

Interagency Breast Cancer and Environmental Research Coordinating Committee

**Department of Health and Human Services  
National Institutes of Health  
National Institute of Environmental Health Sciences  
National Cancer Institute**

**Minutes of the Interagency Breast Cancer and Environmental Research Coordinating  
Committee Meeting**

**May 9, 2012**

The Interagency Breast Cancer and Environmental Research Coordinating Committee (IBCERCC) convened its fifth meeting on May 9, 2012 at the Crystal Gateway Marriott in Arlington, Virginia. The committee chair is Michele Forman, PhD, of the University of Texas MD Anderson Cancer Center.

The meeting was open to the public on May 9, 2012 from 8:30 a.m. until adjournment at 5:30 p.m. The agenda for included provision for a 15-minute session devoted to public comment. Notice of the meeting was published in the *Federal Register*.

The IBCERCC is a congressionally mandated body established by the National Institute of Environmental Health Sciences (NIEHS), in collaboration with the National Cancer Institute (NCI). This Committee is comprised of 18 voting members, including representatives of Federal agencies; non-federal scientists, physicians, and other health professionals from clinical, basic, and public health sciences; and advocates for individuals with breast cancer. The Committee encompasses three subcommittees, each charged with the preparation of one section of the Committee's final product, a report to the Secretary of the Department of Health and Human Services: the State-of-the-Science (SoS) subcommittee (chaired by Dr. Forman), the Research Process (RP) subcommittee (chaired by Dr. Gould), and the Research Translation, Dissemination, and Policy Implications (RTDPI) subcommittee (chaired by Ms. Rizzo).

**Members Present**

Christine Ambrosone, PhD  
Janice Barlow, PNP  
Beverly Canin  
Ysabel Duron  
Suzanne Fenton, PhD  
Michele Forman, PhD, MS  
Michael Gould, PhD  
Sandra Haslam, PhD  
Ronda Henry-Tillman, MD  
Karen J. Miller  
Sally Perreault-Darney, PhD  
Laura Nikolaidis, MS  
Marcus Plescia, MD  
Kenneth Portier, PhD

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Jeanne Rizzo, RN  
Gayle Vaday, PhD  
Cheryl Walker, PhD

**Ex Officio Members Present**

Dale Sandler, PhD  
Neeraja Sathyamoorthy, PhD

**NIH Staff Present**

Jennifer Collins, MR  
Dacia Beard  
Gwen Collman, PhD  
Gary Ellison, PhD, MPH  
Mary Gant  
Nonye Harvey, MPH  
Kimberly Hetkowski  
Ed Kang  
Deborah Winn, PhD

**Other**

Kathy Brown-Huamani  
Connie Engel, PhD  
Puneet Kollipara  
Amal Mahfouz, PhD  
Darlene Summers  
Shelia Zahm, ScD

**I. Welcome and Introductions**

Dr. Forman welcomed all and thanked all for the work done to date on the report. The meeting focused on review of each report section to ascertain consensus on the content, identify gaps, obtain feedback, and ensure the overall integrity of the report. All points and perspectives were welcomed. Participants noted that it would be ideal to have a short-, mid-, and long-term communication plan for the report.

**I. Group Discussion: Overall Impressions of the IBCERCC Report Draft**

Committee members provided overarching comments on the current draft of the report. Members generally agreed that the document has improved significantly since the last meeting noting that it no longer reads as three separate documents. The report's emphasis on communication was also lauded. It was noted that more detail may be needed, particularly on the issue of prevention (e.g., numbers showing expenditures, etc.).

Members recommended that the report be written in an active voice and with the necessary tone to have a greater impact and convey a sense of urgency. Ideas for adding emphasis included

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rewording (e.g., “develop” to “must develop,” removing “mays” and “mights”) and adding additional text boxes to call attention to “Wow!” statements (i.e., headline news).

