

Early Detection Saves Lives

THE SECOND MOST COMMON CAUSE OF CANCER DEATH IN THE UNITED STATES IS ALSO THE MOST PREVENTABLE. This was the message driven home by Dr. J. Alexander Palesty, Assistant Director of the surgery program at Saint Mary's Hospital, and Dr. Kert Sabbath, Leever Cancer Center Medical Oncologist, during a recent CancerAware program entitled "What You Need to Know About Colon Cancer." Sponsored by The Harold Leever Regional Cancer Center, CancerAware programs are free and open to the public.

Almost all colon cancers start out as slow-growing, benign polyps in the outer lining of the large intestine. Removing polyps before they become cancerous is quick, painless and part of a routine colonoscopy, recommended for all adults over the age of 50 and those under age 50 with certain risk factors.

"Colon cancer is a whole lot easier to prevent than to treat," explained Dr. Sabbath. "It is much easier to have a polyp removed than to have surgery and chemotherapy. And, in this case, an ounce of prevention is worth several pounds of cure."

One- and five-year colon cancer survival rates have increased in each decade since 1971, due largely to improvements in both screening methods and care and treatment options. The best screening tool available today is the colonoscopy. Colonoscopies allow doctors to not only get a clear and accurate picture of the inside of the colon, but to biopsy and remove polyps found during the procedure.

"Ninety-five percent of colorectal cancers occur in people over the age of 50," noted Dr. Palesty. "For people with no additional risk factors, then, it is recommended that they begin routine screenings at their 50th birthday."

And while many people are uncomfortable with the idea of a colonoscopy, Dr. Palesty explained that the procedure's pros far outweigh the cons.

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Dr. Kert Sabbath (left) and Dr. J. Alexander Palesty shared the latest information about colon cancer screening and treatment during a CancerAware program at the Leever Cancer Center.

"...an ounce of prevention is worth several pounds of cure."

— Dr. Kert Sabbath

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Early Detection...

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“Colonoscopies are low risk. There is minimal discomfort and virtually no recovery time. The worst part is the prep, and even that has improved dramatically.”

Individuals with an increased risk of developing colorectal cancer, including a predisposition to grow polyps or a family history of the disease, should speak with their doctor about the appropriate screening schedule.

The American Cancer Society's "Polyp Man" is part of an awareness campaign reminding us that we can prevent colon cancer by stopping polyps before they turn to cancer.



- ▶ Colorectal cancer is the second leading cause of cancer-related deaths in the U.S., affecting both men and women equally.
- ▶ Colorectal cancer can be prevented: Precancerous polyps can be both detected and removed during a routine colonoscopy.
- ▶ The American Cancer Society recommends regular colorectal cancer screenings for both men and women with no known risk factors beginning at age 50.
- ▶ People with a family history of colorectal polyps or cancer should talk to their doctor about scheduling screenings at an earlier age and with greater frequency.
- ▶ Many insurance plans, including Medicare, help pay for colorectal cancer screening.
- ▶ A healthy lifestyle can reduce your risk of developing colorectal cancer. Eat plenty of fruits and vegetables, cut back on processed and red meats, and get plenty of exercise.

ask the Doctor



Radiation Oncologist Dr. Jeffrey Bitterman answers your questions about skin cancer.

THE FACTS ABOUT SKIN CANCER

With summer just around the corner, it is time to start thinking about protecting your skin from the dangers of the sun.

Q How common is skin cancer?

A Skin cancer is the most common of all cancers. Melanoma accounts for less than 5% of skin cancer cases, but causes most skin cancer deaths.

Q What is melanoma?

A Melanoma is a cancer that starts in the melanocytes, a type of cell found in the epidermis, or outer layer of skin. Too much exposure to UV radiation is thought to be the biggest risk factor for most melanomas. The main source of UV radiation is sunlight, both natural and the artificial sunlight found in tanning booths and beds.

Q Are there other risk factors besides the sun?

A Moles are benign skin tumors. Certain types of moles increase the risk of getting melanoma. People with many moles are more likely to develop melanoma, as are those with fair skin, men, older individuals, and those with a close relative who has had melanoma.

