

Dear Kentucky Cancer Consortium Partners-

Below is the **February 15, 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. You may read archived editions on our [website](#). If your organization has a cancer-related item of interest that you would like to be included in a 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

February 15, 2012

Advocacy

- *(reminder)* **Colon Cancer Day at the Capitol:** Thursday, March 1, 2012, 1-3 pm, Frankfort Kentucky. The [Colon Cancer Prevention Project](#) is coordinating volunteers and advocates from across the state to rally and educate Kentucky's leaders regarding HB 55, a bill that appropriates \$8 million over the next two years for the Kentucky Colon Cancer Screening Program. Wear blue and bring family and friends! To register, call Andrea Shepherd, [\(502\) 290-0288](tel:502-290-0288).

Cervical Cancer

- *(reminder)* [Cervical Cancer-Free Kentucky](#) (CCFKY) is hosting their Annual Statewide Conference on May 15, 2012, at the Sloan Convention Center in Bowling Green, KY. Sessions will include: Updates on cervical cancer prevention, speakers from CCFKY Mini-Award recipients, and a report on their Cause the Movement personalized cervical cancer awareness campaign. Registration is free, and lunch will be provided. There will be a complimentary reception & tour at the National Corvette Museum the evening before (May 14th) 7:00 – 9:00pm CST. To aid in their planning, please email your ability to attend with your contact information to pkeyes@uky.edu. Also, please indicate if you plan to attend the pre-conference reception, and if you will need to make a room reservation. More details to come!

Colon Cancer

- *(reminder)* **The [Kentucky Cancer Program](#) is excited to kick-off their 4th annual Dress in Blue Day statewide campaign** to increase colon cancer screening. Dress in Blue Day is officially Friday, March 2, 2012. Once again KCP is coordinating an awareness and education program with our District Cancer Councils and community partners. New this year, Madeline Abramson, the Lieutenant Governor's wife, will serve as the Dress in Blue Day Honorary Chair for Kentucky. Additional materials and resources are available at:

<http://www.kycancerprogram.org/special-events/new-programs.html/targeted-colon-cancer-outreach-program-materials.html>

- *(reminder)* **The Colon Cancer Prevention Project is hosting a “Bottom's Up Bash”** on Friday, March 16th from 7-11pm at the Louisville Glassworks, 815 W. Market Street in Louisville. [Find out more!](#)

Financial

- [What Obama's Budget Proposal Means for Disease Prevention](#) (2/14/12, Wall Street Journal Health Blog) Investments in disease prevention — a core principle of President Obama's health-care overhaul legislation — would face a setback under his budget proposal for next year. Obama's fiscal 2013 budget would scale back the Prevention and Public Health Fund, established as part of the health law, by over \$4 billion by fiscal 2022 — leaving that much less money for public-health prevention programs meant to thwart outbreaks or cut down on rates of diabetes, heart disease, and other chronic conditions that account for 75% of U.S. health-care costs. The law originally called for \$21 billion between fiscal 2010 and 2022, a substantial boost in public-health funding. Now it calls for about \$16.75 billion over that period. That's still a lot of money. But so far, the prevention fund has been used heavily to compensate for cuts to the regular budget of the Centers for Disease Control and Prevention rather than for its originally intended use — new disease prevention-related programs.
- [New Way to Pay Doctors](#) (2/9/12, Wall Street Journal) Efforts to change how Americans pay for health care are gathering momentum on a national scale as UnitedHealth Group Inc., the largest U.S. health insurer, becomes the latest carrier to say it is overhauling its fees for medical providers, says the Wall Street Journal. UnitedHealth, like other insurers, is targeting the traditional system that pays hospitals and doctors for each service provided, rewarding them for more care but not necessarily better care. Under the new plan the carrier is rolling out, part of medical providers' compensation could be tied to goals such as avoiding hospital readmissions and ensuring patients get recommended screenings. UnitedHealth has been trying such efforts on a more limited scale, but now the company says it plans to roll out new contracts nationwide that could include financial rewards for care the company considers high-quality and efficient, and in some cases potentially withhold expected increases if certain standards aren't met. UnitedHealth says it expects the new efforts to save at least twice as much money as they cost. UnitedHealth's push comes as other carriers, including WellPoint Inc. and Aetna Inc., are announcing similar moves.

