

INTOUCH

News from the Baylor Charles A. Sammons Cancer Center at Dallas ■ Winter 2010



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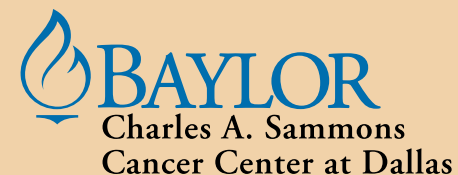
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Making Every Breath Count

It is estimated that last year alone, more than 200,000 new cases of lung cancer were diagnosed in the United States. According to the American Cancer Society (ACS), lung cancer is the leading cause of cancer death for both men and women in the United States—causing more deaths than colon, breast and prostate cancers combined.

However, research and clinical trials at Baylor Charles A. Sammons Cancer Center at Dallas are investigating possible ways to improve diagnosis and treatment of lung cancer. Baylor Sammons Cancer Center is the only facility in Texas to serve as a research site for the International Early Lung Cancer Action Program (I-ELCAP) clinical trial. This is a clinical trial to gather data for the development of early detection tests for people at high risk of developing lung cancer (*see story on page 4*).

Types of Lung Cancer

The National Cancer Institute (NCI) defines lung cancer as “cancer that forms in the tissues of the lung, usually in the cells lining air passages.” There are actually two types of lung cancer: non-small cell and small cell lung cancer. These types of lung cancer are broken down further into sub categories.

Non-small cell lung cancers account for about 85 percent of all lung cancer cases according to Kartik Konduri, M.D., a medical oncologist on the medical

staff at Baylor University Medical Center at Dallas. Depending on the type of cancer cells that develop, non-small lung cell cancer is further classified into these diagnoses:

- Adenocarcinoma
- Squamous cell carcinoma
- Bronchoalveolar cell carcinoma
- Large cell carcinoma
- Poorly differentiated carcinoma

Small cell lung cancers comprise about 10 to 15 percent of all lung cancers. These tumors originate from neuroendocrine cells and often start in the bronchi near the center of the chest. According to the ACS, these cells are small, but can multiply quickly and form large tumors that can spread, or metastasize to other parts of the body, often before a diagnosis is even made.

Causes of Lung Cancer

Although not everyone who develops lung cancer is or was a smoker, smoking remains the leading cause of both non-small cell and small cell lung cancers. The ACS estimates tobacco causes nearly nine out of 10 cases of lung cancer. Cigarettes, pipes, low-tar and light cigarettes can increase the risk of developing lung cancer. People who are exposed to second-hand smoke also have a 20 to 30 percent greater risk of developing lung cancer.

Other causes that may lead to the development of lung cancer, especially when combined with tobacco use, include exposure to radon, air pollution, uranium or arsenic or if you have had previous radiation to the chest area.

Non-Smokers Who Develop Lung Cancer

About 15 percent of new lung cancer cases in the United States are diagnosed in non-smokers. “In the past, people thought if you got lung cancer, you were a smoker and you just did it to yourself,” says Richard Wood, M.D., a thoracic surgeon on the medical staff at Baylor Dallas and medical director of Baylor Sammons Lung Cancer Center. “This is not always true. We have more people than ever who have never smoked developing adenocarcinoma. It is particularly on the rise in women.”

Gene mutations are being investigated as a major cause of lung cancer in non-smokers. “Non-smokers who develop lung cancer usually have a mutation in the Epidermal Growth Factor Receptor (EGFR) genes, which triggers the development of these tumors,” says Dr. Konduri. “There are other mutations involved as well, including EML-ALK (microtubule-associated protein-like-anaplastic lymphoma kinase) mutations found in about 3 to 5 percent of adenocarcinoma. Other genetic factors also are believed to be involved significantly and are being actively investigated.”

(Continued on page 5)

Baylor Sammons Navigates You Through Lung Cancer

When a diagnosis of lung cancer is suspected or confirmed, you often don't know where to turn for the right answers. If diagnosed in later stages, as is usually the case, the need for immediate and aggressive action, along with advanced technology, is especially important. To help patients fighting lung cancer, Baylor Charles A. Sammons Cancer Center at Dallas established the Baylor Sammons Lung Cancer Center.

Baylor Sammons Lung Cancer Center offers a patient navigation program to help patients throughout their cancer journey. "People who just think they might be at risk for lung cancer, those who have had a suspicious report from their physician or a patient with a lung cancer diagnosis who needs to figure out the best route for treatment can call us to help them through the process," says Charlotte Farris, R.N., B.S.N., program coordinator and nurse navigator for Baylor Sammons Lung Cancer Center. "They can call us themselves or their physicians can refer them to us."

The nurse navigator gathers the patient's current information, including any medical reports and X-rays, for review by a multidisciplinary team of physicians on the medical staff at Baylor University Medical Center at Dallas who determine the best treatment plan. Once these decisions are made, the nurse navigator works as a liaison to schedule patient appointments and make sure all medical records and follow-up reports are completed. "Lung cancer is often diagnosed very late and can be very aggressive," says Farris. "It is important for us to work quickly and help patients get the diagnosis and treatment necessary to help them as soon as possible. I see that everything flows from the beginning."

Baylor Sammons Lung Cancer Center takes a multidisciplinary approach to treating each patient in a way that best serves them. "With a diagnosis of lung cancer, it is important to consult a variety of different specialists," says Richard Wood, M.D., a thoracic surgeon on the medical staff at Baylor Dallas and medical director of Baylor Sammons Lung Cancer Center. "We are all able to work together to figure out the best path for that patient."

