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Institute of Medicine Report: New National Assessment Program Needed for Clinical Efficacy

Page 7



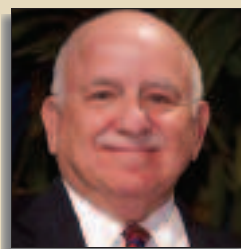
Dr. Wendy Harpham's 'View from the Other Side of the Stethoscope' — "A Healthy Survivor"

Page 36

Page 36

SIMONE'S ONCOPINION: Physician Performance Measures in Specialty Medical Societies

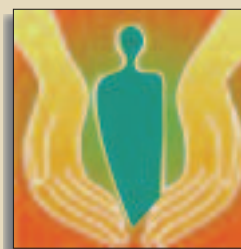
Page 6



Taking the Next Steps to Implement IOM Recommendations to Integrate Psychosocial Services into Cancer Care

By Eric Rosenthal

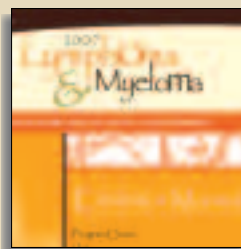
Page 15



Lymphoma & Myeloma: Research, Treatment Trends

Also: Quest for CR in Myeloma May Be Misplaced

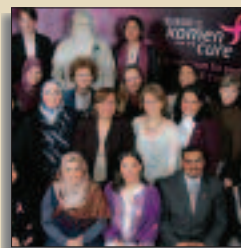
Page 28



Komen for the Cure Kicks Off Global Effort to Train Trainers in Breast Cancer Outreach & Education

By Eric Rosenthal

Page 11



DEPARTMENTS

LETTERS

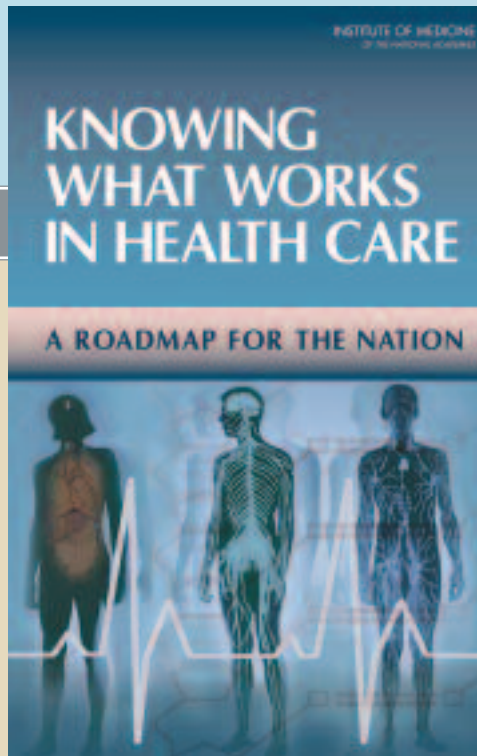
POETRY BY CAREGIVERS

EYE ON WASHINGTON

TURRISI TAKES ON THE MOVIES

SHOP TALK

CLASSIFIED



- Low Imatinib Blood Concentration May Lead to Drug Failure in GIST20
- NSCLC: When Initial Treatment Fails, New Second-Line Options Offer Hope21
- New Palliative Care Evidence-Based Guidelines from ACP Stress Assessing Pain, Dyspnea, Depression25
- Emerging Data on Side Effects of Aromatase Inhibitors40
- Case Manager Urges Franker Discussions about Dying42

H
NEWS CENTER
M
U
P
H
A
R
M
A
C
Y
A
T
O
L
O
G
Y
S
I
N
O
N
C
O
L
O
G
Y

Outreach Snapshots from Abroad— Participants Share Plans for their Different Societies

By Eric T. Rosenthal

One size certainly doesn't fit all, and the Komen global initiative participants' challenge will be to tailor their efforts to meet their respective societal needs.

OT spoke with a number of the Training of Trainers Workshop participants about their backgrounds, specific cultural issues, and implementation plans.

