CANCER AWARENESS

SPECIAL ADVERTISING SECTION

American Cancer Society®

THE BENEFITS OF A *Multidisciplinary* SECOND OPINION

People diagnosed with cancer can feel overwhelmed, both by uncertainty and by the dizzying number of doctors involved. They typically see a series of specialists, each giving them a separate piece of their treatment plan. It can feel like putting together a puzzle without ever seeing the picture on the box. A tumor board review offers patients and doctors that big-picture view. In these multidisciplinary second opinion meetings, radiologists, oncologists, surgeons and nurse navigators sit down together to discuss a patient's treatment plan. The result can be improved communication, individualized care, and a streamlined approach. Because medical imaging is central to the diagnostic process and can be crucial in forming treatment plans, radiologists play a key role these reviews. SMIL radiologists participate in several different local tumor boards. No two tumor boards are exactly alike. Some are free to the patient, some offer patients the opportunity to join the meeting and ask questions, but all offer coordinated care.

DOCTORS SPEAK

about the team approach to fighting breast cancer.

Gerry Kato, MD
MEDICAL ONCOLOGIST

When you get diagnosed with breast cancer, you have a breast surgeon, an oncologist, a radiation oncologist, a plastic surgeon, a radiologist. It's complicated. So when you have a room discussing your case, and you have all the specialties involved, you can get a better plan. We discuss what's best for each patient and the type of cancer they have, and then the patient comes in. Patients love it because they can get a second opinion and ask questions of all the different specialties. They can get the overview of the treatment with everybody in the room, as opposed to seeing somebody today and seeing somebody else in a couple of weeks."

Linda Liu, MD
BREAST SURGEON

One of the most distressing aspects of a new cancer diagnosis is fear of the unknown. The tumor board attempts to empower the patient and her family with information about her cancer. I think it is very reassuring and valuable to provide a patient with a goal and timeline of how we will get there. Inviting the patient to the meeting allows her to hear a full, integrative plan from all the specialities. She can not only understand better the overall treatment plan but participate in the decision-making. Instead of being a passive backseat passenger, she is brought to the front seat so she can see what direction we are going in, actively help us navigate through the process and, most importantly, see that there is a finish line."

Vershalee Shukla, MD
RADIATION ONCOLOGIST

One time [at a tumor board] there was a 32-year-old woman with very advanced breast cancer. We decided to give her chemotherapy up front to shrink the tumor down, then do a mastectomy, radiation and reconstruction. Usually in young patients, I don't recommend immediate reconstruction because you don't want to delay radiation. But because we were all there together, I could see the imaging and her anatomy, and I could tell the plastic surgeon that if he placed the implant this way and took certain measures, she could have her immediate reconstruction. We spared her another surgery and six months of the trauma of having to deal with no breast."

Patricia Clark, MD
BREAST SURGEON

In a hospital-based tumor board, you have specialists from multiple different medical groups, so they bring multiple perspectives. You'll have doctors from a cancer and research center, medical oncologists and radiation oncologists from various groups, private practitioners, nurse navigators, social workers, and someone who monitors clinical trials to see if the patient is eligible for a clinical trial. Where it's really valuable is that some of the patients don't fit neatly within our national guidelines. So you want to individualize the treatment to that patient, and it's very helpful to have other experts in the field weigh in. This also keeps the providers very current on the literature and the conferences, because they have to defend their position to their peers and advise their peers.

Caroline Kilian, MD
SMIL RADIOLOGIST

The breast radiologist's contribution to the tumor board is integral to the discussion with the doctors, nurses and support staff, not to mention the ultimate conversation with the patient. Many times breast cancer is first diagnosed by imaging as well as image-guided biopsy, then further evaluated with more extensive imaging. The breast radiologist not only can describe to the doctors and nurses the tumor and the extent of the disease, but visually demonstrate it to the patient… the tumor board team is knowledgable, caring and empathetic. Patients leave having received answers to their questions, which assists them in selecting the best option for their health success, and having received at least some assurance during this difficult time."

