

Dear Kentucky Cancer Consortium Partners:

Below is the **April 4, 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 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

April 4, 2012

ATTN Lexington and surrounding area:

- The American Cancer Society's Epidemiology Research Program is inviting men and women between the ages of 30 and 65 years who have no personal history of cancer to join a historic research study, [Cancer Prevention Study-3](#) (CPS-3). Enrollment is being brought to Lexington with the Society's host, Central Baptist Hospital. Enrollment will take place **April 14, 2012 from 9 a.m. to 1:30 p.m.** at the hospital's HealthWoRx facility in Lexington Green Mall, 161 Lexington Green Circle, Ste. B2. The ultimate goal is to enroll at least 300,000 adults from various racial/ethnic backgrounds from across the U.S. The purpose of CPS-3 is to better understand the lifestyle, behavioral, environmental and genetic factors that cause or prevent cancer and to ultimately eliminate cancer as a major health problem for this and future generations. Visit cps3lex.org to learn more.

Advocacy

- Federal legislative update, current as of mid-March 2012. Bill introduced to eliminate cost-sharing in Medicare for colonoscopies.
 - While health reform requires screening colonoscopies to be covered with no cost-sharing, many insurers, including Medicare, are still charging a co-pay (around \$225 in Medicare) if any polyps are removed during the procedure. This is because the procedure is reclassified from screening to diagnostic if polyps are found.
 - On March 1, 2012 Rep. Charlie Dent (R-PA) introduced a bill, HR 4120, to eliminate cost-sharing for Medicare patients when a polyp is found.
 - In a press release, Rep. Dent said, "For a Medicare beneficiary on a fixed income, the cost of coinsurance liability could be the deciding factor of whether to pursue a potentially life-saving screening colonoscopy. Congress must correct current law to continue the great progress our nation has made in the fight against colorectal cancer."
 - Rep. Dent also cited CDC estimates that "if all precancerous polyps were identified and removed before becoming cancerous, the number of new colorectal cancer cases could be reduced by 76-90 percent."
 - The bill has been referred to two committees where it will await further action.
 - H.R. 4120 is supported by the American Society for Gastrointestinal Endoscopy, the American Gastroenterological Association, the American Cancer Society Cancer Action Network Fight Colorectal Cancer, the American College of Gastroenterology, the Colon Cancer Alliance, the Prevent Cancer Foundation, the Society for Gastroenterology

Nurses & Associates, the Pennsylvania Society of Gastroenterology and the Digestive Disease National Coalition.

Breast Cancer

- [**Obese Women at Higher Risk of Breast Cancer Recurrence: Study**](#) (3/23/12, HealthDay News) -- Overweight and obese breast cancer patients are at increased risk for recurrence of the disease, a new study finds. The findings -- which held true even though chemotherapy doses were adjusted for weight -- provide further evidence that lifestyle factors can influence cancer patient outcome. Researchers analyzed data collected from 1,909 breast cancer patients. Of those women, about 1 percent were underweight, 33 percent were normal weight, 33 percent were overweight and 33 percent were obese. The researchers examined the link between body-mass index (a measure of body fat based on weight and height) and relapse-free survival and overall survival. The findings are slated for presentation Friday at the European Breast Cancer Conference in Vienna. "We found that BMI was related to both relapse-free survival and overall survival; for example, the 10-year relapse-free survival of a patient who was overweight was 70 percent; compared with 65 percent for one who was obese," researchers noted.