The center also provides access to research information and clinical trials. "Patients are directed to treatment and to possible participation in clinical trials," says Kartik Konduri, M.D., a medical oncologist on the medical staff at Baylor Dallas. "This also is an effective way for patients to obtain second opinions and participate in lung cancer screening techniques such as I-ELCAP (International Early Lung Cancer Action Program)." *(see story on page 4)*

"Another advantage of our patient navigation program is our ability to assess each patient and, as needed, refer patients to our support programs, pastoral care and other forms of healing that can help a patient through this journey," says Dr. Wood. "This is more than a medical treatment process. We also want to help them heal mentally and spiritually."

"Baylor Sammons Lung Cancer Center is really everyone working together for the benefit of the patient," adds Farris.

For more information about Baylor Sammons Lung Cancer Center, please call 214.820.6767 or visit BaylorHealth.com/DallasCancer.



Charlotte Farris, R.N., B.S.N., talks with Carla Baker during a visit to the Baylor Sammons Lung Cancer Center.

Baylor Studies New Ways to Detect Lung Cancers Early

Many types of cancer have regularly recommended screening tests that can detect cancer in its earliest stages. Even cancers that show few physical symptoms until later stages such as ovarian or cervical cancers may be detected earlier through regular Pap smears or pelvic exams. However, lung cancer, which also shows few physical symptoms until later stages, currently has no such screening program or recommendations. Several clinical trials are underway to investigate better ways to screen high-risk patients for tumors in their earliest possible stage when they may be treatable.

I-ELCAP

The International Early Lung Cancer Action Program (I-ELCAP) includes 52 institutions in nine countries studying the benefits of a low-dose CT screening program for high-risk patients. Those include people at least 40 years old who show no symptoms of lung cancer, but do or did smoke at least a package of cigarettes a day for at least 20 years or had second-hand exposure to such smoke or are at risk because of environmental concerns. Baylor Research Institute is the only facility in Texas participating in the clinical trial.

People are referred by their primary care physician or can self refer to the clinical trial through Baylor Sammons Lung Cancer Center. Those who meet the criteria can enroll in the trial to receive a low-dose CT scan. “The amount of radiation in these CT scans is about the same as in a routine mammogram,” says Charlotte Farris, R.N., B.S.N., program coordinator and nurse navigator for Baylor Sammons Lung Cancer Center.

If the baseline scan shows no pulmonary nodules or nodules measuring less than five millimeters, the patient will be rescanned in one year to determine if any changes have occurred. If the scan is positive, further diagnostic work is recommended according to the study protocol. “We are hoping to find early-stage lung cancer so we can perform surgery,” says Farris. “If we catch it early, in most cases we can perform a wedge resection or a lobectomy to surgically remove the cancer.”

Patients receive smoking cessation information, encouragement and referrals to smoking cessation products and services.

For more information about the I-ELCAP clinical trial, please call 214.820.6767.

Cancer research studies on the Baylor Dallas campus are conducted through Baylor Research Institute, Mary Crowley Cancer Research Center, Texas Oncology and US Oncology. Each reviews, approves and conducts clinical trials independently.

InTouch is a publication of Baylor Charles A. Sammons Cancer Center at Dallas. *InTouch* provides information about cancer: prevention, screening, diagnosis and treatment options. It also provides information to patients and their caregivers to help manage the challenges of cancer through educational and support programs and events, sponsored by Baylor Sammons Cancer Center and Texas Oncology.

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If you are receiving multiple copies, need to change your mailing address or do not wish to receive this publication, please email Rosanna Sandlin at rosannas@baylorhealth.edu or contact her at Baylor University Medical Center at Dallas, Marketing and Public Relations Department, 2001 Bryan Street, Suite 750, Dallas, Texas 75201, 214.820.2116.

Cancer research studies on the Baylor Dallas campus are conducted through Baylor Research Institute, Mary Crowley Cancer Research Center, Texas Oncology and US Oncology. Each reviews, approves and conducts clinical trials independently. Their clinical trials are listed together, in this publication, for the convenience of patients and physicians.

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(Continued from page 2)

The DNA makeup of non-smoking lung cancer patients also is being investigated to determine if there is a gene fragmentation in some people that may make them more susceptible to developing the disease. “It may be that a person smoked one time in their life years ago or was around someone who did and an aggressive fragmentation occurred and years later, they developed lung cancer,” says Dr. Wood. “We someday want to be able to do something to stop that growth or shut off that mechanism that allows the mutated cell to reproduce, but we are not there yet.”

Symptoms and Diagnosis

While research is ongoing to better diagnose and treat lung cancer in its early stages, most patients have few symptoms until it has progressed to later stages of development. “When they finally seek care from a physician or in the Emergency Room, they may have a chronic cough or cough up blood or have chest or shoulder pain,” says Dr. Wood. “These people need to be evaluated further but probably about 75 percent of patients who have these symptoms are already in Stage 3 or 4 when they are admitted for treatment.” Other symptoms may include weight loss and fatigue.

Diagnosis options may include:

- Bronchoscopy
- Chest X-ray
- Lung biopsy
- Lung CT
- PET scan
- Sputum cytology

Lung Cancer Treatment Options

Treatment options for lung cancer are expanding and often depend on the exact type and stage of the cancer

at diagnosis. The increasing complexity of options, combined with the need for aggressive treatment of lung cancer, led to the development of Baylor Sammons Lung Cancer Center (*see story on page 3*).