Cheri Ong, MD
PLASTIC SURGEON

I can discuss options for breast reconstruction, taking into account the patient's cancer treatment care plan. We can perform the reconstruction around their chemotherapy or radiation treatments so the optimal outcomes for the patient can be obtained. I can advise the breast surgeon about the different incisions and help design the surgical plan so the aesthetic outcomes of the patient can be maximized. There have been tough cases where all members of the tumor board were able to give their input and pull ideas together. I don't think the plan could've been made without the collaborative efforts of all members involved."

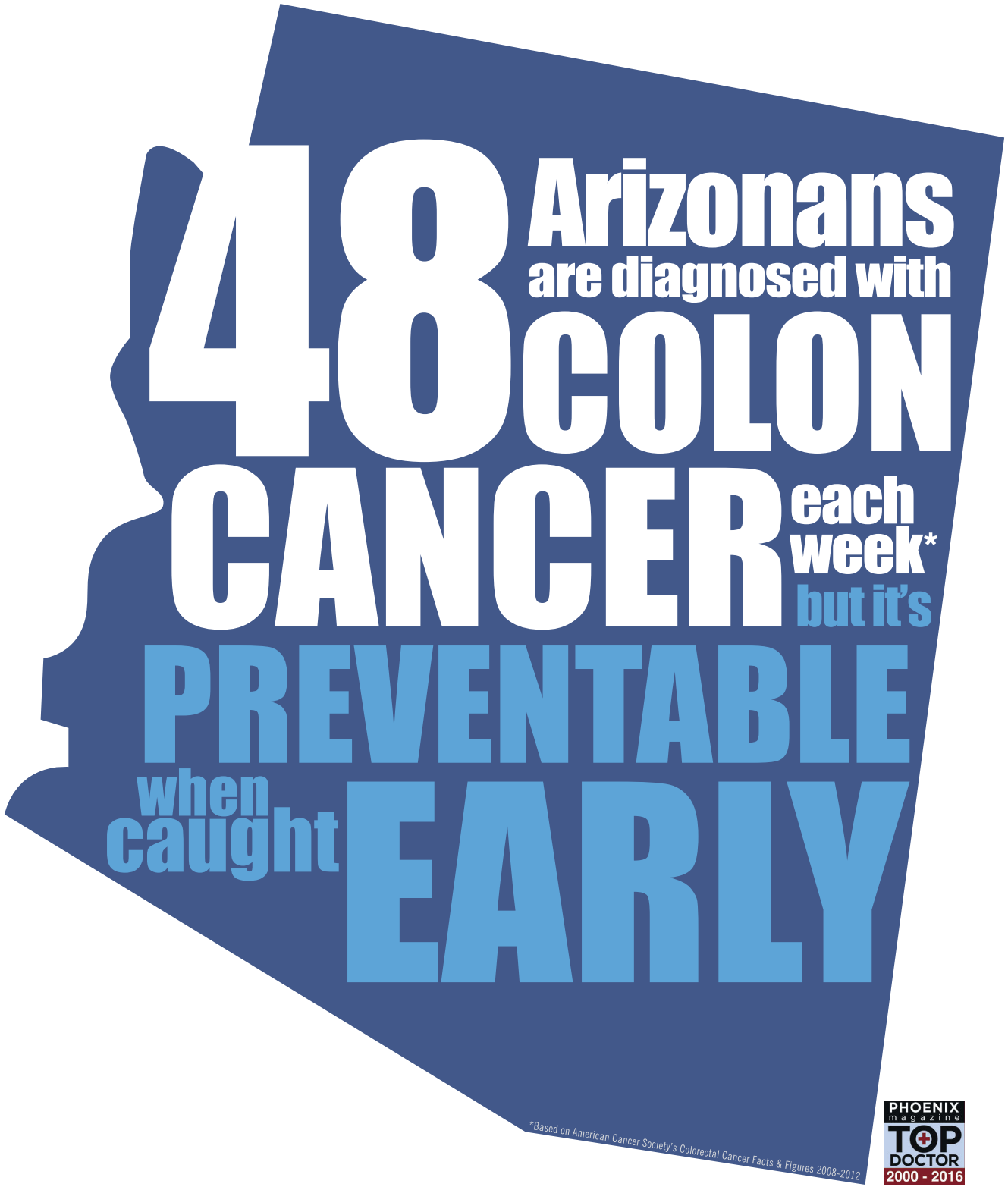
Saving Lives from Cancer and Celebrating Life Every Day

