

Decoding the Body's Secrets



One Woman's Journey to Determine Hereditary Cancer Risks Reveals Volumes

Three-time cancer survivor Shalanda Little is a fighter, a strong-willed woman, a loving daughter, and a friend to many. But above all, the 42-year-old New Britain resident is a proud, loving mother. "Tahara is my pride and joy," she said of her 24-year-old daughter. "I pray that she will never have to endure what I did."

Shalanda's fight against cancer began 17 years ago when she was diagnosed with Hodgkin's lymphoma. The diagnosis was a devastating blow to the young mother, whose radiation and chemotherapy treatments left her with little energy to play with, let alone care for, young Tahara.

Remission brought relief and elation, a state that lasted more than a decade before the Hodgkin's lymphoma returned. Shalanda mustered the strength and courage to once again face her adversary and was declared cancer free after two additional years of chemotherapy.

Everything seemed to be okay... until she found a lump last year. The New Britain resident returned to The Harold Leever Regional Cancer Center where her oncologist of 17 years, Dr. Kert Sabbath, confirmed her fears: the lump was cancerous. "All I could think was, 'How could this be? I am too young!'"

Shalanda's surgeon and medical oncologist suggested that an inherited genetic mutation could have contributed to her most recent diagnosis. The two explained that a few simple tests would not only reveal whether or not she carried the BRCA mutation, but could also determine her future risk of developing other forms of cancer. "At that point," Shalanda said, "I knew we needed answers for both me and my daughter."

The physicians referred their patient to Joanne Giedra, HLRCC Cancer Program Navigator, who explained that Shalanda would first

 I knew we needed real answers...

— Shalanda Little
(Above left with HLRCC Cancer Program Navigator Joanne Giedra)

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Spotlight on:

Joanne Giedra, Cancer Program Navigator



Genetic counseling provides valuable insight into family cancer risks.

It's a fact: Ten percent of all cancers are hereditary.

We talked to HLRCC Cancer Program Navigator Joanne Giedra about The Harold Leever Regional Cancer Center's Genetic Counseling Program – a process that takes the guesswork out of determining an individual's risk of hereditary cancer. There are two steps in this process – genetic counseling and genetic testing. Genetic counseling is the step where an individual's personal

and family history is investigated to determine if genetic testing is necessary and, if so, what set of genes is appropriate to test. Genetic testing involves a blood test so that genes can be carefully analyzed to determine if the genetic code is correct and that the genes are working properly.

How does genetic counseling work?

When a patient is referred for genetic counseling, his/her physician sends all of the patient's paperwork to the Leever Cancer Center, and a phone appointment is scheduled with our genetic counseling partner, InformedDNA. During the call, a board-certified genetic counselor reviews the patient's family health history in detail and discusses whether gene testing is merited.

What happens next?

A certain percentage of patients who go through the genetic counseling process will be deemed at low lifetime cancer risk and therefore will not require further testing. Also, because of the high cost of genetic testing, insurers are increasingly demanding that patients be screened by a board-certified genetic counselor first. Patients should always check with their insurance provider before any procedure to learn what is and is not covered.

What if I need genetic testing?

If the patient is deemed an appropriate candidate for genetic testing, he/she will continue on the initial phone call and learn about the benefits and limitations that are involved. All of the results from the call are shared with the Leever team, as well as the patient's physician, so an informed decision can be made about the next steps. If both parties decide to go ahead with the testing, the patient will return to HLRCC for a blood draw, after which, the sample is sent directly to the appropriate testing facility.

Which hereditary cancers can genetic counseling address?

Most often, patients are referred to our counseling program to assess their risk for breast cancer. Genetic counseling can also assess the risk for other cancers such as ovarian cancer and gastrointestinal cancer. With the tools available to us, we're able to give patients a more comprehensive view of their inheritable cancer risks than ever before.

I've been diagnosed with cancer... could I still benefit from genetic counseling?

Yes, this is something that you should discuss with your oncologist. If you have already been diagnosed with cancer, genetic counseling and genetic testing could help customize your treatment and follow-up options.

