




The Cancer Prevention Study – 3

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American Cancer Society

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“Everyone knows that cigarette smoking causes lung cancer. Few realize that it took three years, 22,000 volunteers, and 188,000 study participants to prove it.”

Meghan Murphy, The Greeley Tribune; 2007

ACS Cancer Prevention Studies

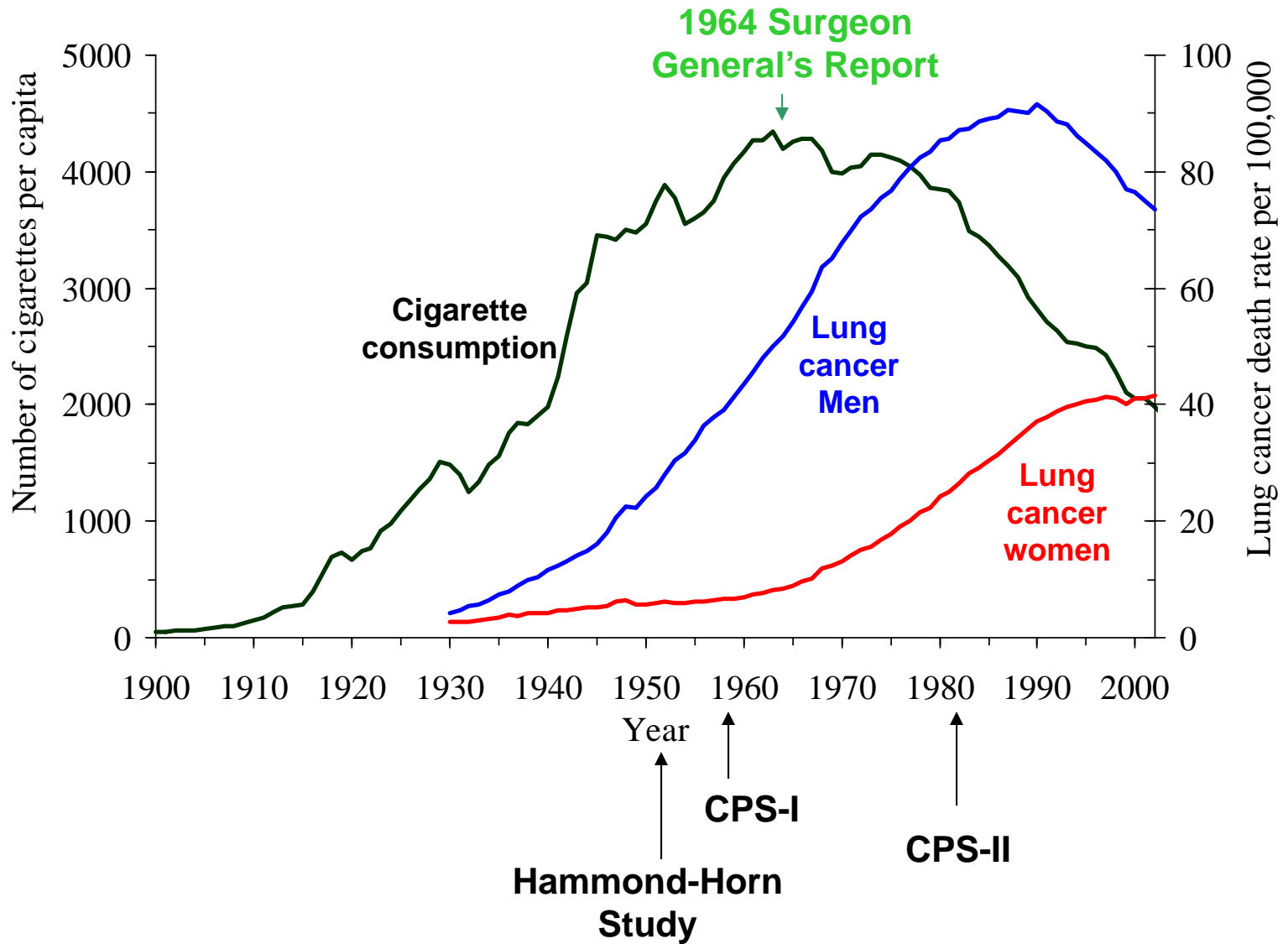
The Society has been conducting large-scale, nationwide population studies to examine the causes of cancer and how to prevent it for nearly 60 years.

