Innovations in Cancer Care

PAOLI HOSPITAL CANCER PROGRAM



Main Line Health

Cancer Center Paoli Hospital

A Member of Fox Chase Network

Message from the Chairman of the Cancer Committee

The Cancer Committee of Paoli Hospital is pleased to announce that at the recent review of our program by the American College of Surgeons – Commission on Cancer we have been reapproved for the maximum term of 3 years with Special Commendation. This award recognizes the cancer program for its adherence to the Commission on Cancer standards as well as going beyond these standards in providing excellence at the community hospital level.

The Cancer Registry continues to upgrade the tracking of cancer incidence seen at Paoli Hospital. The number of cases for 2004 has increased 27% since last year. The most frequent diagnosis continues to be beast cancer followed by lung and prostate cancer.

Several advances for the treatment of our patients have recently occurred, including a new interventional radiology suite that has allowed us to obtain tissue for diagnosis in many patients without open surgery. In addition, we have been able to treat some patients by directly administering chemotherapy to specific arteries under the guidance of the radiologist. The Radiation Oncology department has a new CT scan for planning the most accurate delivery of radiation therapy. In the next few weeks we will be able to deliver high dose local radiation for our patients with breast cancer, shortening treatment times from seven down to one week. This technology is also very useful in treating cervical and endometrial cancers. Our Breast Health Center is celebrating its first birthday and offers digital mammography

which has recently been shown to be superior to film mammography especially for younger women. New equipment in the Breast Health Center now allows our physicians to perform stereotactic biopsies.

The Paoli Hospital Cancer Program continues to offer patients the ability to participate in nationwide clinical trials through the Main Line Health Community Clinical Oncology Program (CCOP) as well as trials from Fox Chase Cancer Center. We also offer programs developed here at Paoli Hospital for breast cancer and evaluating chemotherapy in geriatric patients.

In this issue of the Annual Report, we join the other Main Line Hospitals and focus on colorectal cancer. Dr. Keith Laskin, a gastroenterologist and member of the Cancer Committee, reviews this topic in relation to Paoli Hospital.

With the support of the entire Paoli Hospital staff, administration and auxiliary, the Cancer Committee is committed to providing the highest quality of cancer care for our patients close to home.

Michael B. Dabrow, DO, FACOI Medical Director Paoli Cancer Center Chair, Cancer Committee

Michael Balrasa

Main Line Health CCOP

The clinical trials program of Main Line Health was awarded the designation of Community Clinical Oncology Program (CCOP) by the National Cancer Institute in 1994, and has consistently met the high standards of the NCI. The CCOP designation is a prestigious one, as there are only 50 CCOP's across the country. The goal of a CCOP is to bring clinical trials to the community, rather than having patients leave their community to receive state-of-the-art cancer care. Medical, surgical and radiation oncologists and our research staff accrue patients to both prevention and treatment studies provided by four research bases: M.D. Anderson Cancer Center; Eastern Cooperative Oncology Group; National Surgical Adjuvant Breast and Bowel

Project; Fox Chase Research Base and Radiation Therapy Oncology Group.

As a research center, we also participate in multiple pharmaceutical research endeavors, as well as clinical trials sponsored by other professional organizations, such as the American College of Surgeons Oncology Group and the Gynecologic Oncology Group. All studies continue to accrue patients with the assistance of the medical and research staff.

