

NAGKC Meeting

May 3, 2010

Philadelphia, PA

Minutes:

The meeting was called to order by Dr. Lunsford.

Dr. Lunsford summarized updates regarding NAGKC membership, the 2009 tax return, and the 2010 budget.

Retrospective trials were next discussed. The cluster headache trial paper has been electronically published by the JOURNAL OF NEUROSURGERY. The chordoma manuscript has been resubmitted for review to NEUROSURGERY. Other retrospective trials are underway including ones related to glomus tumors, hemangioblastomas, and craniopharyngiomas. Data submission from member centers was reviewed; the importance of timely submission was emphasized. Study accrual could be compared to patient treatment numbers accumulated by Elekta. It was also noted that funding for some of these projects may be attainable from private foundations.

Other proposed retrospective trials include the following:

1. Central neurocytoma (Lunsford/Kano)
2. Langerhans histiocytosis (Larson/Kano)
3. Papillary pineal tumors (Mathieu)

These studies will move forward at various rates.

Prospective trials that were proposed include the following:

1. ≥ 5 metastasis (Larson and colleagues)
The draft of the study protocol is detailed in the meeting materials. Numbers of centers and range of metastatic lesions that would allow a patient to be eligible need to be further defined. Also, the budget may be able to be reduced. Potential use of

the RTOG as a CRO may be feasible. NINDS or Elekta could serve as funding sources for the prospective trial. Dr. Larson and colleagues will investigate these options and provide an update to the NAGKC.

2. Leading Edge Glioma (Kano, Duma, and colleagues)

The leading edge glioma protocol was discussed. Potential revisions could incorporate MR spectroscopy, Avastin in an arm of the study, and dose escalation. Further iterations of the protocol will be performed and then redistributed to member centers.

3. Cluster Headache (Kano and colleagues)

The cluster headache protocol was discussed. Members expressed interest in the study. Marketing or announcements of the study may be required to increase accrual at some centers.

Next, an update was provided about the database project. Elekta officials were in Pittsburgh for a 3 day visit recently. At that time, Dr. Lunsford provided the Elekta personnel with information to serve as templates for the most common Gamma Knife indications. Mosaic may be a reasonable platform for such a database and allows for insertion of neuro-imaging studies. A common database could facilitate future retrospective and prospective studies by the consortium. De-identified data could be ported to the study PI. It could also be used to provide annual treatment numbers to Elekta.

Regulator issues were addressed by Sharon DeCesare. Some centers need to have submit initial applications for IRB approval. Others need to complete annual continuation applications for their IRB. Ms. DeCesare can provide an IRB application from UPMC to interested member centers for guidance.

Fundraising was discussed for the NAGKC. Philanthropic donations from grateful patients could be sought. However, member institutions frequently compete for such funds. Funds for particular indications might be realizable from private foundations or patient advocacy groups. A more comprehensive fundraising strategy will be developed over time.

New meetings were proposed to coincide with the fall CNS and ASTRO meetings. Further details will follow regarding the fall meetings of the NAGKC. In addition, meetings of the NAGKC could be held at future Leksell Gamma Knife society conferences.

Dr. Lunsford called the meeting to a close.