To learn more about the HLRCC genetic counseling program, contact Joanne Giedra, Cancer Program Navigator, at 203-575-5503 or jgiedra@leevercancercenter.org.

Decoding the Body's Secrets

Continued from page 1

undergo genetic counseling – a non-invasive series of assessments that would determine if additional genetic testing was necessary. Within days, Shalanda had an appointment for a phone interview with a board-certified genetic counselor.

Shalanda recalled the nearly hour-and-a-half phone call during which the counselor explained the process and asked in-depth questions about her life and family. "We talked about where I was born, the places I lived, my genealogy, my siblings, and any family health problems. Because I am adopted, I wasn't sure about some answers, but my counselor said it was okay to only answer as much as I knew. After the call, she referred me to an online assessment that asked many similar questions."



I can share my story and urge women to self-check or encourage anyone who feels that something is wrong to see their doctor right away. Because knowledge is power.

— Shalanda Little
(Above left with her daughter Tahara)

After a thorough analysis of her answers, the counselor reported that Shalanda was a good candidate for genetic blood testing. Shalanda returned to the Leever Cancer Center where a small sample of blood was collected and sent to the testing laboratory. After three anxious weeks, the call she was waiting for finally came. "It was a relief!" she exclaimed. "Out of the 30 genes they tested, 26 of them came back negative for a higher cancer risk. The remaining four genes tested 'inconclusive,' which meant it was impossible to determine the risk. They also were able to tell that my lineage originated all the way back into specific regions of Africa and Egypt!"

But the best news of all, she said, came from the two little words that summed up her risk of passing a breast cancer gene to her daughter. "BRCA-negative!" she exclaimed, laughing. "I got down on my knees and thanked God."

Six months later, Shalanda is thrilled to announce that she is cancer free, back to work, and enjoying every minute she can with her beloved daughter. She's also found a new purpose in life, she said: spreading the news about cancer prevention and screening among Connecticut's African-American community. "African-American women are the most likely to die from breast cancer in our state," she stated. "I think there's a lot of fear out there. Sometimes people don't want to know what is going on in their bodies because they are scared of the answer."

"But I think that's why God put me through this," she said, "so that I can share my story and urge women to self-check or encourage anyone who feels that something is wrong to see their doctor right away." "Because knowledge," she said, "is power."

ask the Doctors

*Dr. Michael Malin and
Dr. Andrew Lawson answer
your questions about
PET/CT diagnostic imaging.*



Dr. Michael Malin
Radiology
Naugatuck Valley
Radiology

Q My doctor recently scheduled me for a PET/CT scan, but I'm not exactly sure how it differs from other tests like an MRI or just a PET scan alone. Can you explain?

Dr. Malin: Positron Emission Tomography (PET) and Computed Tomography (CT) scans are both important tools physicians use to pinpoint diseases, including cancer. Traditionally, the two diagnostic tests have been performed separately to help physicians discover different sets of valuable information.

A PET scan, for example, can determine how your organs and tissues are functioning at a very early stage in a disease by measuring blood flow, metabolism, and oxygen use.

A CT scan, on the other hand, provides detailed information about the body's anatomy such as size, shape, and location. Similar to a CT scan, an MRI focuses mostly on the size and shape of organs and other body structures to discover structural abnormalities.

Thanks to new technology that's available at The Harold Leever Regional Cancer Center, we're now able to combine the benefits of both PET and CT scans into a single exam. The information that the combined PET/CT scan can provide is helpful to determine cancer staging and find the optimal treatment options for each patient. Before this technology was made available, we would have had to perform several tests and/or surgery to obtain that level of information.



Dr. Andrew Lawson
Radiology
Diagnostic Radiology
Associates

Q How does the PET/CT scan work? Will it hurt?

Dr. Lawson: Patients are injected with what is called a "radiopharmaceutical" – a radioactive form of glucose that allows doctors to image and measure how cells in the body metabolize, or use glucose, for fuel. It takes about an hour for the radiopharmaceutical to distribute throughout the body. At that time, the patient is asked to empty his/her bladder and lie still on the scanning bed for about 15 to 30 minutes as the scanner gathers images for analysis.