Cervical Cancer

- [**HPV Infection Lasts Longer in Young Black Women**](#) (4/1/12, HealthDay News) Human papillomavirus infection tends to last longer in college-aged black women than whites, possibly setting them up for a higher risk of cervical cancer, according to a new study. The researchers also found that black women are 70 percent more likely to have an abnormal Pap test -- the screening for cervical cancer -- than their white counterparts. Human papillomavirus, or HPV, which is a sexually transmitted infection, can cause genital warts and is responsible for many cases of cervical cancer. Exactly why black women have more difficulty clearing the virus is not known, but may have something to do with the immune system. The findings are slated for presentation Sunday at the annual meeting of the American Association for Cancer Research, in Chicago. Creek said that black women are 40 percent more likely to develop cervical cancer and two times more likely to die from the disease than European or American white women. This discrepancy is often attributed to lack of access to medical care, but the authors said their findings suggest a biological basis lies behind the varying rates. "African American women may benefit even more from the HPV shots," researchers said.
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- [**HPV Vaccine May Help Women With Cervical Conditions**](#) (3/27/12, HealthDay News) A new study finds that women diagnosed with pre-cancerous cervical conditions after they get the human papillomavirus (HPV) vaccine can still benefit from the shot because it cuts their risk of future HPV-related cervical disease. "This study helps to clarify the effects of the HPV vaccine and further define its use," noted one expert, Dr. Elizabeth Poynor, a gynecologic oncologist and pelvic surgeon at Lenox Hill Hospital in New York City. The study was published online March 27 in the *BMJ*. Previous research has shown that HPV vaccination does not prevent progression to cervical pre-cancers in women who have an HPV infection when they receive the vaccine. However, this is the first study to examine if HPV vaccination can prevent future cervical disease in these women after they've been successfully treated for their current condition, the researchers pointed out in a journal news release. The researchers also found that the risk of pre-cancerous changes of the cervix and other "high-grade" cervical disease was

almost 65 percent lower in those who received the HPV vaccination than in those who received the placebo. Among women who were diagnosed with and treated for vaginal or vulvar disease, the risk of any future HPV-related disease was about 35 percent lower among those who received the HPV vaccine than among those who received the placebo, the study authors reported.

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- *(reminder)* **Cervical Cancer-Free Kentucky** is taking registrations for their 2012 Annual Statewide Conference on May 14-15, 2012, at the Sloan Convention Center in Bowling Green, KY. To register, go to www.cervicalcancerfreeky.org and click on Conference, then [Registration](#). The Conference begins with a complimentary reception at the National Corvette Museum on the evening of May 14th, 7-9pm, and then has a full day of meetings planned on the 15th at the Sloan Convention Center in Bowling Green, KY. No registration fee is required and lunch is provided.

Childhood Cancer

- [Childhood Leukemia Survival Rates Improve Significantly](#) (3/27/12, cancer.org) A new study shows that children with the most common type of childhood cancer, acute lymphoblastic leukemia (ALL) have a survival rate of more than 90%. ALL accounts for about 3 out of 4 cases of childhood leukemia. The research included more than 21,000 children with ALL, more than half the patients in the United States. They took part in the Children's Oncology Group clinical trials from 1990 to 2005. Researchers from the University of Colorado Cancer Center found that the 5-year survival rate for children and adolescents with ALL improved from 83.7% for those diagnosed between 1990 and 1994, to 90.4% for those diagnosed between 2000 and 2005. In the 1960s, the 5-year survival rate was less than 10%. The survival rates increased for girls and boys of all racial and ethnic groups and for all age groups except infants under 1 year old. Improvements in survival for African-American patients with ALL were so significant, they narrowed the racial survival gap. Researchers attribute the improved survival rates to clinical trials that helped doctors learn the best drugs and dosages to treat children with ALL. Survival rates for infants did not increase with improvements in drug use, they said, because more infants died from side effects of their treatment. The researchers are calling for more efforts to improve survival for all children with ALL. The study was published online March 12 in the *Journal of Clinical Oncology*.

Colon Cancer

- [Lawmakers give final passage to lean state budget](#) (3/30/12, AP) A slow economic rebound led to a lean state budget for Kentucky, one that forces sharp cuts on most government agencies, leaves employees without pay raises again, and erases a planned cost-of-living increase from the monthly pension checks of retirees. HB 265, sponsored by House budget committee chairman Rep. Rick Rand, D-Bedford, passed the Senate 36-1 and the House 81-7 today. The bare-bones two-year, \$19 billion state budget now goes to Gov. Steve Beshear to be signed into law.....The governor said he was pleased that education, Medicaid and corrections were spared from major cuts. "Perhaps most importantly, legislators recognized the significance of making key investments in our future," Beshear said. "Legislators approved my plan to reduce crushing

social worker caseloads by hiring more staff in the area of child abuse and neglect, and funded my proposal to provide colon cancer screenings to some 4,000 uninsured Kentuckians."