In addition to chemotherapy and radiation therapy, Baylor Sammons Cancer Center offers many advanced treatment options including:

- Biologic therapy (immunotherapy)—a treatment that uses substances made by the body or in a laboratory to boost, direct or restore the body’s natural defenses against cancer;
- CyberKnife® radiosurgery;
- Lung surgery;
- Three-dimensional conformal radiation therapy;
- Intensity modulated radiation therapy;
- High-dose rate brachytherapy.

“We have made some important breakthroughs in our understanding of lung cancer,” says Dr. Konduri. “The class of compounds called tyrosine kinase inhibitors has particularly high levels of treatment responses for patients who have EGFR mutation-driven tumors. Newer classes of drugs with promise also are being evaluated currently. Some of them, including anti-angio-genesis inhibitors and EGFR blockers, have been approved in lung cancer treatment.

“Newer generations of drugs with better responses and outcomes also are now available. New techniques, including endobronchial ultrasound and electromagnetic navigation, have helped access difficult to reach tumor tissue for more effective diagnosis and treatment,” he adds.

Baylor Dallas also offers several clinical trials to assess investigational techniques and drugs with the goal

of improving outcomes for patients with a variety of cancers. “These clinical trials are invaluable for these patients and future patients to help us better understand who responds best to different types of treatment,” says Dr. Konduri. “Above all, participation in clinical trials is most important to help evaluate newer compounds that may have substantial promise in the treatment of lung cancer patients.”

Cancer research studies on the Baylor Dallas campus are conducted through Baylor Research Institute, Mary Crowley Cancer Research Center, Texas Oncology and US Oncology. Each reviews, approves and conducts clinical trials independently.



Let Us Know What You Think

Baylor Charles A. Sammons Cancer Center at Dallas wants to offer the most useful cancer information on our Web site and we need your help. We are currently conducting a survey on the usefulness of the information and ease of navigation on our cancer Web site. To view the cancer Web site and take the survey, go to BaylorHealth.com/DallasCancer. Please take a moment to review the cancer pages and then complete the survey to let us know how we can better serve your needs on the Web site.

Thank you!

Colorectal Cancer

Colorectal cancer is the third most common cancer diagnosed in the United States, according to the American Cancer Society (ACS). However, African Americans are more likely to die from the disease than Caucasians. Doctors think this is because they tend to delay screening, possibly missing the diagnosis in the early stages of the disease, when it is most treatable.

Mattie Cook was one such woman who postponed her screening. Luckily, her family finally encouraged her to have testing done and her colorectal cancer was detected and successfully treated. She does however regret delaying the diagnosis. The 65-year-old African-American mother and grandmother knew her body was trying to tell her something was wrong. Last year she began having recurring stomach pain and then blood appeared in her stool. As many people do, she ignored the symptoms and explained them away until she could no longer handle the pain.

When she finally went to the doctor, she was diagnosed with diverticulitis and then colorectal cancer. “I just knew when they told me about the diverticulitis, there was something else too,” she says. “I knew I shouldn’t have waited as long to go to the doctor when things started happening to me, but I was afraid. I am glad I finally did though.”

Cook underwent surgery and chemotherapy and, even after the first few treatments, she says she felt like a new person.

“When we look at the diagnosis of colon and rectal cancers in African Americans versus Caucasians, the stage at the time of diagnosis is higher on average in African Americans,” says David McCollum, M.D., a medical oncologist on the medical staff at Baylor University Medical Center at Dallas. “While there are several possible explanations, we believe this is due in large part to the delays in screening or missed screening exams, leading to more advanced stages of cancer at the time of diagnosis in African-American patients.”

However, delaying diagnosis may not be the only reason African Americans have a higher mortality rate from colorectal cancers. Doctors are researching why African-American patients also seem to develop the disease at a younger age than other populations. “The increased risk for African Americans isn’t huge, but it is there,” says C. Richard Boland, M.D., a gastroenterologist on the medical staff and chair of the department of gastroenterology at Baylor Dallas. “Most assumed it had only to do with some people having limited access to screening, but really that wasn’t the case. There does seem, however, to be a slight difference in the biology of the tumors African Americans develop. It is slight, but it is real.”

Colon cancer starts as polyps or abnormal growths in the colon or rectum. Early screening can detect these and they can be removed before they can turn into malignancies. If colon cancer has already developed, early screening also can lead to more successful treatment.

In general, the ACS recommends everyone begin screening for colorectal cancer at age 50. According to Dr. Boland, since data shows many African Americans not only have an increased risk and also develop colorectal cancer at an earlier age, many doctors recommend their patients begin screening earlier—at age 40 to 45.

Other Colon Cancer Risk Factors

In addition to an increased rate of colorectal cancers in the African-American population, there are other risk factors that may increase anyone’s risk for developing colorectal cancer. Genetics play a factor, as do certain familial conditions. In addition, your chances increase with age, and the ACS estimates nine out of 10 colorectal patients are older than 50. If you have had colorectal polyps or cancer before, have Type 2 diabetes or certain bowel diseases, you are at greater risk as well. “We have also known for decades that having Crohn’s disease and ulcerative colitis can increase your risk,” says Dr. McCollum. “These are conditions that cause inflammation of the bowels and it is really important for patients with these conditions to have routine, intensive monitoring to catch any polyps early, even if their conditions are well controlled.”

Lifestyle choices also can contribute to the development of colorectal cancer. If you eat a lot of red and processed meats, cook foods at a high temperature, do not get adequate exercise, are overweight, smoke or drink alcohol heavily, you may put yourself at a higher

risk. A diet high in fruits and vegetables has been linked to lower risk.

“A healthy lifestyle is important in potentially reducing the risk of developing cancer, but also in reducing the risk of heart and vascular disease,” says Dr. McCollum. “Maintaining a normal weight and exercising look to be protective when it comes to lowering your risk of colorectal cancer and are important for everyone.”