Rosemarie A. Tucci RN, MSN, AOCN Manager, MLH Oncology Research & Data Services

Report on Colorectal Cancer — 2004

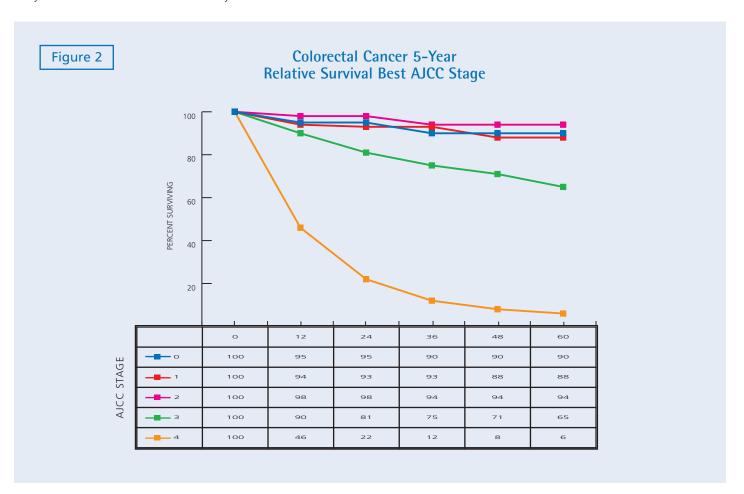
Colorectal cancer is a significant health issue in the year 2004, resulting in over 56,000 deaths in the US. This makes colorectal cancer the 2nd leading cause of cancer deaths in this country. Eleven percent of new cancer cases at Paoli Hospital were colorectal cancer, paralleling national rates. At each stage of presentation, patients treated at Paoli Hospital had better 3 and 5 year survival rates than those listed for community cancer centers across the US (figure 2). This cancer effects men and women equally, but has a higher incidence and mortality rate in African Americans.

Identifying risk factors is paramount in lowering mortality from this disease. These risks include age, especially over 50 years old, history of colon polyps and family history of colon, endometrial or ovarian cancer. We continue to explore the protective effect of aspirin, calcium, postmenopausal hormones and folic acid. Colorectal cancer is one of the few diseases where screening can lead to prevention. Despite Katie Curicks campaign, government statistics show that only 44% of eligible persons have undergone screening. The American Cancer Society lists a number of screening strategies but the most effective is colonoscopy. Much has been reported about virtual colonoscopy but this method of screening lacks the sensitivity of colonoscopy, still requires bowel prep, exposes one to radiation and can be uncomfortable. More interesting is dark lumen MRI, a test in development that does not use x-rays and appears in early trials to be able to detect most early colon cancers.

Most colorectal cancers are sporadic; however, approximately 5% are caused by specific inherited genectic abnormalities. Familial Adenomatous Polyposis (FAP) and Hereditary Non-Polyposis Colorectal Cancer (HNPCC) are two syndromes that have been linked to specific gene mutations. People who have inherited these mutated genes have a much higher risk of developing colorectal cancer as well as other cancers associated with these syndromes. The Paoli Cancer Center Risk Assessment Program counsels patients that are high risk for these syndromes. Through a detailed family health history, appropriate patients for testing are identified. A simple blood test can empower these patients and their families, and help them make beneficial healthcare decisions.

At Paoli Hospital, our surgeons have increasingly utilized less invasive laparoscopic assisted Colectomy in treating colon cancer. The combination of radiation and chemotherapy has dramatically reduced the need for colostomy in patients with rectal cancer Targeted treatments incorporate our growing understanding of the biology of colon cancer along with chemotherapy have dramatically improved the prognosis of patients with colorectal cancer. We continue to offer clinical trials through the Main Line Health CCOP to help advance treatments for our patients.

Keith J. Laskin, MD - Gastroenterology
*National Cancer Database



Oncology Data Services

In FY 2004, the Cancer Registry at Paoli Hospital accessioned 617 new cancer cases of these 537 are analytic (diagnosed and/or treated at Paoli) and 80 non-analytic (diagnosed and/or treated elsewhere and receiving subsequent care at Paoli). This represents a 27% increase in the number of new cancer cases diagnosed or treated at Paoli Hospital from 2003.

The incidence of cancer as seen at Paoli Hospital is referenced by age, gender, stage of disease and treatment. Thirty-one percent of male patients seen at Paoli Hospital were diagnosed between ages 70-79 with 28% of female patients between ages 60-69. Forty-six percent of patients receive surgery combined with other modalities as initial treatment as compared to 37% receiving other types of treatment and 17% receiving no treatment.

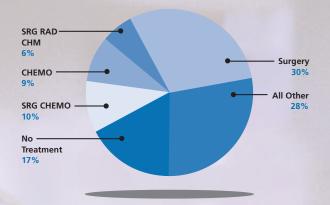
As an approved program of the American College of Surgeons (ACoS) Commission on Cancer (COC) the registry follows over 9,000 patients annually with a reference date of 1989. Lifetime follow-up is required for CoC approval and ensures continuity of patient care.

