



**Cancer Prevention
Study-3** research today for a
cancer-free tomorrow



June 2020 e-newsletter

COVID-19 UPDATE

As we all begin to find ways to adjust to a new normal, we are faced with a summer that does not look the way we expected. One thing remains the same: cancer has not stopped so we are continuing to fight it. When confronted with the COVID-19 pandemic, CPS-3 researchers immediately began asking how we can use our resources and expertise to collect more information about the virus and understand the impact it has on higher risk individuals, like cancer patients.

In March, we shared news of a new COVID symptom tracker, a secure app developed by doctors and scientists at the Harvard T.H. Chan School of Public Health, Massachusetts General Hospital, King's College London, and Stanford University School of Medicine along with a health science company, ZOE. The goal of the app is to better understand the symptoms of COVID-19; understand how fast the virus is spreading in different areas; identify high-risk areas in the country; identify who is most at risk by better understanding symptoms linked to health conditions; and identify the exposure of healthcare workers to COVID-19.



In the future, we will be able to combine these data with other CPS-3 data to understand the long-term effects of COVID-19 infection on cancer.

It is not too late to download the app; all you need is a smartphone or other mobile-compatible device (like a tablet). To learn more about this app, visit the [**COVID-19 symptom tracker**](#).

“By inviting CPS-3 participants to use this app, we hope to be able to help address the immediate and long-term needs of cancer patients and survivors. In the short term, data gathered from the app will help characterize the progression of symptoms and trajectories related to coronavirus. Over time, the data can be combined with CPS-3 data to study the longer-term health effects related to infection, including in vulnerable populations like cancer survivors.”
Alpa Patel, PhD, lead investigator for CPS-3

Additionally, since we know there will be long-term impacts from COVID-19, we are already planning to ask questions related to the pandemic on our next CPS-3 questionnaire, which you will receive in the spring of 2021.

Study Updates

Accelerometry Sub-study Launched in summer 2019, the effort to collect physical activity information using an accelerometer device on up to 20,000 randomly selected CPS-3 participants was going strong with over 4,500 participants already registered. Due to various impacts from the COVID-19 pandemic, including CPS-3 staff teleworking due to stay-at-home orders and the changes in normal routines we are all experiencing, we made the difficult decision to temporarily suspend our accelerometry sub-study research activities. Our top priority remains supporting our dedicated study participants while also ensuring the safety of our equally dedicated study staff. As soon as we are able to resume normal operations, we will begin to notify participants who had already registered and restart additional invitations.

New CPS-3 logo As you may have noticed, the CPS-3 logo is getting a makeover! We worked with a volunteer graphic designer to create our new CPS-3 logo, found at the top of this e-newsletter. The logo was designed to evoke the spirit of this study – individuals from around the country joining forces to make a meaningful impact on our mission – and to create a recognizable, consistent, and captivating impression across all of our communications and materials. We hope you like it as much as we do!

Farewell to Susan Gapstur

In place of our typical Meet the Team feature, we devote this article to wishing Susan Gapstur, PhD, MPH,



former senior vice president, Behavioral and Epidemiology Research, a happy retirement. Since Dr. Gapstur joined the American Cancer Society in 2009 through her retirement on May 1, 2020, much has changed in the world and at the Society. Through her leadership, she extended and deepened the impact of our team in many ways. Dr. Gapstur served as the

principal investigator of CPS-II; led us through strategic planning and scientific reviews of our program of work; expanded our research capacity through a merger of the epidemiology and behavioral research groups; promoted mentorship and education of future epidemiology researchers by establishing our post-doctoral fellowship program; made invaluable contributions to the field of cancer research; and received many honors from the academic research community. Dr. Gapstur guided with passion and was driven to promote our mission in every way imaginable.

We are thankful for all she has done for each of us personally as well as all of her contributions to cancer research.

Dr. Alpa Patel, the current principal investigator of CPS-3, will be filling the leadership role in our group.

What has CPS-3 meant to you over the years and what are your hopes for its future?

“CPS-3 means that the legacy of the Cancer Prevention Studies has a solid and meaningful future and will go on for decades to come. And my hope is that CPS-3’s impact will exceed that of CPS-II and the earlier cohorts in saving lives from cancer.”

- Dr. Susan Gapstur

Data Quality in CPS-3

Data collected from CPS-3 surveys are analyzed to answer critical questions about cancer prevention and survivorship. For us to trust the results of these analyses, we need to confirm that the quality of the data is consistently high.

In order to assess the data quality and methodology of our baseline survey, Melissa Rittase, MPH, a member of our Study and Biospecimen Management Group, led an analysis comparing the completeness of CPS-3 baseline survey data among participants based on the language (English or Spanish) and type of survey (paper or web-based) completed.

The analysis, published in the journal *Cancer Epidemiology, Biomarkers and Prevention* earlier this year, showed that baseline survey data were very complete, with English web-based survey responders having the highest completion rate (97.6%), followed by English paper responders (95.5%) and Spanish language paper responders (83.1%). Only minor differences were seen between participants with different demographic characteristics (like race or

ethnicity, income level, or education).

These consistently high completion rates across survey language, mode, and participant characteristics provide evidence of high-quality data and support our continued prioritization of web-based surveys which can help us save money and time, while often being more convenient.

Importantly, this analysis shows that we need to thank all of **you** for consistently answering each of the survey questions. Your dedication and sincere commitment to cancer prevention research truly matters as we work together to make an impact on our mission.



For the latest cancer information, day-to-day help, and emotional support 24 hours a day, seven days a week, visit our website at [cancer.org](https://www.cancer.org) or call us at 1-800-227-2345.