Saudi Arabia

Dr. Samia Al-Amoudi, an obstetrician and gynecologist who was diagnosed with breast cancer in 2006, was designated as the spokesperson for the four-person team from Saudi Arabia. She is Advisor to the Saudi Cancer Society, Komen's partner organization in Riyadh, Saudi Arabia, but wanted to join the program managers and master trainers in Dallas.

Dr. Al-Amoudi is credited as the first woman in Saudi Arabia to speak out about breast cancer, and subsequently wrote a series of newspaper columns as well as some books and pamphlets in English and Arabic about her cancer experience, including how it affected her young daughter and son.

She said she felt a mass in her right breast and was officially diagnosed on her 48th birthday. She said that 30% of the breast cancer in Saudi Arabia occurs in women younger than 40, and that she felt as a physician and a woman that it was important to tell her story: "In one sense breast cancer was a message from God, telling me my illness could be used so others wouldn't have to suffer as I did."

Her columns came to the attention of a US State Department representative who had learned from other Saudi sources that breast cancer awareness was a concern in Saudi Arabia, and she received the State Department's first

International Women of Courage Award for sharing her experience and raising awareness.

Last fall she helped facilitate First Lady Laura Bush's meeting with breast cancer survivors in Jeddah, and this past January she met President Bush, and said she is very proud of a photo taken with him and Ambassador Nancy Brinker.

Brazil

The Brazilian team from Sao Paulo—Program manager Luciana Holtz de Camargo Barros and master trainer Maria Teresa Veit—are both psychologists involved in psycho-oncology. They will be working with Sao Paulo's Albert Einstein Jewish Hospital, a sister hospital to M. D. Anderson Cancer Center.

Their psycho-oncology orientation will integrate psychosocial issues with the educational mission and look for

psychological barriers to screening and early detection, which they said wasn't practiced much in Brazil. However, a 1998 law mandates that all public health oncology services include a psychologist on the cancer care team.

Ms. Holtz de Camargo Barros specializes in psycho-oncology and bioethics and is the President of Oncoguia (www.oncoguia.com.br), an interactive portal for cancer patients she founded four years ago.

Ms. Veit has a background in sociology as well as psychology and developed a program, "Knowledge Saves," designed to increase early detection and treatment in breast cancer.

"Working with a global initiative like Komen's has given us the opportunity to foster collaboration with various other organizations in Brazil to increase breast cancer awareness and early detection," she said. "We cannot prevent breast cancer, but we can detect it earlier and prevent death from it."

Romania

The Komen effort in Romania will be in partnership with the Society for Education on Contraception and Sexuality, a non-governmental organization (NGO) headquartered in Bucharest.

Program manager Carmen Boscaneanu is a social worker who has been involved in community development and mobilization projects to further partnerships and democracy in the nation that had been under communism for 50 years until 1989.

Master trainer Elisabeta "Violeta" Horhoianu, MD, was trained in child development and general practice, and has experience in public health and reproductive health.

"Under communism everything was more centralized," said Ms. Boscaneanu. "We are now trying to decentralize and we have to be practical; Romania was cut off from many things until the 1989 revolution."

In fact the communist government didn't recognize any social problems, and banned social work and psychology during its regime.

Until a few months ago there was not any breast cancer awareness in the country that had no screening for breast cancer at all, and used mammography strictly for diagnostic purposes. Romania will focus on raising aware-

(continued on page 15)



Tim Sharp

Group photo of some of the participants at Komen for the Cure's first Global Initiative for Breast Cancer Awareness Training of Trainers Workshop

Front row, left to right: Dr. Lamia Safie El-Deen (from United Arab Emirates [UAE]); Dr. Samia Al-Amoudi (Saudi Arabia); Dr. Jalaa Taher (UAE); Livia Olvera Snyder (Mexico); Dr. Yousef AlJahani (Saudi Arabia); Carmen Boscaneanu (Romania).

