



## August 2017 Newsletter

Volume 5 Issue 7

### A Letter from the Founder, Dr. Christine Brezden- Masley

Dear CCTC Members,

Since the launch of the CCTC in 2011, the consortium has remarkably expanded to over 260 members across 31 institutions, including 12 of the major cancer centres in Ontario.

We greatly value any input, feedback, and suggestions in order to make your experience with the site as user-friendly as possible. E-mail us at [cometrials@smh.ca](mailto:cometrials@smh.ca) and we will be more than happy to assist.

Sincerely,

Dr. Christine Brezden-Masley  
Founder, CCTC

### A Letter from the Project Manager, Caroline Illmann

Hello CCTC Members,

This year we are focusing on increasing membership and trials posted. Please feel free share CCTC with your oncology colleagues, we are always happy to have new members join the CCTC network. CCTC is continuing to grow with over 270 members and 31 institutions.

If you have an accruing trial you would like to highlight, please email [cometrials@smh.ca](mailto:cometrials@smh.ca) to nominate it to be one of our next *Trials of the Month*.

As always, please contact me at [cometrials@smh.ca](mailto:cometrials@smh.ca) any time with questions, comments or concerns.

Kind Regards,

Caroline Illmann  
Project Manager, CCTC

## ARTICLE RECOMMENDATION

### Is This Conference for Real? Navigating Presumed Predatory Conference Invitations

Kelly D. Cobey, Miguel de Costa e Silva, Sasha Mazzarello, Carol Stober, Brian Hutton, David Moher, and Mark Clemons  
DOI: 10.1200/JOP.2017.021469

**Background:** Academic conferences provide researchers with the opportunity to share their findings with other like-minded individuals. Indeed, conference attendance ... are used by some institutions as part of their decision making regarding promotions. Therefore, [researchers] are conscious of the importance of conference attendance. Unfortunately, there is a trend for some conference organizers to aggressively solicit conference abstract submissions or to widely send invited speaker requests via e-mail. These types of conference invitations have been termed as predatory because it is thought that many of these conferences fail to conduct themselves with transparency and integrity.

**Methods:** [T]here are knowledge gaps about [predatory] conference invitations. Lack of characterization, guidance, and policy with regard to these conferences makes avoiding these invites challenging. Here, we collate all presumed predatory conference e-mail invitations received by a single medical oncologist (M.C.).

From January 21 to April 21, 2016, all nonsolicited e-mails from unknown recipients received (through an official hospital e-mail account) by a senior medical oncologist (M.C.), who specializes in breast cancer management, were collated. E-mails received were thematically grouped (by M.d.C.). We excluded invites from recognized sources (n = 3 invites excluded).

**Results:** In total, 578 unsolicited e-mails were received during the study period. The most frequent type of e-mail was from presumed predatory journals (n = 191). The second most frequent type of e-mails were invitations to attend presumed predatory conferences (n = 109). Of the invites received, only 13 (11%) related to oncology. Many of the received invitations were perceived as formal (n = 42, 38%) or overly formal (n = 12, 11%) or used flattery of some form (n = 39, 37%). Some e-mails stressed the urgency of the invitation (n = 15, 13%), and more than half contained overt grammar or spelling errors (n = 59, 54%). A few of the invitations also specifically cited the recipient's previous research in the invitation (n = 11, 10%).

**Conclusions:** This study provides an initial look at the characterization of presumed predatory conference invitations, but it is not without limitations.. Future research is needed to determine whether conferences associated with e-mails that we classified as being predatory, or similar invitations received by other scholars, actually relate to conferences that do take place. If so, further work examining whether the quality and professionalism of the event differ from those of genuine conferences will be needed. With this evidence base, decisions and policies surrounding academic conference attendance can be established.

## TRIALS SNAPSHOT

Trial Type	Any Malignancy	Breast	CNS	GI	GU	GYN	Head & Neck	Heme	Lung	Mel	Total
Imaging Study	-	-	-	-	3	2	-	-	-	-	3
Observational	1	2	-	-	1	1	-	1	-	-	6
Prevention	-	-	-	1	-	-	-	1	-	-	2
Radiation	-	3	-	3	5	-	1	-	6	-	18
Supportive Care	1	4	-	-	-	-	-	-	-	-	5
Surgical Therapy	-	1	1	-	1	1	-	-	-	-	4
Systemic Therapy	1	13	1	13	18	5	1	12	11	7	78
Therapeutic	-	1	-	-	2	1	-	3	-	-	6
<b>TOTAL</b>	<b>3</b>	<b>24</b>	<b>2</b>	<b>17</b>	<b>30</b>	<b>10</b>	<b>2</b>	<b>17</b>	<b>17</b>	<b>7</b>	<b>122</b>



