

# Aware!



Prevention and awareness information from The Harold Leever Regional Cancer Center

## Cutting-Edge Technologies

*Deliver Advanced Cancer Treatments*



“Our commitment to being a leader in cancer treatments and protocols makes a tremendous difference to our patients and establishes our position as a world-class cancer center.”

— Douglas M. Housman, MD

*Pictured above are the Leever Cancer Center Radiation Oncologists Dr. Douglas Housman (left), Dr. Jeffrey Bitterman (center) and Dr. Joseph Ravalese III (right) with the “Agility” state-of-the-art Stereotactic Radiosurgery equipment.*

THE HAROLD LEEVER REGIONAL CANCER CENTER CONSISTENTLY INVESTS IN THE MOST ADVANCED TECHNOLOGY AND TRAINING AVAILABLE, ENSURING THAT CANCER PATIENTS IN GREATER WATERBURY AND SURROUNDING TOWNS HAVE ACCESS TO THE VERY BEST IN CANCER CARE, CLOSE TO HOME.

“I feel very fortunate to be delivering world-class treatments in a regional cancer center,” said Dr. Douglas M. Housman, radiation oncologist at the Leever Cancer Center. “We are currently the only cancer center in Connecticut using four-dimensional cone-beam computed tomography (CT). Our commitment to being a leader in cancer treatments and protocols makes a tremendous difference to our patients, and establishes our position as a world-class cancer center.”

Four-dimensional (4-D) cone-beam CT is only one piece of Leever’s \$1.5 million investment in state-of-the-art Stereotactic Radiosurgery (SRS) technologies. This summer, the Leever Cancer Center also completed an upgrade of both linear accelerators, the machines that deliver high-energy x-rays that destroy malignant cells while sparing healthy tissue surrounding the tumor.

“Both machines now have upgraded, multi-leaf collimator (MLC) heads that allow us to deliver precisely sculpted treatment fields,” Dr. Housman explained.

The combination of the upgraded MLC heads and 4-D cone-beam CT technology allows Dr. Housman and his colleagues to effectively treat malignant tumors deemed “inoperable,” often because the patient is not a surgical candidate or because of the tumor’s proximity to critical organs or anatomical structures, such as the heart, lungs or spine.

Using 4-D technology, the medical team at the Leever Cancer Center generates a pinpoint cinematic map of the tumor as it moves within the body during every phase of the breathing cycle. Just as Disney animators draw a series of slightly different, then tightly linked frames, or cels, to depict on-screen movement, Leever’s

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Winter 2014

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## Cutting-Edge Technologies...

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radiation oncologists use the 4-D imaging to track the motion and trajectory of tumors that occur with patients' normal breathing patterns.

"We coach patients toward shallow breathing during treatment," said Dr. Housman, "but there is still very natural movement that causes the position of the tumor to shift slightly. The four-dimensional simulation that we do before treatment begins tracks the tumor as it moves through all breathing phases; that movement is the same during treatment."

Knowing how far a tumor will move during treatment allows Team Leever to construct radiotherapy plans that reach the tumor in every position while minimizing the radiation dose to the healthy tissue that surrounds it.

"Because of the certainty of the position of the tumor and the surrounding structures, we can deliver surgically precise, targeted ablative radiation while remaining safely within the dose constraints of the surrounding normal tissues," said Dr. Housman. "This precision also means that a standard course of treatment may incorporate one to five radiation sessions, as opposed to the 30 or so required previously."

And while the 4-D technology defines the parameters of treatment by establishing the tumor's precise borders throughout treatment, the MLC shapes the radiation beam to precisely match those borders. The leaves of the MLC open, close, and adjust like the lens on a camera, shaping each radiation beam to conform to the exact shape of the tumor. At .5 centimeters, the leaves on the new heads are half the thickness of those on the prior heads, ensuring the most precise conformal shaping of the dosing radiation beam.

"The Leever Cancer Center mission drives us to consistently invest in new technology to retain our position as a leading provider of state-of-the-art cancer care," noted Leever Executive Director Kevin Kniery. "We are proud to be the only cancer center in the state using 4-D CT imaging for both treatment planning and during treatment delivery, and proud to be recognized as a leader in world-class cancer care."

