.).

Division of Cancer Etiology 1987

### **Disease Control Priorities, Third Edition**

**(Volume 9)** Dean T. Jamison 2017-12-06 As the culminating volume in the DCP3 series, volume 9 will provide an overview of DCP3 findings and methods, a summary of messages and substantive lessons to be taken from DCP3, and a further discussion of cross-cutting and synthesizing topics across the first eight volumes. The introductory chapters (1-3) in this volume take as their starting point the elements of the Essential Packages presented in the overview chapters of each volume. First, the chapter on intersectoral policy priorities for health includes fiscal and intersectoral policies and assembles a subset of the population policies and applies strict criteria for a low-income setting in order to propose a "highest-priority" essential package. Second, the chapter on packages of care and delivery platforms for universal health coverage (UHC) includes health sector interventions, primarily clinical and public health services, and uses the same approach to propose a highest priority package of interventions and policies that meet similar criteria, provides cost estimates, and describes a pathway to UHC.

### **Water Encyclopedia, Domestic, Municipal, and Industrial Water Supply and Waste**

**Disposal** Jay H. Lehr 2005-06 Volume 1 outlines water supply infrastructure. The requirements for supplying water to a home, a city or a factory can be very different. Experts in these fields explain the nuances of the details involved in maintaining adequate quantity and quality for these different consumers. Waste water management can be of even greater concern, yet its management can follow similar paths when compared to sophisticated water supply treatment. Both the physics and chemistry of these fields are fully covered. Volume 2 deals with the big picture of regional water supplies, how they become contaminated, how they can be protected and how they can best serve the surrounding populations and industries. Significant focus is placed upon the natural chemistry of available water supplies and its biological impacts. Case studies from regions around the world offer an excellent picture of the world's water resources.

### **Cancer Incidence and Survival Among Children and Adolescents**

1999  
Monthly Catalog of United States Government

Publications 1988

Environment Reporter 2000

Handbook of Long Term Care of The Childhood Cancer Survivor Grace A. Mucci 2015-07-20

This authoritative reference examines in depth the myriad challenges facing pediatric cancer survivors and proposes a robust framework for structured follow-up of these patients through adulthood. Approaches to long-term follow-up include both established models of care and targeted models of lifelong surveillance of late effects by bodily systems and neurological outcomes. Sections devoted to quality of life and re-entry after treatment focus on key concerns such as health risk behaviors, school and career issues, psychological challenges, and care disparities. And a robust resources section adds extra usefulness to the expert coverage. Among the Handbook's topics:

- Developmental considerations in the transition from child and adolescent to adult survivorship.
- Long-term follow-up roadmaps by disease and treatment.
- Neuropsychological effects of pediatric brain tumors and associated treatment.
- Building resiliency in childhood cancer survivors: a clinician's perspective.
- School issues and educational strategies for survivors of childhood cancer.
- Educating and preparing the childhood cancer survivor for long-term care: a curriculum model for cancer centers. A work of rare scope, scholarship, and clinical acumen, the Handbook of Long-Term Care of the Childhood Cancer Survivor is a rewarding, practice-building resource essential to a wide range of healing professionals, including primary care physicians, pediatricians, oncologists, nurses, psychologists, neuropsychologists, child psychologists, and licensed therapists.

Analysis of Cancer Risks in Populations Near Nuclear Facilities National Research Council

