



Above: PET/CT Technologist performing PET/CT Scan.

Left: Actual PET/CT image.

Bottom: PET/CT Technologist positioning the patient for the scan.



PET/CT scans improve cancer care and outcomes

Medicare/Medicaid expands coverage of PET/CT scans

The Leever Cancer Center is one of the few unique facilities in Connecticut with a dedicated PET/CT center in a radiation oncology unit. In fact, we were the first PET/CT facility of its kind anywhere in the state. And while other PET/CT facilities rely on cramped mobile units housed in portable, temporary structures, Leever offers a spacious permanent brick and mortar PET/CT Imaging Center.

Individually, Positron Emission Tomography (PET) and Computerized Tomography (CT) are highly precise imaging tools however, when combined, they provide the most detailed image of a patient's internal anatomy and tumor location. PET scans can detect the "high" metabolic signal of actively growing cancer cells in the body, while CT scans detect structural changes in the body caused by the growth of tumor cells. With this full-body scan, physicians can pinpoint the exact location, size and shape of the diseased tissue or tumor. PET/CT scan allows for earlier diagnosis, more accurate staging, and the most precise treatment, and can monitor the effects of treatment.

PET/CT scans offer our patients significant benefits. The combined PET/CT scan can provide more information for your doctor in a shorter period of time. This means greater comfort for the patient with less time spent doing the scan.

For physicians, PET/CT scans offer improved diagnostic confidence through access to more comprehensive information: One exam can tell your doctor precisely where a tumor is located, how large it is, whether or not it is spreading, and even if therapy is working. This non-invasive way to study tumors is now used to detect and stage colorectal, lung, melanoma, lymphoma, head and neck, breast and esophageal cancers, as well as recurrent brain tumors.

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PET/CT Scans improve...

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“A PET/CT image offers unique information about the exact location and metabolic status of a tumor,” explained HLRCC Radiation Oncologist Dr. Joseph Ravalese III. “This information allows us to target cancer treatments with even greater precision.”

The Centers for Medicare and Medicaid Services (CMS) now approve initial PET/CT scans for all types of solid tumors (with the exception of prostate cancer) that are either biopsy proven or strongly suspected based on other diagnostic testing. CMS recognized the value of PET/CT images by expanding coverage to include new indications. To be clinically indicated, the scan must be potentially beneficial in providing information supportive of a diagnosis or monitoring certain conditions. CMS will continue to cover PET/CT scans as part of a subsequent treatment strategy for the following indications: breast, cervical, colorectal, esophageal, head and neck, lymphoma, non-small cell lung, ovarian, melanoma, myeloma and thyroid.

For those cancers not on the subsequent treatment strategy list, patients may turn to a Coverage with Evidence Development (CED) program. The best known CED is the National Oncologic PET Registry (NOPR). Medicare reimbursement for these cancers may now be available if the patient's referring physician and the provider submit data to the NOPR to assess the impact of PET on the patient's overall treatment plan.

The Harold Leever PET/CT Imaging Center is open Monday through Friday, 7:30 a.m. until 5:00 p.m. Appointments are generally available the same week they are requested; most results are available within 24 hours. For more information, call us at 203-575-5501, or visit www.leeverpet.com.



Call 203-575-5564 for your copy of the patient's information guide "What Do I Need to Know About PET/CT?"

ask the Doctor



Radiation Oncologist Dr. Joseph Ravalese III answers your questions about radiation treatment at The Harold Leever Regional Cancer Center.

Q What is Intensity Modulated Radiation Therapy (IMRT)?

A Radiation therapy, also known as radiotherapy or radiation oncology, uses ionizing radiation to kill cancer cells. The radiation is delivered through a sophisticated process called IMRT, or Intensity Modulated Radiation Therapy.

Q How does IMRT work?

A IMRT is an advanced, highly precise system of delivering radiation therapy. IMRT uses computer-controlled x-ray accelerators to deliver targeted radiation doses to malignant tumors. IMRT allows the radiation dose to conform most precisely to the three-dimensional shape of a tumor by modulating – or controlling – the intensity of the radiation beam. That is, higher radiation doses can be directed to areas within a tumor, while the dose reaching surrounding, healthy structures can be minimized. As such, IMRT provides better tumor targeting, more tissue sparing, and improved treatment outcomes. At the Leever Cancer Center, IMRT is one of the components of our new Synergy system, the most advanced radiotherapy system available in the world today.

