At Howard University Cancer Center we are dedicated to working to reduce health disparities on a local, regional and national level through our cutting edge basic and clinical research programs, ongoing training and education for our faculty, staff and the community and through our service programs for underserved populations. We are pleased to offer The Center Connection the Howard University Cancer Center newsletter. In this newsletter you will find information about Cancer Center programs and events and have an opportunity to meet our faculty and staff and learn more about the work that is being done at the Cancer Center.

One highlight of this issue is Dr. Agnes Day’s reflection on being a breast cancer researcher and having a daughter diagnosed with breast cancer. I commend her willingness to share this personal journey.

Inaugural Swing Fore the Cure Charity Golf Classic A Great Success

On May 7, 2009, eighty-four golfers took to the greens to help fight cancer in Washington, DC at the Inaugural Swing Fore the Cure Charity Golf Classic. Braving the wet weather, participants rolled up their pant legs and enjoyed 18 holes of golfing, a luncheon and inspiring words from HUCC patients, supporters, and a cancer pioneer. The event – held at Lake Presidential Golf Course in Upper Marlboro, MD – raised funding for the Men Take Ten Prostate Cancer Screening Program, renovation of the Charmettes, Inc.

Chemotherapy Infusion Suite, and the acquisition of research equipment. Dr. Wayne Frederick, Interim Director of HUCC, stated, “I am truly thrilled with the success of Swing Fore the Cure. To have so many participants and sponsors in our first year is very inspiring.”

(cont. page 2)
Frederick continued, “The improvements that this funding will provide to the Cancer Center’s screening, treatment and research programs will have a tremendous impact on the quality of care our patients receive.”

Following the round of golf, an awards ceremony was held to honor outstanding members of the HUCC community. Antoinette Galbraith received the Patient Award for her courage and optimism in her journey with breast cancer. The Georgiana Thomas Grand Chapter Order of the Eastern Star received the Rosemary Williams Community Service Award for their dedication to the Cancer Center. Each year, the organization hosts a walk-a-thon and sells tickets to a Washington Mystics game to benefit HUCC.

Two Leadership in Cancer Awards were presented to Dr. Lucile Adams-Campbell and Dr. LaSalle D. Leffall, Jr. Dr. Adams-Campbell headed the Cancer Center and its research activities for over 15 years before leaving last summer. Dr. Leffall has been a member of the Howard community for the American Cancer Society and the Society of Surgical Oncologists.

Swing Fore the Cure was made possible by the generosity of C-Change, Giant Food, Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins, National Minority Organ Tissue Transplant Education Program (MOTTEP), Dr. and Mrs. Clive O. Callender, WHUR, Mrs. Gracia Hillman, Marks Electrical Services, Inc., C. Brown & Associates, Inc., B & W Stat Laboratory, Blue Bay Anesthesia, P.C., Constellation Energy, Hodes, Pessin & Katz, P.A., Otis Elevator Co., Department of Radiation

The winning foursome (pictured above with Dr. Wayne Frederick and his son, Wayne) of the 2009 Swing Fore the Cure included Ty Hunter, Clinton Jones, Ray Savoy and James Campbell.

Antoinette Galbraith, Patient Award Winner

SAVE THE DATE!
The Second Annual Swing Fore the Cure Charity Golf Classic will be held on Friday, May 14, 2010.
Please contact Whitney O'Donnell at (202) 806-5640

Howard University Hospital, Trinidad & Tobago Association of DC, Inc., Langston Jr. Boys and Girls Golf Club, Distinctive Home Care and Mrs. Jeanette Gibbs-Deshields, Chief Administrative Officer, Howard University
Colon cancer is a disease in which cells in the colon become abnormal and divide without control or order, forming a mass called a tumor.

The exact causes of colorectal cancer are not known. However, studies show that certain factors increase a person’s chance of developing colorectal cancer. Among those factors are age, polyps (growths that protrude from the inner wall of the colon or rectum), personal and family history, diet, and exercise. Most polyps are not cancerous; however, experts believe that most colorectal cancers develop in certain types of polyps, called adenomas.

Colorectal cancer is more likely to occur as people get older. Although the disease can occur at any age, most people who develop colorectal cancer are over the age of 50.

