

Dear Kentucky Cancer Consortium Partners:

KCC is pleased to provide you with a link to the [October 3, 2012 issue of "Wednesday's Word"](#), a KCC communication which relays recent state and national cancer control articles, resources, events and tools to you on a weekly basis, in a brief, easy-to-read format. News topics in this issue include:

- Breast and Cervical Cancers
- Financial
- General
- Grants
- Health Disparities workshop
- Cancer Patient Navigators' forum
- Prevention/Genetics/Causes
- Resources for your use
- Smoke-free
- Survivorship & Survivorship Events

You may read archived editions on our [website](#). If your organization has a cancer-related item for Wednesday's Word, or you know of someone who may benefit from receiving this communication, feel free to contact Katie Bathje at kbathje@kycancerc.org.

Sincerely, Kentucky Cancer Consortium Staff

October 3, 2012

Breast and Cervical Cancers

- [Kentucky voices: Local Komen group breaking down barriers to fight breast cancer](#) (9/28/12, Lexington Herald-Leader Opinion article, by Jennifer Bricking) Many of you may be aware of the controversy concerning Susan G. Komen and its funding over the last year. As executive director of our local Komen Lexington affiliate, I would like to share how Komen Lexington uses the funds that are raised here. At Komen Lexington, we keep 75 percent of our net funds to invest into community programs for our 58-county service region that provide screenings, treatment, education and support services for breast health. We also provide 25 percent of our raised funds to invest into groundbreaking research. Our parent group, Komen Global in Dallas, Tx., provides funding for research grants focused on finding a cure, while individual affiliates are responsible for granting to local community programs based on local needs. At Komen Lexington, we have not funded Planned Parenthood in any way. Planned Parenthood, like any local potential grantee, can apply for a grant provided it follows our guidelines for local programs based on screenings, treatment, education or patient support services. Since the inception of the Lexington affiliate, it has not taken the opportunity to apply for a grant. If it were to write for one, it would be reviewed fairly like any other potential grantee. The decision on whether to fund would be based on the need that it would fulfill in our community. The gracious donations of our faithful local supporters are invested into programs that will make the most impact in our area. All grants are reviewed by an impartial committee of volunteers from the community that know the need and mission of Komen Lexington and are in no way affiliated with any grantees, the board

or the staff of Komen Lexington. In 2012, we granted over \$360,000 to 12 organizations. Five of these grantees are Catholic or faith-based organizations and can be found on our Web site komenlexington.org. These grants are to be used for anyone in need in the community who would qualify for each individual program, regardless of race, gender, religious affiliation, political views or any other protected group in our community. We are here to help break down barriers, not create more. Ultimately, our mission is to raise funds in order to provide a program that would cover the individual needs in our 58-county service area. That's why the Race for the Cure, coming up Saturday, Oct. 6 at CentrePointe in downtown Lexington, is so important. Our funds last year raised through the race provided thousands of people in our community with mammograms that would not have happened if Komen dollars were not available. Read more of the Op-Ed [here](#).

Financial

- [Cancer Care Costs to More Than Double in Some U.S. States by 2020](#) (9/24/12, ScienceDaily) Cancer-related medical costs, already a significant portion of overall medical expenses in the United States, will more than double in some states in less than eight years, according to a new study by researchers from RTI International and the Centers for Disease Control and Prevention. The study, published in *The American Journal of Managed Care*, includes state-by-state projections of cancer care costs through the year 2020. According to the study, cancer treatment costs will go up for every state in the nation, ranging from a 34 percent increase in Washington D.C. to a 115 percent increase in Arizona. State-level expenditures for 2020 (in 2010 dollars) will range from \$347 million in Washington D.C. to \$28.3 billion in California. "The projections reflect expected demographic shifts," said Justin Trogon, Ph.D., a health economist at RTI and the lead author of the study. "The states with the higher forecasted increase in costs also have the higher forecasted increases in the number of residents over age 65. These estimates provide a useful baseline against which to gauge the impact of cancer policies and could be useful for guiding future investments in cancer prevention and early detection." The researchers used cancer prevalence data from the 2004 to 2008 Medical Expenditure Panel Survey along with U.S. Census Bureau population forecasts to determine how many people in each state will likely need cancer treatment in 2020 and what the average cost of treatment will be. State-level estimates of the number of residents needing cancer treatment between 2010 and 2020 varied significantly across states, ranging from a 7 percent decline in cancer cases in Washington D.C. to 46 percent increase in Arizona. The projections in the study were based on the assumption that the percentage of people treated for cancer would remain constant within age, sex and state categories and that the inflation-adjusted cost of cancer care per person will increase by 3.6 percent per year. **Complete journal article is attached to this email.**