Other than the needle prick to administer the injection, the procedure is non-invasive and painless.

Another advantage of the PET/CT scan - much to the relief of those who suffer from claustrophobia - is that it is considerably more open than a traditional CT scan or MRI machine. Patients lie on a narrow table that glides through the giant doughnut-shaped machine. At no point is the patient fully enclosed.

Food for thought: Making the most of what you eat

By Karen Sabbath, MS, RD, CSO

Summer is here, and it seems like the perfect time to learn about how to maximize your food intake and lifestyle to lower your risk of cancer or cancer recurrence.

We've all seen ads for "miracle" supplements that supposedly prevent or cure cancer or for special foods and/or diets that make tumors "melt away." Many times, these claims are not based on sound clinical evidence, and people can end up spending a lot of money, with disappointing results. We don't know why many cancers originate or develop, or why cure rates vary. Does that mean you should throw up your hands and give up, leaving all to chance and fate? Absolutely not! There is so much you can do!

There is sound scientific data to show that populations who adhere to specific healthy nutrition and lifestyle guidelines have a lower overall incidence of various types of cancer. Following these recommendations does not ensure that you will be cancer free, but it does mean that you lower your risk. Think of the analogy of driving a car. If you maintain your car

with the recommended service and drive carefully at all times, you lower your risk of having a car accident, but it doesn't rule out the possibility of having something else happen (a pothole, an accident with a bad driver, or a flat tire). In order to lower your cancer risk, choose to be proactive by giving your body the best weapons to fight disease.

What are the guidelines?

According to the American Institute for Cancer Research, and as supported by the American Cancer Society:

1 Be as lean as possible without becoming underweight. Next to not smoking, maintaining a healthy weight is the most important thing you can do to reduce your risk of cancer. Body fat releases insulin, estrogen, and other hormones into your

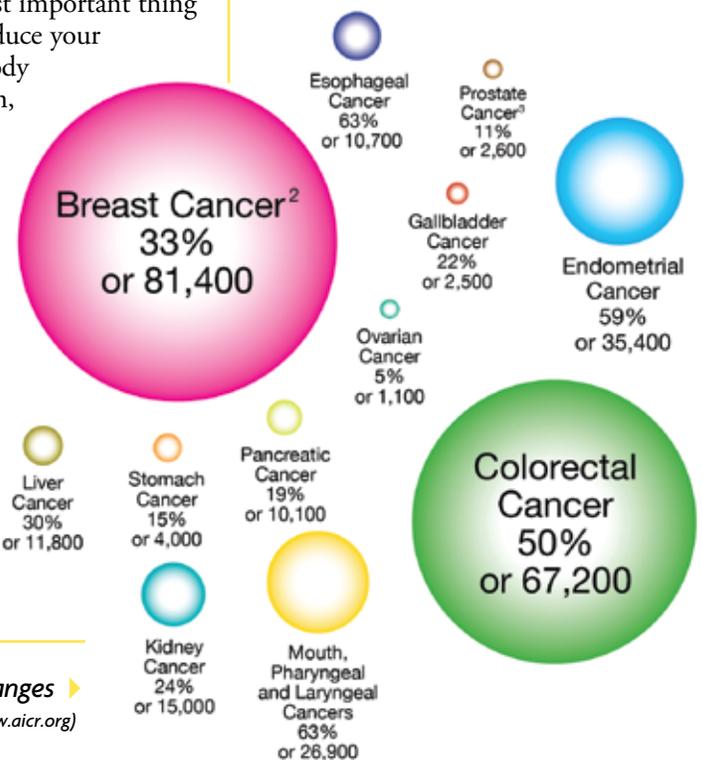
body that can be inflammatory and stimulate growth of cancer cells. Keep your BMI (body mass index) less than 25 or the best benefit.

