Hello friends of the Wilmot Cancer Center,

In my first few months as Director of the Wilmot Cancer Center, I’m humbled and continuously inspired by the diversity and quality of the faculty and staff who directly impact the world-class patient care that takes place here every day.

Cancer care in the year 2013 is all about collaboration. The Wilmot Cancer Center exemplifies this model. From clinicians and nurses to pathologists, scientists, parking attendants and volunteers, we all share in one common goal—to provide nationally recognized, precision cancer care of the highest quality and improve quality of life for patients and survivors through research and community engagement.

In this issue of Dialogue, we’re eager to share stories from a small number of these individuals that make the Cancer Center such a special place, day and night. Since cancer touches practically every department in the University of Rochester Medical Center—dermatology and urology, gynecology and orthopedics to name a few—you will meet a variety of contributors to the Cancer Center across many departments.

Separately, I’m happy to report that we’ve completed the expansion of the sixth floor of the Cancer Center to include new clinical and imaging suites.

Our growth in patient volume year over year made the need for this added space evident. Additional projects in the Cancer Center facility are taking shape to complete the vertical expansion in 2014. Finally, I’d like to take this opportunity to express my appreciation for the immense support we’ve received over the years through personal gifts—large and small. Our recent Discovery Ball was a resounding success, raising more than $600,000 for cancer research at Wilmot. All of this money stays here in Rochester, providing pilot funds for our four research programs: Hallmarks of Cancer, Blood Cancers, Solid Tumors, and Cancer Control and Survivorship. These programs demonstrate our commitment to a collaborative, “team” approach to scientific investigation. We are so fortunate to work in a supportive, generous community like Rochester. Thank you to all supporters and my best wishes for a nice fall season.

Sincerely,

Jonathan W. Friedberg, M.D., M.M.Sc.
Director, James P. Wilmot Cancer Center

On the Cover
A small number of the many individuals that impact daily operations at the Wilmot Cancer Center.

photos by Ken Huth

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Celebration Ignites Discovery at this Year’s Ball

More than 950 patients, faculty and staff, board members and donors, and the local community packed the ballroom at the Rochester Riverside Convention Center on Saturday, May 11 in celebration of the many moments of discovery that take place each day at the James P. Wilmot Cancer Center.
The 14th annual Discovery Ball, chaired by Jeffrey and Patrice Pierce, successfully raised $600,000—including $215,000 pledged in cash donations—and continued to be the single largest fundraiser this year. The funds will support seed grants in four research programs and help the Cancer Center to be maximally competitive for external research funding.

“For first-rate patient care and cancer research to thrive in Rochester, support from the community is critical,” noted Jonathan Friedberg, M.D., director, Wilmot Cancer Center. “Cancer is not an easy target, and we know that cooperative efforts are key to successful research and patient care. The investment made by the many people that attended the Discovery Ball will help our team rapidly pursue innovative scientific leads in the quest to answer key questions in cancer.”

Attendees were brought to their feet after a moving speech from Webster resident, Georgiana Zicari. She was honored with this year’s Inspiration Award, the Wilmot Cancer Center’s highest honor, presented annually to an individual who has helped cancer patients and their families have hope for the future. Georgiana, a mom of two young children, has overcome Hodgkin’s lymphoma and thyroid cancer, starting at age 14. She credits a close relationship with her physicians, her family and her faith for guiding her through both bouts of cancer.

The crowd also heard from University of Rochester President Joel Seligman; URMC CEO Bradford C. Berk, M.D., Ph.D.; and Hucky Land, director of research and co-director, Wilmot Cancer Center; as well as Steve McCluski, chair of the Wilmot Cancer Center Board.

The festivities continued after the program into the evening with dancing and photo booth shots with silly props.
Donor Spotlight
Nancy & Friends Fighting Cancer

The announcement of a $100,000 gift from Nancy & Friends Fighting Cancer ignited excitement during the Discovery Ball program. The foundation was formed in memory of Nancy Zicari Infantino, who lost her battle with breast cancer in 2002 at 32 years old. Nancy’s brother, Bruce Zicari II, shared the exciting news of the gift as he addressed the audience at the Ball.

