

Hem/Onc/BMT SIG Newsletter

SIG Chair Letter

We are looking forward to seeing everyone at SPPAC in Orlando in April! Our SIG continues to grow every year, currently with 218 members in our 6th year! We invite you to come to our SIG business meeting on Friday, April 6 from 6:15-7:15 PM. We plan to provide SIG updates and will hold our trainee mini-symposium where 4 students or trainees will be selected to present their research posters. We also will announce our student poster award winners! If you are a student or trainee, we encourage you to submit your poster for consideration! Additional details are provided on page 6.



We're also extremely excited to announce our concurrent SIG symposium at SPPAC in collaboration with the Pain SIG, "Assessing Pain and Effecting Change: Enhancing Care and Outcomes of Youth with Sickle Cell Disease and Chronic Pain" scheduled for Friday, April 6 from 9:15-10:45 AM. Please come support our SIG presenters and discussant who will be showcasing new avenues in research that are shaping the development of assessment and treatment of chronic pain in sickle cell disease.

Lastly, we will soon embark on another transition in the Hem/Onc/BMT SIG as we welcome new members to join our SIG leadership team. We are in the process of seeking nominations for 3 leadership positions for a 2-year term: Oncology Co-Chair, Member at Large for Education and Training, and Member at Large for Advocacy. We are also soliciting nominations for 2 student representatives to join our leadership committee for a 1-year term. Descriptions of each position are available later in the newsletter (see page 3). We look forward to receiving your nominations!

In this issue, you'll find some of our recurring sections, such as our "Ask the Expert" section focused on relevant questions for training; "Advocacy Spotlight" to highlight national advocacy efforts related to Hem/Onc/BMT; and "Research Updates" of newly published research and upcoming conferences. As always, we welcome your ideas and contributions for future newsletters and encourage you to forward your ideas or questions with us to our SIG email, hemoncbmt@gmail.com.

See you in Orlando!

Amanda Thompson
ALthomps@childrensnational.org

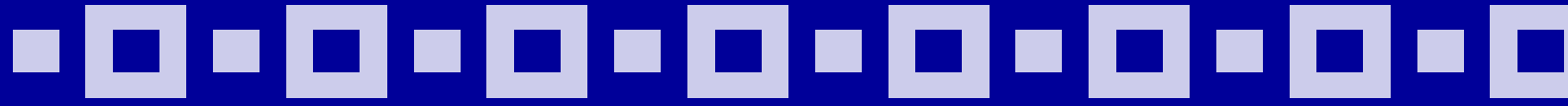
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SIG OVERVIEW



Leadership Team

Oncology Co-Chair:
Dr. Amanda Thompson

**Members At Large:
Education/Training**
Dr. Stacy Flowers
Dr. Catherine Peterson

Member at Large: Advocacy
Dr. Kristin Canavera

Student Representatives:
Dr. Sherilynn Chan
Joanna Tsikis, MS

Hematology Co-Chair:
Dr. Soumitri Sil

**Members at Large:
Research**
Dr. Steven Hardy
Dr. Cindy Karlson

Communications Webmaster:
Dr. Jeffrey Karst

Open Positions for Fall 2018:
Oncology Co-Chair
Member-at-Large: Training
Member-at-Large: Advocacy
Student/Trainee Representatives



SIG MISSION

- Collaborate with organizations with a similar focus (i.e., COG, APOS, IPOS) and current SPP SIGs that often overlap with the Hem/Onc/BMT population (i.e., AYA and C&L SIGs).
- Provide networking opportunities within SPP for members who have a clinical and/or research interest in Hem/Onc/BMT; in particular, connecting students and trainees with an interest in Hem/Onc/BMT with early, mid, and established career Hem/Onc/BMT psychologists.
- Provide a forum for discussion and sharing of information and ideas regarding clinical and research practices across institutions.