Q What about other skin cancers?

A Most other skin cancers are grouped together as non-melanoma skin cancers. These cancers include basal cell and squamous cell cancers. They are much more common skin cancers, but because they rarely spread, they are generally more manageable.

Q What is the best way to protect against skin cancer?

A The best defense against skin cancer is good protection from the sun. The American Cancer Society recommends that you wear a hat and protective clothing in the sun, and use a sunscreen with a minimum SPF of 15. Avoid being outdoors between 10 AM and 4 PM, when the sun's rays are the strongest. Since most skin cancers are curable when caught early, do regular self-exams, and note any changes in moles, freckles or skin tone.



The ABCDEs of Melanoma

Consult a dermatologist if any of your moles or pigmented spots exhibit:

ASYMMETRY: one half is unlike the other half.

BORDERS that are irregular or poorly defined.

COLOR variations from one area to another.

DIAMETER larger than the size of a pencil eraser.

EVOLUTION: a change in size, shape, or characteristics.



Janice Knob, RN, CRN, Breast Health Navigator

HLRCC Welcomes Janice Knob, RN, CRN, Breast Health Navigator

Coping with breast cancer can be difficult; we want to make it a little easier. To help guide patients and their families through the course of

breast cancer care, The Harold Leever Regional Cancer Center has added the position of Breast Health Navigator to our professional team. We are pleased to welcome Janice Knob, RN, CRN, to that post.

Janice comes to the Leever Cancer Center with 30 years of professional nursing experience. Janice began her career as a critical care nurse, working in emergency rooms and intensive care units. She continued her education and professional development with a move to an interventional radiology unit at a regional hospital with a dedicated cancer center, where she remained for more than 20 years. During that time, Janice became certified in radiology nursing and routinely assisted practitioners with advanced cancer therapies, including radiofrequency ablation and directed tumor therapy.

“My experience will be important in developing the Breast Health Navigator position,” Janice Knob explained. “I have assisted with hundreds of biopsies and extensive breast imaging, as well as many progressive treatment procedures.”

Beyond her extensive experience and technical expertise, Janice brings something even more important to her new position: compassion.

“Janice brings a warm, human touch to the guidance and support she provides,” notes Deborah Parkinson, Operations Manager at the Leever Cancer Center. “She is an excellent communicator, which is so important to our patients, who can sometimes be overwhelmed by all the information that comes with a cancer diagnosis. And she is always ready with a hug that can say so much – understanding, support, warmth, and compassion.”

Janice’s role is to serve as an expert and guide for our patients in all aspects of their breast care. In addition to the responsibilities traditionally associated with the role of the Breast Health Navigator (see box at right), Janice will also coordinate our bi-monthly multidisciplinary breast health conferences and our Breast Cancer Awareness Month activities. She will be instrumental in our efforts to earn accreditation through the National Accreditation Program for Breast Centers (NAPBC). The NAPBC accreditation process is rigorous; accreditation is granted only to those centers that demonstrate a sustained commitment to providing the best possible care to patients with diseases of the breast. For more information, contact Janice at 203-575-5504, jknob@leevecancercenter.org.

Breast Health Navigators guide patients and their families through the health care system in many ways, including:

- ▶ Serve as point of contact for patient, family and other caregivers starting at time of diagnosis
- ▶ Serve as patient advocate in multidisciplinary conference case discussions
- ▶ Collect and track necessary data for NAPBC accreditation
- ▶ Monitor and report on outcomes measures
- ▶ Evaluate each patient’s medical and socioeconomic needs to prevent problems and overcome barriers to treatment
- ▶ Educate patient and family about the disease, treatment and potential side effects
- ▶ Refer patient to other services (e.g., social work, nutrition, financial support) and community resources (e.g., patient support groups, transportation) as needed
- ▶ Help eligible patients access appropriate clinical trials
- ▶ Promote community education and increase prevention awareness and early-detection screening programs



Can the Right Lifestyle Prevent Colon Cancer?

IF SOMEONE TOLD YOU THAT THERE WERE STEPS YOU COULD TAKE TO POSSIBLY REDUCE YOUR RISK OF COLON CANCER OR ITS RECURRENCE, WOULD YOU TRY THEM?