“These are the best ideas of our brightest minds, our best hope for defeating this devastating disease,” said Zicari II, also a Wilmot Cancer Center board member. “Having help to fund several of these grants and seeing firsthand their impact here in our own backyard, we are inspired to stretch ourselves and give as much as we can.”

The gift is designated for cancer research seed grant funding. Since 2002, Nancy & Friends has generously provided the Cancer Center with $462,000 to advance cancer research.
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Laura Calvi, M.D., Jonathan Friedberg, M.D., Patrice Pierce, Jeff Pierce, Colleen Buzzard, Hucky Land, Ph.D.
Bone marrow transplant, leukemia and lymphoma patients receiving outpatient care at the Wilmot Cancer Center will now have a new clinical suite of exam rooms for their visits thanks to the completion of the sixth floor.

The need for this additional clinical exam space is apparent—the Cancer Center has experienced a 15 percent increase per year in patients in need of cancer care, in the past few years.

The initial design of the new Cancer Center allowed for the seamless addition of these new suites, without losing connectivity to vital services and state-of-the-art care.

The exam room suite includes a new reception check-in/check-out and waiting area, 10 exam rooms, physician and nurse workrooms, clinical technician workstation, and all of the support services patients expect from the Cancer Center. Patients and their families can continue to access all amenities, as well as infusion services.

An additional radiology suite has also been added to the sixth floor to provide imaging services to BMT patients in the inpatient unit, to limit their distance to-and-from scans and tests. This suite will also be used for urgent outpatient needs.

These projects add to the world-class facility available to cancer patients as the Wilmot Cancer Center strives to be a vital cancer care resource to central New York State, now and for generations to come.
Wilmot Cancer Center Receives National Recognition for Quality Care

The Wilmot Cancer Center has received the 2012 Outstanding Achievement Award by the American College of Surgeons’ (ACS) Commission on Cancer (CoC)—a consortium of professional organizations dedicated to improving patient outcomes and quality of life for cancer patients. The award acknowledges 79 U.S. health care facilities with accredited cancer programs that achieve excellence in providing quality cancer care to patients. The Cancer Center was the only recipient of this award in the region.

Twenty-nine categories within four cancer program areas were used to evaluate the Wilmot Cancer Center: cancer committee leadership, cancer data management, clinical services and quality improvement.

The purpose of the award is to raise awareness of the importance of providing quality cancer care at health care institutions throughout the U.S., as well as:
- Motivate other cancer programs to work toward improving their level of care.
- Facilitate dialogue between award recipients and health care professionals at other cancer facilities for the purpose of sharing best practices.
- Encourage honorees to serve as quality-care resources to other cancer programs.
- Educate cancer patients on available quality-care options.
We are at a pivotal juncture in the fight against cancer. Every day, cancer researchers across the country and in our own backyard, take steps toward answering key questions in treatment and prevention—requiring dedication, patience and money.

Thanks to more than 40 years of national investment in cancer research, we are observing dramatic improvements in outcomes of cancer therapy, as well as our understanding of the fundamental abnormalities in cancer cells.

Such understanding is generating a new generation of “targeted” cancer treatment, with higher success rates, and lower toxicity compared with standard chemotherapy and radiation. However, limitations on federal and state funds for research, and the impact of health care reform, paradoxically threaten our progress in cancer research like never before.

Research funding from non-government sources will be key to our success. I’m excited to report that more than $4 million in cancer research funding has been secured in the last few months from external organizations such as the Patient-Centered Outcomes Research Institute (PCORI) and the American Cancer Society to continue our efforts in geriatric, liver and palliative cancer care at the Cancer Center.

The grant from PCORI is particularly exciting as the organization only awarded 30 grants to investigators across the U.S. that are collaborating with various stakeholders in the community. You will find more details on these three exciting grants for cutting-edge and collaborative cancer research in this edition of Dialogue.