2 Be physically active for at least 30 minutes every day, or 150 minutes a week. Limit sedentary activity. Any type of physical activity is great for reducing cancer risk and risk of other chronic diseases, plus it helps to prevent weight gain. No need to buy spandex and head to a fancy gym; go for a brisk walk in the fresh air! Regular activity keeps hormone levels in check. If you have a sedentary job, make sure you get up and walk around for a few minutes every hour.

3 Avoid sugary drinks and limit consumption of energy-dense foods. Energy-dense foods can be high in sugar and/or fat, and are

What can you do to lower your cancer risk?

According to the American Institute for Cancer Research (AICR), research in many peer-reviewed journals indicate that an estimated 340,000 cases of cancer in the United States could be prevented every year, simply by eating healthier, moving more and being a healthy weight. Studies among cancer survivors indicate that they may live longer by following the same healthy eating and lifestyle guidelines.



Cancer cases that could be prevented yearly with lifestyle changes ▶
Graphic reprinted with permission from the American Institute for Cancer Research (www.aicr.org)

SUNFLOWER CRUNCH SLAW

Ingredients:

For the Salad:

- 1 bag (approx. 4 cups) shredded cabbage or cole slaw mix
- 1 bag (approx. 2-3 cups) shredded red cabbage
- 2 cups shredded carrots
- 2 cups shredded romaine
- 1/2 cup chopped kale
- 4-6 scallions, sliced
- 1 cup roasted sunflower seeds

For the Dressing:

- 1 clove fresh garlic
- 1/2 cup chopped sweet onion
- 1/2 cup fresh orange juice
- 1/4 cup olive oil
- 1/4 cup apple cider vinegar
- 1/4 cup Dijon mustard
- 2 tbsp. honey
- 1/2 tsp. salt
- 1/2 tsp. ground pepper (optional)

Directions:

1. Add all of the salad ingredients in a large bowl.
2. To make the dressing, combine all ingredients in a blender or food processor.
3. About 20 minutes before serving, add dressing to salad.

Makes 8 servings
Adapted from Simple Roots

often high in “empty” calories, which can contribute to becoming overweight. Avoiding these foods helps to decrease cancer risk by preventing obesity. Better to choose fluids like water, unsweetened tea, and/or coffee. Natural fruit juice can be good for you, but keep your portions to a half cup or less, once a day. You can “stretch” the juice by diluting it with water.

4 Eat a variety of vegetables, fruits, whole grains, and legumes (beans).

Try to base your diet around plant foods, which are high in fiber and low in calories. They are also rich sources “phytochemicals” (nutrients from plants) and antioxidants that are natural “cell protectors,” preventing cell damage that can lead to cancer. When you plan your meal, aim to fill at least two thirds of your plate with vegetables, fruits, whole grains, and beans. Limit animal protein to one quarter to less than one-third of your plate.

5 Limit consumption of red meats (such as beef, pork, veal and lamb) and avoid processed meats.

There is convincing evidence that eating large amounts of red meat can result in colorectal cancer. Studies also show that consuming small amounts (less than 18 oz./week) may be safe. If you grill, avoid charring! Eating even small amounts of processed meat (ham, bacon, salami, hot dogs, and sausages) can increase cancer risk. Avoid any processed meats containing nitrates.

6 If consumed at all, limit alcoholic drinks

to two drinks per day for men and zero to one drink for women. Research shows that modest amounts of alcohol can have a protective effect against coronary heart disease. But for cancer prevention, alcohol can be a potent carcinogen. The best advice for reducing the risk of cancer is not to drink alcohol, or limit your

consumption! One drink = 5 oz. wine, 1½ oz. hard alcohol or 12 oz. beer.

7 Limit consumption of salty foods and foods processed with salt (sodium).

Salt and foods preserved in salt can increase the chance of developing stomach cancer. If you have hypertension (high blood pressure) or certain heart conditions, a high salt intake is discouraged. Sodium comes from salt as well as many additives and preservatives. Check the label: 1 teaspoon of salt has 2400 mg of sodium. Keep your daily intake under 2300 mg a day.