The American Cancer Society is a united force against all cancers. Today, our organization is 2.5 million strong. We are courageous, determined, innovative, passionate, empathetic, and caring in our mission to save lives. Together, each step we take moves us closer to achieving a world free from the pain and suffering of cancer. Studies show 1 in 3 women and 1 in 2 men will be diagnosed with cancer in their lifetime. Cancer is a formidable foe, but fortunately this devastating disease will never have what we have — humanity.Because of the actions and efforts of the American Cancer Society, more of us are surviving cancer than dying from it. More than 14 million cancer survivors are alive today, and there has been a 23 percent decline rate during the past 21 years. By advocating for lifestyle change, honoring loved ones lost to the disease, funding groundbreaking research, delivering vital patient services, and empathizing with someone's journey, the American Cancer Society is uniting communities in Arizona to save lives from cancer.

Prevention

Because of the American Cancer Society, today 1.7 million deaths in the United States have been prevented. For non-smokers, the most important risk factors for preventing cancer include bodyweight, diet and physical activity. Each year, one-third of all cancer deaths in the United States are linked to diet and physical activity, including being overweight or obese. Tobacco use accounts for at least 30 percent of all cancer deaths, and skin cancer is now the most commonly diagnosed cancer in the United States.

A healthy lifestyle is the best preventative approach to reducing the risk for any cancer: avoid tobacco use, limit alcohol intake, avoid excessive exposure to ultraviolet rays, remain physically active, consume a healthy diet, and maintain a healthy weight. By adjusting your lifestyle to fit this criteria, the risk of developing cancer or dying from cancer can be dramatically reduced.



Have You Been Screened?

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adhgi.com/phxmag

CANCER AWARENESS

SPECIAL ADVERTISING SECTION

Early Detection

Advanced screening increases the chances of detecting cancer early, which makes it easier to treat and most likely to be curable. For men and women in their twenties, a cancer related checkup should include health counseling and - depending on a person's age, gender, and family history – exams for cancers of the thyroid, oral cavity, skin, lymph nodes, testes, and ovaries, and for some non-cancerous diseases. As people age, cancer screenings become more important.

The American Cancer Society recommends the following screenings for adults at average risk:

BREAST CANCER

Women ages 40 to 44 have the choice to start annual breast cancer screening with mammograms and should discuss this option with their doctor. Women ages 45 to 54 should get mammograms every year. Women 55 and older should switch to mammograms every 2 years, or they can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live 10 more years or longer.

LUNG CANCER

The American Cancer Society does not recommend lung cancer screening tests for people who are not at risk of developing this disease. Individuals who smoke are most likely to develop lung cancer, the deadliest form of cancer for all men and women, and should be screened if they are: 55 to 74 years of age, in fairly good health or have a history of smoking at least 30 packs a year AND are either still smoking or have quit smoking within the last 15 years.

COLORECTAL CANCER & POLYPS

Testing for colorectal cancer and polyps should begin at age 50 for both men and women following one of these testing schedules:
Tests that find polyps and cancer:
- Flexible sigmoidoscopy every 5 years*
- Colonoscopy every 10 years
- Double-contrast barium enema every 5 years*
- CT colonography (virtual colonoscopy) every five years*

Tests that primarily find cancer:
- Yearly fecal occult blood test*, **
- Yearly fecal immunochemical test *,** (stool DNA test is no longer available)

* If the test is positive, a colonoscopy should be performed.
** The multiple stool take-home test should be used. One test done by the doctor is not adequate. A colonoscopy should be done if the test is positive.