LEADERSHIP POSITIONS

Hem/Onc/BMT SIG Co-Chair for Oncology

We are soliciting nominations for a new SIG co-chair to represent Oncology for the 2018-2020 term. The Co-Chair needs to be a member of the Hem/Onc/BMT SIG. Responsibilities will include: Appointing and overseeing all other leadership positions, directing the development and mission of the SIG, maintaining a positive relationship with Division 54 leadership, organizing and presiding over the SIG business meeting at SPPAC and monthly teleconference leadership meetings, and overseeing all communication between the SIG and its members. Please submit any nominations 2/28/18 along with a CV and brief position statement (no more than 300 words) via email to hemoncbmt@gmail.com. Self-nominations are welcome! Elections will be held online in early March.

Member at Large, Education and Training

The Member at Large, Education and Training shall be a member of the Hem/Onc/BMT SIG who is appointed by the Co-Chairs for a term of 2 years. Responsibilities include: Communicating with members about opportunities for educational experiences (including those that qualify for continuing education credits), creating and updating a list of training opportunities (internship and fellowship) that offer Hem/Onc/BMT experiences, establishing opportunities to enhance the student/trainee members, and participating in monthly teleconferences. Please submit nominations 2/28/18 along with a CV to hemoncbmt@gmail.com. Self-nominations are welcome. Positions will be filled by late March.

Member at Large, Advocacy

The Member at Large, Advocacy shall be a member of the Hem/Onc/BMT SIG who is appointed by the Co-Chairs for a term of 2 years. Responsibilities include: Monitoring publications (journal manuscripts, books, reports) for relevant information on program development, legislative efforts, service provision, billing issues, etc. that may be appropriate for dissemination to the SIG members, strengthening communication and building opportunities for collaboration and mutual learning among members, and participating in monthly teleconferences. Please submit nominations by 2/28/18 along with a CV to hemoncbmt@gmail.com. Self-nominations are welcome. Positions will be filled by late March.

Hem/Onc/BMT Student/Trainee Representatives

We are soliciting nominations for new SIG student/trainee representatives for the 2018-2019 term. The Student/Trainee Leaders need to be members of the Hem/Onc/BMT SIG and will be appointed by the Co-Chairs for a term of 1 year. They must remain graduate students or trainees (intern, postdoctoral fellow) throughout the term. Responsibilities include: promoting student/trainee interests in the SIG, encouraging student/trainee participation in the SIG, assisting other members of the leadership team as needed, and participating in monthly leadership teleconferences. The student/trainee representatives also serve as the SIG membership coordinators, maintaining a list of current SIG members, responding to requests to join the SIG, and coordination with Division 54 leadership to ensure SIG members have maintained SPP leadership. Please submit nominations by 2/28/18 along with a CV to hemoncbmt@gmail.com. Self-nominations are welcome. Positions will be filled by late March.

ADVOCACY SPOTLIGHT

The Childhood Cancer Survivorship, Treatment, Access, and Research (STAR) Act – H.R.820/S.292

For this advocacy spotlight, we are featuring the Childhood Cancer STAR Act [H.R.820/S.292], the most comprehensive childhood cancer bill ever taken up by Congress and currently gaining momentum on Capitol Hill as a bipartisan legislative priority.



Sponsors:

Several childhood cancer advocacy organizations have worked to get the Childhood Cancer STAR Act re-introduced into the 115th Congress. *Currently, the bill has over 350 co-sponsors in the House, and it is hoped that the bill will pass both the House and Senate this year.*

House Sponsors: Representatives Michael McCaul (R-TX), Jackie Speier (D-CA), Mike Kelly (R-PA), and G.K. Butterfield (D-NC).

Senate Sponsors: Senators Jack Reed (D-RI), Shelly Moore Capito (R-WV), Chris Van Hollen (D-MD), and Johnny Isakson (R-GA).

What the Bill Will Do:

The bill contains several priorities and asks from Congress that will advance pediatric cancer research and treatments, improve childhood cancer surveillance, and enhance resources and quality of life for survivors.