Screening tests can find polyps that can be removed before they turn into cancer. Screening tests can also find colorectal cancer early -- when the chance of being cured is very good.

Health care providers may suggest one or more tests for colorectal cancer screening including fecal occult blood test (FOBT), sigmoidoscopy, colonoscopy, or double contrast barium enema (DCBE).

Talk to your health care provider about when to begin screening for colorectal cancer, what tests are recommended, the benefits and risks of each test, and how often to schedule appointments.
As a Microbiologist, breast cancer was the farthest thing from my mind. I had performed research on Cryptococcus neoformans, a pathogenic fungus that few people had the courage to work on at the time. While a risky endeavor, it provided the basis for my Ph. D. degree from Howard University. My post-doctoral training required another type of courage – to be the only African American scientist in the National Institute of Dental Research at the National Institutes of Health during that period. My research took a turn towards studying the various proteins in bone and connective tissue, and the role these proteins play in both normal development and disease. While far removed from my earlier studies, the principles of scientific research remained the same; Work hard, work clean, work honest, and work hard.

Coming back to Howard University as a professor, my greatest fear was not having the courage to make a difference. And again, my research focus changed - to cancer. Since my research laboratories were located in the Howard University Cancer Center, I thought it best to devote part of my time to understanding the numerous causes of cancer, and perhaps gain insight into its prevention and cure. Throughout these career changes, my most steadfast and loyal supporter has been my daughter, Teresa.

As a cancer researcher, I would order cancer cell lines for study without a thought as to the women and men whose pain and suffering were exemplified in culture dishes of cells who refused to obey the natural laws and ignored the signposts of controlled cell growth. Cancer had become an abstract problem to me and represented a challenge to be probed and prodded until answers poured forth in the form of data representing incremental triumphs against this disease.
In January of 2009, cancer became real to me and with that reality came a face – the face of my daughter. Who would have thought that a routine baseline mammogram at age 35 would result in six years of treatment with various toxic agents, drugs and, yes, prayers? With a diagnosis of ductal carcinoma in situ (DCIS), Teresa now faces a challenge normally faced by women in their twilight years. Unfortunately, this scenario is occurring with more frequency in African American women under the age of 40. The “why” of this situation is the current focus of my research: Breast Cancer in African American Women: Molecular Analyses of Incidence and Outcomes.

Who knew that my circuitous route to breast cancer research would bring me to this place at this time? Even in her illness, my daughter provides the inspiration for me to rededicate my efforts towards contributing to the cure for cancer in this lifetime. Too many mothers with words less eloquent have sung a dirge of despair. I look forward to singing a psalm of joy.

In your eyes I hope you see
The pride and joy you still bring to me
Your courage and strength give inspiration
To family and friends, you’re a constant elation

Who knew that my circuitous route to breast cancer research would bring me to this place at this time? Even in her illness, my daughter provides the inspiration for me to rededicate my efforts towards contributing to the cure for cancer in this lifetime. Too many mothers with words less eloquent have sung a dirge of despair. I look forward to singing a psalm of joy.

In your eyes I see hope and determination
A call to arms to women of each nation.
To fight to live, and live to fight,
And not go gently into that “good night”.
To overcome, to persevere
To tell the world that you are here!
To live, to love, to grow, to thrive
To fight, to conquer, to survive.

Dr. Agnes Day (seated) and her daughter Teresa
Provider Perspectives

Mammography Screening Guidelines

Anita Aggarwal, M.D.
Director and Assistant Chief, Division of Hematology and Oncology
Associate Professor, Department of Medicine
Howard University

The recently published new guidelines from the U.S. Preventive Services Task Force (USPSTF), a panel of independent experts, have left women quite confused.

New Guidelines by USPSTF which do not apply to higher-risk women:

- Women between the ages of 40 and 49 should not be routinely screened.
- Women between the ages of 50 and 74 should be screened every two years.
- Screenings are unnecessary for women 75 and older.
- Women should not be taught how to perform breast self-examinations.

There is no additional benefit to clinical breast examination by doctors, nor are there added benefits to digital mammography or magnetic resonance imaging over film mammography.

