

AWARe!

A Center of Hope and Healing

What you'll find at the Leever Cancer Center

The Mission of The Harold Leever Regional Cancer Center is to improve the health of the community by creating and fostering a patient- and family-centered approach to high-quality cancer care.

HERE'S AN OVERVIEW OF THE SERVICES AND AMENITIES AVAILABLE TO ALL OUR PATIENTS:

EXPERT CARE From medical and radiation oncology to PET/CT imaging and multidisciplinary conferences, the Leever Center offers state-of-the-art cancer care. Our doctors, nurses, radiation therapists, APRNs, PAs, social worker, nutritionist, financial counselors, physicists, dosimetrists, nuclear technologists and staff work tirelessly every day to ensure patients receive the best care possible.

MEDICAL ONCOLOGY The Leever Cancer Center offers medical oncology services upstairs in Suite A for the Smilow Cancer Center of Yale-New Haven and in Suite B for Saint Mary's Hospital Oncology Center. A medical oncologist is a doctor who is specially trained to diagnose and treat cancer using different therapies, which can include chemotherapy, hormonal therapy, biological therapy, and targeted therapy. There are six resident doctors for medical oncology: Smilow-affiliated Drs. Victor A. Chang, Anamika Katoch, and Kert D. Sabbath; and Saint Mary's-affiliated Drs. Yueming Chang, Sharynn Hall, and Consuelito Medrano.

RADIATION ONCOLOGY Radiation oncology services are found at the Leever Center on the ground floor. A radiation oncologist is a doctor who treats cancer using radiation therapy, which is the use of high-energy x-rays or other particles to destroy cancer cells. There are three resident doctors for radiation oncology: Drs. Jeffrey A. Bitterman (below), Douglas Housman, and Joseph Ravalese, III.

Continued on page 2 ▶



expert care



welcoming facilities



advanced technology

PET/CT IMAGING We offer the latest Positron Emission Tomography (PET) and Computed Tomography (CT) scans to help our oncologists obtain precise and detailed information about the exact location and metabolic status of a tumor. PET/CT scans help identify cancer in its earliest stages, as well as determine the effectiveness of ongoing chemo or radiation therapy treatments. The cutting-edge PET/CT system we use significantly improves diagnostic accuracy and reduces patient exposure to radiation by more than 50 percent, which means fewer side effects and better outcomes for patients. We also recently expanded the PET/CT services we offer.

MULTIDISCIPLINARY CONFERENCES At our regularly held multidisciplinary conferences, we bring together specialists from across disciplines to discuss patient cases and the best treatment options for individuals. The main provider presents the details of the case, considers all the input from other providers, and collaboratively develops a consensus for what the treatment plan will entail.



WELCOMING FACILITIES

At the Harold Leever Cancer Center, we do everything in our power to make our patients feel comfortable and welcomed. To that end, we have designed all our facilities and spaces to be warm and inviting – more like a friend's home than a medical facility. Here are some things you'll find when you visit.



COVERED ENTRANCE

Our covered entrance has always been a popular way for patients to stay sheltered from rain or snow while waiting for a ride or our valet service. Now, for those who have pandemic-related concerns about being indoors, it offers a safe, comfortable outdoor space that provides peace of mind as well as protection from the elements.

PARKING/VALET

Often, a trip to a medical facility requires that you choose between paying to park in a nearby garage and parking far away and taking a long walk to the facility. At the Leever Cancer Center, we offer free parking in our ground-level lot. We also offer FREE valet parking from our covered drop-off area and our valet parking team will always find you a spot.



LIBRARY

While the library is currently closed due to the pandemic, we look forward to reopening it when it is safe once again, to having patients enjoy the comfortable seating, fireplace, puzzle table, adult coloring books, a library of popular novels, a wide array of informational materials for patients, and a computer with internet access – all available free for patient use.

PATIO

The peaceful, healing garden patio at the Leever Cancer Center was originally intended as a place for patients and visitors to relax, and while it still serves that

personal touches



Reflections Boutique

purpose, it has taken on the additional job of acting as a safer, weather-permitting waiting room option during the pandemic.