Advancing Childhood Cancer Research:

The bill would direct the National Cancer Institute (NCI) to offer grants and expand efforts for collecting important clinical, demographic, and biological information, such as biospecimens (e.g., tumor tissue, blood, DNA, RNA, and familial DNA) for children with cancer.

Improving Childhood Cancer Surveillance:

The bill would authorize the Centers for Disease Control and Prevention to offer grants to state cancer registries to identify and track incidences of childhood cancer, improve infrastructure for reporting cases, and support reporting of these cases in a national childhood cancer registry.

Childhood Cancer Survivors:

To address the late effects and quality of life of survivors, the bill would support pilot programs related to survivorship and late effects of pediatric cancers. Specifically, support would be provided for: programs related to models of care for childhood cancer survivors; research on barriers to obtaining insurance coverage and payment for medical care; studying care coordination and collaboration among providers as survivors transition to adult care; and development of a taskforce for establishing and studying standards of survivorship care.

How to Take Action:

To get involved in helping support and advocate for the Childhood Cancer STAR Act, consider joining the 7th annual Alliance for Childhood Cancer Action Days on Capitol Hill, April 23-24th. If unable to attend in person to meet your representatives, you can advocate for the bill by calling or e-mailing your representatives. Additional information on taking action in promoting the Childhood Cancer STAR Act can be found at:

<https://www.stbaldricks.org/advocacy>

<https://www.childrenciause.org/take-action/>

<http://www.allianceforchildhoodcancer.org/legislative-activity/>

<https://cac2.org/legislation/childhood-cancer-survivorship-treatment-access-research-act-star-h-r-3381-s-1883/>

SPPAC - WHAT TO WATCH FOR



- **SIG Meeting: Friday 4/6, 6:15-7:15 PM**
 - Review of SIG activities from the past year
 - Discussion of leadership position changes
 - Student poster presentations (see next page)

- **SIG Symposium: Friday 4/6, 9:15 - 10:45 AM**
 - Please plan to attend our SPPAC symposium, ***Assessing Pain and Effecting Change: Enhancing Care and Outcomes of Youth with Sickle Cell Disease***, which has been jointly organized by the Hematology/Oncology/BMT and Pain Special Interest Groups.
 - Presenters will discuss innovative approaches to characterizing pain presentations in sickle cell disease, predicting the development of chronic pain, intervening to improve pain- and healthcare-related outcomes, and disseminating treatments. We hope to see you there!

- **Other Notes/Events of Interest**
 - 50 student hem/onc related abstracts accepted
 - Conference Welcome: Thursday @ 4:30 PM
 - Internships/Postdocs on Parade: Friday @ 7 PM

SPPAC - STUDENT POSTER AWARDS

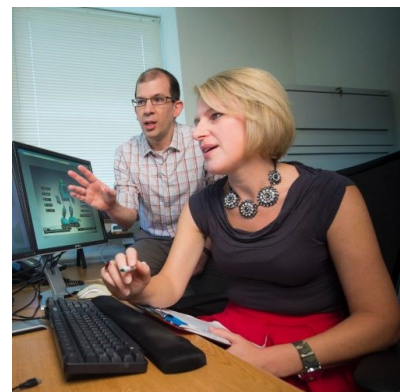
- ψ Submission Deadline: March 21st
- ψ Top 4 posters will be selected for brief oral presentation at SPPAC
- ψ No PowerPoint or media required (Poster can be displayed as PDF)
- ψ Top 2 presenters will receive a small monetary award



RESEARCH HIGHLIGHTS

CONGRATULATIONS

2017 Diane J. Willis Award for
Outstanding Article in the
Journal of Pediatric Psychology



Heather Conklin, PhD

Long-Term Efficacy of Computerized Cognitive Training Among Survivors of Childhood Cancer: A Single-Blind Randomized Controlled Trial

Heather M. Conklin,¹ PhD, Jason M. Ashford,¹ MS, Kellie N. Clark,¹ MS, Karen Martin-Elbahesh,¹ MS, Kristina K. Hardy,^{2,3} PhD, Thomas E. Merchant,⁴ DO, PhD, Robert J. Ogg,⁵ PhD, Sima Jeha,⁶ MD, Lu Huang,⁷ MS, and Hui Zhang,⁷ PhD