	<u>Hammond-Horn</u>	<u>CPS-I</u>	<u>CPS-II</u>
Years	1952-55	1959-72	1982-
Participants	188,000	1,000,000	1,200,000
Sex	Men	Both	Both
Volunteers	22,000	68,000	77,000
States	9	25	50
Cancer endpoints	Mortality	Mortality	Mortality (& incidence)
Research Emphases	Smoking	Smoking, obesity	Multiple

The Researchers at AMA Conference



Tobacco Control and Mortality





Previous CPS Implications

- These studies have been paramount in understanding the role of smoking, obesity, and nutrition/physical activity in cancer etiology
- Results helped to establish various relationships between lifestyle, environment, genetics and cancer risk including:
 - Smoking and lung cancer
 - Obesity and risk of various types of cancer
 - Physical activity and cancer prevention
 - Sitting time and premature death
 - Red and processed meat and colon cancer risk
 - Fruits and vegetables and cancer prevention
 - Aspirin and colon cancer prevention

Obesity and Mortality

J Chron Dis, 1979

VARIATIONS IN MORTALITY BY WEIGHT AMONG 750,000 MEN AND WOMEN

EDWARD A. LEW and LAWRENCE GARFINKEL

Department of Epidemiology and Statistical Research, American Cancer Society, Inc.,
777 Third Ave., NY 10017, U.S.A.

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Overweight, Obesity, and Mortality from Cancer in a Prospectively Studied Cohort of U.S. Adults

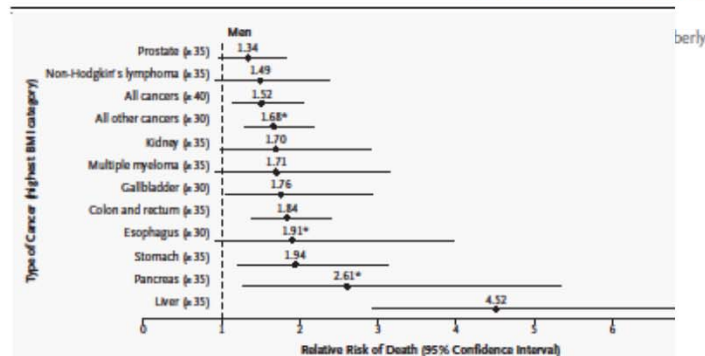


Figure 1. Summary of Mortality from Cancer According to Body-Mass Index for U.S. Men in the Cancer Prevention Study II, 1982 through 1998.

For each relative risk, the comparison was between men in the highest body-mass-index (BMI) category (indicated in parentheses) and men in the reference category (body-mass index, 18.5 to 24.9). Asterisks indicate relative risks for men who never smoked. Results of the linear test for trend were significant ($P < 0.05$) for all cancer sites.

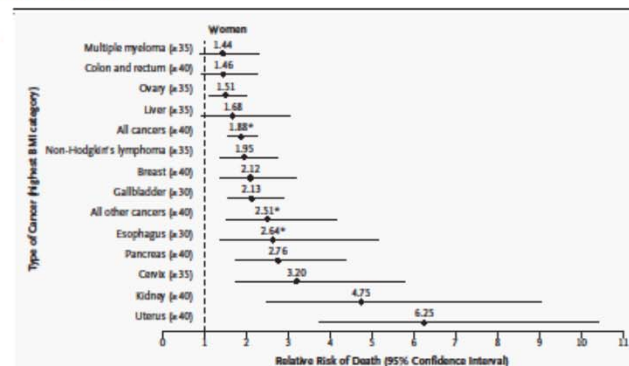
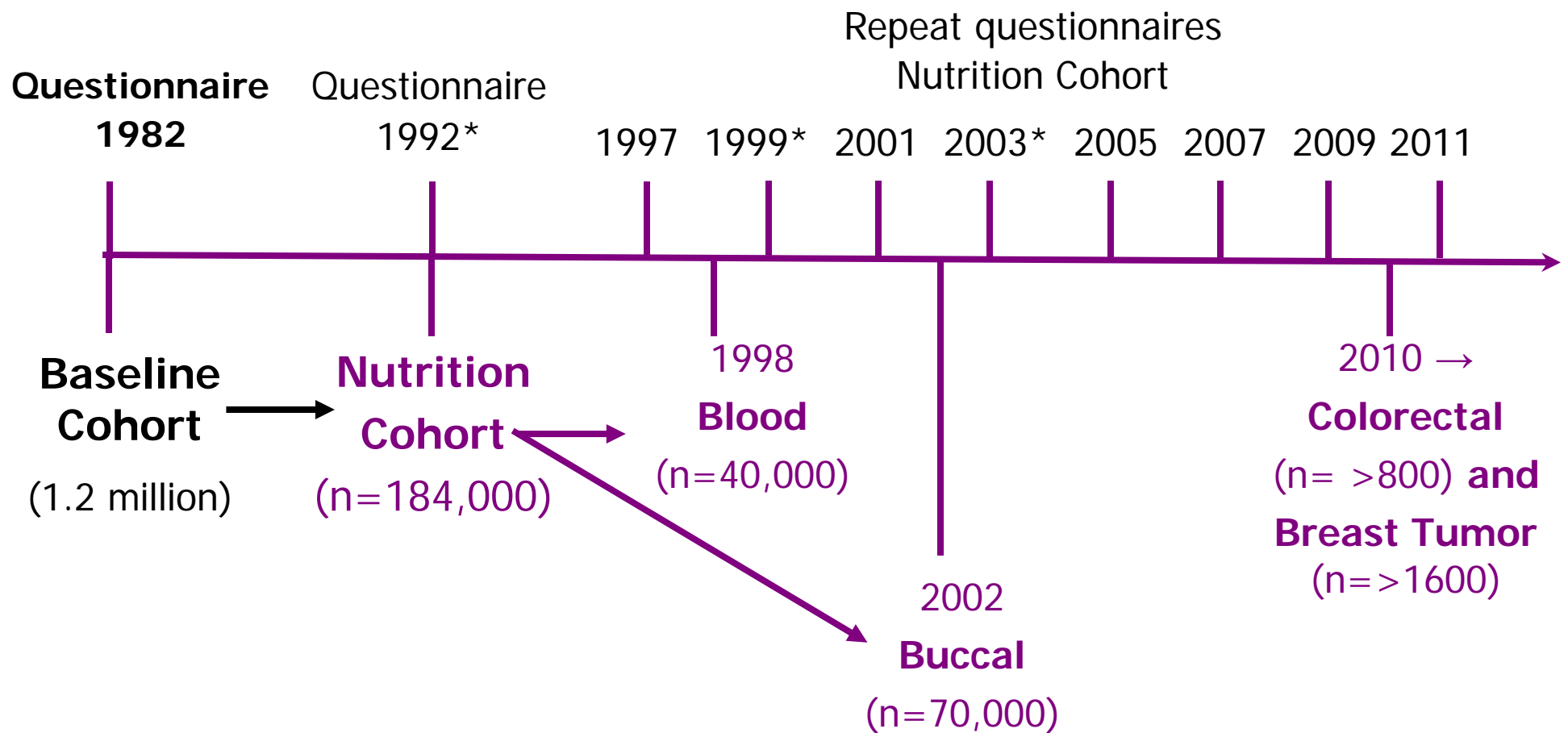