Tests to find both early cancer and polyps are preferred if available and if you are willing to have more invasive tests. Talk to your health provider about which test is right for you. Those with a personal or family history of polyps, colon cancer and other factors should be screened using a different schedule. Discuss your history with your doctor to determine what colorectal screening schedule is best for you.

CERVICAL CANCER

All women should begin cervical cancer screening at age 21. Women younger than 21 should not be tested. Women ages 21 through 29 should have a Pap test every three years. Women ages 21 to 29 should not be tested for HPV testing unless they have an abnormal Pap test result. Women between the ages of 30 and 65 should have a Pap test and HPV test every five years, although a Pap test alone every three years is adequate. Women over age 65 who have had regular cervical cancer testing in the past 10 years with normal results should not be tested for cervical cancer. Once testing is stopped, it should not be started again. Women with a history of a serious cervical pre-cancer should continue to be tested for at least 20 years after that diagnosis, even if testing goes past age 65.

SPECIAL ADVERTISING SECTION

Lifestyle Modifications May Decrease your Risk of Cancer by Fifty Percent

Every year, more than one million Americans are diagnosed with cancer, however a study published in 2008 found that 50 percent of cancers can be avoided by lifestyle modifications. Here's how, according to Dr. David Boyd, Intake Physician and Director of Wellness, Prevention and Primary Care at Cancer Treatment Centers of America:

MAINTAIN AN APPROPRIATE WEIGHT. Various cancers may be linked to obesity. It is important to integrate a healthy diet and physical activity into your day-to-day life. Choosing a diet rich in vegetables, fresh fruit, lean meats and whole grains may potentially decrease your risk for cancer by 30 percent.

QUIT SMOKING OR DON'T START. Approximately 25 to 30 percent of all cancer-related deaths are caused by tobacco use.

LIMIT ALCOHOL INTAKE. According to the federal government's Dietary Guidelines for Americans, it is suggested that men and women drink alcohol in moderate amounts - up to one drink per day for women and up to two drinks per day for men.

EXERCISE 30 MINUTES PER DAY at least, for four to five days a week. Research shows regular physical activity reduces a person's risk of developing high blood pressure, diabetes, heart disease and cancer. Unfortunately, several studies have also shown that more than 50 percent of Americans do not engage in enough regular physical activity. Simple tips to incorporate more exercise include taking the stairs instead of the elevator, parking farthest from your building, mowing your lawn or vacuuming your floor.

SEE YOUR PRIMARY CARE DOCTOR ANNUALLY for wellness exams. It is important that you visit your doctor at least once a year, and talk about vaccinations such as the Human Papilloma Virus (HPV) vaccine. The HPV vaccine may potentially decrease a woman's chances of cervical cancer by 90 percent. It is also important that men and women receive screenings at the appropriate ages, dependent upon their family history.

TAKE CONTROL OF YOUR HEALTH. These lifestyle modifications will make a significant impact in your life, as well as the lives of those you love.

Marnee Spierer, MD
Chief of Radiation Oncology
Clinical Operations

FIGHT

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As a radiation oncologist at Cancer Treatment Centers of America®, I wholeheartedly devote myself to fighting cancer. It's not *one* thing I do, it's the *only* thing I do.

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SPECIAL ADVERTISING SECTION

Invasive Cancer meets Non-invasive Treatment

A cancer diagnosis – not many challenges in life could be more frightening. And while there is no way to take all of the fear, confusion and uncertainty out of such a time, the knowledge that you're in the hands of the best-equipped and most skillful medical professionals available makes all the difference. That's the kind of confidence that comes with being a patient at Phoenix Cyberknife and Radiation Oncology Center. Phoenix Cyberknife is unique in Arizona for offering several state-of-the-art technologies for treating tumors non-invasively, without pain, and in a matter of one to five days rather than weeks. These techniques can treat cancer anywhere in the body – from the head, neck and spine to the lungs, abdomen and pelvis – all while sparing the surrounding tissue from radiation exposure.