REFLECTIONS BOUTIQUE The Reflections Boutique is a free resource for women experiencing hair loss due to cancer treatment. The boutique, located in the lobby, offers more than 100 wigs in different styles, shapes, and colors, along with a wide variety of hats and other head coverings. Women are invited to make an appointment to explore the offerings, and may select pieces to borrow at no charge.

RIDES FOR PATIENTS We understand that some patients are unable to drive themselves to appointments and don't have a friend or family member available for rides. For those patients, we offer free rides through Uber Health. If you need a ride, contact a Leever social worker at 203-575-5511, who will make the arrangements on your behalf.

QUILTS THAT CARE Quilts that Care is a group of volunteers who make lap quilts for cancer patients going through treatment to keep them warm and let them know that someone is thinking of them. While our Quilts that Care group is not meeting in person during the pandemic, we do have an inventory of quilts available for patients — just ask!

FREE KNIT HATS If it's a cold day or you'd just like a stylish head covering, stop by the front desk and select one of the free knitted hats available for patients.

LOOKING TO THE FUTURE

Unfortunately, the pandemic has placed some limitations on the offerings we make available to our patients and visitors, but in the future we hope to bring back services and amenities including free coffee, welcome desk, library, meditation room, and in-person support groups. Until then, we will continue to do everything we can to make our patients as comfortable as possible while maintaining safety guidelines to protect our patients, doctors, and staff.

Cancer Screening Guidelines

The following cancer screening guidelines are recommended for people at average risk for cancer (unless otherwise specified) and without any specific symptoms. Those who are at increased risk for certain cancers may need to follow a different screening schedule, such as starting at an earlier age or being screened more often. Those with symptoms that could be related to cancer should see their doctor right away.

These guidelines follow American Cancer Society (ACS) screening recommendations. Breast Cancer screening recommendations follow the American College of Radiology (ACR) and Society of Breast Imaging (SBI) recommendations. Lung Cancer screening recommendations follow the USPSTF 2021 recommendations.

Breast Cancer

AGE 40

- Annual mammographic screening beginning at age 40 for people of average risk.
- High-risk start mammographic screening earlier.
- For those with genetically inherited increased risk with a calculated risk of 20% or more or a history of radiation therapy at a young age supplemental screening with contrast-enhanced breast MRI is recommended.
- Breast MRI is also recommended for those with personal history of breast cancer and dense tissue or those diagnosed by age 50.
- Obese with histories of breast cancer and those with any other risk factors are present.
- Ultrasound can be considered for those who qualify for but cannot undergo MRI.

All people of African and those of Ashkenazi Jewish descent should be tested for breast cancer risk no later than age 30, or that those at higher risk be identified and get benefit supplemental screening.

Discuss your personal schedule for screening guidelines with your primary care doctor.

Cervical Cancer

AGE 25

- Cervical cancer screening is recommended for people with a cervix beginning at age 25.
- Primary HPV (human papillomavirus) test every 5 years from ages 25-65. If a primary HPV test is not available, a co-test (an HPV test with a Pap test) every 5 years or a Pap test every 3 years.
- People over age 65 who have had regular cervical cancer testing in the past 10 years with normal results should not be tested for cervical cancer.
- People with history of cervical cancer should continue to be tested for at least 20 years after that diagnosis, regardless of age.
- Discuss your personal schedule for screening guidelines with your primary care doctor.

Colorectal and Rectal Cancer

AGE 45

- Regular screening beginning at age 45, with 4 different types of tests:
- Yearly guaiac-based fecal occult blood test (gFOBT)
- Yearly fecal immunochemical test (FIT)
- Multi-targeted stool DNA test (MT-DNA) every 3 years
- Flexible sigmoidoscopy (FS) every 5 years
- CT colonography (virtual colonoscopy) every 5 years
- Colonoscopy every 10 years

Positive tests should be followed up with a colonoscopy. People who choose these things: colonoscopy screening earlier and/or physical history of colorectal cancer, colorectal adenomatous polyps, strong family history of colorectal cancer or polyps, Personal history of chronic inflammatory bowel disease, Family history of hereditary colorectal cancer syndrome.