8 Don't rely on supplements to protect against cancer.

High dose supplements can affect the risk of some cancers. The best source of nutrients is from food and beverages, not dietary supplements. There are situations that warrant supplementation, for example if you have a documented vitamin deficiency or are at risk of a deficiency (as in the elderly or in women of child-bearing age).

Remember that vitamins and other supplements are medications and can interact with other prescription drugs or cancer treatments. If you are not sure, it's best to discuss your supplement use with your doctor or Registered Dietitian.

9 New mothers:

Try to breastfeed babies for up to 6 months and then add other liquids and foods.

Lastly, it goes without saying: do not smoke or chew tobacco.

For more detailed information, go to: aicr.org/can-prevent/what-you-can-do/10-recommendations.html.

So many people want a quick fix for lowering their risk of cancer, but the goal is for a long-term fix. Changing the way we eat, the amount we move, and how much we weigh provides the best defense for having a long and healthy life. And, as a bonus, these guidelines dovetail nicely with the new USDA/FDA 2015 – 20 Dietary Guidelines for Americans, which are aimed at preventing all chronic diseases. So begin today, and treat your body to the life and care it deserves.

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

Landmark Partnership with Japanese Companies

Early last fall, The Harold Leever Regional Cancer Center (HLRCC) became the first facility in the country to enter into a partnership with Japan-based Toshiba Medical Systems and Anzai Medical Co. to offer “4D respiratory gating” – an innovative tool in the fight against cancer.

HLRCC Executive Director Kevin Kniery explained that the integration of gating technology into its array of services enables the Center to provide pinpoint-accurate radiation therapy to patients who are being treated for lung and other cancers. “One of the universal challenges doctors have faced in providing radiation therapy to lung cancer patients is how to accurately treat tumors as they move with a patient’s breathing,” he said. “The traditional solution to that problem was to expand the treatment area to accommodate for movement. But by treating a wider region you’re also exposing a small amount of normal tissue to irradiation, which carries the potential of causing unnecessary side effects.”

The benefit of the 4D respiratory gating technology, he explained, is that it is able to detect and adjust the treatment for tumor motion as the patient breathes. “With such pinpoint delivery,” Kniery continued, “we’re able to significantly improve the accuracy of lung cancer treatment.”

“With such pinpoint delivery, we’re able to significantly improve the accuracy of lung cancer treatment.”
— Kevin Kniery

Six representatives from Toshiba Medical Systems and Anzai Medical Co. in Japan traveled to Waterbury last October to install the equipment and software and to provide training to the Leever staff. The 4D respiratory gating system is FDA-approved for use in the United States.



Above, left to right: Mr. Tomokazu Harada (Toshiba), Mr. Naoya Iwasaki (Anzai), Mr. Hirofumi Arai (Anzai), Dr. Douglas Housman (HLRCC), Ms. Gayle Crowley (HLRCC), Mr. Ian Crooks (HLRCC), Ms. April Nunn (HLRCC), Mr. Kevin Kniery (HLRCC), Dr. Di Zhang (Toshiba), Mr. Jim McCann (Toshiba).



Colorectal Cancer Awareness

This March, HLRCC presented two free educational programs in recognition of National Colorectal Cancer Awareness Month.

Speaker John Zhang, MD, PhD, a highly respected colorectal and general surgeon at Alliance Medical Group and Waterbury Hospital, shared his expertise on the topic of “Innovative Treatments for Colorectal Cancer & Diseases.” Dr. Zhang discussed current and upcoming trends in the treatment of colorectal cancer and other colorectal diseases.

J. Alexander Palesty, MD, FACS, and Iyare Esemuede, MD, of the Stanley J. Dudrick Department of Surgery at Saint Mary’s Hospital, presented “Screening, Prevention and Treatment Options for Colorectal Cancer.”

Drs. Palesty and Esemuede explained the latest screening options for detecting colorectal cancer, presented the newest treatment options, and explored how diet, family history, exercise, and other lifestyle choices factor into one’s risk of developing the disease.

Breast Cancer Myths Busted

In honor of National Breast Cancer Awareness Month in October, The Harold Leever Regional Cancer Center invited the public to its educational program, “Mythbusters in Breast Cancer.”