2012-06-29 In the late 1980s, the National Cancer Institute initiated an investigation of cancer risks in populations near 52 commercial nuclear power plants and 10 Department of Energy nuclear facilities (including research and nuclear weapons production facilities and one reprocessing plant) in the United States. The results of the NCI investigation were used a primary resource for communicating with the public about the cancer risks near the nuclear facilities. However, this study is now over 20

years old. The U.S. Nuclear Regulatory Commission requested that the National Academy of Sciences provide an updated assessment of cancer risks in populations near USNRC-licensed nuclear facilities that utilize or process uranium for the production of electricity. Analysis of Cancer Risks in Populations near Nuclear Facilities: Phase 1 focuses on identifying scientifically sound approaches for carrying out an assessment of cancer risks associated with living near a nuclear facility, judgments about the strengths and weaknesses of various statistical power, ability to assess potential confounding factors, possible biases, and required effort. The results from this Phase 1 study will be used to inform the design of cancer risk assessment, which will be carried out in Phase 2. This report is beneficial for the general public, communities near nuclear facilities, stakeholders, healthcare providers, policy makers, state and local officials, community leaders, and the media.

**Childhood Cancer and Functional Impacts Across the Care Continuum** National Academies of Sciences Engineering and Medicine 2021-09-09 Since the late 1960s, the survival rate in children and adolescents diagnosed with cancer has steadily improved, with a corresponding decline in the cancer-specific death rate. Although the improvements in survival are encouraging, they have come at the cost of acute, chronic, and late adverse effects precipitated by the toxicities associated with the individual or combined use of different types of treatment (e.g., surgery, radiation, chemotherapy). In some cases, the impairments resulting from cancer and its treatment are severe enough to qualify a child for U.S. Social Security Administration disability benefits. At the request of Social Security Administration, Childhood Cancer and Functional Impacts Across the Care Continuum provides current information and findings and conclusions regarding the diagnosis, treatment, and prognosis of selected childhood cancers, including different types of malignant solid tumors, and the effect of those cancers on children's (TM)s health and functional capacity, including the relative levels of functional limitation typically associated with the cancers and their treatment. This report also provides a

summary of selected treatments currently being studied in clinical trials and identifies any limitations on the availability of these treatments, such as whether treatments are available only in certain geographic areas. *Environmental Health Perspectives* 2004

**Cancer Care for the Whole Patient** Institute of Medicine 2008-03-19 Cancer care today often provides state-of-the-science biomedical treatment, but fails to address the psychological and social (psychosocial) problems associated with the illness. This failure can compromise the effectiveness of health care and thereby adversely affect the health of cancer patients. Psychological and social problems created or exacerbated by cancer--including depression and other emotional problems; lack of information or skills needed to manage the illness; lack of transportation or other resources; and disruptions in work, school, and family life--cause additional suffering, weaken adherence to prescribed treatments, and threaten patients' return to health. Today, it is not possible to deliver high-quality cancer care without using existing approaches, tools, and resources to address patients' psychosocial health needs. All patients with cancer and their families should expect and receive cancer care that ensures the provision of appropriate psychosocial health services. Cancer Care for the Whole Patient recommends actions that oncology providers, health policy makers, educators, health insurers, health planners, researchers and research sponsors, and consumer advocates should undertake to ensure that this standard is met.

**Care of Cancer Survivors, An Issue of Medical Clinics of North America, E-Book** Kimberly S. Peairs 2017-10-16 This issue of Medical Clinics, guest edited by Dr. Kimberly Peairs, is devoted to Care of Cancer Survivors. Articles in this issue include: Care Coordination and Transitions of Care; Cancer Survivorship in Adolescents and Young Adults; Long-term and Late Side Effects of Specific Cancer Types; Diet, Physical Activity, and Body Weight in Cancer Survivorship; Anxiety and Depression in Cancer Survivors; Cognitive Changes Related to Cancer Therapy; Cardiac Disease in the Cancer Survivor; Cancer-related Fatigue; Hormonal Changes and Sexual Dysfunction; Palliative Care Issues; Screening for Recurrence and Secondary

Cancers; and Pulmonary Disease in the Cancer Survivor.

