



InPOG Newsletter



April-June 2015

Issue 2

SUMMER CME

Tata Memorial Hospital, Mumbai 27 and 28 June 2015

The summer CME program was well attended by InPOG members. Individual subcommittee chairs presented their road maps. Majority of the subcommittee members had communicated via email and had discussed about their groups research plans prior to attending the meeting.

InPOG chair Dr Sameer Bakhshi gave the

Side room discussions were organized throughout the meeting by various groups. Many proposed studies are at concept stage and need to be taken further ahead for implementation. Two studies, one on ALL and the other on Hodgkin lymphoma have completed the roadmap and have been allocated InPOG study numbers. Three other studies on AML,

- ***SUBCOMMITTEES HAVE BEEN SETUP***
- ***MAJORITY OF THE SUBCOMMITTEES PRESENTED THEIR ROAD MAP IN SUMMER CME***
- ***TWO TRIALS HAVE BEEN GIVEN InPOG NUMBERS***

introduction and highlighted the work done till date, he also answered the queries raised by members (Frequently asked questions on InPOG can be found below). Dr Ramandeep Arora presented the Hodgkins lymphoma protocol (InPOG-HL-15-01) and Dr Brijesh Arora spoke about study on generic drugs.

Wilms tumour and LCH are in advanced stages of development and hopefully would proceed to acquire InPOG study status in the near future.

The next InPOG meeting will be held during annual PHOCON meeting in Pune in November.

InPOG Executive

Chair: Dr Sameer Bakhshi, Co-Chair: Dr Amita Trehan, Secretary: Dr Brijesh Arora, PHO Chair: Dr Nitin Shah

Members: Dr Tulika Seth, Dr Deepak Bansal, Dr Venkatraman Radhakrishnan, Dr Ramandeep Singh Arora

Frequently Asked Questions

Pertaining to InPOG as a Body

Q. Is InPOG a registered body?

A: No, it is part of PHO IAP and not a separate registered body.

Q: Will InPOG fund the studies?

A: No, InPOG is not a funding agency and the individual chief investigators have to be responsible for obtaining the necessary funding. InPOG merely serves a body to bring the researchers together and conduct research in an organized and disciplined manner, and assist in developing multicentric contribution.

Pertaining to InPOG Membership

Q. Is it necessary to be a member of PHO IAP to be part of InPOG?

A: You can become an associate InPOG member if you are not a regular PHO IAP member. However, you have to be a PHO IAP member if

membership number.
https://docs.google.com/forms/d/1buSP_e7GCsVTAVknKZOCeasZq-7VSGaqYkDxsflEZm0/viewform?c=0&w=1&usp=mail_form_link

The difference between the regular and associate InPOG member is that the associate member does not have voting rights, otherwise rest all is same.

Q. I have completed the InPOG online membership form but have not heard back from the InPOG secretariat?

A. Following completion of the InPOG online membership form, an email confirming your membership will be sent to you by email. If you do not hear within one week of your submitting your online form, Email:inpog15@gmail.com.

Q. How does one become a member of an InPOG subcommittee?

A. Initial allocation of members to each of the subcommittee was done by the InPOG secretariat

Member Type	Eligibility	Study Group Co-ordinator	Study Group Member	Voting Rights	Authorship
Regular	Regular PHO Member	Yes	Yes	Yes	Yes
Associate	Pediatric Surgeons Other Surgeons Radiotherapists Radiologists Pathologists Biostatisticians Molecular biologists	Yes	Yes	No	Yes
Trainee	DM Fellows	No	No	No	No

you want to become a regular InPOG member. Notably you have to fill up an online form of InPOG membership and you will be assigned the

based on an online form which was sent by email to all PHO IAP members and the replies received.

Allocation was stratified by the annual number of childhood cancer diagnosed.

Now, any one desirous of joining an InPOG subcommittee should write to the InPOG subcommittee co-ordinator. The names and emails of all co-ordinators has been circulated in the InPOG Newsletter Jan-Mar 2015.

Q. Is there a limit to the number of members of an InPOG subcommittee?

A. There is no prescribed limit to the number of members of an InPOG subcommittee. However it is important to understand that the InPOG subcommittee is not an interest group, rather a collection of individuals who are given the task of initiating and/or evaluating all research related to their subcommittee. For this reason, the number of members needs to be manageable and relevant. It is better to have a mixture of professionals e.g. pediatric oncologists, radiation oncologists, surgical oncologists, statisticians etc rather than have individuals only from one speciality. Similarly, more than 1-2 members from the same institute in a subcommittee may not be necessary.

Pertaining to Studies under InPOG

Q. I have contacted InPOG subcommittee co-ordinator about membership or a study idea but have not heard back?

A. If you do not hear back from the InPOG subcommittee co-ordinator within a week of writing to them, please send a reminder email. If you still do not get any response within two weeks, please email inpog15@gmail.com.

Q: Can someone contribute and develop a research idea for a subcommittee if they are not member of that group?

A: Yes, anyone can come with an idea and if approved by the subcommittee, he/she can be invited to develop that idea and present the protocol within the subcommittee.

Q: Can two or three centers in subcommittee have a study and call it an InPOG study?

A: No, any study from a group has to go through the roadmap that was circulated earlier. Minimum 5 centers have to participate to be eligible to become InPOG study. In addition, the scientific merit as well as the opinion of the subcommittee members and external reviewers would be important for a study to finally get registered as an InPOG study.

Q: Is it mandatory to become a member of an InPOG subcommittee to enrol patients for any study in that group and/or to get authorship?

A: You do not have to be a member of an InPOG subcommittee to enrol patients for any study. You can contribute patients for a study that you feel is appropriate after obtaining the necessary local ethics approval. There are several good reasons to enrol your patients to an InPOG study

- You may feel that the study is worth participating for your patient
- You will advance knowledge and improve science
- Your participation and/or enrolment could entitle you for authorship in the manuscript that results from that study if you meet the criteria.

Pertaining to Authorship

Q: Does getting membership of an InPOG subcommittee automatically qualify one for authorship of any manuscript that comes out of that subcommittee?

A: No, being a member or chair/co-ordinator of a subcommittee does not automatically qualify one for authorship of any manuscript that comes out of that subcommittee. Authorship can only be obtained through two mechanisms

- Significant contribution to the design and planning of the study. In general, we expect that there would be maximum three investigators from the study group (including biostatistician if required). Additionally the study chair could have another member of the group in the writing committee or could include this fourth member from outside the group.
- Enrolment of patients. In order to be an author based on enrolment, you are expected to contribute atleast 5% of the total **evaluable** patients for that study. If you contribute 5-9.9% of the total evaluable patients, then you are entitled for authorship for one person from your center, 2 authors if contribution is 10-14.9%, and 3 authors if it is 15-19.9%, and 4 authors if it is >20%.
- The order of authorship is first author/corresponding author from the study group followed by authorship as per

contribution.

Q. Do we need to inform InPOG before sending an abstract or manuscript?

A: The authorship of the abstract or manuscript needs to be approved by the subcommittee chair and then by the InPOG secretariat before submission, primarily to ensure that the authorship criteria has been appropriately addressed.

In future, we also hope to have a manuscript review committee.

InPOG STUDIES APPROVED

1. InPOG HL-15-01. A collaborative study for newly diagnosed childhood Hodgkin's lymphoma patients in India. PI: Dr Jagdish Chandra

2. InPOG ALL-15-01. ICiCLeALL14-An Indian Childhood Collaborative Leukaemia Group multicentre national standardisation study for newly diagnosed acute lymphoblastic leukaemia (ALL) PI: Prof Vaskar Saha