Cook agrees with the physicians and she is grateful to her daughters, husband, physician and nurses who convinced her to get diagnosed and begin treatment.

She encourages others not to wait. “It is best to get yourself checked out right away,” she says. “I thank God I pulled through to where I am now. If something is going on with your health, go to the doctor immediately before it is too late.”

Colorectal cancer patient Mattie Cook, shares a laugh with Kathy Thomas-Welch, L.M.S.W., OSW-C, a social worker for Baylor Sammons Cancer Center. Thomas-Welch helps Cook and other patients access services during and after cancer treatment.



Hereditary Risk Program

While researchers are still trying to determine why African Americans seem to develop colon cancer at higher rates and earlier ages than other populations, there are some risk factors common to everyone. For some people, the development of colorectal cancer has been linked to a gene mutation that can be passed down through generations. Advanced science allows doctors to test for this gene mutation, letting people know if they are at a greater hereditary risk for developing colorectal cancer and, if so, determine along with their physician an appropriate monitoring program.

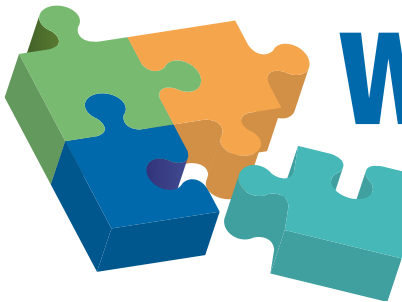
The Hereditary Gastrointestinal Cancer Risk Program at Baylor University Medical Center at Dallas was developed to help people with certain factors determine their risk and take appropriate action.

You may be at risk of colorectal cancer if you have:

- a family or personal history of colorectal cancer before age 50,
- a family or personal history of colorectal polyps,
- a family or personal history of endometrial (uterine) cancer before age 50,
- a family or personal history of stomach, kidney, urinary tract or brain cancer,
- a family member who has tested positive for a genetic mutation.

If you have any of these risk factors, the Hereditary Gastrointestinal Cancer Risk Program staff at Baylor Dallas can help you further determine if genetic testing is appropriate by taking a personal and family history.

If you would like more information about genetic risk factors, call the Hereditary Gastrointestinal Cancer Risk Program at Baylor Dallas at 214.820.2692.



Working Together to Fight Cancer

Sports teams understand the importance of working together. A quarterback cannot win the game on his own, nor can a pitcher. To win, it takes the special talents of every player working together.

Physicians on the medical staff at Baylor University Medical Center at Dallas and other Baylor Dallas medical professionals understand this team approach. That is why patients facing liver or pancreatic cancer have an entire team working for them, each contributing different expertise, skills and knowledge about advances in diagnostic and treatment techniques.

“Baylor Dallas puts a lot of emphasis on taking a multidisciplinary approach to cancer and that is special here,” says Robert Goldstein, M.D., a surgeon on the medical staff at Baylor Dallas and medical director of Baylor Liver and Pancreas Disease Center. “We gather specialists from each area to discuss these cases from different perspectives and how best to handle each situation.”

Physicians and medical specialists ranging from obstetrics/gynecology, gastroenterology and urology to medical, surgical and radiation oncology meet regularly to determine the best plan of action for patients. “We hear reports on very unique cases to get input from other specialties that might have a different perspective on the situation,” says Dr. Goldstein. “We also share

representative cases and discuss the latest treatments and therapies in each area. We have specialists who discuss genetic testing and the molecular nature of the tumor or the latest radiation therapy techniques that might be effective in a certain case. This sharing of knowledge works together to benefit the patient.”

Pancreatology is a fairly new gastroenterology subspecialty that specializes in the diagnosis and treatment of pancreatic conditioning. “We can give a little different perspective on the disease and work as a team with those doing the endoscopy, the specialized surgeons and oncologists to use this multidisciplinary approach to treat pancreatic cancer,” says Luis F. Lara, M.D., a pancreatologist on the medical staff at Baylor Dallas. “This level of comprehensive care exists only in a small number of centers in the United States.”

This multidisciplinary approach is coordinated through Baylor Liver and Pancreas Disease Center. This center was created to make advanced diagnostic and treatment techniques at Baylor Dallas available and easily accessible to patients facing a liver or pancreatic cancer diagnosis. While many advances have been made in these areas in the past decade, both cancers are often still found in late stages and they are difficult to treat. A nurse at Baylor Liver and Pancreas Disease Center works with the patient to quickly schedule appoint-

ments with appropriate members of the medical team to assess the situation and determine a treatment plan. “We coordinate all of that for them and help them access the care they need,” says Dr. Goldstein.

While often grouped together because of their location in the body, cancers that affect the liver and pancreas are different. “The liver and pancreas are connected by the bile duct and work with other organs to form one entity in the gastrointestinal system,” says Dr. Goldstein. “However, pancreatic cancer is very different from liver cancer. We group them together because of proximity and the ability to often use some of the same treatments, but many treatment options are different as well. This is another important aspect to our multidisciplinary concept. We can work together to treat each individual case.”

Pancreatic Cancer

The American Cancer Society (ACS) estimates there were more than 42,000 newly diagnosed cases of pancreatic cancer in the United States last year. While the major causes for developing pancreatic cancers are not well defined, doctors do know your risk increases with age, smoking and eating a high-fat diet. Rates of pancreatic cancer are also higher in African Americans than in other races. These are other conditions that may also increase your risk. “Patients with hereditary pancreatitis who have a known gene mutation are at higher risk for pancreas cancer,” says Dr. Lara. “Other mutations that affect other organs like a type of familial melanoma syndrome also have a higher risk.”