- [**A Pilot Study for Using Fecal Immunochemical Testing to Increase Colorectal Cancer Screening in Appalachia, 2008-2009**](#) (Kluhsman et al, Preventing Chronic Disease 2012; 9:110160) The purpose of this pilot study was to assess acceptability of a take-home fecal immunochemical test (FIT) and the effect of follow-up telephone counseling for increasing CRC screening in rural Appalachia. Patients aged 50 or older, at average CRC risk and due for screening were enrolled during a routine visit to 3 primary care practices in rural Appalachian Pennsylvania and received a free take-home FIT and educational brochure. Those who had not returned the test 2 weeks later were referred for telephone counseling. 72.5% completed the FIT as recommended (adherent) and 27.5% were referred for telephone counseling (nonadherent), of whom 41.8% became adherent after 1 to 2 counseling sessions, an 11.5 percentage-point increase in screening after telephone counseling and 84% FIT adherence overall. Lack of CRC-related knowledge and perceived CRC risk were the screening barriers most highly associated with nonadherence.
- **Post-Health Reform Colonoscopy Coverage Confuses Many** (CDC INSIGHT Newsletter, Winter 2012) The health reform law requires all health insurers to cover colonoscopies, among other preventive services, with no cost sharing for patients. But, since the provision went into effect last year, many patients have been surprised to get an unexpected bill after their colonoscopies. The Affordable Care Act requires all health insurance plans to cover—without cost sharing—all preventive services that have been given an A or B ranking by the U.S. Preventive Services Task Force (USPSTF). Colonoscopies have an A rating from USPSTF for adults aged 50–75 because of their ability to detect colorectal cancer early, when it’s more treatable, and to prevent cancer by finding precancerous polyps so they can be removed before they have a chance to turn into cancer. Under Medicare coding rules, however, if a polyp is removed during a colonoscopy, it reclassifies the “screening” as a therapeutic procedure. If the procedure is classified as therapeutic and not preventive, the patient becomes responsible for the copayment—usually \$186 plus 20% of the doctor’s fee in Medicare. Depending on the number of polyps removed and geographic variation in physician fees, doctors’ fees can range greatly. Read the entire article on [page 3-4 of the newsletter](#).
- *(reminder)* **KET produced television show “One to One with Bill Goodman”** will feature Dr. Whitney Jones and Dr. Thomas Tucker for Colon Cancer Awareness Month, discussing prevention, symptoms, and treatment of this preventable, treatable and beatable cancer. This episode will be repeatedly aired through April. [For airtimes and more information](#)

Data

- [**Report to the nation finds continuing declines in cancer death rates since the early 1990s**](#) (3/28/12, cancer.gov) *Feature highlights cancers associated with excess weight and lack of sufficient physical activity.* Death rates from all cancers combined for men, women, and children continued to decline in the United States between 2004 and 2008, according to the Annual Report to the Nation on the Status of Cancer, 1975-2008. The overall rate of new cancer diagnoses, also known as incidence, among men decreased by an average of 0.6 percent per year between 2004

and 2008. Overall cancer incidence rates among women declined 0.5 percent per year from 1998 through 2006 with rates leveling off from 2006 through 2008. The report is co-authored by researchers from the Centers for Disease Control and Prevention, the North American Association of Central Cancer Registries, the National Cancer Institute, and the American Cancer Society. It appeared early online on March 28, 2012, in the journal *CANCER*. The special feature section highlights the effects of excess weight and lack of physical activity on cancer risk. Esophageal adenocarcinoma, cancers of the colon and rectum, kidney cancer, pancreatic cancer, endometrial cancer, and breast cancer among postmenopausal women are associated with being overweight or obese. Several of these cancers also are associated with not being sufficiently physically active.