# ask the Doctors

**Radiation Oncologist  
Douglas M. Housman, MD,  
and Breast Surgeon  
Ellen G. Polokoff, MD, FACS,  
answer your questions about  
Stereotactic Radiosurgery and  
mammography screenings.**

**Q** I am about to start Stereotactic Radiosurgery (SRS). What should I expect?



**Douglas M. Housman, MD,**  
Radiation Oncologist,  
The Harold Leever Regional  
Cancer Center

**A** **Dr. Housman:** SRS is a very low-risk, high-impact form of cancer therapy. With SRS, we destroy cancer cells and cancerous tumors using high-energy x-rays in the form of radiation beams.

On your first visit, we introduce you to the linear accelerator, the machine that delivers the radiation. We conduct simulation scans that will be used to plan your treatment, much like blueprints are used to help construct a building.

Over the course of the next two to three weeks, we construct, customize, and refine the "blueprints," going through thousands of iterations to plot an individual course of treatment unique to your anatomy. Like an artist painting the dose of radiation to cover the tumor, the treatment plan

stays "inside the lines" to avoid critical normal tissues and minimize toxicity, while taking into account the size and position of your tumor and its proximity to critical organs and structures.

Once we have developed that unique plan, you will come in for what I like to call the "dress rehearsal," where we do one more verification check of positioning, setup, and calibration before the first radiation treatment. (It is important to note that positioning and calibration are constantly monitored and adjusted as needed throughout the treatment process.) Within a day or so of the dress rehearsal, actual treatment begins. We see you according to a strict schedule, usually every other day for a total of one to five treatments, as prescribed by your plan.

SRS is a very low-risk treatment option that offers comparable outcomes to the much more invasive surgical approach. Patients sometimes experience some temporary fatigue; other side effects, like pneumonia, are possible but extremely rare and highly dependent upon the individual case.

**Q** There is a lot of conflicting information about mammograms in the media. When should I begin screenings?



**Ellen G. Polokoff, MD, FACS,**  
Breast Surgeon,  
Polokoff Breast Care;  
Member, The Breast Center  
of Greater Waterbury

**A** **Dr. Polokoff:** Current research suggests that women in their 40s benefit significantly from regular mammography screenings. The physician team at The Harold Leever Regional Cancer Center supports the breast cancer screening guidelines established by the American Cancer Society, which recommend annual mammography screenings for all women beginning at age 40. In some cases, women with a personal or family history that includes breast cancer or precancerous conditions may begin screenings even earlier. It is important that you discuss all aspects of your personal medical health with your own physician to make that determination. It is also important to note that mammograms can miss some cancers and may reveal other conditions that require intervention, but that are not cancer.

# The American Cancer Society Volunteers

**THE AMERICAN CANCER SOCIETY (ACS)** is the largest voluntary health organization in the United States. Like most community-based, nonprofit corporations, the ACS depends on the service and dedication of volunteers. Around the world, the ACS volunteer corps is more than three million strong. At The Harold Leever Regional Cancer Center, our volunteer team is great not only in numbers, but in spirit and compassion as well.

“We get a lot of calls from people interested in volunteering for us,” said Jessica Tynan, ACS Community Relationship Manager at the Leever Cancer Center, “but with the exception of drivers, we are at capacity for volunteers and even have a waiting list. Our volunteers are amazing and very, very dedicated.”

The ACS offers a wide variety of volunteer opportunities, they said, that “empower people from every community to play a role in saving lives while they fulfill their own.” The volunteer team at Leever participates in each of those opportunities, from the Road to Recovery and Look Good, Feel Better programs, to ambassadors and main desk volunteers. But they don’t stop there.

“A few months ago our ambassador group suggested that we begin offering drinks and snacks to patients and caregivers. Because we are not a hospital, we don’t have the benefit of a cafeteria. The ambassadors suggested that we get a snack cart and deliver water and healthy snacks to our waiting and treatment areas,” Tynan explained. “This is a volunteer program that is unique to Leever, that was developed by Leever volunteers and that has been very, very well received.”

While “Treats and Eats” may be the newest volunteer service at the Leever Cancer Center, it is just one of many services ACS volunteers provide.