In Rochester, we are in a unique position to continue this important fight against cancer. We have a great history of discovery, innovation and collaboration at the James P. Wilmot Cancer Center. But we can’t take on this fight alone. The only way to guarantee top-level patient care for cancer in our region is by maintaining, and growing, our cancer research efforts with the help of the Rochester community.

Thank you!

Sincerely,

Hartmut “Hucky” Land, Ph.D.
Robert and Dorothy Markin Professor
Director of Research & Co-Director
James P. Wilmot Cancer Center
Decades Later,
Tamoxifen Pushed in New Directions
Tamoxifen, a time-honored breast cancer drug, has been back in the headlines lately because two separate clinical trials reported that 10 years of treatment is superior to the standard five years for many women with breast cancer.

The studies enrolled more than 15,000 women, and showed that 10 years of therapy reduced the risk of recurrence and death from early-stage, hormone-positive breast cancer. The news made a big splash at this year’s American Society of Clinical Oncology (ASCO) meeting. Many oncologists believe the findings will change current practice worldwide; at a minimum it will create additional dialogue between patients and physicians about the risks versus benefits of extending tamoxifen therapy.

In the midst of the ASCO buzz, a Wilmot Cancer Center research team reported some very interesting findings of their own—on how to leverage the drug’s various cellular activities so that it might work on more aggressive breast cancers.

Published in the journal *EMBO Molecular Medicine*, the research is a promising development for women with basal-like breast cancer, sometimes known as triple-negative disease. This subtype has a poor prognosis because it is notoriously resistant to treatment. Basal-like cancers lack the three most common breast cancer biomarkers (the estrogen receptor, the progesterone receptor and the Her2/neu receptor), and without these receptors, the usual front-line therapies are not effective.

Tamoxifen is known primarily for its ability to block estrogen receptors on the outside of cancer cells. However, newer studies have suggested that when tamoxifen is given in higher doses, it works through a second mechanism of action independent of the estrogen receptor. This second mechanism was the focus of the Wilmot laboratory.

Led by doctoral student Hsing-Yu Chen and Mark Noble, Ph.D., professor of Biomedical Genetics at URMC, the team studied the molecular mechanism that allows basal-like breast cancer cells to escape the secondary effects of tamoxifen, and discovered that two proteins are critical in this escape. One protein, called c-Cbl, controls the levels of multiple receptors that are critical for cancer cell function. A second protein, Cdc42, can inhibit c-Cbl and is responsible for the tumor’s underlying resistance.

The team also discovered that by targeting Cdc42, and thus impeding the inhibitor with an experimental drug compound known as ML141, they could restore c-Cbl’s normal function. Through additional work in animal models and in human cell cultures, the team demonstrated that when ML141 is paired with tamoxifen, it enhances the ability of the drug to induce
cancer cell death and suppress the growth of new cancer cells. Neither drug alone had the same effect on basal-like breast cells. Noble believes there is considerable value to targeting Cdc42, because elevated levels of the protein have been observed in multiple types of cancer.

The powerful ML141-tamoxifen drug combination looks like it has two more important features: It selectively targets cancer cells while sparing normal, healthy cells; and it appears to cripple cancer stem cells, the primitive cells responsible for initiating new tumors and for fueling the bulk of the tumor cell population.

“Our work is very exciting because our approach simultaneously addresses two of the most critical challenges in cancer research—to increase the utility of existing therapies and to discover new vulnerabilities of cancer cells,” said Noble, who also is a leader at UR’s Stem Cell and Regenerative Medicine Institute. “Based on these discoveries, we are already pushing forward with new compounds and approaches that might make clinical translation of this discovery much more rapid than would occur with traditional drug-discovery approaches.”

The National Institutes of Health, Susan G. Komen for the Cure, the U.S. Department of Defense, and the New York State NYSTEM initiative funded the research. Co-authors include Yin Miranda Yang, Ph.D., and Brett Stevens, Ph.D.

The Wilmot Cancer Center functions as an ecosystem that reaches into almost every department of the University of Rochester Medical Center and beyond. Intensive collaboration among more than 1,000 clinicians, nurses and scientists, pathologists, operations staff and volunteers lies at the heart of providing the best possible care to patients and progressive scientific discoveries.