General

- [James Graham Brown Cancer Center adding \\$6 million CyberKnife technology this month](#) (10/1/12, The Lane Report) The James Graham Brown Cancer Center announced today the opening of Louisville CyberKnife, a new cancer treatment center that will begin treating

patients Oct. 24. A \$6 million investment, Louisville CyberKnife was developed as a joint venture between the James Graham Brown Cancer Center and US Radiosurgery. Louisville CyberKnife at the Brown Cancer Center will offer the first CyberKnife® technology available in Kentuckiana and the second in the state of Kentucky. The opening of Louisville CyberKnife culminates a long and persistent effort by Dr. Bobby Baker and prominent Louisville businessman Steve Bass, both of whom spearheaded initial efforts to secure a certificate of need from state regulators for a CyberKnife program in Louisville. CyberKnife is a robotic technology used by radiation oncologists and surgeons to treat patients with stereotactic radiosurgery, a noninvasive method of treating tumors and other medical conditions with surgical accuracy using high-dose radiation delivered in five or fewer outpatient procedures. Louisville CyberKnife at the Brown Cancer Center has installed the CyberKnife 9.6 system, which features a device that controls the width of the machine's radiation beam, allowing physicians to vary the beam size to treat a larger variety of tumors throughout the body. The capabilities of the advanced technology allow for greater accuracy, quicker treatment times for patients and better avoidance of healthy tissue during treatment. "This partnership further illustrates our mission to provide patients throughout our region with the highest quality care," said Dr. Donald Miller, director of the Brown Cancer Center. "Our investment in the new CyberKnife program demonstrates our ongoing commitment to providing our communities with the most advanced technology and the best cancer treatment options." Louisville CyberKnife at the Brown Cancer Center is located at 529 S. Jackson St., Louisville, Ky. 40202. For more information, call (502) 217-8200 or visit www.LouisvilleCK.com.

- *(reminder)* Save The Dates! Please help us disseminate the information below concerning **Webinars coordinated through HealthCare Excel (HCE)**. If you would like more information on webinars such as these or other free tools and resources, please contact the HCE Population Health team at nsemrau@kygio.sdps.org or (502) 454-5112 x2242. All webinar times are 12:30pm – 1pm ET. October 18th: Creating a Welcoming Environment (Breast & Cervical Cancer Screening) - Kris Paul, Kentucky Cancer Program; October 24th : Health Effects of Smoking - Bobbye Gray, KDPH Tobacco Prevention and Cessation Program; November 15th : Dangers of Secondhand Smoke - Bobbye Gray, ""

Grants

- [Request for Proposals Issued for Investing in Kentucky's Future Initiative](#) The Foundation for a Healthy Kentucky is pleased to issue a Request for Proposals (RFP) under the new Investing in Kentucky's Future Initiative (IKF). This initiative is designed to improve the health of Kentucky's children by engaging communities in testing innovative strategies. The Foundation plans to provide funding for up to 10 Kentucky communities where civic leaders are committed to working together to promote the physical and behavioral health and well-being of children ages 5 through 18 by supporting local systems, environments and policies that reduce risks for chronic diseases and help children practice healthy behaviors for a lifetime. **Download the full RFP here.** Please read through the RFP for information regarding applicant conference calls scheduled on October 16 and 18. Foundation staff will

discuss the intent of this initiative in greater depth, and respond to applicant questions during these calls. More information about the Foundation can be found on our website, www.healthy-ky.org. Letters of Intent are due on November 16, 2012 and full-proposals are due on February 28, 2012.