Matthew Cutler, managing partner of Phoenix Cyberknife, shares some insight on Phoenix Cyberknife and Radiation Oncology Center:

Q: WHAT IS CYBERKNIFE TECHNOLOGY, AND WHAT MAKES IT SUCH A LEAP FORWARD IN TREATING CANCER?

A: Accuray Cyberknife is the only technology that tracks and treats tumors in real time. This is due to the accuracy of the technology. Because of this pinpoint precision, we are able to complete a patient's cancer treatment in five days instead of 45 days.

Q: WHAT ARE SOME OTHER TREATMENTS YOU OFFER, AND HOW DO THEY WORK?

A: We also have the Varian Truebeam. Our center is unique in that we're the only center in the country that has both technologies under one roof. Truebeam provides all the standard radiation treatments – IMRT, IGRT, as well as 3-D. Some tumors are better treated with these. We do have a third technology, HDR brachytherapy. It differs from the others by placing the radioactive material under your skin. This treatment is invasive, but for some cancers, like skin cancers, is the appropriate treatment. We can treat any patient, any cancer.

Q: WHAT CAN PATIENTS EXPECT FROM THE CYBERKNIFE EXPERIENCE?

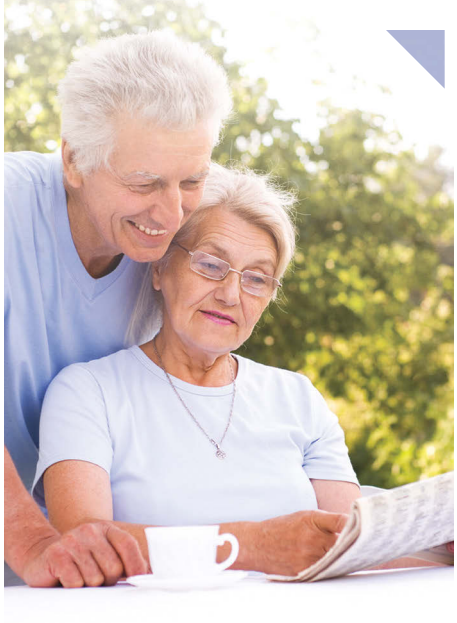
A: The advantages are better outcomes, fewer side effects and lower cost, because the treatment takes less time. Also, it's non-invasive, so there's no pain. That's why we call it Cyberknife – because there's no knife.