## AMBASSADORS

Ambassadors welcome patients and caregivers to the Leever Cancer Center from 9am to 4pm each day. They are here to help people find their way around, share information about Leever programs and services, and make people feel comfortable while waiting or during treatment. In many ways, they are the face of the ACS at the Leever Cancer Center.

“Our ambassadors each like to do different things. Some bake for patients and families, some bring little treats. They really get to know each other and the patients, and develop close relationships,” said Tynan. “Many are survivors, themselves; it is a way for them to give back and they love doing it.”

## LOOK GOOD, FEEL BETTER

Look Good, Feel Better is a non-medical public service program that teaches beauty techniques to cancer patients to help them manage the appearance-related side effects of chemo and radiation, while improving and maintaining self-esteem. In the United States alone, more than 850,000 women have participated in the program, which is sponsored by the ACS and offered in more than 2,500 locations, including the Leever Cancer Center.

## MAIN DESK VOLUNTEERS

Despite having more than 900 offices nationwide, the ACS location at the Leever Cancer Center is unique.

“Having a location in a cancer center like Leever is very special,” Tynan explained. “The opportunity we have here for patient interaction and contact is the ideal, but not the norm.”

From the main desk funded by the Connecticut Community Foundation’s Hallden Fund, volunteers help patients select wigs and head-coverings from the Reflections Boutique, provide information about programs and services, and coordinate free transportation services through the ACS Road to Recovery Program.

## ROAD TO RECOVERY

Road to Recovery is the most requested service the ACS provides at the Leever Cancer Center. Twenty-five volunteer drivers offer their time, vehicles, gas, and driving skills to transport more than 100 local patients each year to more than 2,000 medical appointments.

“Our drivers are an incredibly dedicated group of special people,” Tynan noted, “and we are always looking for more.”

Schedules can be quite flexible for volunteer drivers: they may work as often as every day or as little as once a month.

## REACH TO RECOVERY

Breast cancer survivors support breast cancer patients in person or on the phone through this unique support program. Volunteers are trained to give support and up-to-date information, including literature for spouses, children, friends, and other loved ones.

To learn more about the American Cancer Society, our volunteer programs, or how to become a volunteer driver, call the

American Cancer Society at 1-800-ACS-2345 or The Harold Leever Regional Cancer Center at 203-756-8888.

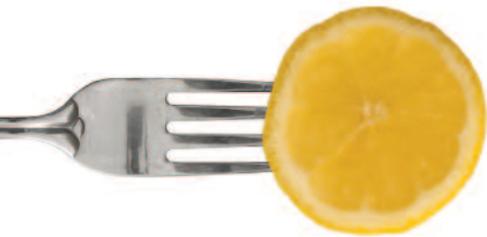
*ACS volunteers donate their time and talents locally to bring national programs to the Greater Waterbury community.*



*The Right Team. Right Here.*

# BUSTED: <sup>more</sup> Five <sup>1</sup> Common Nutrition Myths Debunked

by Karen Sabbath, MS, RD, CSO



IN THE LAST ISSUE OF “AWARE” WE DEBUNKED FIVE OF THE MOST COMMON MYTHS ABOUT NUTRITION THAT KEEP YOU FROM BEING AT THE TOP OF YOUR EATING GAME. Our commitment to your health and well-being continues in this edition, as we take a closer look at five more common nutrition myths. We’re clearing up confusion, and helping you eat right and feel better by making informed food choices.

**Myth 6:** “Superfoods” will keep you super healthy.

**Truth:** Contrary to many reports in the media, there is no single “super” food with super powers that will prevent cancer, heart disease, and high blood pressure, while helping you lose weight and improve your sex life! In fact, there is no legal definition of “superfood” although promoters would like you to believe otherwise. Foods that are heavily promoted, like acai and goji berries, are expensive and have not lived up to their claims when studied carefully. Many less costly and more widely available fruits and vegetables, like berries and broccoli, just to name two, are also loaded with antioxidants. The key to a healthy diet is to eat a variety of colorful fruits, vegetables, whole grains, and healthy fats and proteins.