Cancer Registrars manage and analyze clinical information and are the first line in providing data for national statistics for the purpose of reporting health information for research, evaluation of the results of treatment, monitoring patient outcomes, quality management/improvement and cancer prevention and surveillance. Additionally, registrars monitor compliance of DOH reporting standards, national accreditation standards, cancer program development and facility planning and marketing. Registrars are certified professionals in oncology data management and must continually update their professional skills to ensure collection of quality data.

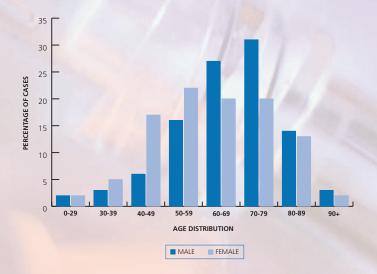
Cancer incidence is reported to the Pennsylvania Cancer Registry of the Department of Health, the National Cancer Database (NCDB) for comparative analysis with similar facilities and national organizations, the Facility Information and Profile System (FIPS) of the American Cancer Society for trends in cancer research and the Cancer Information Reference File (CIRF) for comparative analysis of medical registry systems users. Registry data is also shared with other healthcare facilities for continuity of patient care. In 2004, the registry received over 70 requests for patient data including participation in the CoC Early stage Breast Cancer and Local Excision Rectal Cancer special studies.

We must continually strive to educate the public and private sectors on the incomparable commitment of the cancer registry professional as a valuable resource in the war on cancer.

Initial Therapy



Male vs. Female by Age at Diagnosis



Site Distribution Report – AJCC Staging Paoli Hospital

Study Group: 2004 Analytic Cases (newly diagnosed) AJCC Stage													
Primary Site	Cases	0	1	2	3	4	Unk	N/A	B/B	Male	Female	% PH Database	ACS Est. Figures*
Bladder	28	21	4	1	0	0	2	0	0	20	8		
Brain/CNS	8	0	0	0	0	0	0	1	7	1	7		
Breast	115	16	47	36	10	4	2	0	0	0	115	21%	16%
Cervix	3	0	2	1	0	0	0	0	0	0	3		
Colon/Rectum	58	4	21	12	13	5	1	2	0	35	23	11%	11%
Esophagus	6	0	1	1	0	3	1	0	0	4	2		
Kidney	5	0	3	0	0	0	1	1	0	3	2		
Larynx	3	1	0	0	0	2	0	0	0	3	0		
Leukemia/Hematopoietic	5	0	0	0	0	0	0	5	0	2	3		
Lip & Oral Cavity	8	0	1	1	4	0	2	0	0	6	2		
Lung	67	0	17	4	9	36	1	0	0	25	42	13%	13%
Lymphoma	30	0	10	4	8	8	0	0	0	18	12	6%	5%
Melanoma	29	7	10	4	0	1	7	0	0	16	13		
Myeloma	3	0	0	0	0	0	0	3	0	3	0		
Other	26	1	0	3	6	1	2	12	1	15	11		
Ovary	8	0	0	2	4	1	1	0	0	0	8		
Pancreas	15	0	2	4	5	2	2	0	0	8	7		
Pleura	3	0	2	0	0	1	0	0	0	3	0		
Prostate	72	0	0	55	8	6	3	0	0	72	0	13%	17%
Stomach	4	0	0	0	0	1	2	1	0	2	2		
Testis	5	0	4	0	1	0	0	0	0	5	0		
Thyroid	14	0	9	1	1	1	2	0	0	5	9		
Unknown Primary	13	0	0	0	0	0	0	13	0	6	7		
Uterus	9	0	5	2	2	0	0	0	0	9	0		
Total	537	50	138	131	71	72	29	38	8	261	276	64%	61%

The most frequent cancer sites for 2004 are highlighted in the above table and represent the percentage of cancer incidence seen at Paoli Hospital as comparable to the American Cancer Society's national estimates. They are in descending order, Breast, Prostate, Lung, Colorectal and Lymphoma.