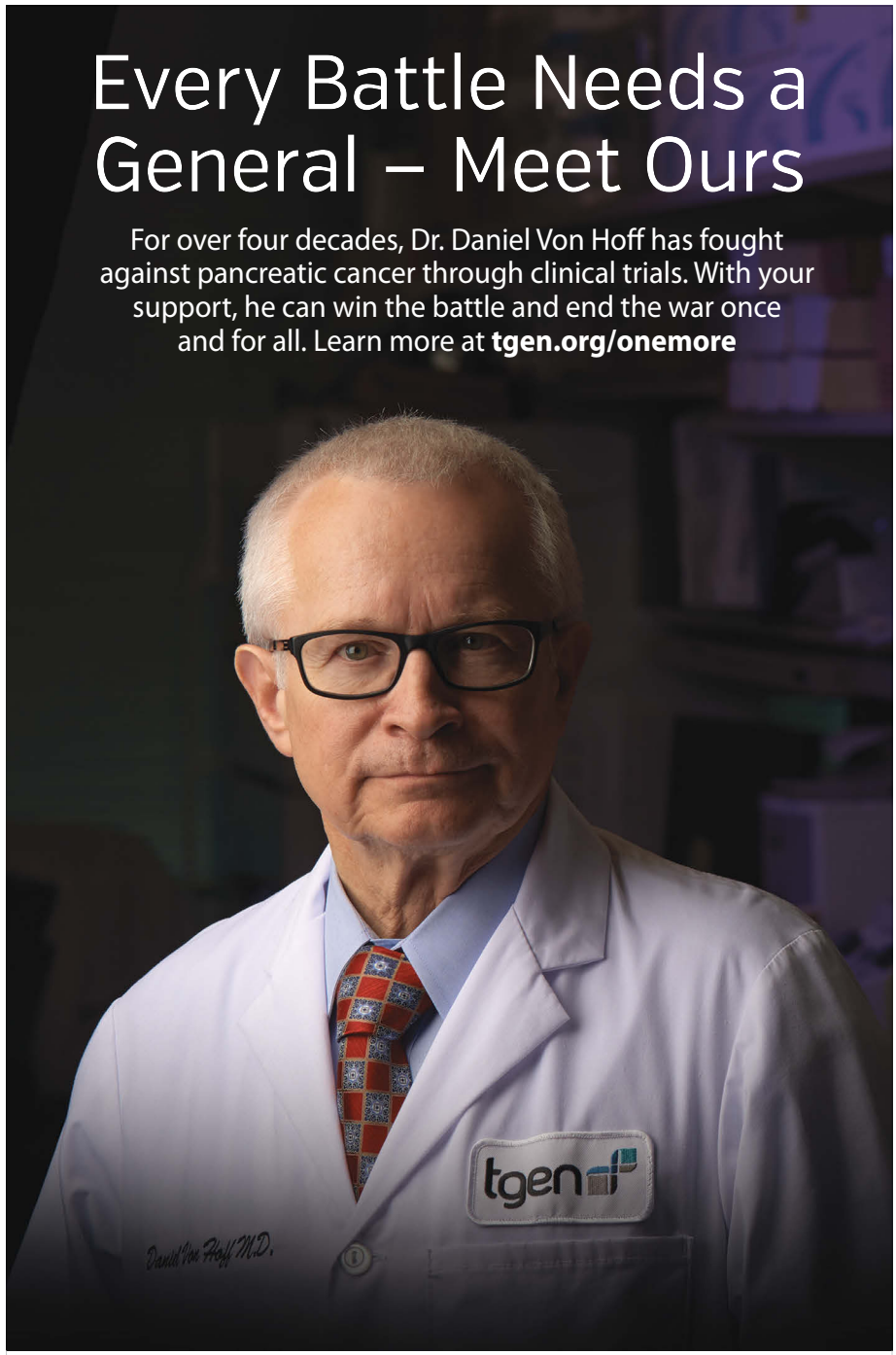
PROSTATE CANCER

Research has not yet shown that the potential benefits of testing for prostate cancer outweigh the harms of testing and treatment for men at average risk for prostate cancer. The American Cancer Society recommends men make an informed decision with their doctor about whether to be tested. Men should not be tested without learning about the risks and possible benefits of testing and treatment.Starting at age 50, men should talk to their doctor about the pros and cons of testing so they can decide if it is they right choice for them. African American men and those whose father or brother were diagnosed with prostate cancer before age 65, are at higher risk and should talk with their doctor beginning at age 45. If you decide to be tested, you should get a PSA blood test with or without a rectal exam. How often you're tested will depend on your PSA level.

ENDOMETRIAL CANCER

Beginning at menopause, the American Cancer Society recommends all women be told about the risks and symptoms of endometrial cancer. Women should report any unexpected bleeding or spotting to their doctors. Due to family and health history, some women may need to consider an annual endometrial biopsy. These women should discuss options with their doctor.





TGen's stepNout RUN WALK DASH

Join us Sunday, November 6, 2016
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CANCER AWARENESS

SPECIAL ADVERTISING SECTION

PatientPrograms

The American Cancer Society is dedicated to freeing the world from the pain and suffering of cancer. Our mission is simple: save lives and celebrate life- every single day. We do this by preventing cancer, saving lives and diminishing suffering from cancer through research, education, advocacy, and service. And it is with the funding of generous donors and selfless volunteers, that we are able to offer the following resources to cancer patients and their families for free:

CANCER RESOURCE CENTERS:

Cancer Resource Centers are located within health care facilities and are staffed with American Cancer Society volunteers who can help with Society programs and services as well as refer patients and their loved ones to community resource.