Figure 2. Summary of Mortality from Cancer According to Body-Mass Index for U.S. Women in the Cancer Prevention Study II, 1982 through 1998.

For each relative risk, the comparison was between women in the highest body-mass-index (BMI) category (indicated in parentheses) and women in the reference category (body-mass index, 18.5 to 24.9). Asterisks indicate relative risks for women who never smoked. Results of the linear test for trend were significant ($P < 0.05$) for all cancer sites.

Enhancements to the **CPS-II** Data Resources



* Diet Questionnaires

Diet and Cancer

ORIGINAL CONTRIBUTION

Meat Consumption and Risk of Colorectal Cancer

Ann Chao, PhD

Michael J. Thun, MD, MS

Cari J. Connell, MPH

Marjorie L. McCullough, ScD

Eric J. Jacobs, PhD

W. Dana Flanders, MD, ScD

Carmen Rodriguez, MD, MPH

Rashmi Sinha, PhD

Eugenia E. Calle, PhD

Context Consumption of red and processed meat has been associated with colorectal cancer in many but not all epidemiological studies; few studies have examined risk in relation to long-term meat intake or the association of meat with rectal cancer.

Objective To examine the relationship between recent and long-term meat consumption and the risk of incident colon and rectal cancer.

Design, Setting, and Participants A cohort of 148610 adults aged 50 to 74 years (median, 63 years), residing in 21 states with population-based cancer registries, who provided information on meat consumption in 1982 and again in 1992/1993 when enrolled in the Cancer Prevention Study II (CPS II) Nutrition Cohort. Follow-up from time of enrollment in 1992/1993 through August 31, 2001, identified 1667 incident colorectal cancers. Participants contributed person-years at risk until death or a diagnosis of colon or rectal cancer.

Meat Consumption among Black and White Men and Risk of Prostate Cancer in the Cancer Prevention Study II Nutrition Cohort

Carmen Rodriguez, Marjorie L. McCullough, Alison M. Mondul, Eric J. Jacobs, Ann Chao, Alpa V. Patel, Michael J. Thun, and Eugenia E. Calle

Epidemiology and Surveillance Research, American Cancer Society, Atlanta, Georgia

Dairy, Calcium, and Vitamin D Intake and Postmenopausal Breast Cancer Risk in the Cancer Prevention Study II Nutrition Cohort

Marjorie L. McCullough, Carmen Rodriguez, W. Ryan Diver, Heather Spencer Feigelson, Victoria L. Stevens, Michael J. Thun, and Eugenia E. Calle

Epidemiology and Surveillance Research, American Cancer Society, Atlanta, Georgia

ORIGINAL INVESTIGATION

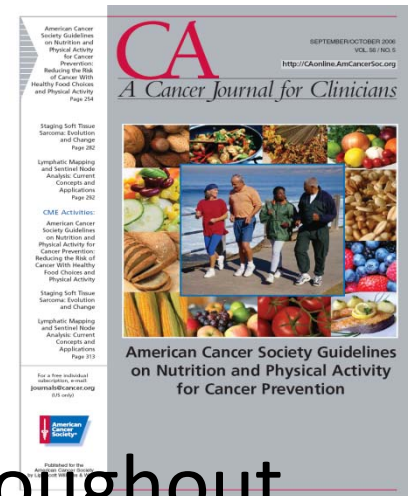
Association of Alcohol Intake With Pancreatic Cancer Mortality in Never Smokers

Susan M. Gapstur, PhD, MPH; Eric J. Jacobs, PhD, MS; Anusila Deka, MPH; Marjorie L. McCullough, ScD, RD; Alpa V. Patel, PhD, MPH; Michael J. Thun, MD, MS

2006 Guidelines on Nutrition and Physical Activity for Cancer Prevention

Individuals:

- Maintain a healthy weight throughout life.
- Adopt a physically active lifestyle.
- Consume a healthy diet, with an emphasis on plant sources.
- If you drink alcoholic beverages, limit consumption.



