

April 26, 2010

Dear Dr. -----,

I am writing to introduce/reintroduce you to our Brain Tumor program here at Saint Luke's. Almost two years ago, after completing a neuro-oncology fellowship at Duke University, I returned to Kansas City to reestablish the multi-disciplinary neurooncology program. Although board certified in medical oncology, palliative medicine and internal medicine, my current clinical practice is entirely limited to the care of patients with central nervous system tumors. With this cancer-specific focus, I am pleased to be able to offer several unique protocols for patients:

- TVAX for recurrent high grade gliomas - a Phase I protocol utilizing a novel tumor-derived vaccine with activated lymphocyte therapy. With high demand/limited slots, this study will close soon. The Phase II portion of this protocol will follow in late 2010.
- CENTRIC – Phase III, new Dx GBM with Methylated MGMT, a non-blinded, randomized trial of standard Temozolomide based therapy +/- Cilengitide.
- CORE – Phase III, new Dx GBM with UNmethylated MGMT, a non-blinded, randomized trial of standard Temozolomide based therapy +/- Cilengitide (two dosing arms). (June '10)

We also have recently opened our 3 Tesla MRI scanner, which will allow improved quality of both standard MRI sequences as well as supporting studies, including diffusion, perfusion and MR spectroscopy. Other clinical protocols we currently have available include:

- CTSU N0577 for co-deleted (1p 19q) Anaplastic Gliomas, RT alone vs. Temozolomide alone vs. RT w/concurrent Temozolomide followed by adjuvant Temozolomide.
- RTOG 0825 for new Dx GBM, double-blind, randomized trial of standard Temozolomide based therapy with Bevacizumab vs. Placebo.
- RTOG 0627 for recurrent GBM, trial of salvage Dasatinib
- MDA 2004-0662 for GBM after standard RT w/concurrent Temo, randomized to week on/week off schedule of Temozolomide +/- Accutane, Thalidomide and/or Celecoxib.
- RTOG 0539 for Meningioma (any grade) after surgical diagnosis.
- RTOG 0227 for CNS Lymphoma, Methotrexate, hyperfractionated RT and Temozolomide.

Additionally, we have a number of supportive oncology/quality of life studies open to patients with brain tumors as well. If you have any questions about our center, or if I can assist you in the care of your patients, please do not hesitate to contact me.

Best Regards,

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