Join us as we open the doors of the Cancer Center over the course of 24 hours to share stories from a handful of the many people that make this place so very special.

6:30 a.m.
After her one hour drive in from Kent, N.Y., Lynn Levandowski walks through the clinical areas of the Cancer Center to ensure all administrative operations are running smoothly.
Dr. Chunkit Fung collaborates with other oncologists and nurses in the team work area prior to seeing patients. In the past few years with the Cancer Center, Dr. Fung has been struck by the strong relationships he’s had the ability to create with his patients, their families, and the faculty and staff.

9:00 a.m. Lei Xu, Ph.D., investigates how cancer cells spread from their original location to other areas in the body. Metastasis is a major cause of death in many cancer patients, but how it occurs is still unclear.
9:30 a.m.
As a parking ambassador for more than six years, Jay Vongkhily is the smiling face that many patients and their families see upon arrival and departure every day.

10:00 a.m.
Dr. Wakenda Tyler chose the URMC to start her career because of the support for research and clinical practices that the organization and community provides. Influenced by her athletic nature and the passing of a good friend from cancer while in medical school, Dr. Tyler’s choice of orthopedic oncology has been extremely rewarding.
11:00 a.m.  
Robin Boerman helps Cancer Center staff carry out the more than 80 active clinical trials in all cancer disease groups. This includes collaboration with more than 10 URMC departments, with a keen focus on patient welfare and safety.

11:30 a.m.  
Loralee McMahon analyzes a patient’s breast tumor sample in the fluorescence in situ hybridization (FISH) lab. While Loralee and her team of five in surgical pathology do not interact with patients, they understand the enormity of their role in a patient’s care—an accurate report will result in an accurate diagnosis and treatment.

Noon  
Susan Nelson works with patients at the Wilmot and Pluta Cancer Centers to regain some essence of control during and after their cancer treatments through activities such as yoga, massage, nutritional counseling and cooking classes.
1:00 p.m.
Husband and wife team, Pat and Bob Zampi, volunteer at the Cancer Center on Monday afternoons. Pat greets patients at the Infusion Center, while Bob drives the golf cart for patients. As a patient of the Cancer Center, Pat is dedicated to educating patients so they are more at ease during treatment.

2:00 p.m.
Dr. Jane Liesveld visits with Peter Wojtas, a leukemia patient that recently received a bone marrow transplant. Her research of how cancer develops in bone marrow easily translate to the patients she cares for each day.

3:00 p.m.
Nurse Practitioner, Julie Berkhof splits her time between the clinic and the office, helping gastroenterology cancer patients manage treatment symptoms on the phone and in the exam room.
3:30 p.m.
Advances in radiation technology help physicist, Michael Schell, Ph.D., provide targeted treatments for patients—sometimes as small as a postage stamp—with greater accuracy to reduce damage to healthy tissue and vital organs.

4:00 p.m.
Chawnshang Chang, Ph.D., has created a lot of excitement in the scientific community for his research into anti-androgen therapies, and the role of androgens in prostate cancer and other genitourinary cancers. He has developed an experimental treatment for patients who have metastatic prostate cancer derived from the main ingredient in the spice turmeric.

5:00 p.m.
Through Dr. Frank Akwaa’s fellowship, he is immersed in treating lymphoma and leukemia patients every day. This experience he will take to Laura Calvi’s lab where he will study how bone marrow micro environments play a role in these diseases—making the connection between science and the patient.
9:00 p.m.
Vijaya Balakrishnan, a graduate student, has spent the last six years researching the commonalities and differences of healthy and cancer cells in the Land Lab.

3:00 a.m.
Throughout the night, Stephanie Bronk monitors patients’ vitals and draws blood for testing on the Bone Marrow Transplant floor. While her position as RN can be emotionally challenging, she is always inspired and amazed by her patients and their families.