General

- [Chemo During Pregnancy Doesn't Seem to Harm Baby: Study suggests treatment of expectant mothers is feasible after first trimester](#) (2/9/12, HealthDay News) A new study finds that the babies of women who had chemotherapy while pregnant aren't at higher risk for a variety of medical disorders, a sign that the treatment should be safe for the fetus in most instances. There's a caveat: babies born to pregnant women who had chemotherapy were more likely to be born prematurely, potentially putting them at risk for impaired brain development, which can cause problems with memory, thinking and learning skills. Still, the findings are "very good

news," says a study commentator, whose work appears in a series of articles about pregnant women and cancer published online Feb. 10 in *The Lancet Oncology*. An estimated one in 1,000 pregnant women have cancer.

- **[Most women with cancer want a role in decisions](#)** (2/9/12, Reuters Health) About two-thirds of women diagnosed with early stage breast cancer want to take part in making decisions about their treatment, according to a new survey of patients from five different countries. Some of these women want complete control over making treatment choices while others want to share the decision with their doctor -- yet only a minority of them actually get the level of involvement they are hoping for. Researchers asked 683 women who were recently diagnosed with breast cancer what kind of role they would like to have in making decisions about their treatment: would they like to have total control, a shared role with their doctor, or have the doctor make the choices. After the women met with their physicians, the researchers followed up to ask how their visit went and whether their preferences for how involved they would like to be in the future had changed. Only 28 out of every 100 women initially wanted to delegate the decision to their doctor, but 46 out of every 100 reported that their doctor ended up making the decision. The findings appear in the online February 6th issue of the *Journal of Clinical Oncology*.
- **If you are interested in serving as an abstract reviewer for the 2012 American Public Health Association's (APHA) Cancer Forum**, please visit [this link](#) by Sunday, February 19. You will be required to enter your Name, Affiliation, Email, and Area(s) of Expertise as they correspond to the Cancer Forum's topical areas. You do not need to be a current member of APHA to be an abstract reviewer. Abstract reviews will take place between the end of February and mid-March. We hope to keep the number of abstracts assigned to each reviewer around 5. Should you have any questions, please feel free to contact Robin Vanderpool at robin@kcr.uky.edu.
- *(reminder)* **How To Make Informed Choices About Standard Care and Clinical Trials.** Please join The [Leukemia & Lymphoma Society](#) for a patient education program on Tuesday, March 6, 2012 from 6pm-8pm at Malone's Banquets, above Sal's Chophouse, 3373 Tates Creek Road, Lexington, KY 40502. The speaker will be Dr. John Hayslip, of the University of Kentucky College of Medicine, Division of Hematology, Oncology and Blood & Marrow Transplantation. Dr. Hayslip will address: Steps to take to help you make treatment decisions; Questions to ask about benefits and risks of standard treatments and treatments under study in clinical trials; How new blood cancer treatments are developed and approved; How to sort out the myths from the facts about clinical trials; How to locate clinical trials that may be right for you; and How The Leukemia & Lymphoma Society can help. There is no charge for this program, but pre-registration is required. Complimentary dinner will be served. REGISTER BY PHONE: Debbie Peyton at [1-800-955-2566](tel:1-800-955-2566) ext. 499 or by email at debbie.peyton@lls.org
- *(reminder)* [Health Care Excel of Kentucky](#) is the Medicare Quality Improvement Organization (QIO) for Kentucky. It is contracted with the Centers for Medicare & Medicaid Services (CMS) to improve quality of care for Medicare beneficiaries, protect the integrity of the Medicare Trust Fund, focus on quality improvement initiatives, and promote preventive health care services. Health Care Excel is holding a Learning and Action Network (LAN) meeting on **Tuesday**,

March 20, 2012, from 9am to 6pm at the Hyatt Regency in Lexington. Learning and Action Networks are structures by which large-scale improvement around specific health initiatives are fostered, studied, adapted, and rapidly spread. Health care partners and stakeholders are invited to the process of making change and attaining the goals of better health care; working toward better health for people and communities; and achieving affordable care through lowering cost. A formal invitation, agenda and registration information will be available next week. If you have questions, contact Scott Gibson at sgibson@kyqio.sdps.org.

- *(reminder)* The [2012 CDC National Cancer Conference](#) will be held August 21-23 in Washington, DC at the Omni Shoreham Hotel. The theme of the 2012 CDC National Cancer Conference is: "Uniting Systems, Policy & Practice in Cancer Prevention and Control." This theme was chosen to reinforce and reflect the need to explore the implications of a changing health system on cancer prevention and control and discuss how to prepare and maximize opportunities. Registration is \$375.

