



## Memorandum

Date February 4, 1982

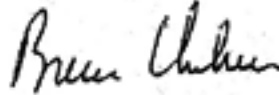
From Acting Director, Division of Cancer Treatment, NCI

Subject Epidemiology Program, DCCP

To Director, National Cancer Institute

When the reports concerning Kaposi's Sarcoma first came to our attention in DCT in July of 1981, we organized a workshop to examine the epidemiology, etiology, and treatment of Kaposi's Sarcoma. This workshop was held on September 15, 1981, and was attended by 54 participants. It considered a broad range of topics related to this disease and came forward with a recommendation that a multi-institution clinical trial be set up to undertake systematic staging and treatment for this disease. The working group formulated treatment proposals as follows. For local and regionalized disease, radiation therapy was designated as the treatment of choice. For patients with generalized disease of an indolent clinical course, a study comparing ICRF with VP-16 was considered most pertinent, while for aggressive, advanced disease a combination therapy regimen was designated. The combination therapy would consist of either actinomycin D, DTIC, and Vincristine or adriamycin, vinblastine and bleomycin. It was also recommended that in view of the interesting epidemiologic background of this problem, parallel studies should be conducted regarding the virology, immunology and possible etiologic factors related to Kaposi's Sarcoma. The DCT under the leadership of Dr. William DeVys of the Clinical Investigation Branch, CTEP, has drawn up a narrative description of a proposed project which will be presented to our Board of Scientific Counselors on February 8, 1982. If approved by our Board, a RFA will be issued in the spring of this year and funding can expect to take place six months from now. The proposed mechanism of funding would be through a cooperative agreement with four to six institutions. A copy of the proposed study is appended. In addition, we will supplement the funding of institutions which currently hold membership in cooperative clinical trial groups and which see five or more patients. We plan to provide immediate supplements to existing cooperative agreements in order to allow the establishment to treatment protocols. I have informed Dr. Richard Adamson, Director, DCCP and Dr. Peter Greenwald, Director, DRCCA of our plans to implement this clinical trial and have requested that they provide me with proposals for conjoint epidemiologic, virologic, or immunologic studies in these patients. I have also contacted Dr. Foege, Director of the CDC, to tell him of our plans for the treatment protocol and to ask that he provide us with information regarding the CDC task force studies ongoing in the etiology and epidemiology of Kaposi's Sarcoma. Dr. James Curran of the CDC has responded by inviting NCI and other interested parties to Atlanta on March 3, to review ongoing CDC studies in this area.

In summary, the Division of Cancer Treatment is moving ahead with plans for a multi-institutional clinical trial to treat Kaposi's Sarcoma and has invited participation of NCI and CDC investigators interested in etiology and epidemiology of this disease.

A handwritten signature in cursive script, appearing to read "Bruce Chabner".

Bruce A. Chabner, M.D.