**Health Services for Cancer Survivors** Michael Feuerstein 2011-06-15 Health has been conceptualized by world and national health organizations (WHO, CDC, Healthy People 2010) as more than the absence of disease. It involves a focus on physical, psychosocial, and functional aspects of life as well as the prevention of future illnesses. At this point in the development of quality health care for cancer survivors, there is sufficient knowledge and expert opinion to push efforts forward to improve the health of cancer survivors. Clearly there is more research in the most prevalent forms of cancers (e.g., breast cancer) than others that provide us with guidance on how to optimize their health, but there are data on other forms of cancers that can also better inform practice. There may also be general care practices that can cut across cancer types. There has been an emergence of epidemiological and clinical research in cancer survivors that can form the basis for a revolution in the quality and nature of health care that survivors receive. This book not only provides the reader with diverse perspectives and data but also integrates this information so it can serve as the foundation necessary to improve and maintain the health of cancer survivors. Reporting of symptoms to health care providers is a complex, multi-determined problem influenced not only by the pathophysiology but also, as we have learned over the years through pain research, by societal, cultural, and biobehavioral factors. This book will consider this important aspect of follow-up for millions of cancer survivors because of the strong reliance on symptom reporting for clinical decision making. In order for us to generate meaningful and effective treatment, we need to better understand the symptom experience in cancer survivors. This book provides much information that will assist us to better understand and manage this complicated end point. The presenting problems need to be articulated and "conceptualized" as clearly as possible by both parties so appropriate actions can be taken. Since health care costs are a major concern for patients, payers, and providers, this area will also be addressed in all the relevant sections. In taking an interdisciplinary perspective, this book

illustrates the importance of a team approach to the improvement of health care and associated health, well-being, and functioning in cancer survivors. The 17 chapters cover critical topics of which physicians and providers of all types must be aware in order to provide the most comprehensive and responsive care for cancer survivors. All of the clinical care chapters include case studies to illustrate the real-world application of these approaches in cancer survivors. Information about sources of referral both within and outside the traditional health care communities will be provided in tabular form. There is no other text that provides both an overview of the problems and their challenges, case illustrations of direct application, and the reality of reimbursement for such care. The editors hope that there may be no need for the clinician or the survivor to adapt to a "new normal" if the presenting problems are understood and handled from an interdisciplinary perspective as outlined here. *Addressing the Barriers to Pediatric Drug Development* Institute of Medicine 2008-08-12 Decades of research have demonstrated that children do not respond to medications in the same way as adults. Differences between children and adults in the overall response to medications are due to profound anatomical, physiological, and developmental differences. Although few would argue that children should receive medications that have not been adequately tested for safety and efficacy, the majority of drugs prescribed for children-50 to 75 percent-have not been tested in pediatric populations. Without adequate data from such testing, prescribing drugs appropriately becomes challenging for clinicians treating children, from infancy through adolescence. *Addressing the Barriers to Pediatric Drug Development* is the summary of a workshop, held in Washington, D.C. on June 13, 2006, that was organized to identify barriers to the development and testing of drugs for pediatric populations, as well as ways in which the system can be improved to facilitate better treatments for children.

**Summary of the Workshop on Information Needs to Address Children's Cancer Risk** Eastern Research Group, Inc 2000 *Childhood Acute Lymphoblastic Leukemia* Ajay

Vora 2017-04-21 This book provides a comprehensive and up-to-date review of all aspects of childhood Acute Lymphoblastic Leukemia, from basic biology to supportive care. It offers new insights into the genetic predisposition to the condition and discusses how response to early therapy and its basic biology are utilized to develop new prognostic stratification systems and target therapy. Readers will learn about current treatment and outcomes, such as immunotherapy and targeted therapy approaches. Supportive care and management of the condition in resource poor countries are also discussed in detail. This is an indispensable guide for research and laboratory scientists, pediatric hematologists as well as specialist nurses involved in the care of childhood leukemia.