- For a Q&A on this Report, go to <http://www.cancer.gov/newscenter/pressreleases/2012/ReportNationQA2012>.
 - To view the Report in its entirety, go to [http://onlinelibrary.wiley.com/journal/10.1002/\(ISSN\)1097-0142](http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1097-0142) .
- CDC's Division of Cancer Prevention and Control is pleased to announce the early release of National Program of Cancer Registries (NPCR) cancer incidence data for the years 1999–2009 to facilitate cancer control planning. The data are available through CDC WONDER at <http://wonder.cdc.gov/cancer.html>. The data from selected NPCR registries cover between 86% and 96% of the United States population, depending on the specific year of diagnosis. This release is part of the NPCR Data Release Plan and is based on the NPCR Cancer Surveillance System 2012 data submission. CDC WONDER is an online query system that produces age-adjusted and crude rates in tabular, map, and chart formats. Variables include year of diagnosis, state, region or division of the United States, sex, race, ethnicity, age, primary site, and childhood cancer.
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 - **Health statistics help shape local policies** (4/2/12, USA Today) Better access to health care data helps local governments improve preventive health policies aimed at reducing overall medical costs, say researchers who released the third annual national County Health Rankings today. In general, the study shows that excessive drinking rates are highest in the Northern states, while Southern states have the highest rates of teen births, sexually transmitted infections and children in poverty. Though there has been little change in the overall statistics nationwide, officials use the findings to try to improve local health. "It is going to take communities a while to improve their health," said Bridget Catlin, director of county health at County Health Rankings and Roadmaps. Businesses and non-profits use the rankings, available at www.countyhealthrankings.org, to talk to politicians about what they can do to help. "Businesses are concerned about costs," Catlin said. "And they're starting to do more in the workplace. But if you go home and there's no access to fresh food or a safe place to walk every day, then the lifestyle does not change." The rankings come from the University of Wisconsin Population Health Institute and the [Robert Wood Johnson Foundation](#). The rankings use death rates, air pollution rates, income levels, health access, physical inactivity rates and access to healthy foods.

General

- [Fayette County Public Health Heroes Announced](#) The Lexington-Fayette County Health Department's Board of Health has selected Vickie Blevins and Jay McChord as the 2012 Public Health Heroes. The award is given annually to individuals who have demonstrated their

dedication to improving the health of Lexington residents. The awards are given each April as part of National Public Health Week (April 2-8). Blevins is the program director of Kentucky Pink Connection, a non-profit organization that helps link women to the screening, diagnosis and treatment of breast cancer. Now in its fourth year, the program has helped more than 3,000 women. Blevins is active at health fairs and shares information about breast cancer options at health departments, hospitals, doctors' office, community events and fundraisers. She has also been part of a grassroots group developing a plan for a mobile mammography van for central and eastern Kentucky. Blevins will be recognized at the April 9 Board of Health meeting held at 5:45 p.m. at the Lexington-Fayette County Health Department, 650 Newtown Pike, and the April 12 Lexington-Fayette Urban County Council meeting.

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- [Most Anal Lesions Don't Cause Cancer in Men, Research Shows](#) (3/23/12, HealthDay News) Anal human papillomavirus (HPV) infection and precancerous lesions are common among gay and bisexual men, but most of these cases will not progress to anal cancer, a new analysis of earlier research shows. The researchers also found that the rate of progression from anal lesions to anal cancer among men appears to be much lower than the rate of progression from cervical lesions to cervical cancer among women. Types HPV 16 and HPV 18 cause 80 percent of anal cancers and 70 percent of cervical cancers, according to background information in the report, published online March 22 in *The Lancet Oncology*.
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- (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 Equity

- [Longevity Up in U.S., but Education Creates Disparity, Study Says](#) (4/3/12, NY Times) Americans are living longer, but the gains in life span are accruing disproportionately among the better educated, according to a new report by researchers from the University of Wisconsin. Researchers have long known of the correlation between education and length of life, but the report provides a detailed picture of what that link looks like across the country's more than 3,000 counties. The study uses government data to rank each American county by health indicators like obesity, smoking, drinking, physical inactivity and premature death. Its findings show that the link between college education and longevity has grown stronger over time. Premature death rates differed sharply across counties, and a lack of college education accounted for about 35 percent of that variation from 2006 to 2008, the most recent years available. That was up from 30 percent over an equivalent period seven years earlier. The findings offered fresh evidence that Americans' fortunes are diverging by education level. When average post-secondary education levels increased by one year, there was a 16 percent decline in years of life lost before age 75.
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- [Black women more likely to die of breast cancer](#) (3/21/12, Reuters Health) More than 1,700 black women die of breast cancer every year in the United States because of racial disparities in cancer risks and access to care, suggests a new study. Researchers who calculated cancer death

rates in 24 of the largest U.S. cities found that in 13 of them, black women were significantly more likely to die of breast cancer than white women. That's despite the evidence that white women are more likely than blacks to get breast cancer in the first place. Of the cities where black women were more likely to die of breast cancer, that disparity ranged from a 24 percent higher risk of death in New York to more than twice the risk of death in Memphis between 2005 and 2007. Other cities with racial disparities in deaths during those years included Los Angeles, Chicago, Houston, Philadelphia, San Diego, Dallas, Jacksonville, Columbus, Milwaukee, Boston and Denver. On the other hand, there was no difference in black and white women's chances of dying from breast cancer in Phoenix, San Antonio, San Jose, Detroit, San Francisco, Austin, Baltimore, Fort Worth, Charlotte, El Paso and Seattle.