Endometrial (Uterine) Cancer

NO RISK

At least 10 years of menstruation. All people with a uterus should be informed of the risks and symptoms of endometrial cancer, and strongly urged to report any unexpected bleeding to their doctor.

People may need to consider having a yearly endometrial biopsy if they are personal schedule for screening guidelines with your primary care doctor.

Lung Cancer

AGE 55, HIGH RISK

- Low-dose CT scan recommended.
- People are eligible for this if they are all of the following:
 - At least a 20 pack-year smoking history (A pack-year is the number of packs smoked each day multiplied by the number of years smoked.)
 - Age of at least 55 years.
 - Age of at least 10 years since they quit smoking, or have quit smoking within the past 15 years.
 - People should get their first low-dose CT scan (LDCT) of the chest at age 55 with an annual low-dose CT scan (LDCT) of the chest the next year and then continue to have low-dose CT scans every 1-2 years thereafter.

People with history of chronic obstructive pulmonary disease (COPD) should be screened for lung cancer. People with a history of lung cancer should continue to be screened for at least 20 years after that diagnosis, regardless of age.

Discuss your personal schedule for screening guidelines with your primary care doctor.

Prostate Cancer

Prostate-specific antigen (PSA) blood test and digital rectal exam (DRE) should be discussed with your doctor beginning at age 50 to high-risk African American and individuals with a strong family history of prostate cancer and/or prostatectomy.

People with a history of prostate cancer should continue to be screened for at least 20 years after that diagnosis, regardless of age.

Discuss your personal schedule for screening guidelines with your primary care doctor.

Everything you need to know about cancer screenings

When should you be screened for cancer? It depends on a number of factors, including your gender, age, and type of cancer. The following cancer screening guidelines are recommended for people at average risk for cancer (unless otherwise specified) and without any specific symptoms. If you are at increased risk for certain cancers, you may need to follow a different screening schedule, such as starting at an earlier age or being screened more often. If you are experiencing symptoms that could be related to cancer, see your doctor right away.

Full-size printed Cancer Screening Guidelines cards (left) can be obtained by calling us at 203-575-5555 or can be viewed on our website at <https://bit.ly/3wYTChO>.

Celebrating Survivors and Caregivers

“Seasons of Hope” Relay for Life 2021

The Leever team was thrilled to participate in another successful Greater Waterbury Relay for Life, held on September 18 at Holy Cross High School. Highlights of the event, which this year had the theme “Seasons of Hope,” included luminaria bags to remember lost loved ones and a powerful speech by the Leever Cancer Center’s own Dr. Joseph Ravalese (pictured below, far left). See an excerpt of his speech at right.

This year’s event raised more than \$100,000 for the American Cancer Society. Thank you to everyone who came out to make the event a success!



As I look around and see all the faces of people gathered here to celebrate life, even the face coverings cannot mask the smiles in your eyes, the strength of your will, or the hope in your hearts.

Survivors, just look around you now. Hope abounds in the faces of your loved ones, of your family, of your friends, and of every healthcare provider that has had the honor to walk beside you through your treatments, your recovery, and on this special evening that recognizes and applauds your fight. Seasons may change, but let us make every season a season of hope.

- Joseph Ravalese, III, MD



Waterbury Fire Department holds fundraiser to support Leever patients

The Waterbury Fire Department held its annual breast cancer fundraising campaign throughout October, Breast Cancer Awareness Month, selling T-shirts with a pink shield on the front and a pink ribbon on the back. Some of the proceeds from the sale of the shirts will go to the Leever Cancer Center for patient care needs such as rides for patients, gift cards for those needing over-the-counter medications, and groceries.

Local news reporters spoke with two of the Leever Center’s radiation oncologists about the fundraiser. “It helps us take care of our patients beyond their medical needs,” said Dr. Jeffrey Bitterman. Dr. Douglas Housman concurred. “Some of our patients have difficulty purchasing the pharmaceuticals they need. Some have difficulty with something basic like paying their rent or electricity.”