According to a recent Expert Report released by the American Institute of Cancer Research (AICR), which analyzed risk factors as they relate to cancer incidence, colon cancer was associated with more dietary and behavioral risk factors than any of the 17 other cancers studied. Since March was Colorectal Cancer Awareness Month, it seems appropriate to take a look at how we can make changes in our lives to reduce the risk of this often preventable disease.



Factors that may INCREASE risk:

Obesity

If you are carrying around a lot of extra weight, particularly in the midsection, your risk is increased, especially if you are a woman. In fact, obesity may be more of a risk factor than smoking, age or family history, according to researchers at Stony Brook University Medical Center in New York. Exact reasons are not known, but theories include insulin resistance, excessive hormone



production associated with fatty tissue and increased inflammation.

Diets high in red and processed meat

It is unclear exactly **why** red and processed meats increase risk, but theories range from their high fat content, to the techniques and chemical preservatives used to manufacture them, to the idea that people who consume lots of meats and sandwich meats (salami, bologna, bacon, etc.) eat fewer plant foods. A **maximum** of 18 ounces of red meat (beef, pork, lamb) per week is recommended, with minimal or no processed meats.

Frequent consumption of alcohol

Although some alcohol may be good for your heart, there is evidence that suggests that too much can be one of the causes of colorectal cancer in men and women. If you are interested in decreasing your risk, limit your alcohol to one drink or less a day for women and two drinks or less a day for men. One drink equals five ounces of wine or 1.5 ounces of hard alcohol.

Factors that may DECREASE risk or provide some protection:

Exercise

Turn off the television, put on your

sneakers

and go walking!

It appears that all forms of physical activity protect against colon cancer as well as post-menopausal breast and endometrial cancers in women. According to the AICR report, strive for 30 minutes of brisk walking a day and increase, if possible, to 60 minutes of moderate or 30 minutes of vigorous activity.

High-fiber diets containing vegetables, whole grains and beans

Research is showing that eating a plant-based diet rich in fruits, vegetables, fiber, whole grains and plant sources of protein (e.g., beans, legumes) can have a protective effect on many cancers, including lung, prostate and cancers of the digestive tract. These foods are loaded with “phytochemicals,” which are naturally occurring substances in foods that help our bodies prevent DNA damage, a possible cause of cancer.

Calcium supplements

Calcium supplements such as calcium carbonate appear to lower the risk of colorectal polyps, which in turn can

lower your risk of developing colon cancer. This preventive effect was most noticeable for those who combined the use of calcium WITH a healthy low-fat, high-fiber diet.

Adequate vitamin D

In addition to these recommendations, there is ongoing research on the role of vitamin D, also known as the sunshine vitamin, and cancer prevention. Data collected at the Harvard School of Public Health observed that men with the lowest vitamin D levels were more likely to be diagnosed with colon cancer. There are some researchers who feel that raising vitamin D levels may prevent up to two-thirds of colorectal cancers in the United States. Vitamin D may also play a role in the prevention of breast and prostate cancer. In the meantime, many experts are recommending supplementation of 1000-2000 IU's of Vitamin D-3 a day, and/or 15 minutes of exposure to sunlight. Your doctor can check your vitamin D level to determine if you may require supplementation. Check with your doctor before you begin using any vitamins.

In summary, the recommendations for colon cancer prevention include:

- ▶ Eat a plant-based diet that includes plenty of vegetables and fruits (9+ servings/day)
1 serving = 1/2 cup cooked, 1 cup raw or 1 medium piece of fruit
- ▶ Exercise regularly
- ▶ Maintain a healthy body weight
- ▶ Eat more fiber from all high-fiber foods including whole grains, legumes (starchy beans), vegetables, fruit, nuts and seeds, cereals and flaxseeds
- ▶ Avoid all tobacco products
- ▶ Use alcohol in moderation
- ▶ Undergo colon cancer screening as appropriate

For additional information, including menus and recipes, visit any of these websites:

- ▶ www.caring4cancer.com/go/cancer/nutrition
- ▶ www.aicr.org (American Institute for Cancer Research)
- ▶ www.cancer.org (American Cancer Society)



If you have nutrition questions that you would like answered, contact our nutritionist.

