



RMH Cancer Program Annual Report, 2006

(Based on 2005 Data)

INTEGRATIVE ONCOLOGY PROGRAM IN THE RIDDLE CANCER CENTER

Riddle Memorial Hospital is pleased to announce that Integrative Oncology Medicine is now being offered in our Cancer Center. Ira Cantor, M.D, a board-certified internist with extensive knowledge and experience in the field of integrative medicine, recently joined our staff and is now providing Integrative Oncology Medicine services to patients in our Cancer Center.

The field of Integrative Oncology developed over the last 10 years in response to patients who wanted to explore additional treatment options. These include (1) diet and nutrition, (2) vitamin and herb supplements, (3) therapies such as massage and acupuncture, and (4) meditation to effect body functions such as the immune system.

Scientific knowledge is now available suggesting that various natural substances have biological effects that may be helpful to patients with malignancies. Vitamin D helps cells to form normally, and Vitamin C can kill cancer cells. Medicinal mushrooms and herbs have beneficial effects on the immune system. Fish oils reduce inflammation and decrease the aggressive nature of different types of cancer cells. Therapeutic massage can improve a patient's sense of well-being and facilitate recovery from surgery. Acupuncture can improve pain control.

Integrative oncology options may be helpful at every stage in cancer treatment:

- (1) When mainstream options are limited or present serious potential side effects, integrative treatments may augment treatment benefits, reduce side-effects such as fatigue, and improve appetite.
- (2) When patients are in a "watch and wait" mode after completion of intensive mainstream treatment, they often are uncomfortable with "doing nothing" and appreciate integrative oncology options to help them stay healthy longer.
- (3) When patients undergo surgery, supplements can help limit tissue damage and enhance healing, and massage can improve blood flow to hasten recovery.

However, our knowledge in these areas is limited, and there exists the potential for side effects or interference with conventional treatments. It is therefore critical that decisions about integrative treatments be made under the direction of a trained physician. Dr. Cantor, a leading physician at the Center for Integrative Medicine at Jefferson University Hospital, began treating Riddle cancer patients in September, 2006.



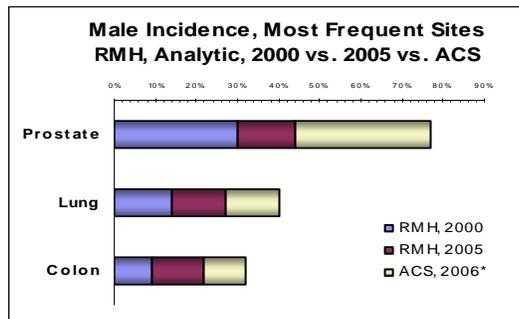
Merrill J. Solan, MD

Medical Director, Jefferson Radiation Oncology Center at Riddle

PROSTATE CANCER EVALUATION AT RIDDLE MEMORIAL HOSPITAL

Despite its relatively small size, the prostate accounts for a substantial and disproportionate incidence of health problems in older men, the most significant of which is cancer.

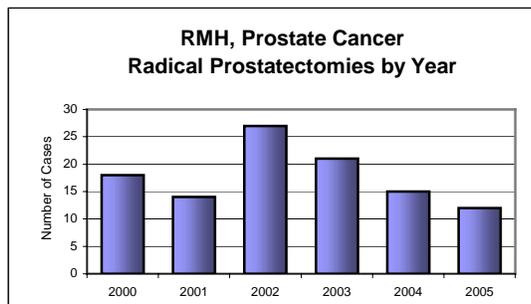
Prostate cancer is the most common cancer in men in the U.S., about 234,000 new cases annually*. The first graph compares the three most frequent cancer sites in men, both nationally and here at Riddle. The decrease in RMH prostate cases between 2000 and 2005 does not reflect a true decrease in disease, but rather the change in physician practices, i.e., biopsies now done in their offices rather than the hospital. According to the American Cancer Society (*ACS, Cancer Facts & Figures, 2006), prostate cancer is the third leading cause of death in men.



The prostate is a walnut sized gland that sits below the bladder. It plays a significant role in reproductive and sexual function. The diagnosis of prostate cancer is usually made with an ultrasound-guided core biopsy. This gives the histologic and cytologic grading (Gleason score) of the tumor. The steps leading to a biopsy are routine prostate-specific antigen (PSA) and digital rectal examination. Clinical staging of prostate cancer is based on biopsy findings (Gleason score) and radiologic studies such as CT scan of the abdomen/pelvis, MRI of the abdomen/pelvis and bone scan.

Pathological staging is only obtainable if the patient undergoes a radical prostatectomy. Radical prostatectomy is the complete surgical removal of the prostate gland, including its regional lymph nodes. Pathological staging is the most reliable means of predicting the outcome of definitive treatment in men with clinically localized prostate cancer. Radical retropubic prostatectomy and the daVinci® robot prostatectomy provide the opportunity to perform pelvic node dissection simultaneously as an additional staging procedure. In men who have undergone radical prostatectomy, the probability of disease-free survival relates directly to the pathologic stage at the time of surgery.

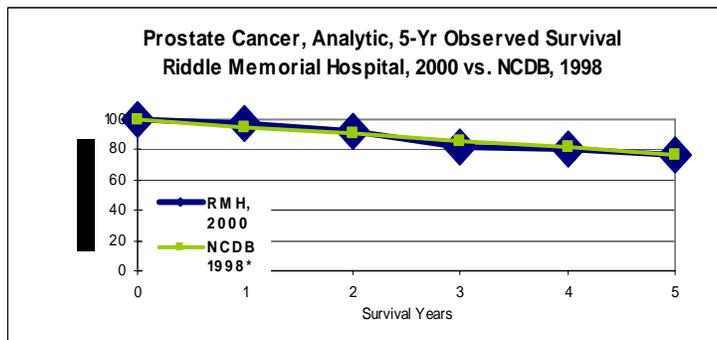
The second graph shows the number of radical prostatectomies done yearly at Riddle Memorial Hospital since 2000. They relate the Riddle experience between pre-op clinical staging and post-op, organ-confined pathological staging.



For patients who choose the radiation treatment option, only clinical staging is available. Radiation treatment can be external beam (IMRT), implanted seeds or a combination of both. The Riddle Cancer Center offers IMRT. Patients for temporary or permanent seed implants are referred to a tertiary center.

As seen by the third graph, Riddle's five-year survival rate for prostate cancer compares favorably with the national data available (NCDB 1998).

Unequivocal progress has been made in developing methods for detecting prostate cancer earlier and understanding the natural history of the disease. However, large questions remain: Who should be treated? How can we minimize the adverse effects of treatment?



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Jacques E. DeCaestecker, MD.
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Front Cover Photo

Seated: Merrill J. Solan, MD, Medical Director, Jefferson Rad/Onc at Riddle, Andrew J. Solan, MD, Chief, Hematology/Oncology, Jessie DiNome, MD, Jefferson Rad/Onc at Riddle.

Standing: Ira Cantor, MD, Integrative Medicine, Terria Chernak, Volunteer, Riddle Cancer Center, Judy Ford, RN, BSN, CTR, Cancer Registrar, Christina M. Clay, MD, Hematology/Oncology Associates, Lorie Matson, RN, BSN, CCRP, Cancer Program/Clinical Trials Coordinator, Rashmi Sanjay, MD, Hematology/Oncology Associates