Q I understand that Synergy is the most advanced radiation delivery system, but how do I know that the radiation treatment plan my doctor prescribes is the right plan for me and the best plan for my particular condition?

A While the radiation oncologists at the Leever Cancer Center are among the very best team of medical professionals in their field, they also have access to some of the very best planning tools in the business. One of the tools HLRCC physicians use in developing radiation treatment plans is the IKOE system. The IKOE system allows Leever clinicians to access a database built by radiation oncology experts from all over the world. The database is filled with highly detailed templates of actual patient cases and their corresponding treatment plans. The team at Leever can compare their treatment plans with those developed by a worldwide network of experts treating identical cases; the Leever Cancer Center is the only IKOE site in the State of Connecticut.

Q How does the IKOE system work?

A There is a central computer server at HLRCC that contains unique IKOE software and a database of completed contoured and planned expert approved cases. Leever clinicians begin by capturing a simulated CT image of their patient, and upload it to the IKOE system. Using an advanced series of algorithms and technological matching methodologies, the IKOE software searches the database for images that match the contours and locations of the tumor contained in that image. With their case matched to one of hundreds of expert cases from places like New York's Memorial Sloan-Kettering Hospital and the University of Texas M.D. Anderson Cancer Center, the Leever physician can compare their treatment plans to those used in the expert cases. IKOE ensures that every patient receives the most advanced, proven and consistent treatment plan available for their individual condition.

A Warm Welcome

Chances are the first person you'll meet when you enter the Leever Cancer Center is behind the front window.

"The front office team is the face of The Harold Leever Regional Cancer Center," explained Deborah Parkinson, HLRCC Operations Manager. "They are our hub, and the source of the first impression most people have of the Leever Cancer Center."

Because the front office team is the best in the business, that impression is a favorable one: patient satisfaction surveys almost always single out the front office team for praise.

"Our job is so much more than greeting patients and letting the medical team know they have arrived for their appointment," revealed Front Office Supervisor Dianne Bedard. "We want to put people at ease and make their visit as comfortable as possible."

Making each visit a comfortable one begins when the front office team calls patients to remind them of their scheduled appointments.

"We try to speak directly to each person; we don't like to leave messages," Dianne Bedard explained. "We identify ourselves using the physician's name they'll be seeing, and leave the scary words 'Cancer Center' out of it."

"We want to put people at ease and make their visit as comfortable as possible."

— Dianne Bedard
Front Office Supervisor

When visitors arrive, they are greeted with a friendly face, a warm voice, and an understanding team. The front office staff has worked to streamline and simplify the paperwork upfront, and to effectively gauge each visitor's comfort level not only when they arrive, but as they sit in the waiting area.

"We try to listen and be aware. If we see someone uncomfortable in the waiting area or someone appearing overly anxious, we might ask if they would like to talk to us or to the

social worker in an effort to alleviate their stress while they wait," revealed Bedard. "We appreciate how important it is to be light-hearted enough to ease patients' fears while remaining appropriately serious."

And while the front office team is dedicated to making each patient's visit to the Leever Cancer Center a comfortable one, there is a good deal of work to be done behind the scenes. The front office staff books consultations, schedules follow-up visits, makes reminder calls, keeps patient charts, disperses physician dictation, answers calls for staff members, keeps track of physician schedules, maintains constant communication with the affiliated hospitals, and is currently working to convert medical records to an electronic system.

"Doing it all and doing it as well as we do takes every member of our team working together. We have overlapping functions and individual functions, but the most important function is that of the full, diversified, and committed team working together. The result is a seamless operation that benefits everyone," Dianne Bedard explained.

And at the heart of every act, every decision and every interaction of the front office team, Dianne reminds us, lie the patient and his or her family.



HLRCC Front Office Team
Front row, left to right: Karen, Joanne, Lisa
Back row: Dianne, Mary, Judy

Go with the Grains!