Health Disparities

- *(reminder)* **Kentucky Cancer Consortium to Host SESRCD's Professional Development Training Resource (PDTR) Workshop on Wednesday, November 7, 2012** from 9am – 4pm at Berry Hill Mansion in Frankfort, KY. Administered through the American Psychological Association, Office on Socioeconomic Status (OSES), The Socioeconomic Status Related Cancer Disparities (SESRCD) Program is a national initiative to build the capacity of community cancer-serving organizations to address health disparities in cancer through the adaptation and utilization of evidence-based cancer prevention and control efforts for socioeconomically disadvantaged populations. SESRCD maintains that irrespective of race, ethnicity, gender, age, disability or sexual orientation, socioeconomically disadvantaged communities are disproportionately affected by cancer and have lower survival rates than their more socioeconomically affluent counterparts. SESRCD's Professional Development Training Resource (PDTR) Workshop Titled, [*Reducing Cancer Disparities and Promoting Health Equity among Socioeconomically Disadvantaged Populations*](#), the full-day free SESRCD workshop provides participants with the information, tools and strategies required to act on, and advocate for, the initiation and/or improvement of cancer prevention and control efforts targeting socioeconomically disadvantaged populations. If a large proportion of your cancer services are to the socioeconomically disadvantaged (urban OR rural), please consider sending a representative from your organization to this important training! **Attendance is limited. Registration is free, and lunch will be provided. See attached flyer for registration info!** Questions? Contact Katie Bathje at katie@kycancerc.org

Lung Cancer

- **LECTURE: Favorable Outcomes With CT-Based Lung Cancer Detection (Garlove Lectureship), Wednesday, November 7, 2012.** Discuss results of recent literature regarding benefits and risks of lung cancer screening. Identify challenges in implementing a multidisciplinary screening program for lung cancer. Speaker: James L. Mulshine, M.D., Associate Provost for Research, Rush University Medicine Center/Acting Dean, Graduate College/Professor, Department of Internal Medicine, Rush University, Chicago, IL. Physician Education: 1.0 AMA PRA Category 1 Credit; Nurse Education: 1.0 contact hour; Location: The Olmsted, 3701 Frankfort Avenue, Louisville, KY. 5:30p Information fair, registration and hors d'oeuvres, 6:30p Program. There is no charge for this program, but registration required (502) 629-1234. Option 2.

Patient Navigation

- (reminder) **Inaugural Cancer Patient Navigators Fall Forum: Thursday, November 8th from 8:15am – 4pm at the University of Kentucky's Boone Center** in Lexington. Cancer patient navigators offer individualized assistance to cancer patients, their families, and caregivers to help overcome health care system barriers and facilitate timely access to quality medical and psychosocial care. Cancer patient navigation works with a patient from pre-diagnosis through all phases of the cancer experience, and is provided by professionals or peers in a variety of settings, both within and outside of the healthcare system, yet always in close collaboration with providers and the community. Due to the multi-modal nature of cancer patient navigation, as well as the field's recent and rapid growth, there has yet to be established a unified network of professionals in Kentucky. The Kentucky Cancer Consortium is coordinating a **one-day cancer patient navigation forum to provide a neutral venue for cancer patient navigation professionals from a variety of settings to gather** to share best practices, highlight helpful resources, network with like-minded colleagues, and consider development of a network for future collaborations. The day will include sessions such as: "Facilitators and Barriers to Successful Patient Navigation In Kentucky" with Fran Feltner; a Panel (to include Norton Cancer Institute, KY Pink Connection,) discussing the Multiple Roles of Cancer Patient Navigators; a large group discussion regarding "What's Working" for KY's cancer patient navigators facilitated by Dr. Jennifer Redmond; and more! **See attached save-the-date flyer.** There is no registration fee. **Attendance is limited.** To reserve your seat at the Forum, e-mail Katie Bathje at katie@kycancerc.org .