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- *(reminder)* [Health Equity Summit II “Setting a Vision for Tangible Change: Moving from Awareness to Action”](#) is scheduled for Monday, April 16, 2012 • 7:30 a.m. to 3 p.m. at the Muhammad Ali Center, Louisville, Ky. The Summit is hosted by Norton Healthcare and the Center for Health Equity, Louisville Metro Department of Public Health and Wellness. Space is limited • Call (502) 629-1234 to reserve your seat.
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- [The 12th Biennial National Symposium on Minorities, the Medically Underserved & Health Equity](#), “Empowering Communities in the Era of Health Care Reform” will be held June 27 - July 1, 2012, at the Hilton Americas Houston in Houston, Texas. In celebration of the 25th anniversary of the Biennial Symposium and the 10th annual Health Disparities Summer Workshop, both events will take place side-by-side in Houston and will be hosted by the Center for Health Equity & Evaluation Research (CHEER, formerly CRMH, a joint venture of the University of Houston and The University of Texas MD Anderson Cancer Center) and the Intercultural Cancer Council.

Prevention/Genetics/Causes

- [Even a Little Drinking May Raise Breast Cancer Risk](#) (3/28/12, HealthDay News) Just one alcoholic drink a day can boost a woman's risk of breast cancer by about 5 percent, according to a new review of existing research. Heavier drinking -- three or more drinks a day -- can increase risk up to 50 percent, according to researchers from Germany, France and Italy. "Alcohol consumption is causally related with breast cancer," the study authors concluded after reviewing 113 prior studies. They attributed 2 percent of breast cancer cases in Europe and North America to light drinking alone, and about 50,000 cases worldwide to heavy drinking. The findings suggest that healthy women at average risk of breast cancer should not consume more than one alcoholic drink a day, the authors said. The link between alcohol and breast cancer was first suggested in the early 1980s, the authors said. To update the research, they searched for studies published before November 2011. They found more than 3,400 studies in all and narrowed their focus to 113 that examined the effects of light drinking on breast cancer risk. The review will be published March 29 in the journal Alcohol and Alcoholism.
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- [Study: Aspirin Can Lower Cancer Risk](#) (3/21/12, cancer.org) Three studies published today conclude that taking aspirin every day may reduce the risk of cancer and prevent cancer from spreading. However, long-term aspirin use can have serious side effects and should not be taken regularly without talking to a doctor first.