**Myth 7:** Herbal supplements are healthy and harmless.

**Truth:** Many people pop herbal supplements (products that come from plants) in the hopes of feeling better, stronger, happier, more alert or less tired. There are several things that are important to know before you take any supplement. Americans spend roughly \$27 billion yearly in supplements, so it is big business. Unfortunately, there is no regulation for these supplements for safety, content or side effects. And, although sold over-the-counter, these products are really medications, and

can interact with other drugs you are taking or medical conditions that you have. Just as one example, glucosamine, commonly taken for pain relief of arthritis, can lower your blood sugar. If you are diabetic and are taking medication that already lowers your blood sugar, this can potentially result in a serious problem. Other supplements can act as blood thinners or even prevent prescription medications (including chemotherapy) from working. It is important to let your doctors know exactly what you are taking, so they can help you determine which are helpful or harmful and which should be continued or discontinued.

**Myth 8:** Multigrain is the same as whole grain.

**Truth:** We get the message loud and clear: **eat whole grains!** And it is true that eating whole grains has many positive effects on your health, like reducing the risk of heart disease, stroke, diabetes and some types of cancer. However, labels that state “made with whole grains” or “multigrain” are not the same and may contain only miniscule sources of whole grains. To determine if a product is rich in whole grains, check out the ingredient list. The first one should be a whole grain (for example, whole wheat flour or whole oats). You can also look for the whole grain seal, which will tell you if it is 50%-100% whole grains. If not, think twice before buying it.

**Myth 9: Organic fruits and vegetables are healthier and safer.**

**Truth:** This is a hotly debated issue. According to the USDA, organic foods must be grown and harvested with restrictions on pesticides, hormones and antibiotics. Use of “natural” or plant-derived pesticides is allowed. Some studies noticed slight differences in vitamin/phytochemical content, while others did not. It is felt that the nutritional content of the food is related to the seed itself, as well as the plant variety, soil conditions, climate, harvesting techniques and storage methods. However, the level of pesticide residues in organic foods is lower. Although pesticides present a known danger to farm workers, as well as to the environment, there is no clear evidence that low-level residues (falling within the FDA guidelines) are harmful. There are certain foods (known as the “dirty dozen”) that consistently appear to have more pesticides. A list of these foods can be found on the website of the Environmental Working Group (ewg.org). Both organic and inorganic foods are equally subject to bacterial contamination. If you are unable to afford organic fruits and vegetables, it is better to buy non-organic, well-rinsed before eating, than not to eat them at all. For environmental purposes, buying locally and seasonally is recommended.

**Myth 10: Drinking tea and coffee causes dehydration.**

**Truth:** Many people remark that if you drink caffeinated coffee or tea, you lose double the amount of fluid you have consumed, and can become dehydrated. This is not true. Water, even by itself, acts as a diuretic, and in studies where participants drank equal amounts of water or caffeinated coffee, the amount of urine they produced was essentially the same. Coffee and tea are 99.5% water, and can be

counted toward your daily intake in the same way as any other fluid. Staying well hydrated helps to improve concentration, alertness and athletic performance. Be aware of the sugar and creamers that you add; they can pack on the calories!

**Nutrition studies can be so confusing:**

One day caffeine is good for you, the next day you need to give up your morning coffee. Wouldn't it be great if we had an expert to sort it all out for us? We do! If you have any questions about nutrition, email Leever's own Karen Sabbath, MS, RD, CSO, at ksabbath@leevercancercenter.org or call her at 203-575-5510.

### SPICED NUTS



**Ingredients:**  
 1/2 cup pecans  
 1/2 cup raw almonds  
 1/3 cup raw pistachios  
 1/3 cup raw cashews  
 1/3 cup raw pumpkin seeds (pepitas)  
 1 Tbsp. maple syrup  
 1/2 tsp. curry powder  
 1/8 tsp. cayenne (optional)  
 1/2 tsp. dried rosemary  
 1/4 tsp. kosher salt

**Directions:**  
 1. Preheat oven to 325°.  
 2. Combine nuts and seeds in a medium-sized bowl.  
 3. Add the maple syrup, spices and salt, and toss to combine.  
 4. Spray a baking sheet with cooking spray, then transfer coated nuts to sheet and spread evenly in one layer.  
 5. Bake 20-25 minutes, stirring once, or until nuts are fragrant and lightly toasted.  
 6. Allow to cool completely before transferring to a container.