Health Literacy

- **Health Reform to Require Insurers to Use Plain Language in Describing Health Plan Benefits, Coverage** (2/9/12, HHS.gov) People in the market for health insurance will soon have clear, understandable and straightforward information on what health plans will cover, what limitations or conditions will apply, and what they will pay for services thanks to the Affordable Care Act – the health reform law – according to final regulations published today. The marketing materials that insurers use can sometimes make it difficult for consumers to understand exactly what they are buying. The new rules require health insurers and group health plans to provide concise and comprehensible information about health plan benefits and coverage to the millions of Americans with private health coverage. The new explanations, which will be available beginning, or soon after, September 23, 2012, will ensure consumers have access to two key documents that will help them understand and evaluate their health insurance choices:
 - A short, easy-to-understand Summary of Benefits and Coverage (or “SBC”); and a uniform glossary of terms commonly used in health insurance coverage, such as "deductible" and "co-payment"
 - A key feature of the SBC is a new, standardized plan comparison tool called “coverage examples,” similar to the Nutrition Facts label required for packaged foods. The coverage examples will illustrate sample medical situations and describe how much coverage the plan would provide in an event such as having a baby (normal delivery) or managing Type II diabetes (routine maintenance, well-controlled) To view the template for the Summary of Benefits and Coverage and the glossary, visit: <http://cciio.cms.gov/resources/other/index.html#sbcug>
- *(reminder)* **The 3rd Annual Kentucky Health Literacy Summit**, entitled “Building Your Health Literacy Toolkit” will be held on March 22-23, 2012, at the Marriott Griffin Gate Hotel in Lexington. This conference is open to all those interested in improving their health literacy and patient communications skills. Keynote speakers will include: Cindy Brach, AHRQ; Audrey Riffenburgh, Plain Language Works; Al Cross, Institute for Rural Journalism; and Bruce Rector, Monday Morning Messages. Interactive workshops will provide you with a health literacy toolkit of skills and resources, and contributed papers and posters will highlight local/regional health

literacy activities. For more information or to register, visit <http://www.cecentral.com/live/3748> Questions? Contact Jane Bryant at (859) 323 - 5715 or jbryant@uky.edu

Honors and Awards

- Faye Wong, CDC's National Center for Chronic Disease Prevention and Health Promotion, Division of Cancer Prevention and Control, Branch Chief, Program Services Branch has been named a recipient of the 2011 HHS Departmental Awards for Career Achievement. This distinguished award is highly competitive as nominees must have ten years or more of HHS service, an impeccable record of outstanding achievements and a high standard of excellence and dedication throughout their career. Faye will be recognized at the HHS award ceremony on Tuesday, February 21, 2012 in Washington, DC.

Leukemia

- [Cancer Drug Shortage Threatens Children's Lives](#) (2/13/12, healthfinder.gov) A shortage of the childhood leukemia drug methotrexate in the United States means that hospitals across the country may run out of the medicine within the next two weeks. If that happens, cancer doctors and federal officials say that hundreds and perhaps thousands of children will be at risk of dying from a largely curable disease, *The New York Times* reported. Methotrexate is used to treat acute lymphoblastic leukemia (ALL), which is most common in children ages 2-5. One of nation's largest suppliers of injectable preservative-free methotrexate was Ben Venue Laboratories. But in November, the company suspended operations at its plant in Bedford, Ohio due to what it called "significant manufacturing and quality concerns." "This is a crisis that I hope the FDA's hard work can help to avert," Dr. Michael P. Link, president of the American Society of Clinical Oncology, told *The Times*. "We have worked very hard to take what was an incurable disease and make it curable for 90 percent of the cases. But if we can't get this drug anymore, that sets us back decades."

Lung Cancer

- [Lung Cancer Alliance Announces National Framework for Lung Cancer Screening Excellence](#)(2/9/12, Lung Cancer Alliance) Today, Lung Cancer Alliance (LCA) moved lung cancer screening to a national platform by announcing a Framework for Lung Cancer Screening Excellence which includes a bill of rights for the at-risk public and guiding principles for lung cancer screening sites. "The science is indisputable: screening those at high risk for lung cancer with low dose CT scans can save tens of thousands of lives each year," said LCA President and CEO Laurie Fenton Ambrose. "We are moving forward now with thoughtful and responsible leaders to bring this benefit of screening to those at high risk for lung cancer safely, efficiently, and effectively," she said. By announcing the first of its kind national framework for lung cancer screening LCA is breaking through the status quo on lung cancer whose 15% survival rate has barely changed in forty years. More people die of lung cancer than the next four leading causes of cancer death - breast, prostate, colon, and pancreatic cancers- combined. The National Framework states that the public has a right to know if they are at risk, that low dose CT screening can save their lives, and that they should only go to sites that follow certain Guiding

Principles, which are also listed. To view Framework, please visit www.lungcanceralliance.org/screening.