Prevention/Genetics/Causes

- **Indoor Tanning Causes Common Skin Cancers, Study Finds** (10/2/12, HealthDay News) Indoor tanning, already associated with an increased risk for the deadliest type of skin cancer, appears to increase the likelihood for other skin cancers as well. Tanning beds lead to more than 170,000 cases of basal and squamous cell skin cancer each year in the United States. And the earlier you start, the worse the odds, researchers say. "Not only do tanning beds cause melanoma, the most deadly form of skin cancer, but our study shows they also contribute to the most common cancer, basal and squamous cell skin cancer," said lead researcher Dr. Eleni Linos, an assistant professor of dermatology at the University of California, San Francisco. "We could prevent hundreds of thousands of cancers each year by avoiding tanning beds," she added. The report was published online Oct. 2 in the *BMJ*. For the study, Linos' team analyzed 12 studies that included more than 9,000 cases of non-melanoma skin cancer, such as basal cell carcinoma and squamous cell carcinoma. The use of tanning beds was associated with a 67 percent increased risk of squamous cell carcinoma and a 29 percent higher risk of basal cell carcinoma, compared with never using a tanning bed, the researchers found. Linos' group estimated that indoor tanning in the United States accounts for about 3.7 percent of cases of basal cell carcinoma (more than 98,000 cases) and 8.2 percent of cases of squamous cell carcinoma (about 72,000 cases) each year. Moreover, using tanning beds before age 25 appears to significantly increase the risk for basal cell carcinoma, the researchers noted.

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- [Cancers associated with excess weight and lack of sufficient physical activity](#) The “Annual Report to the Nation on the Status of Cancer, 1975-2008, Featuring Cancers Associated with Excess Weight and Lack of Sufficient Physical Activity” report was released by CDC, ACS, and NCI in March 2012. NCI released a Q & A fact sheet summarizing the report, including questions such as the one below. Read the entire Q and A to familiarize yourself with the most up to date research on obesity, physical activity and cancer.
 - What is the importance of excess weight and lack of sufficient physical activity to cancer? Excess weight and lack of sufficient physical activity are avoidable (can be modified) causes of cancer in the United States. The International Agency for Research on Cancer concluded that one-quarter to one-third of common cancers in the United States and other industrialized nations were caused by the joint effects of excess weight and lack of sufficient physical activity. For people who do not smoke, maintaining a healthy weight and getting sufficient physical activity may be among the most important ways to prevent cancer.
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- **Based on an updated Community Guide systematic review, [“Preventing Skin Cancer: Primary and Middle School Interventions”](#)**, the Community Preventive Services Task Force (Task Force) ratified the following finding. “The Task Force recommends primary and middle school interventions to prevent skin cancer, based on **strong evidence** of their effectiveness in increasing *sun*-protective behaviors and decreasing ultraviolet exposure, sunburn incidence, and formation of new moles.” Based on the updated review, The Task Force recommendation was changed from sufficient to strong evidence of effectiveness. The review and findings have not yet been published in the scientific literature; however summaries are available on [The Community Guide](#) website.
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- [Quick Survey May Pick Up Ovarian Cancer Warnings: Study](#) (9/28/12, HealthDay News) A simple three-question survey might identify women who have symptoms that may indicate ovarian cancer, according to a new study. The two-minute paper-and-pencil questionnaire can be given in a doctor's office and checks for six warning signs that may improve early detection of ovarian cancer, according to researchers at the Fred Hutchinson Cancer Research Center in Seattle. The survey asks women if they are experiencing one or more of the following symptoms: abdominal and/or pelvic pain; feeling full quickly and/or unable to eat normally; abdominal bloating and/or increased abdomen size. It also asks about the frequency and duration of these symptoms. The study included 1,200 women, ages 40 to 87, who completed the questionnaire. Five percent had a positive symptom score that indicated the need for further tests. Of this group of about 60 women, one was diagnosed with ovarian cancer. Of the 95 percent of women who had a negative symptom score, none developed ovarian cancer during one year of follow-up. The study was published online in the September issue of the *Open Journal of Obstetrics and Gynecology*.
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- [Mailed Kits May Prompt Parents to Protect Kids From Sun](#) (9/30/12, HealthDay News) Mailing sun-protection kits, which contain information about the dangers of exposure to the