**Makes 6 servings of 1/3 cup each.**

### FARRO SALAD with kale, pistachios and dried fruit



**Ingredients:**  
 1 cup uncooked farro  
 3/4 tsp. salt, divided  
 1/4 cup raw, shelled pistachios  
 3 Tbsp. olive oil  
 4 Tbsp. fresh lemon juice  
 2 tsp. honey  
 3/4 tsp. ground coriander  
 1 tsp. grated, peeled fresh ginger  
 1 -1/2 -2 cups finely sliced kale  
 1/4 cup golden raisins  
 1/4 cup diced dried apricots  
 1/2 cup thinly sliced scallions  
 1/4 cup chopped fresh cilantro

**Directions:**  
 1. Preheat oven to 350°.  
 2. Place farro and 1/2 tsp. salt in medium saucepan. Cover with water to 2 inches above farro and bring to a boil. Cover, reduce heat and cook until done, according to directions on package. Once tender, remove from heat and drain off excess water.  
 3. Place pistachios on baking sheet and bake at 350° for about 8 minutes, stirring once. Remove from oven and allow to cool.  
 4. Combine oil, lemon juice, honey, coriander, ginger and remaining 1/4 tsp. salt in a large bowl, stirring with a whisk.  
 5. Add cooked farro, kale, raisins and dried apricots; stir well to combine. Let stand for 20 minutes or until cooled to room temperature.  
 6. Once cool, add scallions and cilantro to farro mixture. Transfer to serving bowl. Sprinkle with nuts (crumbled goat cheese optional) just before serving.

**Serves 8.**

**Notes:** Wheat berries or other grain can be substituted. 1 cup dry farro = approx. 3 cups cooked.

# Hope with Friends Relay for Life 2013

When things get tough, there are two things you can never have enough of: hope and friends. Neither was in short supply during this year's Greater Waterbury Relay for Life, held on the track at Waterbury's Crosby High School on Saturday, June 1 and Sunday, June 2. More than 500 people joined Team Leever in their bright yellow team tees as they spent 24 hours on the track, raising awareness and funds for the American Cancer Society. The T-shirts, conceptualized by Leever Cancer Center Operations Manager Deborah Parkinson and designed by her husband, John, celebrated "Hope with Friends," in a nod to the familiar online "Words with Friends" game.

"Relay for Life is always a special event for us," Parkinson noted. "It connects the Leever Cancer Center with the community in a unique way, working together as a team."

Thank you to Team Leever, family members, friends and survivors (some pictured at right) who supported Relay for Life.

*Fact: In 1985, one man spent 24 hours walking to raise awareness about cancer; 300 friends supported him. Today, almost 30 years later, Relay for Life events are held in more than 5,200 communities and 20 countries, and have become the signature fundraiser for the American Cancer Society.*



# On the Road Again

For the fourth consecutive year, Team Leever pedaled through the streets of Fairfield County to raise money for "Stepping Forward," the Leever Cancer Center's survivorship program, through the Connecticut Challenge. Founded in 2004, the Connecticut Challenge raises funds to support clinics, allied support services, and networks that organize post-treatment care for the 13 million cancer survivors in the United States.

As the survivor population grows (thankfully), so does the need for survivor services. In 2011, the Leever Cancer Center kicked off its own program that helps survivors thrive by offering an effective post-treatment plan for care, disease prevention, and support. Our survivorship team includes nurses, nurse practitioners, a physical therapist, a registered dietitian, and a social worker. Survivors are also encouraged to attend our community health series and YMCA programs.

"Team Leever represents the very best of what teamwork is," said Team Leever organizer and "captain" Karen Sabbath, who is also the Leever Cancer Center's registered dietitian. "We each bring something unique. We support, cajole and encourage each other. We laugh, we cry, we accept each other without judgment, and we celebrate each other's victories. And the work we do has a huge impact on the Leever Cancer Center Stepping Forward Survivorship Program."