Prevention/Genetics/Causes

- **“Step Up to the Plate: Food and Nutrition Conference and Exhibition 2012” with a special pre-conference opportunity: 2012 Breastfeeding Summit.** March 29 & 30 at the Clarion Hotel in Lexington. Sponsored by the Kentucky Dietetic Association. For registration rates and program agenda, read the [Conference brochure](#).
 - Why cancer control colleagues should be involved in nutrition, physical activity, and breast-feeding initiatives (information from the American Cancer Society):
 - Getting to and staying at a healthy weight is important to reduce the risk of cancer and other chronic diseases, such as heart disease and diabetes. Being overweight or obese increases the risk of several cancers, including those of the breast (in women past menopause), colon and rectum, endometrium (the lining of the uterus), esophagus, pancreas, and kidney, among others.
 - Being overweight can increase cancer risk in many ways. One of the main ways is that excess weight causes the body to produce and circulate more estrogen and insulin, hormones that can stimulate cancer growth.
 - Decreasing the length of time a woman's breast tissue is exposed to estrogen may help prevent breast cancer. One manner in which exposure to estrogen may remain lower is through breast-feeding. Some studies have shown that breast-feeding slightly lowers breast cancer risk, especially if the breast-feeding lasts 1½ to 2 years. This could be because breast-feeding lowers a woman's total number of menstrual periods, as does pregnancy. But this has been hard to study because, in countries such as the United States, breast-feeding for this long is uncommon.
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- [What Obama’s Budget Proposal Means for Disease Prevention](#) (2/14/12, Wall Street Journal Health Blog) Investments in disease prevention — a core principle of President Obama’s health-care overhaul legislation — would face a setback under his budget proposal for next year. Obama’s fiscal 2013 budget would scale back the Prevention and Public Health Fund, established as part of the health law, by over \$4 billion by fiscal 2022 — leaving that much less money for public-health prevention programs meant to thwart outbreaks or cut down on rates of diabetes, heart disease, and other chronic conditions that account for 75% of U.S. health-care costs. The law originally called for \$21 billion between fiscal 2010 and 2022, a substantial boost in public-health funding. Now it calls for about \$16.75 billion over that period. That’s still a lot of money. But so far, the prevention fund has been used heavily to compensate for cuts to the regular budget of the Centers for Disease Control and Prevention rather than for its originally intended use — new disease prevention-related programs.
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more care but not necessarily better care. Under the new plan the carrier is rolling out, part of medical providers' compensation could be tied to goals such as avoiding hospital readmissions and ensuring patients get recommended screenings. UnitedHealth has been trying such efforts on a more limited scale, but now the company says it plans to roll out new contracts nationwide that could include financial rewards for care the company considers high-quality and efficient, and in some cases potentially withhold expected increases if certain standards aren't met. UnitedHealth says it expects the new efforts to save at least twice as much money as they cost. UnitedHealth's push comes as other carriers, including WellPoint Inc. and Aetna Inc., are announcing similar moves.

Resources

- [Expert voices: New online resource from the American Cancer Society](#) (2/12) ACS recently launched a blog chronicling input from oncology experts on a variety of topics. More than statistics, writers offer their expert insight based on years of experience in the field. The site is meant to be interactive, and allows for public response/comment. Current blog topics include: Weight Loss During Chemo; To Treat or Not To Treat Prostate Cancer – That Is The Question; Breast Cancer Genetics – Is Testing an Option?; and Why Everyone Deserves Palliative Care.
- [Annals of Internal Medicine's "Summaries for Patients"](#) “Summaries for Patients’ are brief, non-technical summaries of studies and clinical guidelines published in Annals of Internal Medicine. The Summaries aim to explain these published articles to people who are not health care providers. They describe how researchers conducted a study and what they found; describing the official recommendations for patient care developed by official groups such as the US Preventive Services Task Force or the American College of Physicians. Read the most recently published summary (2/7/12), entitled “[End-of-Life Care Discussions Between Patients with Advanced Cancer and Doctors](#)”.
- [Women's Wellness Guide Unveiled at UK Markey Cancer Center](#) (2/13/12, UK Now) Kentucky's First Lady Jane Beshear joined University of Kentucky's Dr. Capilouto as well as representatives from the Kentucky Commission on Women (KCW) and the Markey Cancer Center to unveil the Women's Wellness Guide, a new bilingual, interactive wellness kiosk that provides important health information especially for women. The touch-screen kiosk provides a wide range of information on general women’s wellness and breast health, including symptoms and treatment options for cancer. Topics are programmed with women’s health stories, preventive measures, suggested follow-up questions to ask a health care provider and encouragement to visit a medical professional. The kiosk, located on the first floor of the Marylou Whitney and John Hendrickson Cancer Care Facility for Women at the Markey Cancer Center, also includes a telephone that is programmed to connect the user with immediate assistance if needed or desired. The kiosk design is similar to that of an automated teller machine. Health information is provided in a manner that serves multiple reading abilities for easy comprehension and recollection. The touch-screen technology attracts visitors and allows for the information to be provided in both audio and visual formats to appeal to a broader audience