THE DIETARY RECOMMENDATIONS ARE ALL OVER AND OFTEN READ LIKE A MANTRA: “Eat more fruits and vegetables, choose whole grains.” We are all familiar with fruits and vegetables, and with the summer months upon us, this is often an easy goal to achieve. However, eating whole grains can be a little trickier. The food industry has latched onto the concept of whole grains and the products we buy are often loaded with adjectives: multigrain, all-wheat, natural, organic, hearty, rolled, cracked, to name just a few. But are these foods necessarily healthier? That is the question that is stumping consumers as they try to make good decisions about what to put in their shopping carts.

What are whole grains?

Whole grains, or foods made from whole grains, contain all the essential parts and naturally occurring nutrients of the entire grain seed. This includes the outer covering, or bran, and the heart of the grain, or germ. If the seed has been processed (cracked, crushed, rolled, etc.), the nutrient value should be the same as in the original grain seed.

What are processed or refined grains?

When the bran and germ have been removed during processing, the result is a “refined” or “processed” product. Often, vitamins and minerals are added back into the product “enriched,” but many nutrients are still missing and the fiber content is less.

There are many health benefits associated with a diet rich in whole grains:

Be heart smart: In multiple studies, people who ate 1-3 servings a day of whole grains had a 20% - 40% lower risk of heart attacks and coronary heart disease. It is felt that the soluble fiber in whole grains lowers the LDL or “bad” cholesterol. The high antioxidant content helps to protect against tissue damage, often thought to lead to heart disease.

Manage your blood sugar: People who eat 3 or more servings a day of whole grains appear to have a 20% - 30% lower risk of diabetes. One explanation of this phenomenon is that the fiber



content may slow the rate at which glucose enters the bloodstream. Whole grains also appear to improve insulin metabolism, which not only lowers the risk of diabetes and related side effects, but also heart disease, metabolic syndrome and other inflammatory processes.

Keep your gut up to speed: Whole grains tend to keep things moving quickly through the digestive system. This is likely due to their bulky nature and high fiber content. This “rapid transit” helps to prevent constipation while also minimizing exposure to potentially harmful substances consumed in our food supply.

Fight fat: People who eat more whole grains tend to feel fuller sooner, and therefore may consume less food and lose weight. Some studies have shown a slight difference in the amount of weight gained over a 10-year period in groups eating more whole grains, but these were not statistically significant.

Fight cancer: Whole grains contain many cancer-fighting nutrients. They are also one



Examples of whole grains:
barley, brown rice, buckwheat, bulgur [cracked wheat], millet, oatmeal/rolled oats

Examples of refined or processed grains:
corn flakes, couscous, enriched “white” pasta, grits, pretzels, pumpernickel bread, rye bread, saltine-type crackers, white bread, white rice, cream of wheat/rice

SPINACH QUINOA SALAD WITH CHERRIES AND ALMONDS

- Ingredients:**
- 1/4 cup sliced almonds
 - 1-1/2 cups quinoa, rinsed well and drained
 - 2 cups spinach leaves
 - 2 cups fresh cherries, pitted and halved, or 1 cup dried cherries, chopped (dried cranberries can be substituted)
 - 1 cucumber, peeled, seeded and cut into 1/3-inch dice (about 1-1/2 cups)
 - 1 15-oz. can chick peas, rinsed and drained
 - 1 small red onion, finely chopped
 - 1 cup plain yogurt
 - 5 tbsp. olive oil
 - 1/2 cup fresh lemon juice
 - 3-4 cloves garlic, minced

1. Preheat oven to 350°. Spread almonds on baking sheet and toast 7-10 minutes, shaking pan occasionally, or until golden brown. Cool.
 2. Bring 3 cups salted water to boil. Stir in quinoa. Reduce heat to medium low, cover and simmer 15-20 minutes, or until all liquid has been absorbed.
 3. Remove from heat and cool, covered, in pot.
 4. Chop spinach into slivers.
 5. Toss together cooled quinoa, almonds, spinach, cherries, cucumber, chick peas and red onion in a large serving bowl.
 6. Whisk together yogurt, olive oil, lemon juice and garlic in small bowl.
 7. Pour over salad and toss to coat.
 8. Season to taste with salt and pepper.
 9. Chill well before serving.
- Serves 6 - 8 as a main dish, 8 - 10 as a side dish.*

of the best sources of fiber in our diet. Fiber is important for many reasons, but one of the key ways that fiber helps reduce cancer risk is by helping us maintain a normal body weight. Being overweight puts people at a higher risk for cancer and cancer recurrence.