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### TRIALS OF THE MONTH

Type	Acronym	Study Title	Description	Site(s)
Breast	<a href="#"><u>ILIAD</u></a>	A Randomized Trial of Individualised Care Versus Standard Care for Breast Cancer Patients at High Risk for Chemotherapy Induced Nausea and Vomiting.	<ul style="list-style-type: none"> <li>• Adjuvant</li> <li>• Supportive Care</li> </ul>	Kingston General Hospital
GU	<a href="#"><u>ARASENS</u></a>	A Randomized, Double-blind, Placebo Controlled Phase III Study of ODM-201 Versus Placebo in Addition to Standard Androgen Deprivation Therapy and Docetaxel in Patients With Metastatic Hormone Sensitive Prostate Cancer	<ul style="list-style-type: none"> <li>• Prostate Cancer</li> <li>• Metastatic</li> <li>• Systemic Therapy</li> </ul>	Odette Cancer Centre
Heme	<a href="#"><u>VENICE I</u></a>	Open-Label, Single-Arm, Phase 3b, Multi-Center Study Evaluating the Efficacy of Venetoclax (ABT-199) in Relapsed/Refractory Subjects With Chronic Lymphocytic Leukemia (CLL)	<ul style="list-style-type: none"> <li>• Leukemia (CLL)</li> <li>• Relapse/Refractory</li> <li>• Systemic Therapy</li> </ul>	Odette Cancer Centre
GYN	<a href="#"><u>Prima</u></a>	A Phase 3, Randomized, Double-Blind, Placebo-Controlled, Multicenter Study of Niraparib Maintenance Treatment in Patients With Advanced Ovarian Cancer Following Response on Front-Line Platinum-Based Chemotherapy	<ul style="list-style-type: none"> <li>• Ovarian</li> <li>• Adjuvant</li> <li>• Systemic Therapy</li> </ul>	London Health Sciences Centre
Lung	<a href="#"><u>LUSTRE</u></a>	A Randomized Trial of Medically-Inoperable Stage 1 Non-small Cell Lung Cancer Patients Comparing Stereotactic Body Radiotherapy Versus Conventional Radiotherapy	<ul style="list-style-type: none"> <li>• Non-Small Cell</li> <li>• Adjuvant</li> <li>• Radiation Therapy</li> </ul>	Kingston General Hospital London Health Sciences Centre
Mel	<a href="#"><u>Melanoma Adjuvant</u></a>	Study of Neo-adjuvant Use of Vemurafenib Plus Cobimetinib for BRAF Mutant Melanoma With Palpable Lymph Node Metastases	<ul style="list-style-type: none"> <li>• Melanoma</li> <li>• Stage III</li> <li>• Systemic Therapy</li> </ul>	Odette Cancer Centre
GI	<a href="#"><u>PA.7</u></a>	A Randomized Phase II Trial of Gemcitabine and Nab-Paclitaxel vs Gemcitabine, Nab-Paclitaxel, Durvalumab and Tremelimumab as 1st Line Therapy in Pancreatic Adenocarcinoma	<ul style="list-style-type: none"> <li>• Pancreatic</li> <li>• Metastatic</li> <li>• Systemic Therapy</li> </ul>	Kingston General Hospital London Health Sciences Centre Odette Cancer Centre



[Click here to NOMINATE your trial for Trials of the Month!](#)



## MEMBERSHIP UPDATES

**271 members**  
**31 institutions**  
**122 accruing trials**



## ACKNOWLEDGEMENTS

The CCTC has been funded by unrestricted educational grants from the following supporters:



## CONTACT US

Do you have any questions, feedback, suggestions? Please do not hesitate to contact us.

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[www.cometrials.com](http://www.cometrials.com)

## INSTITUTIONS

Institution	Location	Members	Trials
Cambridge Memorial Hospital	Cambridge	3	2
Grand River Hospital	Waterloo	9	1
Humber River Regional Hospital	Toronto	5	3
Kingston General Hospital	Kingston	4	26
Juravinski Cancer Centre	Hamilton	7	-
Lakeridge Health Corporation	Oshawa	20	-
London Health Sciences Centre	London	9	63
Mackenzie Health Hospital	Richmond Hill	6	-
Markham Stouffville Hospital	Markham	4	1
Mount Sinai Hospital	Toronto	2	4
North York General Hospital	Toronto	12	5
Odette Cancer Centre/Sunnybrook	Toronto	57	44
Ontario Institute for Cancer Research	Toronto	4	-
Ontario Hospital		1	-
Ottawa Hospital	Ottawa	2	-
Princess Margaret Cancer Centre	Toronto	25	1
Quinte Health Care	Belleville	1	-
Rouge Valley Health System	Ajax	3	-
Royal Victoria Regional Health Centre	Barrie	24	18
Scarborough General Hospital	Toronto	1	-
Southlake Regional Health Centre	Newmarket	19	12
St. Joseph's Health Centre	Toronto	4	-
St. Joseph's Healthcare	Hamilton	4	-
St. Michael's Hospital	Toronto	13	6
Sudbury Regional Hospital	Sudbury	1	-
Thunder Bay Regional	Thunder Bay	2	-
Toronto General Hospital	Toronto	3	1
Toronto East General Hospital	Toronto	6	-
Trillium Health Partners	Mississauga	16	-
William Osler Health Systems	Brampton	4	-
Windsor Regional Hospital	Windsor	1	-
Wingham and District Hospital	Wingham	1	-