### **Fiscal Year 1999 EPA R&D Budget**

**Authorization** United States. Congress. House. Committee on Science. Subcommittee on Energy and Environment 1998

### Agriculture, Rural Development, and Related Agencies Appropriations for Fiscal Year 2002

United States. Congress. Senate. Committee on Appropriations. Subcommittee on Agriculture, Rural Development, and Related Agencies 2002

Late Effects of Childhood Cancer Daniel Green 2004-01-08 The treatment of childhood cancer has become increasingly successful over the last forty years, and during the last two decades in particular, and the overall cure rate is now 60-70%. This, in turn, has introduced new issues for the clinician as the number of long-term survivors has increased. Some of the therapies that have contributed most to the

### Identifying and Addressing the Needs of Adolescents and Young Adults with Cancer

National Cancer Policy Forum 2014-05-18 Identifying and Addressing the Needs of Adolescents and Young Adults with Cancer is the summary of a workshop convened by the Institute of Medicine's National Cancer Policy Forum in July 2013 to facilitate discussion about gaps and challenges in caring for adolescent and young adult cancer patients and potential strategies and actions to improve the quality of their care. The workshop featured invited presentations from clinicians and other advocates working to improve the care and outcomes for the adolescent and young adult

population with cancer. Cancer is the leading disease-related cause of death in adolescents and young adults. Each year nearly 70,000 people between the ages of 15 and 39 are diagnosed with cancer, approximately 8 times more than children under age 15. This population faces a variety of unique short- and long-term health and psychosocial issues, such as difficulty reentering school, the workforce, or the dating scene; problems with infertility; cardiac, pulmonary, or other treatment repercussions; and secondary malignancies. Survivors are also at increased risk for psychiatric conditions such as anxiety, depression, substance abuse, and suicide and may have difficulty acquiring health insurance and paying for needed care. Identifying and Addressing the Needs of Adolescents and Young Adults with Cancer discusses a variety of topics important to adolescent and young adult patients with cancer, including the ways in which cancers affecting this group differ from cancers in other age groups and what that implies about the best treatments for these cancer patients. This report identifies gaps and challenges in providing optimal care to adolescent and young adult patients with cancer and to discuss potential strategies and actions to address them.

### **Reducing Tobacco-Related Cancer**

**Incidence and Mortality** Institute of Medicine 2013-05-16 Tobacco use is the leading cause of preventable death in United States, causing more than 440,000 deaths annually and resulting in \$193 billion in health-related economic losses each year-\$96 billion in direct medical costs and \$97 billion in lost productivity. Since the first U.S. Surgeon General's report on smoking in 1964, more than 29 Surgeon General's reports, drawing on data from thousands of studies, have documented the overwhelming and conclusive biologic, epidemiologic, behavioral, and pharmacologic evidence that tobacco use is deadly. This evidence base links tobacco use to the development of multiple types of cancer and other life-threatening conditions, including cardiovascular and respiratory diseases. Smoking accounts for at least 30 percent of all cancer deaths, and 80 percent of lung cancer deaths. Despite the widespread agreement on

the dangers of tobacco use and considerable success in reducing tobacco use prevalence from over 40 percent at the time of the 1964 Surgeon General's report to less than 20 percent today, recent progress in reducing tobacco use has slowed. An estimated 18.9 percent of U.S. adults smoke cigarettes, nearly one in four high school seniors smoke, and 13 percent of high school males use smokeless tobacco products. In recognition that progress in combating cancer will not be fully achieved without addressing the tobacco problem, the National Cancer Policy Forum of the Institute of Medicine (IOM) convened a public workshop, Reducing Tobacco-Related Cancer Incidence and Mortality, June 11-12, 2012 in Washington, DC. In opening remarks to the workshop participants, planning committee chair Roy Herbst, professor of medicine and of pharmacology and chief of medical oncology at Yale Cancer Center and Smilow Cancer Hospital, described the goals of the workshop, which were to examine the current obstacles to tobacco control and to discuss potential policy, outreach, and treatment strategies that could overcome these obstacles and reduce tobacco-related cancer incidence and mortality. Experts explored a number of topics, including: the changing demographics of tobacco users and the changing patterns of tobacco product use; the influence of tobacco use on cancer incidence and cancer treatment outcomes; tobacco dependence and cessation programs; federal and state level laws and regulations to curtail tobacco use; tobacco control education, messaging, and advocacy; financial and legal challenges to tobacco control efforts; and research and infrastructure needs to support tobacco control strategies, reduce tobacco related cancer incidence, and improve cancer patient outcomes. Reducing Tobacco-Related Cancer Incidence and Mortality summarizes the workshop.