Second row, starting with woman in purple shirt: Karin Eisele (Institute of International Education [IIE] Executive Director); Jamila Al Balushi (UAE); Dr. Walaa Sabih (UAE); Majeda Habta (Jordan); Maria Teresa Veit (Brazil); Miriam Ruiz Mendoza (Mexico); Oleya Bondar (Ukraine); Trish Tierney (IIE); Barb Crook (Training Facilitator); Stacey Ramirez (IIE).

Third row: Cecilia Mora (Costa Rica); Huwayda Darweesh (Saudi Arabia); Dr. Galina Mastruk (Ukraine); Nisreen Qatamish (Jordan); Violeta Horhoianu (Romania); Luciana Holtz de Camargo Barros (Brazil); Linda Morales (Training Facilitator).
Back row: Fabiola Gamboa Ross (Costa Rica); Christina Stansell (IIE); Nojoud AlSaeed (Saudi Arabia); Angie DeWitt (IIE).

⇒ Eric Rosenthal reports

Taking the Next Steps to Implement the IOM Recommendations for Integrating Psychosocial Services into Oncology Care

By Eric T. Rosenthal,
Special Correspondent

Being granted a validated license and given the green light are critical first steps when setting off on a journey, but without a vehicle, fuel, money, and a good road-map, compass, or GPS system, one

"The report is a validation of the work many of us have done over many years, bringing in the evidence base and the prestige and influence of the IOM."

won't get very far.

This situation is somewhat analogous to the next steps involved in disseminating and implementing the Institute of Medicine's recommendations to include psychosocial services as part of the standard of care for cancer patients. (OT, 12/10/07)

The landmark report, *Cancer Care for the Whole Patient: Meeting Psychosocial Health Needs*, issued last fall, was initially funded by the IOM for about \$1 million, but as with many IOM initiatives, did not provide additional funds to implement the recommendations.

That task has fallen to various members of the IOM Committee on Psychosocial Services to Cancer Patients/Families in a Community Setting, who drafted the 339-page report that highlighted 10 recommendations, beginning with the fact that cancer care should provide appropriate psychoso-

cial health services by identifying each patient's needs, linking the patient with needed services in a specific care plan, and following up on the patient's psychosocial care plan.

Looking at the whole patient has been a gradual process, with quality-of-life and survivorship issues being addressed a few years ago.

OT contacted several members of the IOM committee as well as American Society of Clinical Oncology President Nancy E. Davidson, MD, to assess outreach efforts to disseminate the report and plans for making the recom-

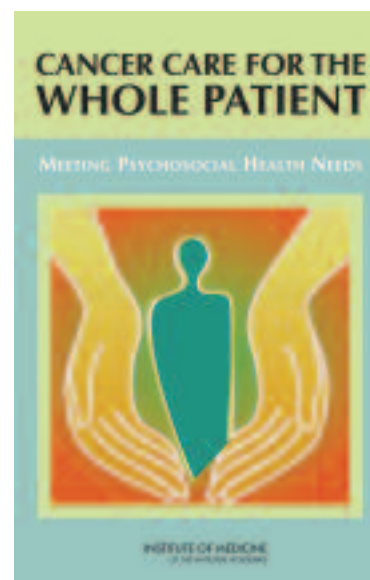
mendations a reality.

'Important Time for Looking at Cancer Patient Needs'

"The IOM report is a validation of the work many of us have done over many years, bringing in the evidence base and the prestige and influence of the IOM," said Diane Blum, MSW, Executive Director of CancerCare Inc., and Editor-in-Chief of

ASCO's People Living with Cancer Web site (www.plwc.org) for patients and the public.

"I see it as a very important milestone" (continued on page 16)



Snapshots

continued from page 14

ness about screening programs, especially in rural areas, and will use community mobilization to get available resources to work together.

Dr. Horhoianu said an important step was to train family doctors and community nurses to perform clinical breast examinations and teach women breast self-examination.