It was noted that the recommendations throughout the report should support the recommendations provided in the Executive Summary. It was suggested that the Overarching Recommendations in the Executive Summary be renamed as “Visions” and that the recommendations throughout the body text should continue to be called “recommendations.” The recommendations in the Executive Summary also should focus on what needs to be done whereas the recommendations within the report chapters should focus on how to accomplish the overarching recommendations. The recommendations within the chapters, therefore, should be measurable. In addition, some points within the text of the report seem to be recommendations but were not stated as such. Other suggested edits included the following:

- Authors indicated that they would like a rationale for material that is moved to the appendix if they do not make that decision themselves.
- Transitions between sentences and paragraphs are needed to elucidate the points made.
- References to the appendix also should be included throughout the body text, where appropriate.
- Some participants would like to see the definitions included at the beginning of each chapter. A good definition of primary prevention is especially important.
- The report should be sensitive to multiple audiences, particularly the government audience, which has to justify programs to Congress and federal leadership and prove that efforts are not duplicative within and among agencies.
- The report should acknowledge areas where the committee or subcommittees did not reach consensus about focus or emphasis.
- Findings from the research, particularly large studies, should be discussed in the report as much as possible.
- As much as possible, research described in State of the Science should be linked to programs described in Research Process so that the readers understand how past and current investments in research on breast cancer and the environment have produced important results.
- The economic and political climate necessitates an emphasis on synergy across agencies as well as indicators of success. How science has helped people and society should be transparent and integrated throughout the report (this could be featured in “wow” or side boxes).
- Major limitations to research on breast cancer and the environment exist and should be highlighted, including the fact that breast cancer is not a single disease. The issue of breast cancer subtypes should be discussed early in the report. Other challenges include genetic heterogeneity, difficulties in disease classification, and behavioral risk factors for environmental exposures.

## **II. Group Discussion: Current Draft of the Report**

Next, the Committee reviewed each section of the current draft of the report. As members brought forward points for discussion, Dr. Collman asked participants to be very specific about what needs to be done to edit that section of the report. For areas that require writing or revision, assigned persons were asked to commit to write/rewrite that piece in a timely fashion (i.e., within 10 days following the meeting) and indicate the specific place where new or revised text should be located in the report. The Committee members also reviewed and considered the recommendations presented in each chapter during this discussion.

## **III. Group Discussion: Recommendations**

Next, the Committee discussed the current version of the overarching recommendations presented in the current draft of the report. During the discussion the following were proposed:

- The word “overarching” should be changed to “Visions for the Future.”
- Very succinct, bold statements (in active voice) should be used when possible to make the message clear.
- Some participants suggested that these “vision” statements be incorporated earlier in the report (in addition to mention in the Executive Summary).
- The bullets are critical and should be written to resonate with all audiences, including the media.
- A vision is needed for minority populations, and the chapter should reflect the intent to develop this vision—the statement about minority populations needs to be bolder.

## **IV. Public Comment**

Public comments were invited. No public comments were shared.

## **V. Closing Remarks & Meeting Summary**

The group expressed consensus that the report will be satisfactory provided that today’s comments are incorporated and depending on how the recommendations are revised.

The vision should be linked to an outcome that is measureable in a large sense—i.e., the committee hopes that implementation of the vision would reduce the incidence and disparities of breast cancer as a long-term goal. One approach proposed was for the report to provide specific metrics. Participants noted that breast cancer may have a similar function to a canary in a coal mine in that it is an indicator of a toxic environment. The report should reflect the intent to achieve accelerated reduction of incidence of breast cancer and present a model that is adopted by others.

## **VI. Adjournment**

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Dr. Forman thanked the committee for the considerable work accomplished at the meeting, and adjourned it at 5:30 pm May 9, 2012.

**CERTIFICATION**

I hereby certify that, to the best of my knowledge, the foregoing minutes are accurate and complete.

/Michele Forman/

Michele Forman, PhD

Chairperson

Interagency Breast Cancer & Environmental Research Coordinating Committee

/Gwen W. Collman/

Gwen W. Collman, PhD

Executive Secretary

Interagency Breast Cancer & Environmental Research Coordinating Committee

Proper signatures

Treat as signed, § 1.4(d)(2)