6:30 p.m.
Max Popp, a postdoc in the Maquat Lab, researches how faulty mRNA that are not destroyed by the body can cause various diseases such as cancer. This underlying, basic research is the foundation for which clinical research is built.
Wilmot Cancer Center: By the Numbers

**Patients from far away:**

- **Women by stage:**
  - 0 – 8% (caught before stage I)
  - I – 29%
  - II – 17%
  - III – 14%
  - IV – 16%
  - N/A – 16%

- **Men by stage:**
  - 0 – 6% (caught before stage I)
  - I – 18.5%
  - II – 21.5%
  - III – 16%
  - IV – 21%
  - N/A – 17%

**by cancer type:**

- Brain: 5%
- Eye: 0.15%
- Head & neck: 3%
- Endocrine system: 2%
  - (thyroid, etc)
- Respiratory system: 13%
- Breast: 0.25%
- Soft tissue: 1%
  - (including heart)
- Skin: 7%
- Digestive system: 16%
- Urinary system: 10%
- Male Genital System: 25%
- Bones & Joints: 0.6%
- Lymphoma: 7%
- Myeloma: 2%
- Leukemia: 4%
- Miscellaneous: 4%

**by cancer type:**

- Brain: 8%
- Eye: 0.125%
- Head & neck: 2%
- Endocrine system: 5%
  - (thyroid, etc)
- Respiratory system: 16%
- Breast: 22%
- Soft tissue: 0.75%
  - (including heart)
- Skin: 6%
- Digestive system: 15%
- Urinary system: 6%
- Male Genital System: 5%
- Bones & Joints: 0.125%
- Lymphoma: 7%
- Myeloma: 1%
- Leukemia: 3%
- Miscellaneous: 3%

**$10,205,004 2012 Community Contribution**

**In-Patient beds**

- **43**

**46,324 Current Cases in Cancer Registry**

- **15,252 Outpatients**
- **3,175 Inpatients**
- **Patients treated each year**

**Cancer clinical trials in 2012 > 150**

**2012 NCI funding for cancer research $16 Million**

- (31 awards)

**Physicians 113**

**Nurses (NPs and RNs) > 200**

**Support Staff > 50**

**Cancer Researchers 100**

find us on Facebook and Twitter
We’ve all known middle-aged people who seem older because of health problems and 75-year-olds who seem younger because they’re very healthy. Scientists want to know if measuring a cancer patient’s physiological age rather than chronological age improves communication about chemotherapy and other age-related treatment issues between the physician and patient.

Dr. Supriya Mohile to Lead National Study on Age-Related Cancer Care
“I realized long ago that most cancer research did not include elderly patients, so treatments were based on the younger population. I’ve been very fortunate that my cancer diagnosis and treatment were straightforward and that I’ve had no recurrence. The support I received from a local breast cancer organization when I was first diagnosed grew my interest in patient advocacy. When the opportunity arose to be involved in geriatric oncology research, it just seemed like a natural fit.” — Beverly Canin, patient advocate
“So many issues related to aging are not routinely incorporated into communication about the risks and benefits for chemotherapy. We hope the GA survey gives patients a way to report their own health concerns so that a conversation about the risks, safety, and efficacy of chemotherapy can have real meaning and provide a framework for better communication.”

– Supria Mohile, M.D., M.S.

Supriya Mohile, M.D., M.S., director of the Specialized Oncology Care and Research for the Elderly (SOCARE) clinic at the Wilmot Cancer Center, will be the principal investigator to study this topic over the next three years with several collaborators locally and across the country—thanks to a $2 million grant from the Patient-Centered Outcomes Research Institute (PCORI).

Although age is the single most important risk factor for cancer and older people comprise a fast-growing segment of the general population—ironically no consensus exists among oncologists or geriatricians about the best ways to care for older people when they get cancer. Clinical trials for new cancer therapies traditionally have excluded this group as well, because of co-existing health conditions that naturally develop with aging.

This study will look at the risks of chemotherapy in a new light. Mohile and her colleagues will use a geriatric assessment (GA) survey to identify frailty, memory problems, chronic diseases and other disabilities in patients.

