# Cancer Survivors: The New Majority

More than 10 million people in the United States are now considered cancer survivors. Miraculously, 65 percent of people diagnosed with cancer today are expected to live at least five years after their diagnosis. The change is due largely in part to advances in treatment, early detection and increased public awareness about the disease.

In 2006, Eisenhower Medical Center's Lucy Curci Cancer Center treated more cancer cases than any other medical facility in the Coachella Valley. It has become a safe haven for those diagnosed, treated and surviving cancer. "What patients at the Center have come to rely on is that the Center's targeted and sophisticated treatments and technologies are helping them survive the types of cancers that just a generation ago were thought to be a death sentence," says Joan Randall, RN, Executive Director, Eisenhower Lucy Curci Cancer Center.

**THE NEW STATISTICS**

Research, new drugs, targeted therapies and state-of-the-art technology are working in tandem at Eisenhower Lucy Curci Cancer Center to fight today's most prevalent cancers: breast, colorectal, leukemia, lung and prostate. The Eisenhower Schnitzer/Novack Breast Center is the first and only center in California to obtain the state-of-the-art advanced diagnostic tool for breast cancer detection known as breast-specific gamma imaging.

Breast cancer is still the most common cancer diagnosed in females. While one in eight women will be diagnosed with breast cancer in their lifetimes, the overall five-year survival rate is an encouraging 88.6 percent. If the cancer is found in its earliest stage and localized, the five-year survival rate jumps to an even more significant 98 percent.

Thanks to increased public awareness of the disease, breast self-examinations, mammography and new diagnostic techniques such as breast-specific gamma imaging (BSGI) technology, patients and their health care providers are making inroads in the battle against breast cancer. The Eisenhower Schnitzer/Novack Breast Center is the first and only center in California to obtain the state-of-the-art advanced diagnostic tool for breast cancer detection known as breast-specific gamma imaging. In addition, the Eisenhower BIGHORN Radiation Oncology Center was the first in the Coachella Valley to offer the MammoSite™ Radiation Therapy System for breast cancer, a high-dose technology that delivers radiation treatment in five days versus six to seven weeks.

The fourth most common cancer in both men and women, colorectal cancer is decreasing primarily due to an increase in screening for the disease, which can detect polyps before they progress to cancer. Procedures like the fecal occult blood test, sigmoidoscopy and colonoscopy (recommended at age 50 and above) have all proven effective in the detection of the disease. At Eisenhower Imaging Center, a new virtual colonoscopy, also called computed tomography colonography, uses special X-ray equipment to produce pictures of the colon. The American Cancer Society® notes that a majority of colorectal cancer cases could be prevented with screening and preventive care. In fact, early detection of colorectal cancer greatly improves survival rates, with a five-year survival rate of 90 percent when the cancer is localized.

Inroads have been made in the treatment of adult onset leukemia as well, with the introduction of such drugs as Gleevec® and such sophisticated treatments as bone marrow transplantation, which have improved survival rates to more than eight years for cases in which the cancer is treated at stage 1 or earlier. Eisenhower BIGHORN Radiation Oncology Center was the first to offer Stereotactic Radiosurgery.

Lung cancer death rates have been declining over the past several years due in large part to the decrease in smoking over the past 30 years, the disease's most significant risk factor. Researchers are exploring the benefits of early detection and its effects on lung cancer mortality. Eisenhower Medical Center is a participant in the International Early Lung Cancer Action Project (I-ELCAP), a seminal study to detect lung cancer in its early stages, in which only four facilities in California are participating. Investigators are studying the effects of computed tomography in the early detection and diagnosis of lung cancer and its ability to increase survival rates to as much as 10 years.

Prostate cancer is the most common cancer diagnosed in men. Radiation Oncologists and Urologists at Eisenhower collaborate to choose the most effective treatment for each patient. Eisenhower's Arnold Palmer Prostate Center was the first in the world to offer on-site IsoStrand™ seed stranding using the cesium isotope combined with external beam radiation therapy for prostate cancer treatment.