- In one of the studies, published in *The Lancet*, researchers analyzed patient records from 51 trials that compared people who took aspirin every day to people who took no aspirin. They found that taking daily low-dose aspirin (less than 300 mg) for 3 years resulted in approximately a 25% lowered risk of developing any type of cancer.
- A second article published in *The Lancet* looked at the effect of aspirin on cancer metastasis (spread). They found that during an average 6 ½ years of taking aspirin (75mg or more a day), trial participants lowered their risk of metastatic cancer by 36%. The main effect seemed to be on the risk of metastatic adenocarcinoma (a common type of solid cancer that can occur in many areas, including the colon, lung, and prostate), which was lowered by 46%. Researchers also found that daily aspirin lowered the risk of non-metastatic cancer progressing to metastatic cancer, especially in patients with colon cancer.
- The third study, published in *The Lancet Oncology*, also looked at aspirin's effect on metastasis. The researchers reviewed observational studies as well as randomized trials to draw conclusions regarding less common cancer types and cancer in women. They found significantly lowered risk of cancer and metastasis in colon, throat, gastric, biliary and breast cancer.
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- **Melanoma cases rising; young women at greatest risk** (4/2/12, USA Today) Planning to head to a tanning salon to beef up your bronze looks for prom and graduation or to get a head start on beach season? Young people might want to reconsider. Every session adds risk: Experts worry that it's common for teens and young women to visit a tanning salon before a dance or big event. Women under 40 are hit hardest by the escalating incidence of melanoma, according to a Mayo Clinic study published in the April issue of [*Mayo Clinic Proceedings*](#), out today. Researchers examined records from a decades-long database of all patient care in Olmsted County, Minn., and looked for first-time diagnoses of melanoma in patients 18-39 from 1970 to 2009. Melanoma cases increased eightfold among women in that time and fourfold for men, the authors say. The findings might be explained by gender-specific behaviors addressed in other studies, the authors wrote. "Young women are more likely than young men to participate in activities that increase risk for melanoma, including voluntary exposure to artificial sunlamps." The study is the latest evidence of a steady rise in skin cancer. A major government study published Wednesday reported that while new cases of many of the most common cancers are declining, melanoma cases are increasing.
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- **Taller, Heavier Women May Face Higher Ovarian Cancer Risk** (4/3/12, HealthDay News) Taller, heavier women may be at an increased risk of ovarian cancer, research suggests. An international research group examined data from 47 studies conducted in 14 countries involving more than 25,000 women with ovarian cancer and 81,000 women without the disease. Every 2-inch increase in a woman's height was associated with a significant increase in the odds of developing ovarian cancer, the investigators found. A higher body mass index (a measurement based on height and weight) also was associated with a higher risk of ovarian cancer, but only among women who had never taken menopausal hormone therapy. The researchers found that the association between height and weight and ovarian cancer remained even after taking into account other factors that could influence ovarian cancer risk, such as age, age at first menstrual period, family history of ovarian or breast cancer, use of oral contraceptives, menopausal status, and use of alcohol or tobacco. The results of this large, observational study by the Collaborative Group on Epidemiological Studies of Ovarian Cancer,

based at Oxford University in England, are published in this week's issue of the journal *PLoS Medicine*.

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- [Weight of the Nation Documentary](#) Beginning in May, HBO Documentary Films, Institute of Medicine, NIH, CDC, Kaiser Permanente, and Michael & Susan Dell Foundation will launch the Weight of the Nation public health campaign featuring a four-part documentary film series on the obesity epidemic. The topics of the four films will be *Consequences*, *Choices*, *Children in Crisis* and *Challenges*. Supporting these films will be advertising, press releases, major market screening events, robust social media, bonus short videos online, DVD screening kits and online community action resources. Also on the HBO family network, three half-hour films will be shown, focused on children who have taken action against obesity personally and in their communities. HBO channels will be available free the week of May 14 so everyone can see the series. **Public health programs and partners are encouraged to host screening events** for opinion leaders and community mobilization activities using the DVD screening kits that include the entire series, discussion guides in English and Spanish, and tips and supplemental materials for hosting screenings. [Sign up online for an e-newsletter and screening kits](#). Use online resources from CDC at www.CDC.gov/Obesity and join conversations to help build online communities at www.Facebook.com/TheWeightOfTheNation. CDC and its partners hope these tools will catalyze and support local efforts in communities that combat obesity across the country.
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- [Best Fed Beginnings](#) Please encourage interested hospitals in your community to apply for the Best Fed Beginnings initiative. The National Initiative for Children's Healthcare Quality (NICHQ), with support from CDC, is leading a nationwide effort in close partnership with [Baby-Friendly USA](#) to help hospitals improve maternity care and increase the number of Baby-Friendly hospitals in the United States. Upon acceptance into the Best Fed Beginnings project, hospitals will begin a 22-month learning collaborative with other participating hospitals to make system-level changes in order to become Baby-Friendly. Recruitment opens on April 2, an information webinar will be held April 10, and applications must be submitted by May 4. See http://www.nichq.org/our_projects/cdcbreastfeeding.html for details. On March 20, the US Breastfeeding Committee hosted a webinar to talk about strategies that breastfeeding coalitions and other partners can use to engage and help hospitals. USBC and CDC plan to host additional webinars as the initiative gets under way. We will let you know about these, and encourage you to participate in them.