There is also ongoing research to determine if there is a genetic link for developing pancreatic cancer. “People who have a family history of more than two family members with the disease do seem to have a higher

rate of developing pancreatic cancer,” he says. “We are working to identify these high-risk groups now so we can better monitor them and change the natural history of the disease.”

Being able to better determine who is at higher risk may lead to earlier diagnosis and more successful treatment regimens being developed. Several factors play into the problems associated with early diagnosis of pancreatic cancer. According to Dr. Lara, the location of the pancreas deep in the body behind the stomach makes it more difficult to monitor. Physical symptoms are few and develop slowly over time. However, it is an aggressive and dangerous cancer. “If we can identify those people at highest risk and focus our attention on screening these people, we may have an impact on fighting this disease,” he says. “It is unlikely that we need a screening program for everyone, but if we can continue to learn more about who is at highest risk, we may really make a difference.”

Liver Cancer

Cancer in the liver can actually mean different things. Primary liver cancer is cancer actually arising from cells in the liver. Secondary liver cancer has metastasized or spread from another part of the body such as the lungs or the breast. The ACS estimates more than 22,000 new cases of liver and bile duct cancers were diagnosed last year in the United States. Men are more likely than women to develop this cancer with a 1-in-100 rate for men and 1-in-250 for women.

Primary liver cancer

In the United States, the most common type of malignant liver cancer is hepatocellular carcinoma. Dr. Goldstein estimates 90 to 95 percent of primary liver cancer in this country are hepatocellular cancers.

It typically begins as many spots throughout the liver and is usually caused by liver cirrhosis. “Without underlying liver disease such as cirrhosis, only about 10 percent of liver cancers in the United States are primary cancers,” he says. Ulcerative colitis also can put you at a higher risk for developing primary liver cancer, as well as colon cancer or colon cancer metastatic disease.

Secondary Liver Cancer

Having a cancer that has spread to the liver from another part of the body is actually more common than developing a primary liver cancer. Most often, cancer in the liver spreads from another part of the body, including stomach, colon, pancreas, breast and lung.

Treatment Advances

The multidisciplinary approach at Baylor Dallas comes to the forefront when a treatment plan is developed for each patient. “We have many more treatment options open to us today than we did even 10 years ago,” explains Dr. Goldstein. “That is thanks in large part to our work as a multidisciplinary team. We share the information for the benefit of the patient.”

All treatment plans depend upon the individual situation of each patient. A lot of research is going into better treatment for pancreatic cancer. Currently, options include surgery to either remove the tumor, or if not possible, to relieve some of the painful symptoms; as well as radiation therapy and chemotherapy.

Liver cancer treatment has made great strides in the past decade. Surgical resection is still the preferred treatment option, according to Dr. Goldstein, but only 20 to 30 percent of patients are appropriate candidates

for surgery due to issues such as where and when the tumors are found.

Recent additions to the treatment arsenal for liver cancer include new chemotherapy drugs, radiosurgery at Baylor Radiosurgery Center, and new chemotherapy and radiation beads that deliver precise dosages directly to the tumors.

Liver and pancreatic cancer patients may also be candidates for a transplant. Baylor Regional Transplant Institute (BRTI) is the integration of transplant services at Baylor University Medical Center at Dallas and Baylor All Saints Medical Center at Fort Worth. Baylor Dallas offers liver, pancreas, small bowel, kidney, islet cell, heart and lung transplants as well as access to advanced transplantation research. BRTI is recognized around the world for its strength in transplantation research. Dr. Goldstein estimates nationally about 10 percent of liver cancer patients are candidates for transplant, but at Baylor Dallas, “the number is closer to 15 percent because we have such a strong emphasis on treatment here,” he says. “Another special thing about Baylor is that we are one of the few places treating liver cancer with all available options. There are many who have a lot of treatment options, but not all of them from chemotherapy to transplant like we do.

“All of these data and changing technology are coming together to work for the benefit of the patient,” says Dr. Goldstein. “We have a better understanding of the complexities of these cancers and how it really takes a team effort. Patients can really benefit from being a part of the Baylor team.”

Healing the Body, Mind



When Baylor University Medical Center at Dallas opens its new outpatient cancer center in 2011, it will be one of the largest in North Texas. Renovations to the current Baylor Charles A. Sammons Cancer Center at Dallas will be complete in 2013, making the facility the first dedicated cancer hospital in North Texas. The goals of the new inpatient and outpatient facilities are to improve access and make advances in cancer treatment, diagnosis, prevention and research.

It will also provide more.

Physicians and administrators at Baylor Sammons Cancer Center are working together to develop an integrative medicine program to provide a new dimension to cancer care, one that will focus on each patient's concerns from a holistic viewpoint and address nutritional, physical, emotional and spiritual aspects of the healing journey. "Every patient is a unique individual and regimens will be tailored for the patient's own set of circumstances and concerns," says Carolyn Matthews, M.D., a gynecologic oncologist on the medical staff at Baylor Dallas who is helping develop the program.

In addition to traditional medicine, the integrative medicine program of Baylor Sammons Cancer Center will offer therapies such as massage, acupuncture and nutritional guidance. Mind-body medicine, guided

imagery, and breath work for stress relief and relaxation will complement yoga and personalized exercise programs. "This isn't to downplay all the incredible advances we have made in traditional medicine," says Dr. Matthews. "This is a way to supplement or integrate existing treatment options with 'low-tech' approaches that in many cases have been around for thousands of years."