Abstract

Objective To investigate the long-term efficacy of computerized cognitive training in improving cognitive outcomes among childhood cancer survivors. **Methods** Sixty-eight survivors of childhood acute lymphoblastic leukemia (ALL) or brain tumor (BT) were randomly assigned to computerized cognitive intervention (23 ALL/11 BT, age = 12.21 ± 2.47) or a waitlist control group (24 ALL/10 BT, age = 11.82 ± 2.42). Cognitive assessments were completed pre-, immediately post-, and 6 months postintervention. **Results** A prior report showed training led to *immediate* improvement in working memory, attention and processing speed. In the current study, piecewise linear mixed effects modeling revealed that working memory and processing speed were unchanged from *immediate* to 6 months postintervention (intervention $\beta = -.04$ to $.01$, $p = .26$ to $.95$; control $\beta = -.06$ to $.01$, $p = .23$ – $.97$), but group differences on an attention measure did not persist. **Conclusion** Cognitive benefits are maintained 6 months following computerized cognitive training, adding to potential clinical utility of this intervention approach.

RESEARCH HIGHLIGHTS

Recent Articles of Interest

- [Barrera et al. \(2018\): Easing psychological distress in pediatric cancer](#)
- [Hardy et al. \(2017\) Psychosocial care and education of children with sickle cell disease undergoing hematopoietic stem cell transplant and their families](#)
- [Lavi et al. \(2018\) Stress and marital adjustment in families of children with cancer](#)
- [McGrady et al. \(2017\): Earlier pediatric psychology consultation predicts lower stem cell transplantation hospital costs](#)
- [McGrady et al. \(2017\): Spending on hospital care and pediatric psychology service use among adolescents and young adults with cancer](#)
- [Morrison et al. \(2018\): Facilitators and barriers to self-management for adolescents and young adults following a hematopoietic stem cell transplant](#)
- [Prussien et al. \(2017\): Cognitive function, coping, and depressive symptoms in children and adolescents with sickle cell disease](#)
- [Psihogios et al. \(2017\): Family functioning, medical self-management, and health outcomes among school-aged children with sickle cell disease: A mediation model](#)
- [Rodday et al. \(2017\): Understanding the relationship between child health related quality of life and parent emotional functioning in pediatric hematopoietic stem cell transplant](#)
- [Schatz et al. \(2017\) Developmental screening in pediatric sickle cell disease: Disease-related risk and screening outcomes in 4-year-olds](#)
- [Schepers et al. \(2018\): Parental distress 6 months after a pediatric cancer diagnosis in relation to family psychosocial risk at diagnosis](#)
- [Scialla et al. \(2018\): Delivery of care consistent with the psychosocial standards in pediatric cancer: Current practices in the United States](#)
- [Stern et al. \(2018\) NOURISH-T: Target caregivers to improve health behaviors in pediatric cancer survivors with obesity](#)
- [Tillery et al. \(2017\): Youth's adjustment to cancer: Examination of patterns of adjustment and the role of peer relations](#)
- [Valrie et al. \(2018\) Sleep problem risk for adolescents with sickle cell disease:](#)