Buyers beware! Watch out for misleading labeling: Many manufacturers are jumping on the whole grain bandwagon in order to catch the eyes (and pocketbooks) of the health-minded consumer. Terms like “multigrain,” “wheat flour,” “enriched flour,” “durum wheat,” “bran” and “wheat germ” do not necessarily mean whole grain.

Recognizing the real deal: The Whole Grains Council created an official packaging symbol in 2005 called the Whole Grain Stamp. Although not yet mandatory, its use is becoming more common every day...look for it on the products you buy.

Also, look for words like “whole grain,” “whole wheat,” “whole (other grain),” “stone ground whole (grain),” “brown rice,” “wheat berries,” “oats and oatmeal.” You may not know the exact amounts of whole or processed grains, but if the first few ingredients listed are whole grains, your product is likely to be a good one.

While reading the labels on cereals, try to buy cereals with less than 7 grams of sugar and at least 5 grams of fiber.

Making whole grains a part of your daily routine:

- Enjoy high fiber, whole grain cereals for breakfast.
- Substitute whole wheat toast or whole grain muffins/bagels instead of plain.
- Make sandwiches using whole grain breads or rolls.
- Expand your menus using whole

grain side dishes like brown rice, wild rice, bulgur or wheat berries.

- Add cooked brown rice or rolled oats to ground meat or turkey for extra texture and body.

Try for at least 3 servings a day. Examples of 1 serving = 1 slice bread, 1/2 cup cooked grains or 1/2 – 1 cup whole grain cereal (check the label for portion size).

Nutrition Day 2009

Nutrition Day at the Leever Cancer Center is an annual event designed to raise awareness about the importance of good nutrition. HLRCC Nutritionist Karen Sabbath, MS, RD, uses Nutrition Day to emphasize that good nutrition can happen with a little knowledge and planning; a few good recipes and samples don't hurt either.



Above: Karen Sabbath, MS, RD, Nutritionist at HLRCC does some prep work for her demonstration.

Left: Karen Sabbath, with assistance from Trisha Lindenmann demonstrates cooking methods.

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.



Wolcott's Outstanding Teen 2009 Promotes Cancer Awareness:

Alexa Farrell, Wolcott's Outstanding Teen 2009, has adopted "Find a Cure, Fight Against Cancer" as her pageant platform. Miss Farrell recently visited HLRCC for a tour and to learn more about the facility. Alexa has asked Deborah Parkinson, HLRCC Operations Manager, to serve as her mentor.

Connecticut's Outstanding Teen Program is a sister program to Miss Connecticut and Miss America. While encouraging young ladies to reach their educational and career goals, it fosters confidence and community service efforts for its participants.

Wolcott's Outstanding Teen 2009 Alexa Farrell (center) recently visited the Leever Cancer Center with her mother, Sue Farrell (left), and grandmother Theresa Pagano (right). Alexa's pageant platform is "Find a Cure, Fight Against Cancer."



From left: ShopRite's Philomena and Charlene deliver baked goods to HLRCC Medical Assistant Diana Spahiu.

Partners in Caring®:

ShopRite Supermarket of Waterbury recently donated baked goodies to HLRCC patients as part of their *Partners in Caring* program. Partners in Caring is a year-round, community-based, hunger-fighting initiative that works with more than 70 food industry manufacturers to provide \$2 million annually to qualified charitable agencies in New York, New Jersey, Connecticut, Delaware, Pennsylvania, Massachusetts and Rhode Island.



The Magic Moments Book Club Continues to Grow:

Mrs. Robinson's fifth-grade class at Middlebury Elementary School recently donated a collection of books to the HLRCC Magic Moments Book Club. The Club allows children visiting the Leever Cancer Center to select a book to read during their visit and then take it home free of charge. For more information about the Club, contact Joyce Buselli at jbuselli@interimhealthcare.com.

A Strong Presence at Greater Waterbury's Relay for Life®:

Members of the HLRCC family made their presence known with their western-themed spirit during the 2009 Greater Waterbury Relay for Life, held June 6th and 7th at Crosby High School, Waterbury. Look for Relay for Life photos in the next issue of *Aware*.