Resources

- [Primary Care and Public Health: Exploring Integration to Improve Population Health:](#) A new report from the Institute of Medicine. Marcus Plescia, CDC Division Director for Cancer Control, testified before the IOM panel for this report. This is one of the CDC, Division of Cancer Prevention and Control's goals -- to work more closely with Federally Qualified Health Centers. Also, note that pages 80-88 highlight colorectal screening as a case example for the potential for integration. The report can be downloaded for free for your personal use.
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- The following Fact Sheets have been recently updated by the National Cancer Institute:

- Fact sheet 3.13 “[Oral Contraceptives and Cancer Risk](#)”: Discusses research on the association of oral contraceptive use with risk of various cancers. Revised March 21, 2012.
- Fact Sheet 3.20 “[HPV and Cancer](#)”: Examines the link between human papillomavirus (HPV) infection and cancer. Revised March 15, 2012.
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- [ResearchtoReality.cancer.gov](#) is an online community of practice designed to bring together cancer control practitioners and researchers to discuss moving evidence-based programs into practice. It is both an information resource and a forum where members can connect and collaborate with other public health professionals to ask questions, discuss ideas and solutions, share useful resources and tools, and participate in cyber-seminars and other events. It was developed in response to [Cancer Control P.L.A.N.E.T.](#) users' need to have a better, timelier way to engage their colleagues and share experiences.
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Smoke-free

- [Secondhand Smoke Affects Young Girls More Than Boys: Study](#) (3/30/12, HealthDay News) -- The health effects of early life exposure to secondhand smoke appear to be greater in girls than in boys, a new study finds. University of Cincinnati researchers looked at 476 children and found that those who were exposed to high levels of secondhand smoke and also had allergic sensitizations at age 2 were at higher risk for decreased lung function at age 7. The investigators also found that lung function among children exposed to similar levels of secondhand smoke and allergic sensitization -- in which the immune system develops antibodies that show up in an allergy test -- was six times worse in girls than in boys. The study, conducted by epidemiologists with the university's Cincinnati Childhood Allergy and Air Pollution Study (CCAAPS), was published online March 21 in the journal *Pediatric Allergy and Immunology*.
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- [Ad Campaign Spurs Large Rise in Calls to Quit Smoking Line](#) A new U.S. government anti-smoking campaign featuring graphic images of diseased smokers led to a huge increase in the number of people calling a toll-free number to help them quit smoking. The 1-800-QUIT-NOW line received more than 33,000 calls last week, which was the first week of the \$54-million, 12-week ad campaign. The phone line received less than 14,500 calls the previous week, the Associated Press reported. The volume of calls last week was the highest in the seven-year history of the federally-sponsored quit line, which provides counseling and information about how to quit smoking. Officials also said the number of clicks to the federal government's Smokefree.gov website increased from about 20,000 to about 60,000 last week, the AP reported.
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- **State Cigarette Excise Taxes** (3/30/12, MMWR Weekly) Increasing the price of cigarettes reduces the demand for cigarettes, thereby reducing youth smoking initiation and cigarette consumption and decreasing the prevalence of cigarette use in the United States overall, particularly among youths and young adults. Further increases in cigarette excise taxes would be expected to result in further reductions in demand for cigarettes, decreasing smoking and associated morbidity and mortality. To update data on state cigarette excise taxes in 2009, CDC conducted a survey of changes in state cigarette excise taxes during 2010–2011. From 2009 to

2011, the national mean cigarette excise tax among all states increased from \$1.34 per pack in 2009 to \$1.44 in 2010 and \$1.46 in 2011. In 2011, Missouri had the lowest state cigarette excise tax in the United States, at \$0.17 per pack, and New York had the highest, at \$4.35 per pack ([Table](#)). Among six major tobacco-growing states (Georgia, Kentucky, North Carolina, South Carolina, Tennessee, and Virginia), the mean state cigarette excise tax was \$0.49 cents per pack in 2011, an increase from \$0.40 per pack in 2009. For all other states, including the District of Columbia, the mean cigarette excise tax was \$1.59 per pack in 2011, an increase from \$1.46 in 2009.

- **For those of you who haven't [registered](#), the KCSP Spring Conference** will be held on April 11, 2012 at the Doubletree Suites in Lexington. The conference is free. As a part of the conference we will have a luncheon and an award ceremony to acknowledge smoke-free communities and Smoke-Free Advocate of the Year. A draft of the agenda is attached to this email. The last day to register is April 6, 2012. Please register for the conference even if you are unable to stay the entire time!