CPS Major Contributions to Public Health

Smoking

- Contributions to 21 U.S. Surgeon General Reports on Smoking & Cancer.
- Confirm relationship of 2nd hand smoke with lung cancer & heart disease, helping to motivate smoke-free laws.
- Ongoing role in debunking myths from tobacco industry.
- Low tar/nicotine cigarettes do not reduce the risk of lung cancer.

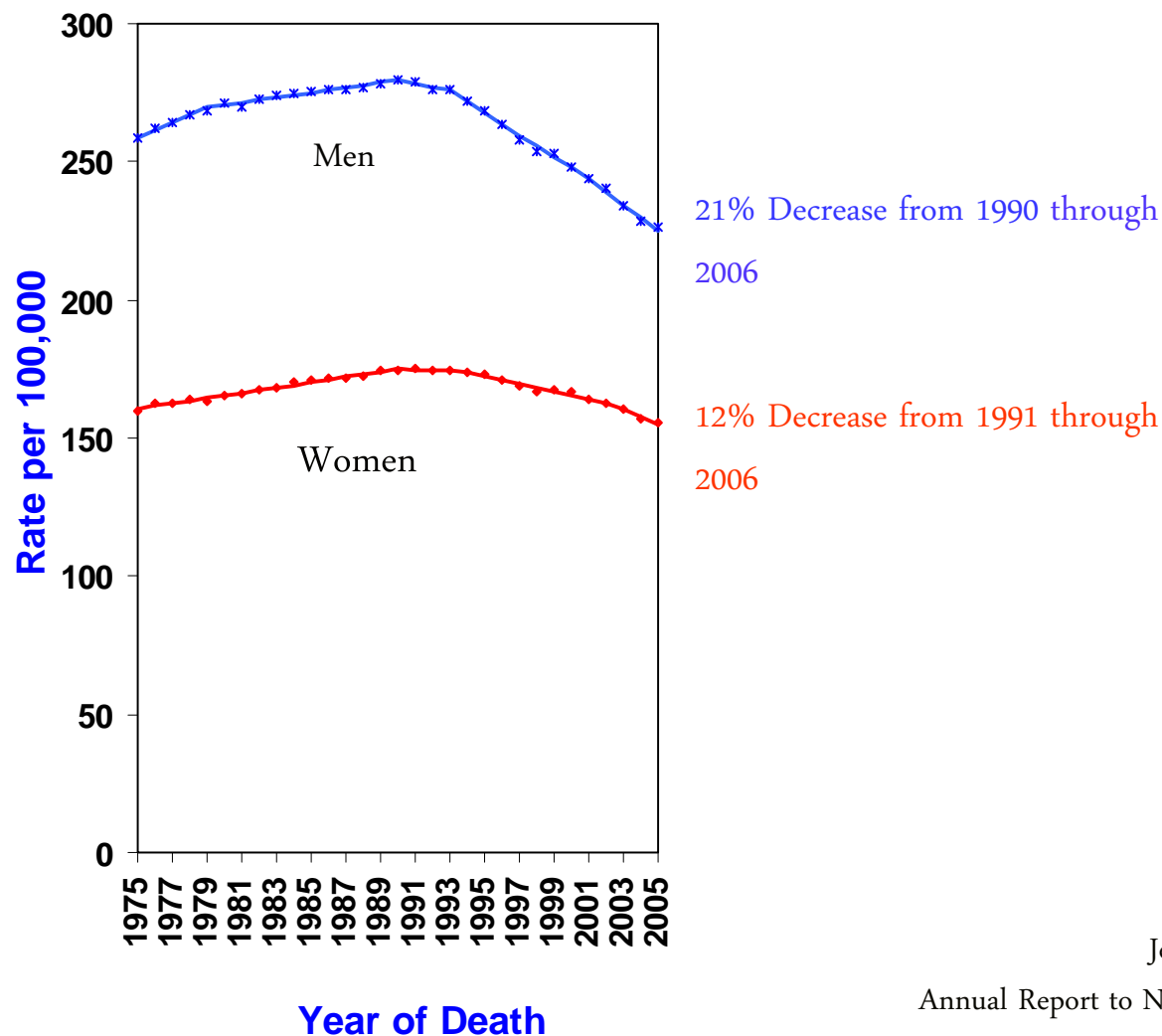
Obesity, nutrition, and physical activity

- First epidemiological study that overweight/obesity shortens longevity.
- Landmark paper linking obesity to increased death rates from 10+ cancer sites.
- First US epidemiologic study that sitting time shortens longevity.
- Major contributions to IARC Monographs, WCRF/AICR Reports

Other areas

- Discovery of the link between aspirin use and lower risk of colon cancer.
- Air pollution (small particulates and ozone), increase death rates from heart and lung conditions; motivate the Environmental Protection Agency to propose more stringent limits on air pollution.