SIOP PPO HIGHLIGHTS

Psychosocial Staffing

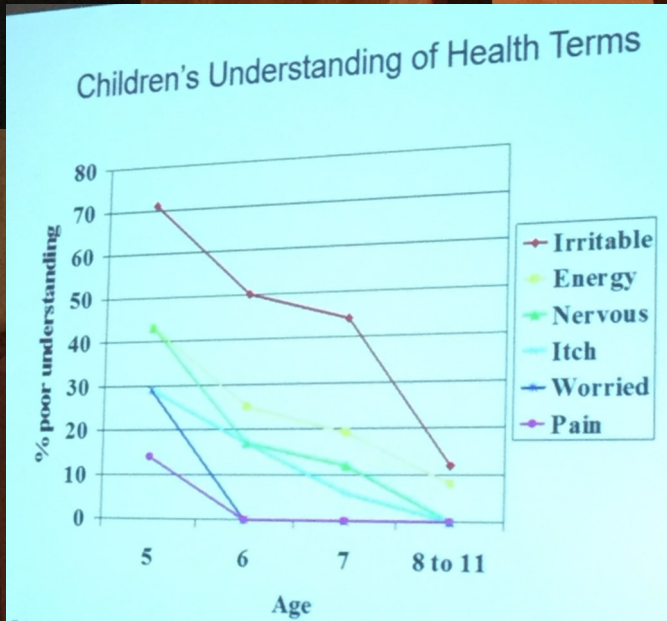
Discipline	In our program	Median and range (FTE)
Social workers (MSW)	95.9%	Median = 2.0 0.0 - 24.0
Psychologists	60.3%	Median = 1.0 0.0 - 9.0
Neuropsychologists	30.6%	Median = 0.0 0.0 - 4.0
Psychiatrists	19.0%	Median = 0.0 0.0 - 3.0
Child life specialists	93.4%	Median = 2.0 0.0 - 20.0



Delivery of Care Consistent with the Psychosocial Standards in Pediatric Cancer

Anne E. Kazak, PhD, ABPP
 Nemours Children's Health System
 Thomas Jefferson University

SIOP PPO
 October 12, 2017
 Washington, DC, USA



ASK THE EXPERTS

Q: As I prepare to attend the 2018 Society for Pediatric Psychology Annual Conference (SPPAC) in Orlando, I am curious how to make the most of my time there. Are there any approaches, experiences, or suggestions you would have for trainees attending this conference?

A: Balance learning in conference sessions with meeting people. SPPAC is one of the few places where you have an opportunity to do so, in educational as well as social settings. In addition to networking with other trainees/early career folks, don't be afraid to approach mid-career (and later career) people with questions or comments- especially at poster sessions, receptions, or after their presentations. We like learning from you too.



- Dr. Mary Jo Kupst

Have a question you'd like to ask training directors or experts in the field? Forward your question to hemoncbmt@gmail.com for our next newsletter!

IN MEMORIAM



Dr. Andrea Patenaude

1946 - 2018

Our colleague, Andrea Farkas Patenaude, Ph.D. died on January 29, 2018 in Boston. She was a researcher, clinician, educator, mentor, and advocate. A pioneer in pediatric psychology, her early work in bone marrow transplantation helped us to better understand the psychological issues involved for patients, families, and professionals. She continued to conduct innovative research in pediatric psycho-oncology often in collaboration with colleagues around the world. She was one of the first to study the impact of cancer genetic testing on patients and families and received numerous national and international awards for her work. She was a core member of the Children's Oncology Group Behavioral Science Committee and an APA Fellow in Pediatric and Health Psychology. She was also a leader in the recent development of standards of psychosocial care for children with cancer and their families. In addition to her work as Director of Psycho-Oncology Research in Pediatric Oncology and the Center for Cancer Genetics and Prevention at Dana-Farber Cancer Institute, she was a clinician, supervisor, and mentor there, as well as Associate Professor in Psychiatry, Harvard Medical School. With all of her accomplishments, she was always generous in her support and encouragement of others, dedicated to her work but keeping family as the priority, a true role model for us all. She will be missed greatly. ~ Dr. Mary Jo Kupst

ANNOUNCEMENTS



Recent/Upcoming Meetings

Ψ [APOS 2018: Feb 22-24, Tucson, AZ](#)

Ψ [SPPAC 2018: Apr 5-7, Orlando, FL](#)

Ψ [FSCDR 2018: Jun 15-17, Washington, DC](#)

Ψ [SIOP 2018: Nov 15-19, Kyoto, Japan](#)

- Abstract Deadline: April 10, 2018

Ψ [ASH 2018: Dec 1-4, San Diego, CA](#)