Area experts addressed common “myths” that are often part of the breast cancer conversation, including such topics as mastectomy vs. lumpectomy, chemotherapy and radiation concerns and side effects, breast MRIs and ultrasounds, and more.

Panelists included leading breast cancer specialists Dr. Jeffrey Bitterman, Dr. Eric Hyson, Dr. Scott Kurtzman, Dr. Rachel Must-Ettinger, Dr. Ellen Polokoff, Dr. Kert Sabbath, Dr. Robert Schwartz, Dr. Beth Sieling, Dr. Yeo Yang Shin, and Dr. Nicole Sookhan.



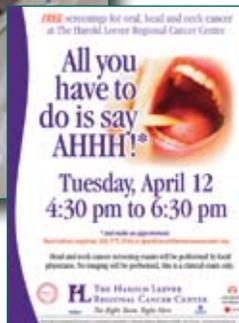
Above, left to right: Dr. Beth Sieling, Dr. Jeffrey Bitterman, Dr. Nicole Sookhan, Dr. Scott Kurtzman, Dr. Rachel Must-Ettinger, Dr. Eric Hyson, Dr. Ellen Polokoff and Dr. Robert Schwartz.



Above: Jaclyn Sylvia, PA and Dr. Joseph Ravalese, III.

Say ahhh...

Oral, Head and Neck Cancer Screening 2016



The Harold Leever Regional Cancer Center was pleased to host its fifth annual Oral, Head and Neck Cancer Screening event earlier this year.

During the no-cost, two-hour program, ten local physicians screened 103 people for cancers of the mouth, head, and neck. One patient was referred for immediate follow-up, 11 for additional evaluation, and the balance for routine future screenings. There was one other referral to another (not ENT) specialty. In this case it was a dental referral.

For information about future programs and screenings at The Harold Leever Regional Cancer Center, please visit leevercancercenter.org.

Event statistics 2014 – 2016	NUMBER OF PEOPLE SCREENED	NUMBER OF REFERRALS			
		For routine follow-up	For further head and neck evaluation	Suspected malignancies	Other referrals
APRIL 2016	103	90	11	1	1
APRIL 2015	81	56	19	0	6
APRIL 2014	131	96	30	5	0

Survivors Day 2015

Musician and Rare-Cancer Survivor Shares Musical Message of Hope

HLRCC was honored to host nationally touring singer/songwriter Charlie Lustman on our annual Survivors Day last November. Charlie, a rare-cancer survivor with a prosthetic jaw, began the day greeting Leever patients as they arrived for doctor visits and treatments and performed a private concert for each. "He completely made my day," said one patient. "Sometimes you just need that reminder to keep on fighting with a smile on your face."

At the annual Survivors Day celebration later that evening, Charlie shared his own cancer journey through song and electrified the spirits of the standing-room-only crowd. Although his story is a cancer survivor tale, his overall theme, he says, is universal: "Everyone I know is going through some kind of difficult life challenge. The idea is to 'FLIP IT,'" he says. "The power of the mind can create your reality. Just focus on the opposite of what it is you are upset about and possibilities open up immediately! Look at me! I lost my upper jaw to cancer and now I am living my dreams and singing better than ever before! You know, what doesn't kill you makes you sing better!"

After losing his upper jaw to osteosarcoma (bone cancer) in 2007, Charlie wrote and produced a collection of songs entitled *Made Me Nuclear*, a humorous and touching "one-man pop opera" chronicling his cancer journey from diagnosis and treatment to recovery. Since releasing the *Made Me Nuclear* soundtrack eight years ago, Charlie has brought his musical message of hope to theaters, cancer centers, health conferences, and survivorship events across America.



Want to be inspired by Charlie's music? Visit mademenuclear.com to listen!



Top, right: Charlie Lustman sings at the annual Survivors Day Celebration.

Below: Kevin Kniery, HLRCC Executive Director; Shaya Lustman and his father, Charlie Lustman; and Deborah Parkinson, HLRCC Operations Manager.