Several other expert sources, including the American Cancer Society have criticized the new guidelines and disagree with them. American Cancer Society Stands By Cancer Screening Guidelines. "We are not redoing or rethinking our guidelines at this time, nor are we going to restate our guidelines to emphasize the inadequacies of screening," said Dr. Len Lichtenfeld, deputy chief medical officer of the American Cancer Society.

Howard University Cancer Center seeks to improve the diagnosis, treatment, and prevention of cancer through innovative basic and clinical research, patient care, community education and outreach, and the training of cancer specialists. Cancer Center at Howard University serves population from diverse ethnic groups. Ninety percent of patient population at our hospital is African American. Age-specific incidence rates are higher for Black than White women before age 40 years. Moreover, the cancer in these young females is biologically different, more aggressive and usually diagnosed at higher stage. In 2008, 40,480 women died from breast cancer, one-sixth of all breast cancer deaths were in women diagnosed in their 40s. If we follow the new guidelines as recommended by USPSTF, we will be missing all those females who could be diagnosed at stage when the breast cancer can be cured. We will continue to follow the screening guidelines as by ACS.

- Yearly mammograms starting at age 40 and continuing for as long as a woman is in good health.
- Clinical breast exam (CBE) as a part of a periodic health exam, about every 3 years for women in their 20s and 30s and every year for women 40 and over.
- Women should know how their breasts normally feel and report any breast change promptly to their health care providers. Breast self-exam (BSE) is an option for women starting in their 20s.

You Won’t Find Cancer If You Don’t Look For it
Dear Dr. Wayne Frederick and Ms. Kimberly Higginbotham:

Dr. Frederick, on behalf of Ms. Higginbotham as well as other medical persons, I am sharing my appreciation for your Oncology (WISH) Program.

Words can not express how grateful and appreciative I am for your sensitive “navigation” and “coordination” of my mammogram and cervical (PAP Smear) testings. On both occasions, I felt cared for and respected. Your sensitivity is especially appreciated, given the fact that I was not the only patient that you had to navigate and coordinate, although you acted as if I were the only patient.

Words can not express how grateful and appreciative I am of the HUH Department of Oncology Services, which, in partnership with the WISH Program, offers its very best oncology physicians and medical staff. Dr. Hill was sensitive, listening to my concerns, as he prepared for my cervical (PAP Smear) examination. His attending nurse and female physician were also patient-centered; the female physician displayed caring verbal and nonverbal communication. As a teaching hospital, Dr. Hill was not only listening to me, as a patient, but he also was educating his medical student, particularly with respect to patient-doctor communication. As a result, I felt there was effective communication interaction between physician, medical staff, and patient.

During the registration and waiting periods, which can be very stressful for patients while waiting for these types of exams, the support staff displayed calm caring for the patients. This was especially observable, given the various culturally diverse clientele. Light snacks and drinks were offered to patients, another caring feature of this program. Still another special and caring feature, is the student volunteer escort service, where the student volunteers segue patients from one site to another site. This is also a learning experience for the student volunteers, as they provide medical and community service.

When a patient is either under-insured or uninsured, it is so very important to have a program such as this one and to have a caring staff such as HUH’s Department of Oncology Services. I also appreciated the opportunity to have a follow-up conference with “my” physician, Dr. Hill, clarifying some questions I had. Ms. Higginbotham helped to “navigate” this conference.

So, keep up this great and special cancer program for the women. We, the community of women, need it. If there is anything that I can do in promoting and supporting this program, please do not hesitate to call me.

Thank you,

Judy R. Walton
Ward 7 Resident
HUCC Celebrates Breast Cancer Awareness Month
October 2009

Georgiana Thomas Grand Chapter
Holds 5K Breast Cancer Walk
to Benefit HUCC

On Saturday, October 3, the Georgiana Thomas Grand Chapter held its annual 5 K walk to benefit the Cancer Center’s breast cancer programs. Close to 50 people participated in the walk, including many Cancer Center staff, family and friends. The Georgiana Thomas Grand Chapter has been a long-time supporter of the Cancer Center and holds several events throughout the year to support the Cancer Center’s programs including a raffle and the Breast Cancer Walk.
The Quilting Ministry from Union Temple Baptist Church donated 50 non-allergenic mastectomy pillows to the Cancer Center. “I hope that the patients can feel the love and care that has been placed into every stitch” stated Mrs. Washington who leads the quilting ministry. After having surgery for breast cancer (mastectomy, lumpectomy, and/or lymph nodes removed) patients will have tenderness and discomfort. Mastectomy pillows can help relieve the discomfort following these procedures. The beautiful handmade pillows are made of a variety of pink patterns (see picture).

