

CHS Colleagues organized  
this first meeting

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Whatever comes next  
belongs to all interested  
members

# In uncertain times embracing change is a beautiful strategy

- Each individual cohort is a tremendous resource and should remain autonomous
- Collaboration across multiple cohorts creates a very powerful resource that expands:
  - age, race/ethnic, geographic and disease diversity
  - the skillset and critical mass of scientific colleagues

# Changing Research Dynamics

We are living in time of:

- Tremendous opportunities  
("omics", precision medicine etc.)
- Tremendous change in funding models

# Funding agencies are seeking

- Larger sample sizes
- Operational Efficiencies
- Investigator Initiated Science

AND...

- Team-based research
  - Epidemiology has been a leader in developing research teams (epidemiologists, statisticians, practicing physicians, imagers, laboratorians, dieticians, policy experts, etc.)
  - Many teams currently exist and could form the foci for new opportunities and approaches

# Questions for Discussion

- Is this type of cross-cohort collaboration valuable?
- Who else should be part of this group?
  - Cancer Cohorts?
  - International cohorts?
  - eheart, million hearts, VA MVP, NHS, PHS, etc.
- How will we coordinate with other efforts?
- What type of Governance structures are needed (if any)?

# Some Potential Next Steps

- **Form an Organizing/Steering Committee**
  - Nominate two from each interested cohort
  - Start with two conference calls a month
  - Develop workscope for the collaboration
  - Form working groups for more focused collaboration (e.g., aging, health disparities, inflammation, etc.).
  - Seek funding and opportunities for meetings
  - Is coordinating center needed due to multi-site structure?
- **Requires substantial collaboration and leadership**

*Each Success only buys an  
admission ticket to a more  
difficult problem*

*Henry Kissinger*

# *Open Discussion*