Karen Sabbath, MS, RD
203-575-5510
ksabbath@leeevercancercenter.org

WILD RICE SALAD

Ingredients:

- 4 cups chicken broth
- 1 cup long grain white rice (brown rice, a whole grain, can be substituted, but must be cooked separately due to longer cooking time)
- 1/2 cup wild rice
- 1/2 cup pine nuts
- 4 stalks celery, chopped
- 1/4 cup olive oil
- 1 tsp. sugar
- 2 Tbsp. red wine vinegar
- 2 Tbsp. dark sesame oil
- 8 green onions, sliced
- 2 cups thawed frozen peas
- 3/4 cup dried cranberries
- Salt and pepper

1. Put the chicken broth in a medium-sized pot. Add the rice and wild rice, bring to a boil, reduce heat to low, cover. Let cook for 40 minutes. Remove from heat and cool completely.
2. Heat a small skillet on medium high heat. Add the pine nuts. Cook, stirring frequently, until lightly toasted. Remove from pan and cool. You can also purchase toasted pine nuts.
3. Whisk together olive oil, red wine vinegar, sugar and sesame oil.
4. In a large bowl, gently mix together the cooled cooked rice, chopped celery, green onions, peas, dried cranberries, pine nuts and olive oil mixture. Add salt and pepper to taste, if needed.
6. Chill completely before serving.

Serves 8 - 10

WHEATBERRY & BARLEY SALAD

Ingredients:

- 1/2 tsp. salt
- 1 cup wheatberries
- 1 cup pearl barley
- 1 small red onion, chopped fine
- 2 garlic cloves, minced
- 1/4 cup extra virgin olive oil
- 1/2 cup balsamic vinegar
- 2 scallions, chopped fine (white and green portions)
- 1-1/2 cups cooked or frozen corn
- 1/2 pound smoked mozzarella cheese, diced fine
- 1 pint (or more) cherry or grape tomatoes, halved
- 1/2 cup chopped fresh chives
- 1/2 cup chopped fresh parsley
- Salt and pepper to taste

1. Fill a large pot with water, add salt and bring to a boil.
2. Stir in wheatberries and cook at a slow boil for 30 minutes.
3. Stir in barley and continue cooking at a slow boil for 40-45 minutes until grains are tender.
4. While grains are cooking, combine onion, garlic, oil and vinegar in a large bowl.
5. Drain the grains well and add to the onion mixture. Toss well and cool.
6. When cool, add scallions, corn, mozzarella, tomatoes, chives, parsley, salt and pepper. Refrigerate.
7. Best made a day ahead to allow the flavors to develop. Bring to room temperature before serving.

Serves 8 as a main dish, 10 - 12 as a side dish

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.

The American Cancer Society and the Leever Cancer Center: Vision and Legacy

AS A BUSINESS WOMAN AND PHILANTHROPIST, MARGARET M. HALLDEN WAS A LEADER, A VISIONARY, AND A PIONEER. She shaped her vision into a legacy through a bequest to the Connecticut Community Foundation that funds programs and services through the American Cancer Society on site at The Harold Leever Regional Cancer Center.

Founded in 1923 as the Waterbury Foundation, the Connecticut Community Foundation was the first community foundation in the state. Today, the Connecticut Community Foundation's service area covers 21 towns in Greater Waterbury and the Litchfield Hills.

The Foundation administers more than 380 charitable funds and private foundations established by local donors, including the Margaret M. Hallden Fund.

The Hallden Fund is the second largest fund under the stewardship of the Connecticut Community Foundation, and awards funds annually and in equal part to both the American Cancer Society and the American Heart Association. In establishing the fund, Margaret M. Hallden hoped to support activities and services above and beyond what was already available to the Greater Waterbury community through the American Cancer Society. The arrival of The Harold Leever Regional Cancer Center provided a unique and fitting opportunity to move that initiative forward.