Countdown Begins to Launch of New Leever Website

New Site to Be Hub of Information and Inspiration

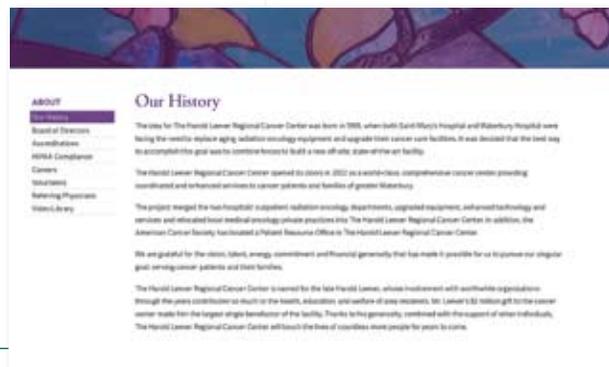
What's easy to use and chock full of valuable information, health tips, and more? It's our new website, coming this year! The interactive, easy-to-use website will offer plenty of features, including information and education on different types of cancers, complete physician profiles, an interactive event calendar, and lots more!

"The website was created with one main goal in mind: to empower patients and our community through education," said Deborah Parkinson, HLRCC Operations Manager. She explained that site visitors will find abundant and easy-to-understand resources to help them learn more about their cancer diagnoses, available treatment options, and cancer prevention news. The mobile-friendly site will also feature the Leever Blog, a regularly updated source of news and upcoming events.

Parkinson also noted that although HLRCC is about to make a huge leap in its digital evolution, its web address, leevercancercenter.org, will stay the same.



"Like" our Facebook page to be among the first to learn about our site launch and find out how you can be one of the 100 individuals to receive a Leever giveaway for signing up to receive our email and blog alerts.



Shine a Light presenter Dr. David Hill (middle) of Waterbury Pulmonary Associates with Dr. Jeffrey Bitterman (left) and Kevin Kniery, HLRCC Executive Director.

Waterbury "Shines a Light"

This past November, HLRCC was among 300 health care institutions who hosted a "Shine a Light on Lung Cancer" program in recognition of Lung Cancer Awareness Month.

Dr. David Hill of Waterbury Pulmonary Associates led a brief presentation that concluded with all attendees shining a (flash) light in honor of those who are fighting lung cancer and those who have lost their battle with the disease.

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.

With gratitude to:

The teachers and staff of **Driggs Elementary School** and **Wendell Cross Elementary School** in Waterbury who last October raised money to earn the opportunity to dress down and wear pink in support of Breast Cancer Awareness Month. We are grateful for the generous contribution.

Emma Bugnacki for recently organizing a lemonade and cookie stand at her house. Emma said that she was determined to raise money so that the Leever Cancer Center could “help someone in need.”

The **Women’s Golf Association of East Mountain** whose generous donation “fore” our patients and programs is greatly appreciated.

Orchid Florist who designated HLRCC as the beneficiary of its Charity in Bloom benefit. They donated 20 percent of the proceeds from a specially designed floral arrangement sold during the month of October to our center. We also thank Orchid Florist for brightening our lobby with gorgeous fresh flower displays the whole month long.

Boy Scout Troop 5 in Middlebury who sold flower bulbs through their “Be a Garden Angel” program. The bulbs were planted in community areas including the HLRCC gardens (below).



The **Watertown Police Department** for hosting a charity golf tournament last October at the Crestbrook Park Golf Course. The event raised an astounding \$22,000 for HLRCC’s Stepping Forward Cancer Survivorship Program. A special thank you goes to **Officers Christopher Paquin and Christopher Donston** (pictured above right) for their help in coordinating the event.

Our friend **Bernadette Schwartz** for coordinating donations from many of our donors to create “Thirty-One®” comfort care bags for the enjoyment of our patients.

The **Oak Tree Day Program** in Waterbury for decking our halls with an assortment of beautiful, handcrafted seasonal decorations.