On behalf of all our patients, thank you to the Waterbury FD for their important efforts!



Watertown Police Department holds Sixth Annual Golf Tourney benefitting Survivorship Program

On October 1, the Watertown Police Department held its sixth annual Charity Golf Tournament to benefit the Leever Cancer Center. The event, which was held at the Crestbrook Park Golf Course, raised funds for

the Stepping Forward Survivorship Program, which is designed to address the needs of cancer survivors and provide them with an effective post-treatment plan for care, disease prevention, and support. Everyone here is very grateful for the continuing support of the Watertown PD, all the event sponsors, volunteers, and participants.

Above: Co-chairs Sergeant Christopher Paquin (left) and Officer Christopher Donston (right) with Kevin Kniery, HLRCC’s executive director, at this year’s golf fundraiser.

Spotlight on:

Radiation Oncology Nurses

We are pleased to welcome **Samantha Conway** and **Erin Gregoire** to our Radiation Oncology staff. We asked both nurses some questions to help us get to know them better. We're sharing it with you, so you can learn more about them too!

Samantha Conway, RN *Lead RN, Radiation Oncology*

Samantha obtained her nursing degree at Naugatuck Valley Community College in 2015, and worked at Waterbury Hospital, in home care, and in primary care as a triage nurse before joining the Leever nursing team in April 2021.

Q How did you get interested in radiation oncology?

A *I had been in all kinds of positions previous to my nursing career. All those positions were in an effort to help people, but none were totally satisfying. I decided to learn about oncology medicine and it was extremely interesting, so I determined that would be my career path.*

Q Had you heard of Leever before you applied for the job?

A *Absolutely — I was familiar with Leever long before this position became available. When I was working in human resources, I had the opportunity to attend an amazing program called Leadership Greater Waterbury. Through those classes I met Tom [Belzek], who is Leever's finance director. I've also had interactions with many people at Leever, and have seen them at lots of different Relay for Life events.*

Q What has been your experience with Leever so far?

A *Very positive. It's a great group of people that work together in an amazing way. The focus is always on the patients and the families, and they really work to make being here as positive an experience as it can be.*

Q What are your professional goals as an RN, both daily and long term?

A *I'm always, always focused on patient safety and satisfaction, and long term, I'd like to continue my education in the field.*



“The focus is always on the patients and families...”



Erin Gregoire, RN *Radiation Oncology*

Erin obtained her nursing degree at Goodwin College in East Hartford. Before joining the Leever nursing team, she worked in the Waterbury public school nurse's office as a public health aide, at a summer school in Bethel, and then with DaVita dialysis at Waterbury Heights.

Q How did you get interested in the field?

A *I have wanted to become a nurse for as long as I can remember. I am a cancer survivor myself, and while I was going through my treatments, I knew I wanted to work in oncology one day.*

Q Had you heard of Leever before?

A *Yes. It has been my dream to work here since I knew it was opening almost 20 years ago.*

Q What has been your experience with Leever so far?

A *My experience here has been nothing short of amazing. All the staff is wonderful. They have welcomed me and are so supportive.*

Q What was your specialty prior to joining Leever?

A *My specialty was dialysis, which is much more physically hands-on. Radiation oncology treatments are delivered by high-tech devices, and we help manage the results of the treatment, whereas in dialysis I was responsible for delivering the treatment as well.*

Q What are your professional goals as an RN?

A *On a daily basis, I strive to provide our patients with exceptional care. Long term, I am working toward gaining a stronger knowledge base in oncology and radiation therapy.*

“I strive to provide our patients with exceptional care.”



Cuppa Joe: Yes or No?

By Karen Sabbath, MS, RD, CSO

The lines of cars outside Dunkin Donuts and Starbucks every morning attest to America’s love affair with coffee. In fact, 64% of Americans drink just over three cups of coffee a day, for a total of 400 million cups consumed daily.