Mohile hopes to recruit 500 people aged 70 and older with advanced cancer within the University of Rochester Community Clinical Oncology Program to participate in the study. Prior to making a decision about chemotherapy, all patients will complete the GA survey. One group will receive a summary of the survey results plus targeted interventions to consider. The other half will receive standard care without provision of the GA survey results.

In both groups, when patients and physicians discuss treatment options, researchers will audio-record the visit to measure the number of concerns brought up by patients and their families, and how the physician responds. In addition, researchers will analyze the patient’s quality of life and satisfaction with cancer care, and compare responses in the two groups.

Mohile is collaborating with a diverse group of oncologists and cancer researchers. Most importantly, collaboration with patient and other stakeholders strengthened the PCORI award application, Mohile said. For example, Mohile sought input on every aspect of the study from a breast cancer survivor and widely recognized patient advocate. A Hudson Valley-area resident, Beverly Canin brings twelve years of experience as a patient advocate working in support of cancer research and education at the local, state and national levels. She will lead an advisory board of older patients with cancer, caregivers and patient advocates for Mohile’s research project.

PCORI, an independent, non-profit organization authorized by Congress in 2010, has approved 51 awards, totaling $88.6 million over three years, to fund patient-centered comparative clinical effectiveness research projects. Thirty of these awards were for cancer-specific research. The Wilmot Cancer Center is the only program in the region to receive one of these grants.
When the diagnosis is advanced cancer, good communication between doctor and patient is one of the most important elements of care. But what does a compassionate discussion look like?

Robert Gramling, M.D., DSc., associate professor of Family Medicine, Public Health Sciences, and Nursing, received a $1.3 million, four-year, grant from the American Cancer Society to study the process. The funding period began July 1.

He plans to enroll 300 patients to investigate how they, their families, and palliative care doctors and nurses work together to craft treatment plans that match the patient’s values and options.

“There may be a hundred right ways to have these types of discussions, and it’s important to recognize that what works for some people may not work for everyone,” Gramling said.

The best communicators learn to adapt to different situations, to acknowledge people’s worries, and to be “fully present along the way,” he said.

Key collaborating investigators include Sally Norton, Ph.D., R.N., of the UR School of Nursing, and Ronald Epstein, M.D., and Kevin Fiscella, M.D., M.P.H., of the URMC Department of Family Medicine. Collaborators from Duke University, University of Arizona, University of Wisconsin, Boston University and University of Colorado will also participate.

The biology of liver cancer has eluded scientists for many years, but a research team led by Aram Hezel, M.D., created an important new model last year to investigate the two most common gene mutations linked to Intrahepatic Cholangiocarcinoma (IHCC). And now, with an additional $720,000 grant from the American Cancer Society, their good work will continue.

By investigating the activating mutations of Kras and the deletion of p53 oncogenes, Hezel hopes to gain a better understanding of the energy and recycling pathways involved in IHCC tumors.

Another goal is to focus on the early stages of this cancer type, which they hope will lead to better early detection. IHCC tumors tend to be aggressive and prone to metastasis at an early stage. Hezel’s primary research focus, however, is on pancreatic cancer. Since IHCC and pancreatic cancer share a number of similarities, he is able to apply his research findings in both areas.

“On a genetic and molecular level, we’ve been able to extend what we’ve learned about pancreatic cancer to liver cancer, and similarly use what we learn about liver cancer to better understand pancreatic,” Hezel said. “The ACS award is a tremendous help.”

Both Hezel’s and Gramling’s grants were awarded based on merit and following an expert peer-review process.
Ten years ago, breast cancer was viewed and treated as a single disease. Today, information from the genes within a tumor are used to define which women benefit from chemotherapy, and whether or not additional targeted treatment may improve outcomes. This strategy minimizes side effects and improves quality of life for patients.

Members of the Breast Cancer Research Initiative, a Wilmot Cancer Center donor-driven group, received a tour of the McMurray Lab in mid-June to learn about these strategies and how cutting-edge research is helping to evolve breast cancer therapies.