sun's harmful UV rays and skin cancer, as well as swim shirts, hats and sunscreen, increases the number of people who take steps to protect their children from sun exposure, according to a new study. Researchers from the Colorado School of Public Health and the University of Colorado Cancer Center found that the kits prompted more people to provide their kids with sun-protective clothing, hats and sunscreen. The kits also encouraged more people to avoid midday sun. The investigators noted that because the kits were inexpensive and delivered by mail, they could be widely distributed. "This is a low-cost, effective intervention that could be an important component in efforts to reduce sun exposure in children during the years that they acquire much of their risk for skin cancer," the study's first author, Lori Crane, investigator at the Cancer Center and chair of the department of community and behavioral health at the Colorado School of Public Health, said in a news release from the center. The study involved 676 children, all 6-year-olds, and their parents. All participants were surveyed to assess their level of sun-protective behaviors as well as parents' knowledge about melanoma and their understanding of their child's lifetime risk for this form of skin cancer. Skin exams also revealed the children's level of tanning and number of potentially dangerous moles they had. Half of the participating families were randomly selected to receive sun-protection kits in the mail in April and May of 2005, 2006 and 2007. The study, published in the October issue of the *American Journal of Preventive Medicine*, revealed that those who received the sun-protection kits gained more awareness about sun exposure and had greater adherence to sun-protective behaviors. The most significant behavioral changes the people reported were those emphasized in each yearly kit, the researchers noted.

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- **(reminder) Kentucky Youth Advocates is hosting the “Step Up for Kids” Conference at the Muhammad Ali Center in Louisville THIS Monday, October 8th.** During the day, we will explore ways you can help children in Kentucky grow up safe, healthy, and ready to succeed and highlight several Blueprint for Kentucky’s Children priorities. We will be welcoming national speakers from Georgetown’s Center for Children and Families and the Children’s Advocacy Institute at the University of San Diego. Michael Petit, from Every Child Matters, will also be joining us to discuss the importance of investing in kids. If you plan on attending, please let us know by signing up online at <http://2012stepupforkidsconf.eventbrite.com/>. Please encourage your colleagues and send this out to your networks to sign up as well. If you would like more information, check out our website <http://www.kyouth.org/2012stepupforkidsconf.html> If you’d like to be a conference sponsor, you can find the form [here](#). You can also contact Andrea Bennett with any questions, at 502-895-8167 x127.

Resources

- **“What Works: Tobacco Use” Fact Sheet from The Community Guide** The Community Guide released the first of its “What Works” fact sheets—colorful, easy-to-read summaries of Community Preventive Services Task Force findings on specific public health topics and the systematic reviews on which they are based. The first fact sheet is on tobacco use. Others are planned on different topics. You can print this public domain fact sheet from The

Community Guide website to use as a handout for presentations, exhibits. or meetings:
<http://www.thecommunityguide.org/about/whatworks.html>.