**Federal Register** 2013-05

[Subject Index of Current Extramural Research Administered by the National Cancer Institute](#)  
1978

[Cancer Rehabilitation 2E](#) Michael D.

Stubblefield, MD 2018-09-28 Praise for the previous edition: "This book is a milestone and must-have for anyone involved in the care of those with cancer." --American Journal of

Physical Medicine and Rehabilitation "This reference provides a comprehensive, pragmatic approach for physical medicine physicians; speech, occupational, and physical therapists; and nurses with cancer survivor responsibilities...[A]ny cancer program with significant rehabilitation services will find this a useful addition to its library." --JAMA (Journal of the American Medical Association) This completely revised second edition of the gold-standard reference on cancer rehabilitation provides a state-of-the-art overview of the principles of cancer care and best practices for restoring function and quality of life to cancer survivors. Authored by some of the world's leading cancer rehabilitation experts and oncology specialists, the book opens with primer-level discussions of the various cancer types and their assessment and management, including potential complications, as a foundation for providing safe and effective rehabilitation. Subsequent sections thoroughly explore the identification, evaluation, and treatment of specific impairments and disabilities that result from cancer and the treatment of cancer. Designed to serve the needs of the entire medical team, this singular resource is intended for any clinician working with cancer survivors to improve function and quality of life. With several new chapters on topics such as inpatient cancer rehabilitation, pediatric oncology, research issues, and barriers to accessing cancer rehabilitation and building a cancer rehabilitation program, the book keeps pace with recent advances in the growing field of cancer rehabilitation. This new edition features updates throughout and expansions to major topics, including imaging in cancer and key disorders such as aromatase inhibitor-induced arthralgias. Presenting the most current medical, clinical, and rehabilitation intelligence, this is a mandatory reference for anyone in the field. Key Features: New edition of the only contemporary comprehensive text covering the field of cancer rehabilitation Revised and updated to reflect current knowledge, practice, and emerging topics Covers essential aspects of oncology and medical complications of cancer to inform rehabilitation decisions and strategies Provides state-of-the-art reviews on all major topics in cancer rehabilitation, including pain

assessment and management, neuromuscular and musculoskeletal dysfunction, neurologic, and general rehabilitation issues 13 new chapters and expanded coverage of signature areas Key points are provided for each chapter to reinforce learning

**Reducing Environmental Cancer Risk** Suzanne H. Reuben 2010-10 Though overall cancer incidence and mortality have continued to decline in recent years, cancer continues to devastate the lives of far too many Americans. In 2009 alone, 1.5 million American men, women, and children were diagnosed with cancer, and 562,000 died from the disease. There is a growing body of evidence linking environmental exposures to cancer. The Pres. Cancer Panel dedicated its 2008&2009 activities to examining the impact of environmental factors on cancer risk. The Panel considered industrial, occupational, and agricultural exposures as well as exposures related to medical practice, military activities, modern lifestyles, and natural sources. This report presents the Panel's recommend. to mitigate or eliminate these barriers. Illus.