Hosted by Hucky Land, Ph.D., director of research and co-director of the Wilmot Cancer Center; Kristin Skinner, M.D., chief of Surgical Oncology and director of the Multidisciplinary Breast Cancer; and Helene McMurray, Ph.D., the group explored the various areas of the laboratory where research takes place, met the team of researchers, and learned more about the research that is helping the Cancer Center implement precision medicine to breast cancer patients in the clinic.

The Breast Cancer Research Initiative meets two to three times a year to discuss the newest research discoveries — inviting Wilmot physicians and scientists to discuss their experiences in dealing with breast cancer. The group has raised more than $100,000, providing seed grants to support ongoing breast cancer research.
Caroline Firkins, a sixth grade student at Quest Elementary in Hilton, raised $370 by selling handmade jewelry, to support lung cancer research in honor of her late great grandfather and great aunt.

Many friends and family members of the late Jack “Captain” Cunliffe enjoyed a Jimmy Buffet-themed evening for the ‘Captain Event,’ raising more than $5,000.

The sixth annual ‘Keeping the Hope Alive’ event to support the Comprehensive Breast Care Center raised more than $9,000, and included live music, a silent auction and food.

The girls Holley basketball team raised more than $1,000 through ‘More Than a Game Foundation,’ to support breast cancer research.

The seventh annual ‘Pi Day’ event at Rush-Henrietta Ninth Grade Academy raised more than $4,000 for the Wilmot Cancer Center. Every $40 raised awarded the student the opportunity to push one pie in their math teacher’s face.

Discovery Ball Inspiration Award recipient, Georgiana Zicari, hosted a ‘Wine Pull Happy Hour’ to support the Judy DiMarzo Survivorship Program at the Wilmot Cancer Center. More than 50 people attended, raising $2,000.

The Pittsford Crew hosted ‘Crew for a Cause Ergathon’ – a day-long ergathon to benefit the Wilmot Cancer Center. Hundreds of rowers raised more than $3,000.

The Mendon Tavern held a rib dinner in memory of a former employee, Jane Toggenburger and raised $2,300.

Local jewelry artist, Sharon Jeter, hosted a special event to support the head and neck support group. The event raised more than $1,500.

Caroline Lederman, Erin McManus, Katie Smolensky, Casie McManus and Emma Gaenzle, seventh graders at 12 Corners Middle School in Brighton, raised more than $50 for the Judy DiMarzo Survivorship Program by hosting a lemonade stand during a family garage sale.
Caroline Lederman, Erin McManus, Katie Smolensky, Casie McManus, Emma Gaenzle, of 12 Corners Middle School in Brighton (left to right)

Keeps the Hope Alive organizers present a check to the Wilmot Cancer Center

Teacher, Betsy Spanagel gets “pied” by two of her students

Sharon Jeter presents a check to social workers, Darlene Harmor and Sandy Sabatka, Wilmot Cancer Center
June 2 was a very special day as cancer survivors and their families across the country celebrated National Cancer Survivors Day. To commemorate cancer survivorship in the Rochester community, more than 300 cancer survivors, their friends, family and caregivers laced up their sneakers for the inaugural Warrior Walk: Celebrating Life Beyond Cancer.

The walk/run along the Erie Canal and at the University of Rochester River Campus raised more than $40,000 to support the Judy DiMarzo Survivorship Program. After the walk, participants enjoyed the opportunity to connect with one another over refreshments from local vendors, children’s activities, cancer survivorship education and live music.

Five individuals who have battled cancer or supported a loved one with cancer were named Warrior Walk honorees—Emma Falk, Shannon Case, Scott Kropman, Leah Shearer and Mary Schwid. Their stories were chronicled in the Spring edition of Dialogue.

A special thanks to our presenting sponsor Wegmans, as well as Morgan Stanley and Van Putte Gardens for their generous support.