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- **[New Resource: The Tobacco Portal](#)** is a resource center providing links to tobacco related data, reports, scientific information and publications. The Tobacco Portal organizes publicly available tobacco information into one location and categorizes resources that are useful for researchers and tobacco control experts. The Tobacco Portal was created by researchers at Georgia State University's Institute of Public Health. The idea to create a Tobacco Portal was born when Dr. Michael Eriksen and Carrie Whitney, MPH were conducting research for the fourth edition of The Tobacco Atlas. During the process of researching and writing The Tobacco Atlas, they identified the need for a single location of resources for tobacco researchers to access organized, credible data and resources on tobacco related topics. The researchers at the Institute of Public Health will continue to maintain and update the Tobacco Portal and welcome your comments and feedback.
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- **[CDC develops Infographic poster for Hepatitis C Recommendations](#)** There are high rates of Hepatitis C in people born during 1945-1965. People born during 1945 through 1965 are 5 times more likely than other adults to be infected. In fact, 75% of adults with Hepatitis C were born in these years. The reasons why baby boomers have the highest rates of Hepatitis C are not completely understood. The numbers of people who will develop serious health problems and die from Hepatitis C are expected to rise rapidly in the coming years. Early diagnosis and treatment can help prevent liver damage, cirrhosis, and even **[liver cancer](#)**. It is estimated that one-time testing of everyone born during 1945 through 1965 will prevent more than 120,000 deaths. Many people with Hepatitis C do not know that they have Hepatitis C. One-time testing of everyone born during 1945 through 1965 would find an estimated 800,000 undiagnosed Hepatitis C cases. **[CDC has created fact sheets, infographics and other resources to help increase the early diagnosis and treatment for Hep C.](#)**
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- **[Cancer in Older Adults](#)** (ASCO, cancer.net) The single greatest risk factor for developing cancer is aging. In fact, more than 60% of cancers in the United States occur in people age 65 and older. Because older adults with cancer and their families often have different needs than younger adults and children, people in this age group should consider these needs when making decisions about their care and treatment. However, when it comes to older adults with cancer, age is truly just a number. Each older adult will have a different level of health and independence and a different expectation of treatment. As a result, a person's age should not be the only factor considered when determining treatment options for cancer. This booklet can help older adults and their loved ones communicate with health care providers and each other so that the best possible course of care can be followed. Download a printable **[PDF version](#)** (36-page booklet). To order multiple copies (plus shipping and handling), call 888-273-3508 or **[order materials](#)** online.
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- [**County Health Rankings & Roadmaps Releases New Resource for Community Leaders**](#)
When it comes to solving problems that affect our health, knowing what works matters. Implementing or adapting proven strategies increases your likelihood of success in improving health. [What Works for Health](#), the latest release from *County Health Rankings & Roadmaps*, is an online, searchable menu of policies and programs—each with a rating based on strength of evidence for factors that can help make communities healthier places to live, learn, work and play. Each of the policies, such as increased alcohol taxes, for example, and programs, such as early childhood interventions, included in What Works for Health is given an evidence rating to help guide users toward choosing proven strategies. What Works for Health is easy to use. Simply choose a health factor (i.e. tobacco use, employment, access to health care, or environmental quality) and browse through the evidence ratings for programs or policies, that address the particular health factor of interest. Together, the *County Health Rankings & Roadmaps* and the new What Works for Health give you a profile of your county’s health, guidance to take action, and information on strategies that can make your community healthier.
 - [Explore What Works for Health.](#)

Smoke-free

- **Leaders in Health and Business invite you to the Smoke-Free Kentucky Forum Series**
Sponsored by: Kentucky Public Health Association, Kentucky Chamber of Commerce, Kentucky Voices for Health, Kentucky Health Departments Association, and Smoke-free Kentucky. Kentucky’s leading health and business organizations invite you and other community leaders to attend a smoke-free forum near you. Hear how you can join the effort to eliminate secondhand smoke from all indoor worksites and public places. We need your help to protect all workers from secondhand smoke, improve Kentucky’s business image and lower health care costs related to tobacco use. **Invited Speakers:** Secretary of the Cabinet for Health and Family Services, Audrey Haynes; Representatives from the Kentucky Chamber of Commerce and Local Chambers of Commerce; **Dates and Details:**
 - **Tuesday, October 23rd**; Crowne Plaza Hotel, 830 Phillips Lane, Louisville, KY 40209
Breakfast Forum: 8:00 a.m. - 9:00 a.m. EST
 - **Wednesday, October 24th**; Boyd County Health Department, 2924 Holt St, Ashland, KY 41101
Breakfast Forum: 8:00 a.m.-9:00 a.m. EST
 - **Wednesday, November 14th**; River Park Center in the Berry Theater, 101 Daviess Street, Owensboro, KY 42303
Dinner Forum: 5:00 p.m. – 7:00 p.m. CST
 - **Tuesday, November 27th**; Lourdes Hospital, Borders Conference Room, 1530 Lone Oak Road, Paducah, KY 42003
Breakfast Forum: 8:00 a.m.-9:00 a.m. CST

Learn more about the campaign at www.smokefreekentucky.org or www.facebook.com/smokefreekentucky Please RSVP to betsyjanes@ymail.com or call 502-

797-0638. There is no cost to attend the forums and meals will be provided. Official Forum Invitation Flyer is attached to this email!