Survivorship

- Certified massage therapist Christy Murphy will be at [Gilda's Club Louisville](#), 633 Baxter Ave., on Monday, April 9th to discuss lymphedema and its treatment. The program is from 6:30 to 8pm, and dinner is served at 6pm. Everyone is welcome. Please call Gilda's Club at 502-583 0075 to RSVP for dinner and the workshop.
- [Gilda's Club Louisville](#) is hosting its annual "Gimme-A-Break Spring Break Lock-in" on Friday, April 13 at the Clubhouse, 633 Baxter Ave, Louisville, KY 40204. This overnight event is for youth ages 8 and 15 who are connected to cancer – their own diagnosis or a cancer diagnosis of someone to whom they are close. The clubhouse will be transformed into Hogwarts School of Wizardry & Witchcraft, and a night full of Harry Potter-related activities are planned. Call the clubhouse at 583-0075 to RSVP. See you at the Sorting Hat!
- [The Role of Obesity in Cancer Survival and Recurrence - Workshop Summary](#) (4/3/12, IOM) Recent research suggests that excess weight and obesity can influence cancer survival and recurrence. Given the increasing rate of obesity and an aging population more susceptible to cancer, there is mounting concern about obesity's role in fueling tumor growth. Additionally, there is interest in exploring ways to break the obesity-cancer link, especially in patients already diagnosed with cancer who are more susceptible to new cancers as well as a cancer progression or recurrence. At a workshop October 31-November 1, 2011, held by the IOM's National Cancer Policy Forum, experts presented the latest laboratory and clinical evidence on the obesity-cancer link and the possible mechanisms underlying that link. Clinicians, researchers, cancer survivors, and policy makers also discussed potential interventions to mitigate the effects of obesity on cancer, and research and policy measures needed to counter the expected rise of cancer incidence mortality due to an increasingly overweight and older population. This document summarizes the workshop.
- [Stigma, Shame Can Worsen Depression in Lung Cancer Patients](#) (3/29/12, HealthDay News) Feelings of shame, social isolation and rejection can heighten depression in lung cancer patients,

a new study finds. The findings may help explain why depression is more common among lung cancer patients than among patients with other kinds of cancer, according to the researchers at the Moffitt Cancer Center in Tampa, Fla. "Given its strong association with tobacco use, lung cancer is commonly viewed as a preventable disease," study co-author Paul Jacobsen said in a Moffitt news release. "Consequently, patients may blame themselves for developing lung cancer and feel stigmatized. Even lung cancer patients who have never smoked often felt -- accurately or inaccurately -- that they were being blamed for their disease by friends, loved ones and even health-care professionals." For the study, the researchers gave mental-health questionnaires to lung cancer patients and found that 38 percent of them suffered from depression. Greater levels of perceived stigma were associated with greater levels of depression. The study was published in the March issue of the journal *Psycho-Oncology*.

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- [**You Survived Cancer: Now Pay Attention to Your Overall Health: Half of cancer survivors die of other conditions, such as heart disease and diabetes**](#) (4/3/12, HealthDay News) Cancer survivors need to pay close attention to other aspects of their health as they age, researchers urge. A new study finds that nearly half of cancer survivors die of something other than cancer, such as heart disease or diabetes. And the further from the initial cancer diagnosis they get, the more likely it is that their cause of death will be something other than cancer. The study was to be presented Tuesday at the American Association for Cancer Research's annual meeting in Chicago. In following 1,800 cancer survivors over the course of more than 18 years, researchers found that 776 of the patients died: 51 percent eventually died from cancer and 49 percent died from other conditions. "We realized that the mortality rates for some types of cancer, such as breast cancer, had declined," said researchers. "Cancer survivors live much longer than they did several decades ago. So with this large group of cancer survivors, we need to pay more attention to cancer survivors' overall health." The patients followed in the study survived some of the most common forms of cancer, including breast, prostate, cervical, lung and colorectal. A large percentage were also diagnosed with conditions other than cancer, including high blood pressure and diabetes. The more time that passed after the initial cancer diagnosis, the more likely cancer survivors were to die from another illness. Among those who died from a condition other than cancer during the study period, 33 percent had been diagnosed with cancer within the previous five years and 63 percent had been diagnosed 20 years earlier.