Please save the date for the second-annual Warrior Walk on Sunday, June 1, 2014.
'Judy’s Fund’ Celebrates Cancer Survivors Night at the Ballpark
More than 1,000 supporters of the Wilmot Cancer Center and Judy’s Fund came out to Cancer Survivors Night at the Ballpark in May to watch the Rochester Red Wings take on the Durham Bulls. The evening raised more than $7,700 for the Judy DiMarzo Survivorship Program.

‘Nancy Lives, Wilmot Gives’ Parties at Easy on East for Wilmot
‘Nancy Lives, Wilmot Gives’ has cumulatively raised more than $43,000 for the Wilmot Cancer Center during its annual party every January at Easy on East. Nancy Lives, created by Mike Roberts in memory of his mom Nancy Roberts, provides support to those in the community that have been affected by cancer. The event celebrates the lives lost to cancer, those that have survived, and supports families and friends of those affected by cancer.

Dado Boutique Fashion Shows: A Can’t Miss in Rochester
Dalida Atallah, owner of Dado Boutique, has cumulatively raised more than $142,000 from seven Dado Boutique Fashion Shows, through sponsorships, ticket sales and the models’ peer-to-peer fundraising. What began as a way to promote the boutique, the fashion shows are now a “must attend” for many in the area, and have become one of the largest community fundraisers. Dalida’s bi-annual events are in honor of the care her mother receives at Wilmot Cancer Center.

Model, Lizzie Vanderlinde shows off the latest fashions at the Dado Spring Fashion Show

Spikes and Red Wing players look on as Derek Swanson, Richard DiMarzo and Katy Hanrahan have their heads shaved

wilmotcancercenter.com
Additional photos can be found on our website.
Wilmot Cancer Center
Calendar of Community Events

Saturday, September 14 | ‘Coop Cup’ | Terry Hills Golf Course
Join friends and family of the late Clinton “Coop” Cooper for a day of golf to support the brain tumor research fund. For more details contact Josh Kent: joshdkent@gmail.com.

Wednesday, September 18 | Dine Out for Wilmot | Rochester-Area Restaurants
Enjoy a meal out to support oncology nursing education at the Wilmot Cancer Center. Various restaurants in Rochester will be donating at least 25 percent of their sales. Visit dineoutforwilmot.urmc.edu to find a list of participating restaurants.

Sunday, September 22 | MacKenzie-Childs Special Sale | Aurora, NY
Ten percent of all sales on September 22 will be donated to the Wilmot Cancer Center. Receive 20 percent off on one of your favorite MacKenzie-Childs patterns (non-sale items only). Stop in to the Aurora, NY location or call in your order ahead at 315-364-6118.

Saturday, November 16 | Step It Up 5k Walk | RIT Gordon Field House
Join the Pancreatic Cancer Association of WNY for the fourth-annual walk to benefit pancreatic cancer research. The event includes activities for all ages. For more information visit www.pcawny.org.

Corporate Partnership Spotlight:
Hammer Packaging

Hammer Packaging is a fourth-generation, family-owned business, with a long history of giving back to the Rochester community for more than 100 years. Jim Hammer, CEO and Wilmot Cancer Center board member, was first introduced to the Cancer Center as a caregiver for his father, who was diagnosed with lymphoma. Through his father’s experience, Jim was exposed to the importance of a state-of-the-art facility to treat regional cancer patients. His support for this was evident during the Capital Campaign for the new Wilmot Cancer Center facility.

Hammer Packaging has also supported the Discovery Ball for more than 10 years. Jim and his wife, Donna, co-chaired the Ball in 2010. Recently, Hammer Packaging employees created a team for the Cancer Center’s inaugural Warrior Walk, to commemorate cancer survivorship in the Rochester community.

Jim instills his emphasis on giving back to the community in all of his employees—“It’s all about giving back, whatever that is—financially, donating your time. What makes a community is giving back to it.”
“Investing in the heart of our community—the University of Rochester—is a meaningful way for us to give back and make an incredible impact. Through our George Eastman Circle memberships, we can truly support the future of our region we are so dedicated to. It is with profound honor we continue this tradition of philanthropy George Eastman started so long ago.”

www.GeorgeEastmanCircle.com