> 450 Reports, Monographs, Peer-Reviewed Publications Have Contributed to Falling Cancer Death Rates



Cancer Prevention Study – 3



	<u>Hammond-Horn</u>	<u>CPS-I</u>	<u>CPS-II</u>	<u>CPS-3</u>
Years	1952-55	1959-72	1982-	2006-
Participants	188,000	1,000,000	1,200,000	300,000
Sex	Men	Both	Both	Both
Volunteers	22,000	68,000	77,000	25,000
States	9	25	50	35
Cancer endpoints	Mortality	Mortality	Mortality (& incidence)	Mortality & incidence
Research Emphases	Smoking	Smoking, obesity	Multiple	Multiple



Changing the Course of Cancer...

The 3rd Cancer Prevention Study (CPS-3) will...

- Examine a wide spectrum of lifestyle, behavioral, environmental, and genetic factors in relation cancer risk, survival, and mortality
- Identify (or validate) early markers of disease



Scientifically, Why Do We Need a 3rd Cancer Prevention Study?

- To explore new areas of research due to changes in environment, lifestyles, and new scientific technologies
- To study diverse populations in the US (defined by race/ethnicity)
- To improve understanding of cancer biology and etiology leading to better individualized risk prediction
- To continue tracking the evolution of the public health impact of smoking and obesity
- To have a contemporary national resource in the US as most new large studies are overseas



What Makes CPS-3 Different from Other Cancer Prevention Studies?

- Higher proportion of younger adults (e.g., 60% are 30-49 yrs)
- Blood draw at baseline on all participants
- Physical assessment at baseline (e.g., waist circumference)
- Detailed medication history at baseline
- Use of electronic technologies for data collection
- Greater ethnic/racial diversity



The knowledge gap in cancer disparities

- 2011 President's Cancer Panel concluded:

“The current understanding of cancer risk, progression, and outcomes is based largely on studies of non-Hispanic white populations. The risk factors, screening guidelines, and treatment regimens identified through research are often not appropriate for individuals of non-European descent.”
- Without racially/ethnically diverse study populations in place, we can't improve our understanding of why these differences exist



Where are we Now?

Study Participant Characteristics*

- ~110,000 recruited
- 74% women
- Race/ethnicity
 - 82% NH White
 - 3% African American
 - 10% Hispanic
 - 1% Asian
 - 4% Other
- Age
 - 25% age 30-39
 - 36% age 40-49
 - 30% age 50-59
 - 9% age 60-65
- BMI
 - 35% normal weight (<25)
 - 33% overweight (25-<30)
 - 30% obese (30+)
- Smoking status
 - 64% never
 - 7% current
 - 25% former

*As of August 1, 2011



CPS-3 Goals

OPERATIONAL

- Enroll a diverse group of **at least 300,000** men and women aged 30-65 years with no prior history of cancer, **by December 2013**
- At least 25% racial/ethnic minority participation
- Geographic diversity
- Blood specimens at enrollment

SCIENTIFIC

- Examine a wide spectrum of lifestyle, behavioral, environmental, and genetic factors in relation cancer risk and mortality
- Study gene x environment interactions in cancer risk and mortality
- Identify and/or validate early markers of disease

Venues to Reach 300,000 by Dec 2013

- Nationwide-wide engagement to support enrollment
- Utilize a combination of venues:
 - Relay For Life and other event-based enrollment
 - Open community enrollment in select markets
 - Corporate/worksite enrollment
 - Hospital-based enrollment
 - Targeted recruitment to increase minority & male participation utilizing all venues



Hospital or Corporate Based Enrollments

Initial enrollment

- Part One (at home electronic)
 - Schedule appointment
 - Comprehensive baseline survey
- Part Two (on site during appointment)
 - Consent and short survey
 - Waist circumference
 - Small blood sample

Long-term follow-up

- Repeat surveys every few years
- Annual newsletter to participants





Hospital Partner Perspective

- Provides return on investment in the shared vision for a healthier community and an emphasis on disease prevention
- Supports their partnership with the American Cancer Society and our mission to save more lives from cancer
- Offers great opportunity to provide personal and meaningful employee engagement at no cost
- Enhances visibility and media attention for the hospital in their local community

Community Outreach by Hospitals

SEPTEMBER 15, 2008

JOHNSON
MEMORIAL
HOSPITAL

News

Johnson Memorial to host only Cancer Prevention Study in Central Indiana for 2009

- Monday, June 30, 2008

The Cancer Care Center of Johnson Memorial Hospital is proud to announce that the American Cancer Society (ACS) has chosen the Relay For Life of Johnson County - Franklin site as the only Relay in Central Indiana for 2009 to host its Cancer Prevention Study - 3 (CPS-3).