What is it about coffee that makes so many of us crave it? The first thing that usually comes to mind is caffeine, a stimulant that can make you feel more awake and alert. In fact, 75% of all caffeine consumed is from coffee. But coffee also contains hundreds of nutrients and phytochemicals including polyphenols, trigonelline, melanoidins, magnesium, potassium, and vitamin B. These compounds act as antioxidants and can improve health and metabolism. While the majority of adults drink coffee as their primary source of caffeine, others drink tea or soft drinks, both of which provide caffeine. Although tea has many antioxidants, most soft drinks contain only sugar.

Although always a popular beverage, there was a time when coffee was considered to be potentially damaging to health, but analysis of data did not substantiate these claims. Based on current research, coffee consumption has been linked to reduced risk of many ailments including Parkinson’s

disease, heart disease, type 2 diabetes, gallstones, depression, suicide, cirrhosis and cancers of the liver, prostate, endometrium/uterine, and melanoma. Studies conducted worldwide have shown that people consuming three to five 8-ounce cups of coffee (keep in mind that most coffee mugs contain 10-16 ounces) containing a total of about 100 mg/8 oz. serving, depending on the variety of coffee bean, or 400 mg caffeine, had reduced death rates, with coffee drinkers being less likely to die from all causes. And coffee counts towards your hydration requirements.

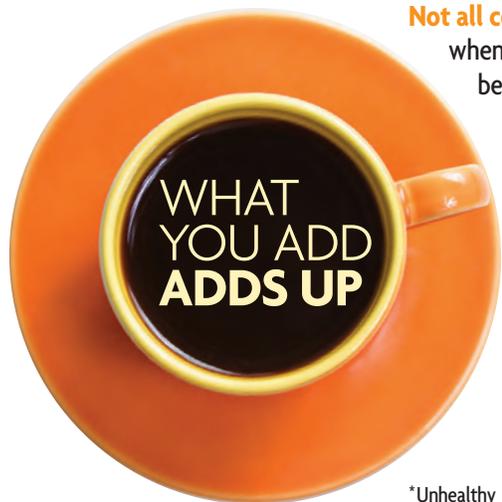
Keep in mind that these epidemiological studies are typically based on self-reports from the participants over time, while tracking disease incidence. This means that there appears to be a “strong positive correlation or association” between caffeine/coffee intake and improved incidence of various health issues, but a direct cause and effect has not been proven.

So, should we all run out and start guzzling coffee? As is often the case, too much of good thing may not be such a good thing. There are situations that warrant restricting or eliminating your caffeine intake. These include breastfeeding and pregnancy, where caffeine has been shown to cross the placenta and increase the risk of miscarriage, low birth weight, and premature birth. Safe levels are thought to be less than 200 mg (the amount in two 8-oz. servings) daily. Decaffeinated coffee is fine. Excessive coffee can also worsen anxiety or rapid heartbeat in some people. If you suffer from sleep disturbances like insomnia, you may want to drink your coffee early in the day, only occasionally, or not at all.

Bottom Line: Drinking coffee can definitely be a part of your healthy diet.

Be sure to incorporate other factors of a healthy lifestyle that have a positive impact on your health: eating a balanced diet with lean proteins, lots of fruits, vegetables, whole grains, and healthy fats; staying away from processed foods and excessive sugar; and exercising and keeping your weight in a healthy range.

Not all coffee drinks are created equal. Black coffee gives you all the nutritional benefits, but when you start adding the flavorings, sugar, and fats, like cream, you can offset all the benefits. Here is an example to compare:



*Unhealthy

	Medium Dunkin Donuts Pumpkin Swirl Frozen Coffee with Cream	Medium Dunkin Donuts Coffee with Whole Milk
Calories:	890	30
Fat:	31 gm, 17 gm saturated* fat (equivalent to eating a 7-oz. steak)	1.5 gm, 1 gm saturated* fat
Cholesterol:	100 mg	5 mg
Sugar:	128 grams (close to ¾ cup!)	2 mg

Questions about nutrition? Contact nutritionist Karen Sabbath, MS, RD, CSO, at ksabbath@leevercancercenter.org or 203-575-5510.