Eisenhower BIGHORN Radiation Oncology Center was the first to offer Stereotactic Radiosurgery, threedimensional, computer-guided radiation that aims highly focused beams for radiation directly into a tumor. The Center also offers Intensity Modulated Radiation Therapy (IMRT), one of the most significant innovations in cancer treatment in the past three decades. Using sophisticated computer technology to create extremely precise and accurate treatment plans, IMRT allows the radiation beams to be shaped in ways previously thought impossible. The Center's advanced equipment and treatment techniques are numerous for the specialized needs of each patient.

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# Eisenhower Medical Center Cancer Registry

**WHAT IS A CANCER REGISTRY?**

The Eisenhower Medical Center Cancer Registry, located in the Eisenhower Lucy Curci Cancer Center, is the data and statistic nerve center for all Eisenhower Medical Center cancer patients. Staffed by five employees, the group follows an average of 8,800 patients annually.

"As soon as a person has a cancer diagnosis at Eisenhower, they are automatically enrolled in our database," explains Kim Herling, Cancer Registry Coordinator. "We then follow that patient every 15 months to see how they are doing — if they are cancer free, their general quality of life. These are the things we monitor on a regular basis."

The information is used to develop screening and preventive programs for patients. "We produce an annual report from the data collected that is a wonderful tool for medical staff. Ultimately, however, the goal of collecting the information is to improve patient care," says Herling. The statistical information documenting diagnosis, treatment and follow-up is submitted to state and national registries for use in research, treatment and prevention planning.

The tracking process is usually done "invisibly" and all information is kept completely confidential. "By just going to the doctor and having the annual exam, that helps us track a patient's progress and keep them current in our database," says Herling. "We encourage patients to have their annual checkups. Also, if they move or change doctors, we ask they inform us of that new information. By doing this and participating in the cancer registry, they are helping to improve cancer outcomes."

Eisenhower Lucy Curci Cancer Center's 2007 accreditation (a full Three-Year Approval with Commendation) from the American College of Surgeons (ACoS) Commission on Cancer (CoC) was based in part on the Cancer Center's compliance with rigorous standards, including the collection of quality data from approved facilities and using the data to develop effective educational interventions to improve cancer care outcomes at the national, state and local levels.

# New Support Group for Breast Cancer Survivors

As more and more people survive cancer, places like Eisenhower Lucy Curci Cancer Center are committed to treating more than just the physical needs of cancer patients. For the past four years Alison Sachs, MSW, OSW-C, Community Outreach Director, for Eisenhower Lucy Curci Cancer Center has facilitated one of the most highly attended breast cancer support groups in the country. "This is a healing place like no other. We want to support our patients not only on a physical level, but on an emotional and spiritual level as well," says Sachs. Recently it became very clear to Sachs that there were women in her group that had been out of treatment for a year or so — some for even two years. "They had very specific issues and needs to talk about that were different from the women who were newly diagnosed," explains Sachs. "That is when I began thinking that maybe we need two different groups. Maybe we need a group for the newly diagnosed and those under treatment, and another group for survivors."

Sachs immediately called on long-time colleague Lynn Behar, PhD, MSW, to help her facilitate the group. "It is important to me and to Eisenhower to have trained professionals leading our groups — people who understand the specific needs and concerns of those who have been diagnosed and treated for cancer. The day treatment ends, a new chapter in life begins for patients. It is a whole new phase of their cancer experience. They are not focused on fighting cancer anymore. I wanted Lynn to help our patients deal with those new issues."

Behar, an oncology social worker with more than 10 years experience facilitating similar groups in both the hospital and community setting, was immediately on board. "It is always inspirational to facilitate a group and learn from people who have learned to live day-to-day," says Behar. "There is a lot of laughter in the cancer group, a lot of shared experiences. Many people would think they are depressing, but that is far from the case."

As group facilitator, Behar provides a safe place for patients to share their ideas and feelings. "I am there to make it comfortable for them and to help when things get stuck," she says. "I certainly don't 'run' the group. I let the experts do that. I truly believe the experts are the people who have had cancer."

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