While details of Baylor Sammons Cancer Center's integrative medicine program are still in development, the main goal is to tailor each plan to the patient's needs and situation. "We anticipate each patient will leave with a personal plan integrating the patient's cancer care with lifestyle recommendations, including diet, exercise, manual therapies such as massage or acupuncture and personalized exercise recommendations," says Dr. Matthews. "Such a plan requires more time than most oncologists have to spend with patients, but with this approach, we're not just treating the cancer, but also the patient with that cancer."

Dr. Matthews, herself, is a cancer survivor. She is hopeful these additional programs will benefit patients going through cancer treatments. She notes a diagnosis of cancer is frequently a point at which patients become more motivated to make healthy lifestyle changes. "I tell my patients my own cancer was a blessing in disguise," she says. "It brought me down a whole new, healthier path."

Baylor Sammons Cancer Center's integrative medicine program will be the first of its kind in North Texas. "This will add a whole new dimension for cancer care at Baylor," says Dr. Matthews. While many of these programs are still in development, Baylor Sammons Cancer Center currently offers several free classes through the Virginia R. Cvetko Patient Education Center, including:

- *Healing Through Journaling*—Reduce stress and worry, improve communication skills and enhance the healing process. This class meets from 10 – 11:30 a.m. on the second and fourth Wednesdays of the month in the basement level of Sammons Tower.
- *Express Yourself*—Words can escape us when we try to communicate our thoughts, feelings, hopes and fears. Let the world of color and shape help you explore your cancer journey through artistic expression. Knowledge or experience in art are not required. The class meets from 9 – 10:30 a.m. on the second Wednesday of every month in suite 620 of the Collins building.
- *Gentle Yoga for Cancer Survivors*—Helps cancer survivors at all stages of recovery regain flexibility, movement and relaxation. This class meets from 10 – 11:30 a.m. on the second and fourth Fridays of each month on the basement level of the Sammons Tower.

and Soul

- *Relaxation Made Easy*—Helps survivors and caregivers explore relaxation techniques that may reduce tension, anxiety, anger and fatigue. This program is offered from 10 – 11:30 a.m. on the first and third Fridays of every month.

Preregistration is required. **Please call 214.820.2608 to register.**

Complementary Methods for Health and Relaxation Workshop Saturday, Feb. 27

This annual workshop for cancer patients, their families and health care professionals offers information and experience with various treatment options that complement traditional health care. The workshop will feature a keynote presentation on integrative medicine by Carolyn Matthews, M.D., a gynecologic oncologist on the medical staff at Baylor University Medical Center at Dallas. Breakout presentations will include discussions on nutrition, acupuncture, music therapy, yoga and Feng Shui.

For reservations and more information, please call 214.820.2608.

Lifting Your Spirits

When you are undergoing cancer treatment, doing small things to lift your spirits and make yourself feel attractive are important. Ernie's Appearance Center is a specialty boutique located in the first floor lobby of Baylor Charles A. Sammons Cancer Center at Dallas offering an array of jewelry, scarves and gift items designed to do just that.

“We offer items that many cancer patients need such as wigs, camisoles, support hose, compression garments, swimsuits and bras that can be precisely fitted,” says Dusty Clark, manager of Ernie's and a breast prosthetic fitter certified by the American Board for Certification for Orthotics and Prosthesis. “But we also feature collections of beautiful items meant to just make people smile, whether it is the patient undergoing treatment or their family member waiting with them.”

Ernie's carries a variety of jewelry including both clip-on and pierced earrings, necklaces and pins. “A popular line is sterling silver bracelets with Swarovski crystals in the color representing the types of cancer such as teal for ovarian cancer and pink for breast cancer,” says Clark. “They are just beautiful.”

They also have scarves to wear while undergoing chemotherapy or just as a fashion statement and decorative canes. In these colder winter months, stylish hats are in stock. “We also have gift items such as hearts and crosses on a ribbon with inspirational sayings and angel stones you can carry in your pocket.”

The boutique also carries non-metallic deodorant and skin lotion for use during radiation treatment.

Ernie's is open from 8:30 a.m. to 4:30 p.m., Monday through Friday. It is located in the first floor lobby of Baylor Charles A. Sammons Cancer Center.

For more information, please call 214.820.8282.





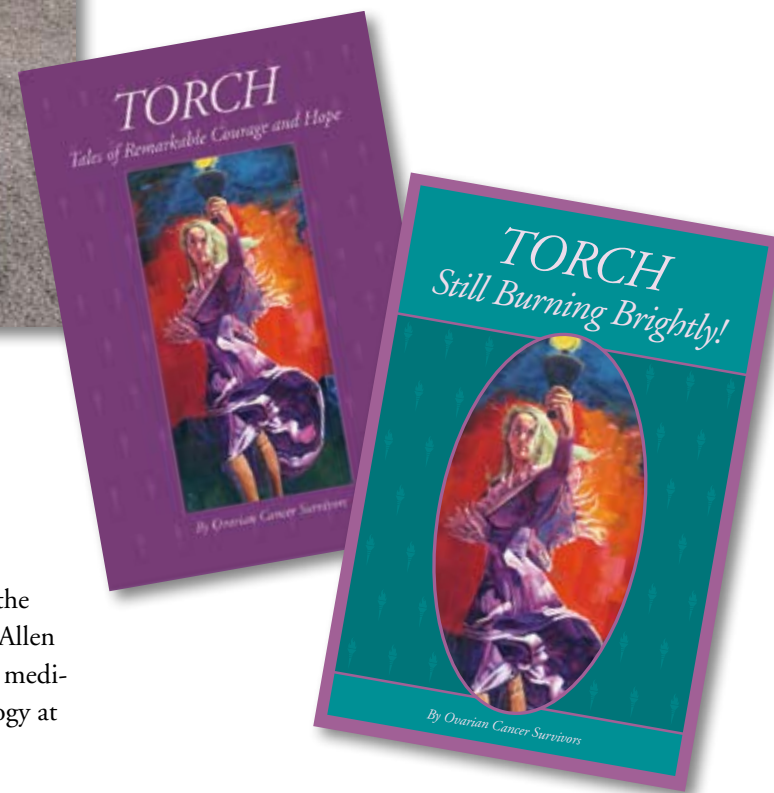
Baylor University Medical Center at Dallas, used some connections to personally deliver a portrait she had painted of Winfrey holding a child from her school in South Africa. Kincaid-Stringer said the portrait was to get Winfrey's attention and ask her to dedicate a show to ovarian cancer. After the two met and the portrait was delivered, Winfrey promised to contact Kincaid-Stringer if a show about ovarian cancer is scheduled.