Shelby Walton and the One Putt Golf Tour for hosting the Mike Franks Cancer Awareness Golf Tournament to benefit The Harold Leever Regional Cancer Center.

The **WATR Benefit Dance**, which featured the Rockin’ Heartbeats band. The sold-out dance held last February at the American Legion Hall in Oakville raised money for the Stepping Forward Survivorship Program at HLRCC.



Mrs. Karen Bailey for coordinating the successful Bevin Bell Fundraiser. Bells manufactured by CT-based Bevin Brothers Manufacturing Company (who also made the same bell featured in “It’s a Wonderful Life”) were sold during the holiday season to benefit the George I. Bailey Indigent Care Fund at HLRCC.

Junior Girl Scout Troop 64006 of Southbury for making and delivering 25 comfort bags and inspirational cards for our patients. The Scouts (below) are currently working toward achieving their Bronze Award and had many excellent questions for our staff as they toured the HLRCC facility.



PET/CT IMAGING: *The Future is Now*

PET/CT (Positron Emission Tomography/Computerized Tomography) is a unique, state-of-the-art diagnostic tool that helps physicians effectively pinpoint the source of cancer.

A non-invasive test, this powerful tool combines metabolic and anatomic imaging, providing a more complete picture and making it easier for your doctor to diagnose problems, determine the extent of disease, prescribe treatment, and track progress. The Harold Leever Regional Cancer Center is widely recognized as a leader in the use of PET/CT scan technology.

To find out more about PET/CT scans at HLRCC, call us at (203) 575-5501, or visit us online at leevercancercenter.org.



The Right Team. Right Here.



We are immensely grateful for the generosity of our donors!

You can now donate to The Harold Leever Regional Cancer Center online.

Please go to our website, leevercc.org, use the “Donate here” button on the home page, and donate online on the “Giving Opportunities” page.

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@leevercancercenter.org

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Community Events and Monthly Support Groups

SPRING/SUMMER

UPCOMING EVENTS



**AMERICAN CANCER SOCIETY'S
RELAY FOR LIFE OF GREATER WATERBURY:**

Saturday, June 4 - Sunday, June 5
Frisbie Elementary School, Wolcott

CT CHALLENGE: Saturday, July 30 Fundraiser for Stepping Forward Survivorship Program. Contact team captain Deborah Parkinson at dparkinson@leevecancercenter.org.

MAKING STRIDES AGAINST BREAST CANCER:
Sunday, October 23, 1 PM Library Park, Waterbury

EVERYONE LOVES A QUITTER!

FREEDOM FROM SMOKING: An 8-week smoking cessation series. Please call Sandra Micalizzi at 203-575-5573 for information on the start of the next series.

Classes will be facilitated by Sandra Micalizzi, APRN, CDE, Heart Center of Greater Waterbury Outreach Nurse.



ACTIVATE THE CURE: Interdenominational prayer gathering, weekly, Thursday, 9 AM – 10 AM, contact Joellen Putnam at 203-213-6495

AMERICAN CANCER SOCIETY: LOOK GOOD, FEEL BETTER!: monthly, 1st Tuesday, 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

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

ART THERAPY: monthly, 2nd and 4th Friday, 2 PM, contact Deborah Parkinson: 203-575-5564

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

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

CANCER CAREGIVER SUPPORT GROUP: monthly, 3rd Monday, 12 PM – 1 PM, contact Melissa Seres, MSW: 203-575-5511

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

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

ENERGY THERAPY: Tuesdays and Wednesdays, contact Melissa Seres, MSW: 203-575-5511

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

JOURNALING: A WAY TO HEAL FROM YOUR CANCER EXPERIENCE: Friday, 10 AM – 11:30 AM, contact Bob Devito: 203-910-3107

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

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

WATERBURY AREA OSTOMY SUPPORT GROUP: monthly, 1st Monday, 6:30 PM – 8:30 PM, contact Don Grocki: 203-695-3340

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

Call contact person to confirm that group is as scheduled. Meeting times may be rescheduled to accommodate holidays or special meetings. See leevecancercenter.org for ongoing events.