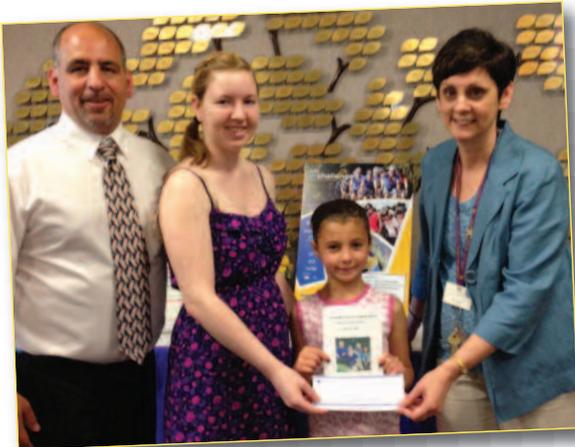


“Team Leever represents the very best of what teamwork is...” — Karen Sabbath

# A Community of Caring

The Harold Leever Regional Cancer Center wishes to express its appreciation and a sincere thank you to its neighbors and friends by recognizing the spirit and hard work of the members of our community in fulfilling the Mission of the Leever Cancer Center.

Earlier this year, Woodland Regional High School student **Mary Fitzgerald** produced a benefit concert and talent show to honor the memory of **Karen DePalma**, who recently lost her battle with cancer. The 14-act show featured singers, dancers and musicians. Proceeds from the show benefited both the DePalma Children College Fund and the Leever Cancer Center. Thank you, Mary, for your extraordinary work and generosity.



Thank you to **Sue Turmel** for the beautiful handmade blanket.

We are grateful to **David Chopak** and **Sonia Myers** for their cash donation of \$250, given on behalf of **Naugatuck Valley Savings and Loan**.

*Mary Fitzgerald and Joseph DePalma present a check representing the proceeds of Mary's fundraiser to the Leever Cancer Center in loving memory of Karen DePalma.*

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is published by  
The Harold Leever Regional  
Cancer Center

Publishing and Editorial Executives:  
Kevin Kniery, Deborah Parkinson, Tom Belzek  
Design: Aro Strategic Marketing

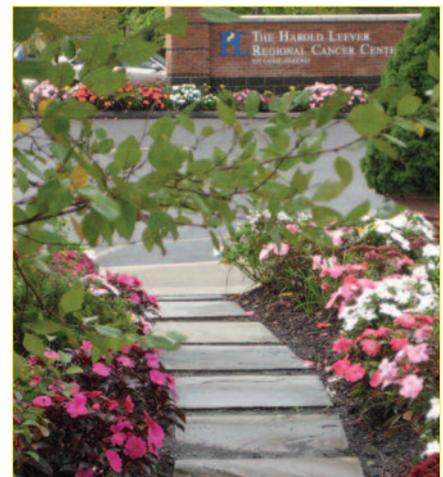
We encourage your feedback.  
If there is a cancer topic you  
would like covered, to respond to  
an article you've read, or to be put  
on our mailing list, please call  
203-575-5555 or email:  
dparkinson@leevercancercenter.org

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## Our Legacy of Hope

For more than 10 years The Harold Leever Regional Cancer Center has brought hope to Greater Waterbury: hope through advanced cancer treatment and technology; hope through exceptional medical practitioners; hope through caring. And we couldn't have done it without your support. Help us continue building our legacy of hope. Please consider making a donation to the Leever Cancer Center today, using the envelope in the centerfold of this edition of "Aware."



Above: Thanks to the 30 members of Team Leever (some pictured above) who together raised close to \$40,000 this year: Alexei Bachuretz, James Beckett, Donald Bellemare, Emmalee Caisse, Richard Caisse, Joelee Cedela, Dave Daniels, Michael Elser, Sheila Elser, Tom Ercoli, Ann Merriam Feinberg, Michael Feinberg, Bob Feldman, Elaine Feldman, Chris Hibbs, Kevin Kniery, Mary Kokoska, Jeremy Kortmansky, Julie Lindenman, Trish Lindenman, Patti Lizotte, Terry McDowell, Dave McKinley, Alan "Chip" Mowrey, Chris Mulhall, Deborah Parkinson, Joanna Pond, Karen Sabbath, Kert Sabbath, Will Wesson.

Left: Victorious celebration at the end of a long ride! Congratulations to all who participated.



## Less Cancer, More Birthdays

The American Cancer Society (ACS) is dedicated to creating a world with less cancer, where people live to celebrate more birthdays. To that end, they have launched a new research study called the Cancer Prevention Study-3 (CPS-3).