Kincaid-Stringer also illustrated the covers of two books that include inspiring stories from Baylor Dallas ovarian cancer patients, their loved ones and caregivers. *TORCH: Tales of Remarkable Courage and Hope*, and the second collection, *TORCH: Still Burning Brightly*, are available at Ernie's Appearance Center located in the lobby of Baylor Charles A. Sammons Cancer Center at Dallas or online at www.amazon.com.

Artist Asks Oprah to Promote Ovarian Cancer Awareness

Dallas artist Shannon Kincaid-Stringer believes in her cause. She wants to raise awareness and funds for the fight against ovarian cancer. Last fall, she took her fight to one of the biggest names in show business—

Oprah Winfrey. When Winfrey made a stop at the State Fair of Texas, Kincaid-Stringer, wife of C. Allen Stringer, M.D., a gynecologic oncologist on the medical staff and chief of the department of gynecology at





Passing the Torch Relay

Baylor Charles A. Sammons Cancer at Dallas celebrated victories over breast and ovarian cancer, as well as offered education about the genetic link between these two cancers, at a special event based on the TORCH books. The event involved a relay with breast and ovarian cancer survivors walking around the Baylor Dallas campus passing a torch of victory from one survivor to another. At a special post-rally celebration, survivors share their thoughts:

“As a 20-year breast cancer survivor, it was a great honor and pleasure being able to participate in our first “Passing the Torch” event from ovarian cancer survivors to breast cancer survivors,” says Cynthia Robinson-Hawkins, M.B.A., R.N., manager of the patient navigation program for Baylor Sammons Cancer Center. “Because I have the wonderful opportunity to work with cancer patients during their cancer journey and being a survivor, I understand the feeling each one of those participating enjoyed. Every day is a blessing for me and I cherish each day. The relay was fun-filled, full of laughter, hugs and joy. We shared our stories about our cancer journey and life in general. I have been given one more day on this earth and I am grateful and thankful for that day.”

“My journey hasn’t been easy,” says Kay Knodel, a nine-year ovarian cancer survivor and torchbearer. “From physicians and medical professionals to the social workers and chaplains, the incredible team at Baylor Dallas is an essential part of my support group—they help me roll with the punches.”



Above left: Kathy Welch, L.M.S.W., OSW-C, social worker at the Cvetko Patient Education Center at Baylor Dallas, accepts the torch passed from Lynda Beutnagel, a three-time breast cancer survivor who volunteers at the Cvetko Center. Above: Survivors Cynthia Robinson-Hawkins, M.B.A., R.N., manager of the patient navigation program for Baylor Sammons Cancer Center, and Kay Knodel hugged as they passed the torch.

Look Good...Feel Better

Going through treatment for cancer can often take a toll on patients physically, mentally and emotionally. The Virginia R. Cvetko Patient Education Center is hosting a special program to help women currently in active treatment for cancer look and feel better.



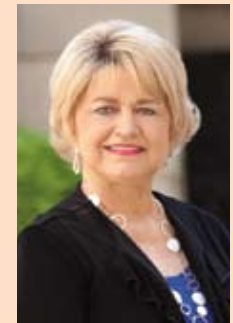
Look Good...Feel Better is an American Cancer Society program that offers women techniques for skin care, head wraps and accessories. Free make-up kits are provided.



Upcoming dates for Look Good... Feel Better workshops are:

- Monday, Feb. 1
- Monday, April 5
- Monday, June 14
- Monday, Aug. 9
- Monday, Oct. 4
- Monday, Dec. 6

To register for any one of these workshops or for more information, please call 214.820.2608.



Virginia R. Cvetko Patient

The Virginia R. Cvetko Patient Education Center is designed to help you and your loved one understand and manage the challenges of cancer. The Cvetko Center offers general and disease-specific education programs, a variety of educational resources, spiritual and emotional support, and pastoral care.

Services are provided by both staff members and trained volunteers who are cancer survivors. All educational services of the Cvetko Center are provided to patients, family members and cancer survivors free of charge.

The Cvetko Center is located at Baylor Charles A. Sammons Cancer Center at Dallas, Collins Building, Suite 615. **For information on educational resources or to register for activities and programs, please call 214.820.2608.**



Parking Garage #4

Garage #4 is the new six-level, 829-space parking garage next to Baylor Charles A. Sammons Cancer Center. This garage is accessible from both Worth Street and Junius Street. **Patients attending Cvetko Center programs will receive a free-parking voucher. Patients attending Cvetko programs in Truett Hospital may park for free in Parking Lot #9 (entrance from Hall Street).**

Special Programs

Virginia R. Cvetko Living with Cancer Series

This special educational series will provide information specifically for the cancer patient and his or her family/caregiver. Program topics will address nutrition, exercise and communication. This series also provides patients and their family/caregiver an opportunity to share their cancer experience with other cancer survivors.