Men and women between the ages of 30 and 65 years who have no personal history of cancer are invited to join this historic research study. Those interested in participating in the study will be able to sign up during the 2009 Relay For Life event in Franklin at Johnson Memorial Hospital on Saturday, May 16, 2009.

The ultimate goal is to enroll 500,000 adults from various racial/ethnic backgrounds from across the U.S. The purpose of CPS-3 is to better understand the lifestyle, behavioral, environmental and genetic factors that cause or prevent cancer and to ultimately eliminate cancer as a major health problem for this and future generations. CPS-3 is a grassroots effort where local communities from across the country can support cancer research not just through fundraising efforts like Relay For Life, but also by participating actively in this historic research study.

The study involves participants filling out a personal health history and providing a small blood sample that will be taken the day of the event. Then, participants will be followed through periodic health surveys.

The Franklin Relay was chosen because of the tremendous growth the event has created over the past several years. In the last five years, the event has gone from raising \$43,500 in 2003 to over \$104,000 this year. The event has also been recognized with several awards including All-American Relay, Pacesetter Award, Most Cancer Survivors and Most Funds Raised in the Central Indiana Region.

Past long-term American Cancer Society follow-up studies have played a major role in cancer prevention at the American Cancer Society, as well as in other national and international efforts. More than 300 scientific articles by American Cancer Society epidemiologists have been published from these studies and findings have significantly contributed to tobacco-related research, and to the understanding of obesity, diet, physical activity, hormone use, air pollution, and various other exposures in relation to cancer and other diseases.

The Relay For Life - Franklin site committee is in need of volunteers to help with the registration of participants in the study, as well as to volunteer with the event. If you are interested in joining in the fight against cancer, please contact event chairperson Enos Dotson at relayfamily@atl.net. For more information about CPS-3, visit the ACS website at www.cancer.org/cps3.

Focus on Health >>

Media Contacts >>

Media Photos >>

QUAD CITIES
area

Promoting
Healthier Living
in Your Community

- Physical
- Emotional
- Nutritional

MARCH 2010 FREE

HealthyCells

MAGAZINE

www.healthycellsmagazine.com

Assisted Living
May be the Best
Option pg 5

Childhood Obesity pg 5

Internet
Addiction pg 5

If You Could Drive Less
Than 20 Miles to Cure
Cancer, Would You? page 12

Media and Publicity

Newsweek

Cancer Studies Want Yo

The goal of one study, which will follow 500,000 to figure out who gets cancer and who doesn't,

Claudia Kalb
NEWSWEEK
Updated: 12:27 PM ET Mar 6, 2008

Susan Stitt is sick of a cancer. Stitt's mother had colon cancer. Stitt, 46, has cancer. Stitt, 46, has cancer. Stitt, 46, has cancer.

We should all be so di \$200 billion a year in r significantly and new t don't know about why causes lung cancer; d cancer. Now research treatments.

That means you can d researchers need 500 cancer. (They've got 2 20 years, is to figure o be a major focus. If pe likely to exercise? Res The results may give s healthier neighborhood colon cancer; CPS-3 v medications. Unlike e provide a direct benefi ones and definitely to

Many prevention trials of developing it (you're endometrial cancer in Center in Houston (MK setting? telephone con participation will help

One day, cancer vacci market could help mu trials (cancer.gov) to acid-reflux drug prev progressing? Does ca patients who've already the NCI's Dr. Leslie Fr

The key may be ident Ernest Hawk. Ultimate cardiologists prevent i there.



PAGE 10 / MAY 25, 2007

ACS Launches Third-Generation of Its Huge Prevention Studies

By Eric T. Rosenthal

In an era of waning federal support for cancer trials of the therapeutic and prevention varieties, the American Cancer Society is launching what it says may be "the last best chance" to undertake a large-scale population research study on the genetic and environmental factors causing and preventing cancer in the United States.

ACS hopes to enroll 500,000 geographically and ethnically diverse adults age 30 to 65 in its Cancer Prevention Study-3 (CPS-3) through 2011, and follow them for at least 20 years.

Eligibility includes never having been diagnosed with cancer and a long-term willingness to commit to the study, which will mean completing somewhat lengthy questionnaires about every other year.

The study hopes to accrue a minimum of 25% non-white participants, with a ratio of 40% men to 60% women.

But what is somewhat significant about CPS-3 is its method and venue for recruitment.

What is somewhat significant about CPS-3 is its method and venue for recruitment.

More than Half a Century Dedicated to Prevention Studies

The American Cancer Society's cancer prevention studies have been designed to advance understanding of lifestyle, environmental, and genetic factors that may cause or prevent cancer.

For more than half a century, the Society has followed the health outcomes of each study's recruits to determine how the outcomes relate to collected exposure data.