"We worked with the American Cancer Society to assess the most effective ways to bring additional services to our community based on proven delivery models," explained Carol O'Donnell, Associate CEO at the Connecticut Community Foundation. "The opening of the Leever Cancer Center was pivotal in that it provided a tremendous opportunity to consider new ways for meeting the wide range of patient needs. The Patient Resource Center model was chosen because it added

the most value, serving as a highly visible connection to services for patients and their families. Mrs. Hallden would have been pleased to know her legacy lives on through the services of the Leever Patient Resource Center."

Today, the American Cancer Society Patient Resource Center at The Harold Leever Regional Cancer Center offers patients and their families a comprehensive range of support services, including transportation to and from appointments, educational programs, and health management resources.

"Mrs. Hallden would have been pleased to know her legacy lives on through the services of the Leever Patient Resource Center."

— Carol O'Donnell

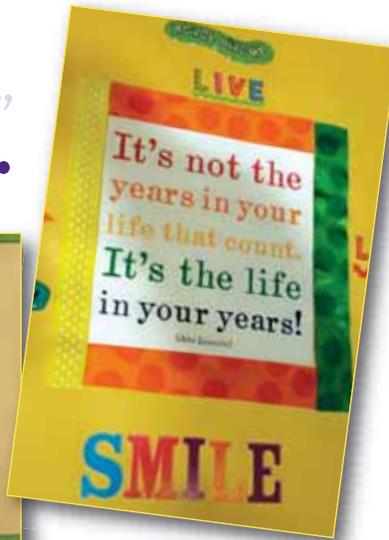
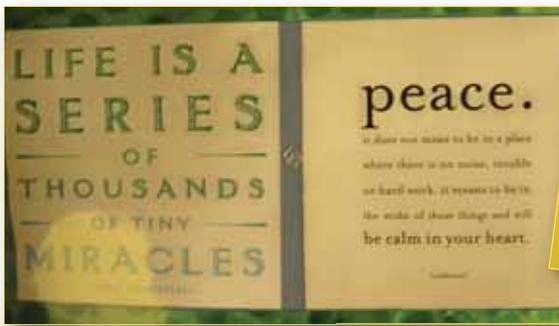
Thanks to the Hallden Fund and the Connecticut Community Foundation, American Cancer Society programs are free to Leever Cancer Center patients and their caregivers. For more information, contact the American Cancer Society at 203.756.8888, visit their website at www.cancer.org or call the Leever Cancer Center at 203.575.5555, www.leevercancercenter.org. To learn more about the Connecticut Community Foundation, visit their website at www.conncf.org.



(From left) ACS Community Relationship Manager Jessica Tynan-Lynch and volunteer Claudia Vaudreuil provide resources and support through the ACS presence at the Leever Cancer Center, supported by the Margaret M. Hallden Fund.

Hope, Joy, and Inspiration: Sami Albert wanted to bring hope, joy and inspiration to cancer patients through her Bat Mitzvah project. The result? A scrapbook that is warming hearts and brightening the lobby of The Harold Leever Regional Cancer Center. The book is filled with brightly colored pages featuring messages of encouragement, from simple words – like “smile” – to famous quotes from the likes of Gandhi, Abraham Lincoln, and the one featured here by Robert Frost. The book also includes blank pages where HLRCC visitors are encouraged to add their own words of comfort and support.

“The best way out is always through.”
Robert Frost



Circle of Hope Continues to Give: With the retirement of founder and president **Jeanne Tassis**, the **Circle of Hope Lymphedema Foundation** will limit its presence in the community. To continue its mission, the Foundation has generously gifted the Leever Cancer Center with a grant for the purchase of lymphedema compression garments. Those in need may apply for funding through the Leever Cancer Center. For more information, call Deborah Parkinson at 203.575.5564.

Our sincere thanks and deep appreciation to:

Brothers with Bikes and Street Runners: President Ted Brown and Norman Andrews recently presented HLRCC with a generous donation honoring cancer patients.

Curves of Bethlehem: Curves chose HLRCC as the beneficiary of their recent 50/50 raffle. Both raffle drawer and winner are breast cancer survivors.

Cousins Samantha and Kaitlyn made cards for HLRCC visitors during the fall holiday season.