Call 214.820.2608 for dates and times.

Look Good...Feel Better

This program is for women in current active treatment for cancer who have not previously attended a Look Good...Feel Better event. Please see page 13 for upcoming dates and more information.

Complementary Methods for Health and Relaxation Workshop

Saturday, Feb. 27

This annual workshop for cancer patients, their families and health care professionals will offer information about and experience with various treatment options that complement traditional health care. See Page 11 for more information about this event and plans for a new integrative medicine program planned for the new Baylor Charles A. Sammons Cancer Center at Dallas.

For reservations and more information, please call 214.820.2608.

Lymphedema: Everything You Need to Know

Wednesday, April 7

This event will offer information about the prevention, causes and treatment of lymphedema, as well as teach coping mechanisms for current patients.

For reservations and more information, please call 214.820.2608.

Life After Cancer for Young Adults

Saturday, April 10

This event will feature a keynote address by Wendy Harpham, M.D., a cancer survivor who will address "Healthy Survivorship." It will also include breakout sessions on the special challenges faced by young adult survivors, including issues in the workplace, dating, health insurance, long-term treatment side effects and disclosure.

For reservations and more information, please call 214.820.2608.

Blood and Marrow Transplant Survivor Conference and Reunion

Please visit BaylorHealth.com/DallasCancer for more details in the upcoming months.

Education and Support Programs

For details, visit BaylorHealth.com/DallasCancer.

Disease-Specific Education

Amyloid Support North Texas*

Quarterly – second Saturday

10 a.m. – 1 p.m.

Room 7, lower level

Truett Hospital (near cafeteria)

Breast Cancer Support Group – Days

Monthly – first Tuesday

2 – 3 p.m.

Basement level, Sammons Tower

Baylor Charles A. Sammons Cancer Center

Breast Cancer Support Group – Evenings

Monthly – first Tuesday

6:30 – 8 p.m.

Darlene G. Cass Women's Imaging Center

3900 Junius Street, Suite 200

Carcinoid Cancer Texas Survivors*

Every even month – second Saturday

11 a.m. – 1 p.m.

Room 1, lower level

Truett Hospital (near cafeteria)

North Texas Myeloma Support Group*

Monthly – second Saturday

10 a.m. – 1 p.m.

Ovarian Cancer Support Group

Weekly – Mondays

11:30 a.m. – 12:30 p.m.

Basement level, Sammons Tower

Baylor Charles A. Sammons Cancer Center

Prostate Cancer Education and Support Group*

Monthly – first Tuesday

11:30 a.m. – 1:30 p.m.

For location, please call 214.820.2608.

Support for People with Oral and Head and Neck Cancer (SPOHN)*

Monthly – second Tuesday

11 a.m. – 1 p.m.

Basement level, Sammons Tower

Baylor Charles A. Sammons Cancer Center

A separate SPOHN group now meets in Plano on the first Tuesday of the month at Baylor Regional Medical Center at Plano, 4700 Alliance Blvd., Plano 75093

6 – 8 p.m.

Rooms A and B, Garden level

Waldenström's Macroglobulinemia Support Group*

January, March, May – third Saturday

10:30 a.m. – 12:30 p.m.

Room 4, basement level

Truett Hospital (near cafeteria)

For more information, please call 214.820.2669.

Ongoing Complementary Programs

Healing Through Journaling

Reduce stress and worry, improve communication skills and enhance the healing process. Join us and experience the power of journaling.

Monthly – second and fourth Wednesdays

10 – 11:30 a.m.

Basement level, Sammons Tower

Baylor Charles A. Sammons Cancer Center

Pre-registration is required.

Call 214.820.2608.

Express Yourself

Words can escape us when we try to communicate our thoughts, feelings, hopes and fears. Let the world of color and shapes help you explore your cancer journey through artistic expression. Knowledge of art and experience in art are not required.

Monthly – second Wednesday

9 – 10:30 a.m.

Suite 620, Collins Building

Baylor Charles A. Sammons Cancer Center

Pre-registration is required.

Call 214.820.2608.

- **Reservations required for this event. Please call (214) 820-2608.**

- * **Family members are invited to attend these support group meetings.**

Gentle Yoga for Cancer Survivors

Bi-monthly—second and fourth Fridays

10 a.m. – 11:30 a.m.

Basement level, Sammons Tower

Baylor Charles A. Sammons Cancer Center

Pre-registration is required.

Call 214.820.2608.

Relaxation Made Easy

This program is designed to explore various relaxation techniques that may reduce tension, anxiety, anger and fatigue. CDs will be given to class participants to practice new skills at home.

Monthly – first and third Friday

10 – 11:30 a.m.

To register or for more information, please call 214.820.2608.





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Medical Center at Dallas
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Health
Wellness
Beauty
Lifestyle

Saturday, January 30
7:30 a.m. – Noon
Doubletree Hotel—Campbell Centre
8250 North Central Expressway
(across from NorthPark Center)

Women of all ages are invited to attend a morning seminar devoted to their specific health needs. Sponsored by Baylor University Medical Center at Dallas, For Women, For Life™ offers women time to focus on their own health. The event includes free screenings and assessments, five-minute chair massages, health education booths as well as the

opportunity to attend health education presentations by allied health professionals and physicians on the medical staff at Baylor Dallas. The event is free, but registration is required.

To register and schedule your screening, call 1.800.4BAYLOR.