ROAD TO RECOVERY:

Even the best treatment can't work if a patient can't get there. This program provides transportation to and from treatment for cancer patients who don't own a vehicle, can't afford gas, or don't have access to public transportation. Some may be elderly and unable to drive, too ill to drive, or have no family members or friends who can help with all their transportation needs. Volunteer drivers donate their time and the use of their cars so cancer patients can receive the potentially lifesaving treatments they need.

LOOK GOOD FEEL BETTER:

Look Good Feel Better is a free program that teaches female cancer patients how to cope with appearance-related side effects of chemotherapy and radiation treatments. The program helps to restore appearance and self-esteem through the use of skincare and makeup products, wigs, scarves, and other accessories. Each cancer patient receives a cosmetic kit matched to her skin tone and is worth $250.

REACH TO RECOVERY:

Breast cancer survivors provide one-on-one support and information to help newly diagnosed patients cope with breast cancer. Visits can be via email, over the phone, or in person.

PATIENT LODGING:

The American Cancer Society partners with hotels and motels in communities to provide free or reduced cost lodging to patients traveling more than 50 miles to their cancer related appointments.

PATIENT NAVIGATION:

Navigators are professionals dedicated to helping newly diagnosed cancer patients, their families and caregivers through the cancer experience. All our Patient Navigators are able to assist with a variety of requests including cancer information, community-based resources, transportation, lodging nutritional information and free wigs.

HOPE LODGE:

Facing a cancer diagnosis is hard. Having to travel out of town for treatment can make it even harder. Yet the American Cancer Society has a place where cancer patients and their caregivers can find help and hope when home is far away - an American Cancer Society Hope Lodge. Each Hope Lodge offers cancer patients and their caregivers a free place to stay when their best hope for effective treatment may be in another city. Not having to worry about where to stay or how to pay for lodging allows guests to focus on getting well. Hope Lodge provides a nurturing, home-like environment where guests can retreat to private rooms or connect with others. The American Cancer Society operates Hope Lodge at the Village at Mayo Clinic in Phoenix, AZ. Hope Lodge opened with six guest rooms early in September 2009 and expanded with a second building and 12 more rooms

in 2013. Two casita buildings with 18 private guest rooms in total. Each casita building includes private guestrooms, a fully stocked kitchen, communal dining area and family room with TV, library that includes a TV, and a laundry room.

NATIONAL CANCER INFORMATION CENTER:

The American Cancer Society National Cancer Information Center provides information and support 24 hours a day, 365 days a year via 800-227-2345 or online at cancer.org. Trained cancer information specialists take calls and participate in online chats, providing accurate information and connecting people with valuable services and resources in their communities. This resource is free to anyone with questions about cancer.

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AMERICAN CANCER SOCIETY RESEARCH PROGRAM:

The American Cancer Society is the largest, non-profit funder of cancer research, having spent more than $4 billion in cancer research since 1946. No other private, not-for-profit organization even comes close. The Society has been at the forefront of cancer research and played a role in most major cancer research breakthroughs in recent history. In fact, the Society has funded 47 Nobel Prize-winning researchers. It was the American Cancer Society researchers who were among the first to confirm the link between smoking cigarettes and lung cancer. The subsequent anti-smoking campaign has helped lead to a 50-percent decrease in smoking and a reduction in the lung cancer death rate. In 1948, Society research helped promote the Pap smear test to detect cervical cancer, leading to a 70-percent reduction in cervical cancer deaths during the next 50 years. Currently seven American Cancer Society funded research grants are at work in Arizona, totaling more than $5.6 million. As the Society continues to make progress against cancer though research, perhaps the next breakthrough will come from our own backyard! The American Cancer Society encourages everyone to be their own best health advocate and know their family health history, cancer risks, have regular and recommended check—ups and cancer screening tests. For cancer information, answers, support, to donate or become a volunteer, please visit cancer.org, or call anytime, day or night, 1-800-227-2345.

Today, 14 million Americans are alive largely due to the efforts of the American Cancer Society, but our work continues.

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