Caitlin Cipriano, 11, Kathryn McDuff, 11, and Lauren McDuff, 7, made cheerful cards on display in the **Leever Cancer Center lobby.**

The VFW Junior Girls from Prospect Post #8075 coordinated a community effort to make fleece scarves for HLRCC. President **Alyssa Gaskin, 14,** and Treasurer **Sarah King, 10,** recently delivered 35 scarves to us.

Julie Moore of Wolcott continues to deliver baskets of beautiful, handcrafted jewelry — gifts for HLRCC patients.

The Best Doctors Are Right Here. And Also In Connecticut Magazine.

Every year *Connecticut Magazine* surveys physicians around the state to find out whom they would send their loved ones to for the very best medical care. This year four physicians who call The Harold Leever Regional Cancer Center home earned top marks in the Oncology and Hematology category. Congratulations to (clockwise from top left): Dr. Joseph J. Bowen, Dr. Kert D. Sabbath, Dr. Victor A. Chang, and Dr. Joseph G. Sinning.



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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Free Wi-Fi is now available
in most public areas at
the Leever Cancer Center!

CT Challenge: Cycling for Cancer Survivors

Join Team Leever on **Saturday, July 24** as we take to the streets for cancer survivors. Participants may ride a 12-, 25-, 50-, 75- or 100-mile course to raise money and awareness for survivorship programs and resources throughout the state of Connecticut. Since 2005, the CT Challenge has provided grants to support survivorship programs at a number of area hospitals; The Harold Leever Regional Cancer Center recently received a \$5,000 grant to help establish its own survivorship program.

We invite all interested cyclists, volunteers, and donors to support Team Leever and the CT Challenge. Fifty percent of all the funds we raise will directly benefit the Leever Cancer Center. **For more information, call Deborah Parkinson at 203-575-5555, or visit bike.ctchallenge.org.**



Executive Director Kevin Kniery (left) recently accepted a grant of \$5,000 from CT Challenge Survivor Advisory Board member Michael Daly. The funds will help establish a survivorship program at the Leever Cancer Center.

Community Events & Monthly Support Groups

JOURNALING: A WAY TO HEAL FROM YOUR CANCER EXPERIENCE: 6-WEEK SERIES!

Fridays, May 7 – June 11, 10:00 AM – 11:30 AM. The act of writing can help improve the spirit, thus enhancing the quality of life. Contact Melissa Seres, MSW: 203-575-5511

ART THERAPY: Wednesdays, May 26 – July 21, 10:30 AM – 12:30 PM.

Prior experience not required, contact Melissa Seres, MSW: 203-575-5511

BEANS AND GREENS FREE COOKING CLASS: Thursday, June 3, 11:30 AM – 1:00 PM.

Karen Sabbath, MS, RD, will show you how to incorporate nutritious beans and greens into appetizers, salads and main course meals. Space is limited, call to reserve: 203-575-5555

THE AMERICAN CANCER SOCIETY'S GREATER WATERBURY RELAY FOR LIFE:

June 5 – 6, Crosby High School, Waterbury. For more information, call the ACS at 203-756-8888 or visit www.cancer.org

CARING KIDS PROGRAM AND FAMILY NIGHT: Call Melissa Seres, MSW, at 203-575-5511 for dates and information

THYROID CANCER SUPPORT GROUP: monthly, last Tuesday, 6 PM – 7 PM, contact Dot Torretta at 203-753-8833 x366

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

BRAVE AT HEART BREAST CANCER SUPPORT GROUP: monthly, 2nd Wednesday, 7 PM – 9 PM, contact Anne Pringle at 203-910-7582

CT MULTIPLE MYELOMA FIGHTERS SUPPORT GROUP: monthly, 3rd Tuesday, 6 PM – 8 PM, contact Robin Tuohy at 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 at 203-575-5511

BETTER BREATHING CLUB: monthly, 3rd Friday, 1 PM, contact Rachel Kirchner at 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, 7 PM – 9 PM, contact Ursula Daiber at 860-274-4601

Please call contact person to confirm that group is running as scheduled.
Meeting times may be rescheduled to accommodate holidays or special meetings.
See www.leevercancercenter.org for ongoing community events.