- (reminder) [Smoke-Free Kentucky](#) is a coalition of organizations and individuals who support making all public and work places 100% smoke-free in order to protect citizens and workers from the proven dangers of secondhand smoke. Periodically Smoke-free Kentucky hosts teleconference calls to update coalition partners (individuals, businesses, community organizations) about what is happening with the Smoke-free Kentucky Campaign. **Upcoming Smoke-free Kentucky Coalition call date:** Thursday, November 8, 2012 12:00 PM-1:00 PM. The call-in number is 877-366-0711 and participant passcode is 56658420.

Survivorship

- [Access to Doctors' Notes Aids Patients' Treatment](#) (10/1/12, Wall Street Journal) Patients who have access to doctor's notes in their medical records are more likely to understand their health issues, recall what the doctor told them and take their medications as prescribed, according to a study published Monday. The study, [published online](#) in the Annals of Internal Medicine, is the culmination of an experiment [known as OpenNotes](#), an effort to improve doctor-patient communication by letting patients know everything their doctor has to say about them, including after a visit. Beth Israel Deaconess Medical Center in Boston, Geisinger Health System in Danville, Pa., and Harborview Medical Center in Seattle took part in the trial, which included 105 primary-care doctors and 13,564 of their patients who had at least one note available to them during the voluntary program. While patients legally have the right to see their entire medical record, including doctor's notes, the notes aren't automatically included in requests for records and doctors don't make it easy for patients to see them, says Tom Delbanco, a primary-care doctor at Beth Israel who is co-lead author of the study and a professor at Harvard Medical School. Some doctors were initially resistant to the idea of sharing notes, he says. According to the study, doctors who declined to participate expressed concerns that their workflow might be disrupted and that they might scare or offend patients. But the study, based on surveys of doctors and patients taken in fall 2011 after 12 to 19 months of participation, found most fears weren't realized, and patients were enthusiastic about accessing the notes. Close to 11,800 patients opened at least one note contained in their electronic medical record. Of 5,391 patients who opened at least one note and returned online surveys, 77% to 87% across the three sites reported that OpenNotes made them feel more in control of their care and more adherent to medications. Only a few reported worry, confusion or offense. As many as 89% of patients agreed that having access to notes would influence their choice of providers in the future.
- [Cancer, the Flu, and You: What Cancer Patients, Survivors, and Caregivers Should Know About the Flu](#) Living with cancer increases the risk for complications from influenza. For those in treatment now, or have had cancer in the past, there is a higher risk for complications from the seasonal flu or influenza, including hospitalization and death. To help prepare for the flu this season, CDC has an extensive webpage addressing special considerations for cancer

patients, survivors, and caregivers for the flu. Included on the website are podcasts, fact sheets and reminder e-cards. Send the link on to your cancer control partners today!

Survivorship events

- **PINK OUT Festival- October 5th, 12-8pm** at Centre Pointe located at Limestone and Main Street in downtown Lexington. Come for a day of fun with live music, vendors and food. You can still register for the 16th Race for the Cure that is on October 6th and pick up your t-shirt packet if you have not already done so.
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- **16th Annual Race for the Cure ~ October 6th at Centre Pointe.** Come celebrate survivors with us too! Starting at 8am survivors can get a free breakfast at the Komen Cafe with a guest and then we will get a picture of everyone before starting our survivor parade to the starting line. The race kicks off at 9am. Please register today at komenlexington.org or come to the Herald Leader at 100 Midland Ave, Lexington, KY, M-F 9am-5pm to register in person. If there are any questions please call 859-368-7133 or email support@komenlexington.org.
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- **HOT SEAT FOR HOPE: Roasting Dr. Rice Leach, with proceeds going towards Kentucky Pink Connection.** Dr. Leach, Commissioner for Public Health at the Fayette County Health Department has graciously agreed to be the inaugural 'roastee' for this new event – an evening of fun and laughter at the Lyric Theatre on 300 East 3rd Street in Lexington. Evening includes cocktails, tours of Lyric Theatre, dinner, entertainment and toasts. Tickets are \$50 per person and may be purchased at the Lyric Theatre Box Office at 859-280-2218, online at www.lexingtonlyric.com or by calling [KY Pink Connection](http://www.ky-pink-connection.com) at 859-309-1700 or 877-597-4655.