- *(reminder)* **National Cancer Institute Cyber-Seminar: [Howdy, Partner! Using the PARTNER Tool to Track and Analyze Community Partnerships](#)** February 21, 2012 2:00PM - 3:00PM EST. A major challenge facing public health researchers and practitioners today is how to partner with other organizations, agencies, and groups to collaboratively address public health goals while effectively leveraging resources. The process by which organizations have engaged partners in collaboration has varied, with few ways to measure the success of these partnerships. The PARTNER Tool (Program to Analyze, Record, and Track Networks to Enhance Relationships), is a free social network analysis tool designed to demonstrate how community organizations members are connected, how resources are leveraged and exchanged, the levels of trust, and to link outcomes to the process of collaboration. [Find out more.](#) »

Rural Health

- *(reminder)* **[Remaking Rural Health: A KET Special Report](#)** Kentuckians are dying younger than people in nearly every other state in the country due to alarmingly high rates of cardio-vascular disease, cancer, obesity, and diabetes. And while these problems affect all Kentuckians, they disproportionately impact rural Kentuckians. Discover what's being done to combat this health-care crisis in [Remaking Rural Health: A KET Special Report](#) . Find out more about this program and watch a preview online at the link above. This program was made possible, in part, by a grant from the Foundation for a Healthy Kentucky.
 - KET2 Monday, February 13 • 10/9 pm **CT**

Smoke-free

- **[Playing Sports May Help Keep Kids From Smoking \(2/8/12, HealthDay News\)](#)** Middle-school kids who participate in lots of sports are less likely to start smoking than other kids, new research finds. Yet, students with teammates who smoke are more likely to smoke, too. This apparent influence of peers is more pronounced among girls. Researchers questioned 1,260 sixth through eighth graders about their smoking behavior. The children were middle class, lived in urban areas and ethnically diverse. The study, appearing Feb. 8 in *Child Development*, found that the more sports the kids played, the less likely they were to smoke.
- **[Smoke-free policies sweep across South](#)** (2/9/12, Campaign for Tobacco-Free Kids) More and more communities in South Carolina and Kentucky — states where tobacco used to be king — are helping reduce smoking and protect everyone from dangerous secondhand smoke by enacting local ordinances requiring workplaces and public places to be smoke-free. In South Carolina, North Myrtle Beach became the latest Palmetto State municipality to clear the air when the City Council passed an ordinance prohibiting smoking in workplaces and public places. There are now 44 smoke-free communities in South Carolina. Meanwhile in Kentucky, two additional municipalities — Manchester and Somerset — got the New Year off to a healthy start by enacting smoke-free ordinances. More than a third of Kentucky residents are now protected by smoke-free workplace laws, a dramatic increase from zero percent in 2004. Nationwide, 29 states, Washington, DC, Puerto Rico, the U.S. Virgin Islands and more than 640 cities have laws requiring smoke-free restaurants and bars. Read more about clearing the air in [Kentucky](#).
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- *(reminder)* The Kentucky Center for Smoke-free Policy is hosting **their Spring 2012 Smoke-free Conference** on April 11, 2012 at the Doubletree Suites in Lexington. Save the date!

Survivorship

- *(reminder)* **Friend for Life Cancer Support Network** is a non-profit support network of cancer survivors who serve the emotional and psychological needs of persons recently diagnosed with cancer, and their loved ones. FFL matches persons recently diagnosed with any form of cancer as closely as possible with a trained volunteer who has encountered the same type of cancer and similar course of treatment. Wherever possible, they also match for age and gender. Friend for Life's next volunteer training will be Saturday, March 3, 2012 from 9:00am until 5:00pm at Baptist Hospital East, Administrative Building, 2nd Floor, VTC room, 4007 Kresge Way, Louisville, KY. The training is free, and Breakfast and lunch will be provided. Registration is required. Visit <http://www.facebook.com/events/297742476944531/> for information, or call: [502-893-0643](tel:502-893-0643) or [866-374-3634](tel:866-374-3634).