The pillows will be placed in the chemotherapy infusion center as well as in the Howard University Hospital Surgical Suite to be distributed to patients as needed.

In recognition of Breast Cancer Awareness the Northern Virginia Chapter of the AKA Sorority donated scarves to HUCC for patients to use when they have had hair loss from chemotherapy. The organization donated 50 soft, handmade pink and white scarves.
As a cancer center focused on supporting its community, HUCC is delighted to highlight those in the community who have given back to our patients. This issue of the Newsletter highlights the generosity of Mr. Lindsay Cobbs. Mr. Cobbs’ contributions to the Cancer Center are more remarkable in that at a time when he was most financially vulnerable, he decided to give back to the Howard University Cancer Center.

Lindsay Cobbs has had quite a year. In February 2008, Mr. Cobbs and his partners opened Indulge, a candle, gift and accessory boutique in Dupont Circle. The opening fulfilled his dream of having his own business, but he was quickly met with misfortune. Shortly after opening the store, Mr. Cobbs began to feeling strange. Initially, he believed it had something to do with the long hours – spending his days as a regulatory analyst for Johnson & Johnson and his nights at Indulge. But soon, he would find out it was something far more serious.

In the summer of 2008, his health was becoming more of an issue and he found himself in the emergency room – diagnosed with a heart condition. Despite this setback, Mr. Cobbs contacted the Cancer Center about his interest in supporting breast cancer. To that end, he donated a portion of the proceeds from a breast cancer candle sold in the store and even joined the Cancer Center at HU’s Homecoming in October 2008. Mr. Cobbs continued with his frantic pace for a few more months. But when faced with declining sales at the store, he knew that something had to change. After much contemplation, he decided to close the store in February 2009.

Today, he does not regret this past year. “I’ve learned a lot (from owning my own shop). And I’m happy with the decision to close the store.” He went on, “More than that, I’m glad I was able to help breast cancer patients at Howard.”

Mr. Cobbs continues to work with Cancer Center staff to develop innovative ways to increase philanthropic support at HUCC.

Giving to HUCC

**Annual Fund** - In these difficult economic times, the funding priorities for HUCC are continually evolving to meet patient needs. Larger projects can be put on hold to help patients provide for basic necessities such as transportation or to hire an additional support staff to increase efficiency. In order to respond quickly to these priorities, unrestricted donations are essential, and such donations make up the Cancer Center’s **Annual Fund**. As an unrestricted donation, your contribution to the Annual Fund will support projects such as the development of new patient programs, staff salaries, research programs, and preserve and enhance the facility. No gift is too small and when combined with donations from other caring members of the community, these donations make a huge difference in the treatment and care of HUCC’s patients.

**Sponsor-An-Infusion Room** - To help provide a comfortable environment for our chemotherapy patients during their long treatments, individuals can sponsor an infusion room. Your donation to this program will update our existing infusion rooms with new televisions, DVD players, chairs and decorations.

**Breast Cancer Programs** - Donations designated for breast cancer programs will help provide free screening to DC area women (40 and over) through the Rosemary Williams Mammoday Program and early education to teenage girls through Project Early Awareness.

**Prostate Cancer Program** - The Men Take Ten Program provides education about the risks and signs of prostate cancer as well as free screening to DC men.

**Swing For the Cure Charity Golf Classic** - The Second Annual Swing Fore the Cure will be held on Friday, May 14, 2010. Donations to Swing Fore the Cure will benefit community, research and clinical programs. Registration: $200 for Individuals, $700 for Foursomes. Sponsorship opportunities are also available.

For more information, contact Whitney O’Donnell at (202) 806-5640.
□ Yes, I would like to make a donation to HUCC to help ease the burden of cancer in the African American and medically underserved communities.
Please accept my donation in the amount of $________.

I would like my donation to be used for:

□ Annual Fund
□ Sponsor an Infusion Room
□ Breast Cancer Programs
□ Prostate Cancer Programs
□ Swing Fore the Cure

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