In addition, 80 cases where diagnosed in a staff physician's office or elsewhere and received ongoing treatment at Paoli Hospital for a total of 617 newly diagnosed cases in 2004.

* Cancer Facts and Figures 2004, American Cancer Society

Paoli Hospital Cancer Committee - 2004/2005

Michael B. Dabrow, DO Medical Oncology, Cancer Committee Chair

Timothy T. Fox, MD General Surgery, ACoS Liaison

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Gregory Thompson, MD Urology

Gregory Williams, MDPulmonology

Heather Curry, MD

Radiation Oncology

Pathology

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Keith Laskin, MD Gastroenterology

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Leland Berkwits, MD PM&R

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Rosheen McCutcheon, OCN, CCRP Clinical Trials & Cancer Research Sandra Karger, MS Community Health Services

Scott Kripke, MD General Surgery

Stacey Vacchiano, MSN, AOCN Mgr. Paoli Hospital Cancer Program

Valerie Hunt, MD Radiology

Paoli Hospital Cancer Service Directory



Supportive care provided by volunteers after surgery, chemotherapy and radiation therapy.

Breast Health Center 610-648-1315

The new Breast Health Center offers women the most advanced breast care services in a soothing, spa-like environment. The Center features personalized attention and care combined with the most current diagnostic imaging and treatment including digital mammography with computer-aided detection and minimally invasive biopsy procedures.

Risk Assessment and Genetic Testing Program

610-648-1600

Provides a risk profile for women that establish normal, moderately high and high risk factors associated with breast and ovarian cancers. For women with high risk, counseling and genetic testing is also provided. This research program gives our community members new and valuable insights into their own genetic risk.

Medical Oncology 610-648-1600

The Medical Oncology suite of the Cancer Center at Paoli Hospital offers a complete multidisciplinary approach to patient care in a warm nurturing environment. The Senior Oncology program offers a comprehensive geriatric assessment for patients' over age 65 to maximize the effectiveness of treatment while minimizing potential side effects.

Clinical Trials and Cancer Prevention Research 610-648-1637

Provides patient access to NCI sponsored cancer clinical research studies and prevention trials.

Community Education and Screening

610-648-1270

Community Education provides educational programs and cancer screenings to the community.

Fox Chase Cancer Network Referral Line

610-648-1140

An on-staff coordinator assists patients and their families through the referral process if a second opinion or treatment is needed at Fox Chase Cancer Center.

"Look Good, Feel Better" Program 1-866-225-5654

American Cancer Society sponsored program, providing cosmetic instruction for women during and after cancer treatment.

Lymphedema Management Program

610-526-3360

Therapists specially trained in Lymphedema management provide personalized therapy to patients to improve impaired lymphatic drainage, restore function and control edema in upper or lower extremities.

Nutritional Services 610-648-1179

Registered Dieticians counsel patients and care givers on proper nutrition during cancer care.

Oncology Data Services/Cancer Registry

610-648-1455

A comprehensive data management system for collection of malignant or neoplastic disease. Cancer Registrars capture a complete clinical and demographic summary of the patient's history, diagnosis, treatment, health status and provide lifetime follow-up of patients diagnosed with cancer.

Physical Medicine and Rehabilitation

610-648-1063

PM&R offers advice and instruction concerning exercises and/or ambulation for patients undergoing cancer treatment.

Radiation Oncology 610-648-1600

The Radiation Oncology suite at Paoli Hospital features state-of-the-art equipment and the latest cancer treatment options, including Intensity Modulated Radiation Therapy (IMRT) in a convenient community setting.

Social Services

Paoli has a dedicated oncology Social Worker who addresses issues such as community resource referrals, coping with illness, family and relationship concerns and financial or insurance needs. Group and individual counseling is also available.

Support Groups 610-648-1253

Information, education and support for patients recovering from cancer.

Women's Health Source 1-866-225-5654

A free membership club offering information on a wide variety of health care issues important to women.

Main Line Health

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