United Arab Emirates

UAE is a federation of seven Middle Eastern states—Abu Dhabi, Ajman, Dubai, Fujairah, Ras al-Khaimah, Sharjah, and Umm al-Quwain. The lead partnership organization is the Health Authority Abu Dhabi, and four of the six members of the Komen team were in Dallas—program managers Dr. Jalaa Asaad Taher and Dr. Walaa Sabih, and master trainers Jamila Ahmed Al Balushi, RN, IBCLC, and Dr. Lamia Ahmed Safie El-Deen.

Screening mammography is available, but lack of awareness about breast cancer has led to high mortality rates. The word cancer wasn't used in UAE until two years ago when the first lady of the Emirates began an empowerment program. Until then breast cancer screening was only known as special health screening.

Dr. Sabih, who specialized in community medicine, and Ms. Ahmed Al Balushi, who trains nurses in primary health care, both have experience as lac-

tation specialists, which has been a natural bridge to discussing breast cancer prevention with patients.

Dr. Asaad Taher trained in general surgery before focusing on women's health, and Dr. Ahmed Safie El-Deen, originally trained as a veterinarian, now is involved in social work and counseling.

The team's goal is to decrease mortality through early detection and screening, but many Arab women prefer to be examined by female physicians and will not travel for mammograms. In fact, one special population, Bedouin women, would rather be sick than see a male doctor, according to Dr. Sabih, who has been working in the remote western region of Abu-Dhabi for the past eight years.

Ukraine

Former Soviet-republic Ukraine was left with virtually no health care system after the fall of the Soviet Union in 1989. During communist rule most people had jobs with health care clinics located within their places of employment, but for most of the 1990s a medical vacuum existed within the formerly socialist state with citizens responsible for their own health care, and the absence of any public health professionals.

However, according to master trainer Galina Mastruk, MD, a gynecologist-oncologist, that changed in 2001 when the Ukrainian government created a national program in oncology.

Dr. Mastruk, and Program Man-

ager Olesya Bondar, a development expert, are working through the Ukrainian Women's Fund, a Kiev-based international charitable organization dedicated to improving women's rights and "building gender democracy." They will be focusing on cancer screening initiatives, including training medical professionals in clinical breast examination techniques in a nation that has few mammography units and lacks funding to increase that number substantially in the near future.

The Ukrainian effort will build on previous programs developed there including cervical cancer awareness.

"Komen's model is very important to us now," Dr. Mastruk said. "This program will give us the opportunity to implement new techniques, and give the medical initiative a social face much needed in our society."

Mexico

Mexico City-based Asociación Mexicana contra el Cáncer de Mama, A.C., Fundación Cim*ab is Komen's NGO partner in Mexico.

Program Manager Miriam Ruiz Mendoza is a journalist and women's rights activist who had experience working with midwives, lactation education, and violence against women issues.

Livia Olvera Snyder, master trainer, is a social psychologist with an interest in holistic healing who was recruited just days before the Dallas training session.

Until a few years ago breast cancer

was the second leading cancer cause of death in women in Mexico after cervical cancer. Now it's number one, with about 4,000 women dying annually from breast cancer. That switch was due largely to a successful cervical cancer awareness campaign to increase Pap smears and train medical personnel.

The Komen initiative plans to mobilize those who were involved in cervical cancer to become engaged in breast cancer early detection efforts.

"We plan to get things done so well during our six-month pilot program that we can continue with Komen support and create some momentum," said Ms. Ruiz Mendoza. "Komen came in at a great moment as we began focusing on breast cancer screening, and this will enable us to train others, raise funds, and launch our campaign."

Costa Rica

Costa Rica's Program manager Fabiola Gamboa Ross, is a corporate lawyer, and master trainer Cecilia Mora develops social responsibility programs. They will be working with San José-based Fundación Dra. Anna Gabriela Ross, a volunteer-run NGO dedicated to cancer awareness and prevention, which will increase its breast cancer work through the Komen program.

Jordan

The Jordanian representatives will be working with the King Hussein Cancer Foundation in Amman.