DIVISION OF CLINICAL TRIALS

A significant component of cancer research is the clinical trial—a research study to determine the effectiveness of a specific treatment modality, including chemotherapy, surgery, radiation therapy, immunotherapy, or combinations of these. Clinical trials are of major importance both for the current treatment of cancer patients and for the development of new and/or improved future treatments. They offer the cancer patient participating in the study the opportunity to receive investigative drugs, either alone or combined with other cancer treatment modalities. By participating in clinical trials, Illinois physicians and cancer patients are in a better position to understand and fight cancer.

Because of the ICC's established consortium of research specialists, we have qualified throughout our first decade of development for a series of NCI-funded research programs. These clinical trials awards enable the ICC to bring new cancer information and treatments to large and small hospitals as well as individual physicians and patients throughout Illinois.

Research projects in the Division of Clinical Trials are many and varied. Phase I and II studies examine factors such as effective dosages and the anti-cancer activity of different modes of treatment. The Biological Response Modifiers (BRM) program, for example, examines specialized treatments such as the Interferons, the Interleukins, and monoclonal antibodies. Other projects test new applications of existing anti-cancer agents or combinations of agents which may be more effective than standard therapies. As our clinical investigations and scientific questions grow in number, so does the research and funding base necessary to support them.

The ICC has developed a Clinical Trials Executive Committee consisting of the chairpersons of oncology sections from all major ICC consortial institutions, as well as six elected community representatives. **Jules Harris, M.D.**, serves as Associate Director and **Gershon Locker, M.D.**, as Executive Officer of this committee which meets monthly to monitor the progress and development of the ICC Clinical Trials Program.

Each of our important clinical trials investigations propels us toward our Year 2000 goal as we continue to look for new ways to reduce the cancer threat.

Albert Riley, M.U.P.P., Assistant Director, Statistical and Computer Services, reviews the survival analysis of a clinical trial study of lung cancer patients with Grace Lai, B.S., Programmer/Analyst.

NATIONAL PROGRAMS

Jules Harris, M.D., Director of the ICC Clinical Trials Program, is also the Director of the Rush Cancer Center, and the Samuel G. Taylor III Professor of Medicine at Rush Medical College.

Dr. Harris serves on the NCI Biological Modifiers Program Decision Network Committee, among other national committees, and is the principal investigator of a number of NCI-funded studies, both national and local in scope.

ICC-sponsored lung cancer clinical trials include Phase II trials for treating lung cancer patients. In addition, the ICC participates in the national cooperative Lung Cancer Study Group (LCSG), contributing an average of 40 patients per year. The LCSG grant runs through January, 1987, and we are confident that the high quality of research the group has generated will result in a renewal award from the NCI.

The ICC participates in the Gastrointestinal Tumor Study Group (GITSG)—a cooperative organization which links universities and hospitals working in gastrointestinal disease nationwide. Through the ICC, Illinois oncologists have had the unique opportunity to participate in GITSG clinical trials.