The Hammond-Horn Study was conducted from 1952-1955, and studied 188,000 American males to examine the effect of cigarette smoking on cancer and other disease death rates.

It set the methodology for CPS-1

(1959-1972) and CPS-II (1982-ongoing), which studied 1 million men and women, and 1.2 million men and women, respectively, to assess various environmental and lifestyle exposures that might increase or decrease cancer risk.

A still ongoing CPS-II Nutrition Cohort study concurrently enrolled 185,000 CPS-II participants to look at how various behavioral, environmental, and genetic exposures affect cancer risk.

Among the important findings of these studies:

- Links between cigarette smoking and lung cancer.
- The significant impact of excess

Interested individuals agreeing to consent to participate will fill out a brief questionnaire at the overnight events, have their weights measured, and provide a small blood sample.

With NCI's recent 10% cuts of its cooperative group clinical trials, and decision to delay indefinitely the National Surgical Adjuvant Breast and Bowel Project's breast cancer prevention study to Evaluate Leucovorin and Raltitrexed (STELLAR), this is a large prospective prevention study sponsored by a nonprofit, non-governmental, non-industrial third-party organiza

in Florida, Georgia, South Carolina, North Carolina, Connecticut, Massachusetts, Texas, Missouri, Colorado, New Mexico, Arizona, California, and Washington State.

In 2008, enrollment will take place at 125 sites, with the addition of Ohio, Indiana, Michigan, and Illinois, and from 2009 through 2011 recruitment will be held at some 250 to 300 sites in a total of 25 states.

A trial program in 2006 provided a jump start to the project by enrolling the first 2,000 participants.

Dr. Patel explained that the specific

ative body weight on cancer occurrence and death.

- The impact of hormones, physical activity, diet, medications, vitamins, and other factors on cancer risk.
- Air pollution's effect on cardiopulmonary conditions.

- The link between aspirin and reduced colon cancer risk.
- The link between postmenopausal hormone-replacement therapy and certain gynecological and breast cancers.

- The link between diabetes and pancreatic and colon cancer.
- The link between physical activity and lowered risk of breast, colon, and aggressive prostate cancers.

cause they had a large percentage of minority participants, or had a more stable volunteer structure. College events were given less consideration since they might not yield a large enough percentage of age-eligible people.

These sites will be the only places to sign up for the study this year, but Dr. Patel said it was not necessary for study participants to take part in the Relay for Life itself, just to physically be there to register.

Once enrolled, participants would only have to fill out a 45- to 60-minute



Tracking Cancer Nationwide

Dr. Alpa Patel

Strategic Director, Cancer Prevention Study, American Cancer Society // Atlanta, Georgia

Alpa Patel wants to know how cancer is linked to our diet and exercise routines—and what we need to do to keep ourselves healthy and cancer-free. Patel is the strategic director of the American Cancer Society's Cancer Prevention Study. Previous population surveys helped prove links between cancer and cigarette smoking, secondhand smoke and obesity. Now Patel is signing up 500,000 U.S. residents between the ages of 30 and 65 who've never had cancer for a study that will track them for 20 to 30 years. The study, officially launched in 2006, has about 70,000 par-

500,000 volunteers for cancer battle

Long-term research seeks clues to causes

By ROBIN ERB
FREE PRESS MEDICAL WRITER

The American Cancer Society is looking for a half-million volunteers for a long-time study into what causes cancer. It would mean years of answering questionnaires about things like the foods you eat, the way you use your cell phone and where you grew up.

So why would anyone sign up for that kind of grilling? Deena Gardner's motivation smiles at her every day — photos on her desk of her mother. Andrea Burnette

Ashford was just 47 when she died in 2008 of uterine cancer.

"When my mother was first diagnosed, it was complete helplessness: 'I can't make this go away,'" said Gardner, 29, who, after her mom's death, took a job as a community representative at the Cancer Society's Southfield office.

The information she provides for the study might offer clues that may one day help prevent or even cure cancer, she said.

The biggest need is for minority participants in the study. With about 80,000 recruits so far, the study lags in representation of people of color. It has fewer than 16% nonwhite participants; its goal is 25% — even though some cancers are more prevalent among people of certain racial

backgrounds.

The commitment to the decades-long study might make some hesitate, and many African Americans are especially suspicious of sharing such information, said Dr.

Otis Brawley, the Cancer Society's medical director and a former Detroit.

Answering questions about such things as how many times you eat foods with potentially cancer-fighting lycop

penes (think ketchup or spaghetti sauce) or where your mother or was born might seem insignificant now. But with those details, researchers might be able to discern patterns over time, gleaming clues to genetic, environmental and lifestyle links to cancer. In fact, it was the Cancer Society's first study in the 1950s that initially linked smoking to cancer.

"I'm asking people to be involved with these... studies for their grandkids," Brawley said.

A 28-page initial survey in this fourth large-scale study will be followed every two years by shorter questionnaires. Participants must be between 30 and 65 years old, be cancer-free and willing to provide a blood sample.