HLRCC Is Home to Connecticut's Top Docs

Every year *Connecticut Magazine* surveys doctors around the state to find out which of their peers they would recommend to a loved one seeking the very best in medical care. This year, two of our own topped the list in the Oncology and Hematology category. Congratulations to Dr. Joseph J. Bowen (right) and Dr. Kert D. Sabbath (far right), both Medical Oncologists and Hematologists at HLRCC, for earning the respect and admiration of their peers throughout the State of Connecticut.



Support Group President in Print



Waterbury Area Ostomy Support Group President Ursula Daiber can now add “published author” to her resumé. *Coping with Cancer*, a national magazine dedicated to cancer patients, recently published Ursula’s piece, “Everything I Learned About Life After Cancer I Learned from a Flight Attendant.” In the May/June 09 issue, Ursula recalls the instructions every flight attendant gives before take-off: In the event of a loss of pressure in the cabin, put your yellow mask on before helping anyone else with theirs. “How profound...,” writes Ursula, “...make sure you give to yourself first, because only then will you be able to give fully to others.”

For more information, visit www.copingmag.com or www.UrsulaTheCancerCoach.com.

Mark Your Calendars: November 4th Is Survivors' Day

Survivors' Day 2009 will feature two separate events with one big name: Tom Hayes. Hayes is both a cancer survivor and a well-known, inspirational keynote speaker who has enjoyed careers as a top salesman and a stand-up comic. An avid adventurer and winner of the Showtime network's “Funniest Person” award, Tom Hayes strives to make each speaking opportunity educational, amusing, and transformational. A powerful and entertaining storyteller, Tom shares his own experiences to teach others how to overcome adversity, maximize adaptability, and optimize creativity.

HLRCC staff members will enjoy a daytime session with Tom, where he will talk about the healthy outlook needed to work with oncology patients and about dealing with the stressors that come with the job. Hayes will also offer an evening program for survivors and caretakers that celebrates survivorship with humor and wisdom. Look for more information about the evening session soon on our website.

Aware!

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We encourage your feedback.
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203-575-5555 or email:
teamleever@leevercancercenter.org

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Celebrating Extraordinary Service



Radiation Oncology staff members and physicians were recognized for their ongoing commitment to Team Leever during our “Staff Appreciation Day and Ceremony to Celebrate Years of Service” on June 3rd. Many staff members are original HLRCC employees, transitioning from their positions at Saint Mary’s Hospital and Waterbury Hospital to form The Harold Leever Regional Cancer Center in October of 2002.

Receiving service pins for completion of years of service in the following categories were:

1 YEAR	
Karen Bailey	Lisa Gilmore
Gayle Crowley	Kevin Knieri
5 YEARS	
Cindy Audet	Mary Kolb
Tom Belzek	Janet Policano
Elizabeth Buchetto	Karen Sabbath
Coreen Dupre	Diana Spahiu
Carole Gizzi	Aurelia Varrone
10 YEARS	
Dianne Bedard	Kerrie Huria
Judy Feliciano	Cindy Pengelly
Cheryl Guetens	Melissa Seres
20 YEARS	
Diane Ferretti	
25 YEARS	
Peter Sanchez	
Deborah Parkinson	

Community Events & Monthly Support Groups

SURVIVORS’ DAY ANNUAL CELEBRATION: Wednesday, November 4.

Evening program featuring Tom Hayes, cancer survivor and inspirational speaker. Pre-registration required, contact Deborah Parkinson: 203-575-5564

ART THERAPY: Tuesdays, June 2 – July 21, 10:00 AM – 12:00 PM.

Open art studio – stop by! Mondays, June 15 – July 20, 12:00 PM – 3:00 PM.

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

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

REIKI SESSIONS BY COMPASSIONATE HANDS: Monday, Tuesday, Wednesday and Thursday afternoons by appointment, contact Carol McIlravy at 203-723-2552

WOMAN TO WOMAN BREAST CANCER SUPPORT GROUP: monthly, 3rd Tuesday, 7 PM – 9 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, either 2 PM – 4 PM or 4 PM – 6 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.