**Journal of the National Cancer Institute** 2014

**Pediatric Psycho-Oncology** Lori S. Wiener PhD 2015-02-04 Pediatric Psycho-Oncology is a comprehensive handbook that provides best practice models for the management of psychological, cognitive, and social outcomes of adolescents living with cancer and their families. Chapters cover a wide range of topics including psychological aspects of particular pediatric cancers and their treatments, how to talk to a child and family at critical times during the disease course, genetic testing, individual, family, educational, psychological and psychiatric interventions, and caring for international patients . Each chapter highlights the necessity of embracing an interdisciplinary approach to ensure that each child has the best options for living with cancer and, when cure is not possible, that death occurs with as much dignity as possible for the child and family. An extensive resource section is appended to provide information on written, online, video, community, national and international services and programs. This book features contributions from experts designed to help clinicians review,

anticipate and respond to emotional issues that often arise in the context of treating pediatric cancer patients. Numerous cross-references and succinct tables and figures make this concise reference easy to use. Pediatric Psycho-Oncology is an ideal resource for helping pediatric oncologists and nurses recognize when it may be best to refer patients to their mental health colleagues and for those who are establishing pediatric oncology services or adding psychosocial components to existing clinics.

**Direct-to-Consumer Genetic Testing** National Research Council 2011-01-16 Today, scores of companies, primarily in the United States and Europe, are offering whole genome scanning services directly to the public. The proliferation of these companies and the services they offer demonstrate a public appetite for this information and where the future of genetics may be headed; they also demonstrate the need for serious discussion about the regulatory environment, patient privacy, and other policy implications of direct-to-consumer (DTC) genetic testing. Rapid advances in genetic research already have begun to transform clinical practice and our understanding of disease progression. Existing research has revealed a genetic basis or component for numerous diseases, including Parkinson's disease, Alzheimer's disease, diabetes, heart disease, and several forms of cancer. The availability of the human genome sequence and the HapMap, plummeting costs of high-throughput screening, and increasingly sophisticated computational analyses have led to an explosion of discoveries of linkages between patterns of genetic variation and disease susceptibility. While this research is by no means a straight path toward better public health, improved knowledge of the genetic linkages has the potential to change fundamentally the way health professionals and public health practitioners approach the prevention and treatment of disease. Realizing this potential will require greater sophistication in the interpretation of genetic tests, new training for physicians and other diagnosticians, and new approaches to communicating findings to the public. As this rapidly growing field matures, all of these questions require attention from a variety of perspectives. To discuss some of the foregoing issues, several units of the



National Academies held a workshop on August 31 and September 1, 2009, to bring together a still-developing community of professionals from a variety of relevant disciplines, to educate the public and policy-makers about this emerging field, and to identify issues for future study. The meeting featured several invited presentations and discussions on the many technical, legal, policy, and ethical questions that such DTC testing raises, including: (1) overview of the current state of knowledge and the future research trajectory; (2) shared genes and emerging issues in privacy; (3) the regulatory framework; and (4) education of the public and the medical community.

*Health Literacy and Communication Strategies in Oncology* National Academies of Sciences, Engineering, and Medicine 2020-04-10 Health literacy is a critical skill for engaging in healthy behaviors to reduce disease risk and improve health outcomes across the continuum of cancer care. However, estimates suggest that more than one-third of the U.S. adult population has low health literacy, and nearly half of all patients with cancer have difficulty understanding information about their disease or treatment. Low health literacy among patients with cancer is associated with poor health and treatment outcomes, including lower adherence to treatment, higher rates of missed appointments, and an increased risk of hospitalization. Low health literacy can also impede informed decision making, especially as cancer care becomes increasingly complex and as patients and their families take more active roles in treatment decisions. To examine opportunities to improve communication across the cancer care continuum, the National Cancer Policy Forum collaborated with the Roundtable on Health Literacy to host a workshop, *Health Literacy and Communication Strategies in Oncology*, July 15-16, 2019, in Washington, DC. Patients, patient advocates, clinicians, and researchers, representatives of health care organizations, academic medical centers, insurers, and federal agencies explored the challenges of achieving effective communication in cancer care. This publication summarizes the presentations and discussions of the workshop.

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