Prospective participants can enroll during select Relay for Life events. Relay for Life of Detroit, at Marygrove College, 8425 W. McNichols, Detroit, and Relay for Life Brandon/Ortonville, at Harvey Swanson Middle School, 209 Varsity Drive, Ortonville, are both 1-5 p.m. June 19.

For more information or to find other Relays with enrollment events, call 888-604-5888 or visit www.cancer.org/cps3.

CONTACT ROBIN ERB: 313-222-2708 OR REB@FREEPRESS.COM



A photo of Deena Gardner with her mother at a Relay for Life event in 2008.



Relay for Life luminaries, bags with a lit candle inside, honor those with cancer.



Types of CPS-3 Enrollment at Hospitals

- “Open” enrollment site
 - Enrollment available to community at-large
 - Wide-scale promotion to the community and within the hospital to staff (requires both ACS and hospital support for outreach)
 - Enrollment “sessions” will take place for a few days
 - Implementation requires 4-5 months
- “Closed” enrollment site
 - Enrollment available to employees only
 - Hospital sites with at least 750 employees
 - Internal promotion only (by hospital)
 - Generally, single or two-day enrollment session
 - Implementation requires 3-4 months



Host Hospital's Role

- Name a lead staff person to coordinate with ACS staff
- Provide space for individuals to enroll (large auditorium, conference center, etc.)
- Promotion to employees and constituents (using template materials provided by ACS)
- Provide cost-free parking for participants and ACS staff, phlebotomists, etc.
- Assist with day-of volunteers



American Cancer Society's Role

- Provide all study materials and promotional templates
- Onsite training and oversight
- Create appointment scheduling website
- Manage all direct communication with study participants after the initial enrollment
- Work with hospital partner on community-wide promotion



Other Logistical Considerations

- Phlebotomy
 - Quest Diagnostics, Inc. contracted nationally for CPS-3 blood collection, transport, and processing
 - Staff trained to follow CPS-3 scientific protocol to maintain standardized process across venues
 - Hospital must be willing to have Quest onsite
 - Phlebotomy staffing coordinated from NHO
- Confidentiality issues
- Institutional Review Board
- Commission on Cancer (CoC) standards



Protection of CPS-3 Participants

- Approval and oversight by Emory University Institutional Review Board
- Data are de-identified by assignment of unique study ID
- Limited access to study data by authorized research personnel
- All CPS-3 research staff, volunteers and vendors sign confidentiality forms
- Participant identity will never be disclosed within or outside ACS, without participant approval
- Individual results will not be shared with participants or their family, physicians, employers, insurance companies or other third parties
- Privacy and confidentiality are addressed on the CPS-3 informed consent form
- **Note:** Employees should use personal email if concerned about the possibility of corporate email monitoring

Where Are We Now?

- Nearly 110,000 participants in 34 states plus Puerto Rico



CPS-3: Benefits Beyond the Science

- Allows people to participate in cancer research
- Empowers survivors and their caregivers
- Enhances community relationships and presence
- Brings wide-scale media and publicity to facility and to research



Home Channels Videos
CPS I Participant Shares Her Story



A screenshot of a blog post. The title is "... SERVICE ABOVE SELF". The author is Robin Tucker. The post is dated Monday, May 17, 2010. The main text discusses the Rotary Club of Cedar Rapids program promoting the upcoming Cancer Prevention Study-3 sign-up on June 4th in Cedar Rapids, Iowa. It includes a call to action: "Are you interested in participating in the Cancer Prevention Study-3? It's coming to Cedar Rapids, Iowa on June 4th. Research today for a cancer-free tomorrow. You help FIND the cure. Now help FIND the cure by personally participating in cancer research." There is a graphic of three hands holding a globe. The post also lists eligibility criteria: "Who is eligible to participate? Anyone who: • is willing to make a long-term commitment to the study, which involves completing periodic follow-up surveys at home • is between 30 and 65 years old • has never been diagnosed with cancer (not including basal or squamous cell cancer)". A sidebar on the right contains contact information for Robin Tucker, a "Welcome to my blog ..." message, a Facebook link, and a "Service Above Self" logo with the text "Service Above Self is the motto of Rotar". At the bottom, it mentions "2010-2011 RI Theme" and "Rotary International".

Newsweek

Cancer Studies Want You!

The goal of one study, which will follow 500,000 people for years, is to figure out who gets cancer and who doesn't, and why.

Cancer Prevention Study-3:

Leading the Way to a World with Less Cancer & More Birthdays...



"I have already signed up to participate myself, as this study offers a unique opportunity to be a part of some of the most pioneering medical advances of our time."

Dr. John Seffrin, American Cancer Society National CEO



Call to ACTION

- Visit www.cancer.org/cps3 to learn more or call 1-888-604-5888
- Support the Maryland Relay For Life sites offering CPS 3
- Website will maintain updated location information for community events

“The opportunity to support a project like the American Cancer Society’s Cancer Prevention Study-3 is a natural fit with the vision and values of Quest Diagnostics.” - Quest Diagnostics national vice president