A Community of Caring

The Harold Leever Regional Cancer Center wishes to express its appreciation to our neighbors and friends...

Thank you to **Middlebury Girl Scout Troop 64504** for the beautiful comfort bags for our patients! Not only did the girls assemble the bags and fill them with small items designed to help our patients through their cancer experience; they also decorated them with colorful designs and messages of hope (some are pictured above) and dropped them off to us to distribute.

We are also grateful to **Middlebury Girl Scout Troop 64171** for designing and assembling thoughtful comfort bags filled with goodies for our patients! Attached to each bag was a "Feel Better Soon" label with a photo of the Senior Girl Scouts responsible for the gift, which is just the kind of positive, personal note that means so much to everyone in the Leever family.



Thank you to the staff at Naugatuck Stop & Shop. Twenty comfort bags for patients and a lovely floral arrangement for the enjoyment of everyone in the building were donated from all who participated in a Pink Out Day fundraiser.

We are most grateful for the following donations:

Generous monetary donations for patient needs by **Waterbury Emblem Club #552**, **National Jr. Honor Society at ACES at Chase**, and **Autumn Lake at Bucks Hill, Resident Council Group**.

Beautiful, unique handmade items including hats, scarves, gloves, prayer shawls, and blankets from **Marilyn Dillon**, **The Prayer Shawl Ladies at First Congregational Church of Watertown**, **Joyce Baland**, **Carole Mueller**, **Maria Bernardi**, and **Our Lady of Mount Carmel Church, Waterbury**.

A walker, wigs, and afghans from **Jill Bazzono** in memory of her mother.

A case of useful disinfectant wipes from **Richard Razza**.

Several donations of chemo caps from **Maryann Jackson**.

Special wig donations from **Essie Hoffler** and also in memory of **Anthony and Christine Vitarelli**.

aware!

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We encourage your feedback.
If there is a cancer topic you would like covered, to respond to an article you've read, or to be put on our mailing list, please call 203-575-5555 or email: dparkinson@leevecancercenter.org



THE HAROLD LEEVER
REGIONAL CANCER CENTER

1075 Chase Parkway
Waterbury, CT 06708
203-575-5555
leevecancercenter.org



We need your help to shape our care and services!

Please participate in The Harold Leever Regional Cancer Center's Community Needs Assessment Survey.

Our goal is to gain a better understanding of the communities we serve and their specific needs as they relate to the care and treatment of cancer, caregiver support services, and general treatment resources.

While you may take the survey anonymously, those who provide their name and email can receive a copy of our new cancer screening card delivered via mail or email. The input of our community is invaluable.

Please go to surveymonkey.com/r/269K2N3 or scan this QR code > to get started. The survey will be available through the end of February.



IMPORTANT INFORMATION *about the Leever Cancer Center*

As always, the health and safety of our patients and staff are of the utmost importance, and we are doing everything we can to ensure that we are able to provide the necessary care to our patients while protecting against the spread of COVID-19.

For the most up-to-date patient alerts and safety precautions, go to leevercancercenter.org/news/important-information-about-the-leever-cancer-center.

ALL ONSITE SUPPORT GROUPS AND EVENTS ARE CANCELED THROUGH THE END OF 2021.

Although we no longer have in-person support groups at this time, we have some virtual/online resources:

- **Look Good Feel Better:** For a virtual workshop and to receive your free makeup kit, visit lookgoodfeelbetter.org/alliance-partner-virtual-workshops/.
- **Brave at Heart Zoom Meetings:** Contact Anne Pringle for more information at 203-910-7582.
- To view an extensive list of online support groups: cancercare.org/support_groups.



IN MEMORY OF **Craig Carragan**

Our friend Mr. Craig Carragan passed away recently. Craig, along with his surviving wife Clare Ventre Carragan, founded the Reflections Boutique.

We will be forever grateful for all you have done for the Leever Center.