Participation in CPS-3 is open to men and women between the ages of 30 and 65 years who have no personal history of cancer. The ACS hopes to enroll at least 300,000 adults from various racial and ethnic backgrounds from across the United States. The goal of the study is to help the ACS understand how to prevent cancer.

This summer, the ACS sponsored a number of CPS-3 enrollment events in and around Waterbury; nearly 250 area residents signed on to participate in the study. The Leever Cancer Center hosted one of the enrollment sessions. Other area enrollment locations included the Greater Waterbury Relay for Life at Crosby High School, Saint Mary's Hospital, Waterbury Hospital, the Waterbury YMCA and the Naugatuck YMCA.

*For more information about CPS-3 and additional enrollment locations, please email [CPS3@cancer.org](mailto:CPS3@cancer.org) or call toll-free 1-888-604-5888.*

## Community Events & Monthly Support Groups

### COLORECTAL CANCER EDUCATIONAL AND AWARENESS EVENTS:

**Monday, March 10, 3PM**, Dr. John Zhang at HLRCC, RSVP: 203-575-5544

**Wednesday, March 12, 6PM**, Dr. J. Alexander Palesty at HLRCC, RSVP: 203-575-5544

**ORAL, HEAD AND NECK CANCER SCREENING EVENT: Tuesday, April 22, 4-6 PM**,  
RSVP: 203-575-5548

**ENERGY THERAPY:** Tuesday, Wednesday, Thursday afternoons and Thursday mornings,  
contact Melissa Seres, MSW: 203-575-5511

**FREEDOM FROM SMOKING:** An 8-week smoking cessation series: held 4 times per year,  
please call 203-575-1992 for information on the start of the next series

### JOURNALING: A WAY TO HEAL FROM YOUR CANCER EXPERIENCE:

Fridays, 10 AM – 11:30 AM, contact Melissa Seres, MSW: 203-575-5511

**THYROID CANCER SUPPORT GROUP:** monthly, last Tuesday, 6 PM – 7 PM, contact  
Dot Torretta: 203-756-3481

**WOMAN TO WOMAN BREAST CANCER SUPPORT GROUP:** monthly, 3rd Tuesday,  
7 PM – 8:30 PM, contact Theresa Lombardo: 860-274-2200

**BRAVE AT HEART BREAST CANCER SUPPORT GROUP:** monthly, 1st Wednesday,  
7 PM – 9 PM, contact Anne Pringle: 203-910-7582

**CT MULTIPLE MYELOMA FIGHTERS SUPPORT GROUP:** monthly, 2nd Tuesday,  
6 PM – 8 PM, contact Robin Tuohy: 203-206-3536

**HOPE MUTUAL AID GROUP FOR PATIENTS AND THEIR LOVED ONES:** monthly,  
1st and 3rd Tuesday, 12 PM – 1 PM, contact Melissa Seres: 203-575-5511

**BETTER BREATHING CLUB:** monthly, 3rd Friday, 1 PM, contact Rachel Kirchner: 203-757-4991

**AMERICAN CANCER SOCIETY: LOOK GOOD, FEEL BETTER!:** monthly, 1st Monday,  
2 PM – 4 PM, contact the ACS at 203-756-8888

**AMERICAN CANCER SOCIETY: REACH TO RECOVERY:** by appointment, contact the ACS  
at 203-756-8888

**WATERBURY AREA OSTOMY SUPPORT GROUP:** monthly, 1st Monday, 6:30 PM – 8:30 PM,  
contact John Sickola: 203-729-9623

**AMPUTEE SUPPORT GROUP:** monthly, 3rd Friday, 5:00 PM, contact Dila Hassiem: 203-597-8818

**ART THERAPY:** monthly, 1st and 3rd Tuesday, 2 PM, contact Melissa Seres, MSW: 203-575-5511

**QUILTS THAT CARE:** monthly, 1st and 3rd Mondays, 6:30 PM – 8:30 PM,  
contact Deb V: 860-945-0184

**COMPASSIONATE FRIENDS:** monthly, 2nd Wednesday, 6:45 PM – 10:00 PM,  
contact Sharon: 860-384-1398

*Please call contact person to confirm that group is running as scheduled.  
Meeting times may be rescheduled to accommodate holidays or special meetings.  
See [leevercancercenter.org](http://leevercancercenter.org) for ongoing community events.*

Winter