

Dear Kentucky Cancer Consortium Partners:

Below is the **May 30, 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

May 30, 2012

Advocacy

- *(reminder)* [Kentucky Statewide Pioneering Healthier Communities Conference](#) June 5-6, 2012 at the Hyatt Regency Hotel in Downtown Louisville. The Statewide PHC Conference will allow those working for local policy change in KY to share and capture best practices, obstacles, and tips for local advocacy. Participants will build networks between communities working on similar issues and discuss sustainability and growth plans. Attendees will also learn the best ways to leverage statewide and national resources and efforts. Plenary speaker: Mark Fenton, nationally recognized expert on local advocacy. Registration is free for all participants and includes lunch and evening appetizers on June 5, and breakfast on June 6. Hotel rooms are available free of charge for the night of June 5. If traveling over 100 miles, you may reserve a room free of charge for the night of June 4. A limited number of travel stipends are available. To RSVP visit <http://www.123contactform.com/form-329852/Kentucky-Statewide-Pioneering-Healthier-Communities-Conference>

Breast Cancer

- **UCSF study finds breast MRI helps predict chemotherapy's effectiveness** (5/23/12, NCI Cancer Center News) Magnetic resonance imaging (MRI) provides an indication of a breast tumor's response to pre-surgical chemotherapy significantly earlier than possible through clinical examination, according to a new study published online in the journal Radiology. Women with breast cancer often undergo chemotherapy prior to surgery. Research has shown that women who receive this treatment, known as neoadjuvant chemotherapy, are more likely to achieve breast conservation than those receiving chemotherapy after surgery. [Click here to read full press release](#) 
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- *(reminder)* [Living Beyond Breast Cancer Conducting Survey of Women Diagnosed Under Age 45](#) LBBC is conducting a survey for women who were diagnosed with breast cancer under age 45. The 30-minute survey, **open only until tomorrow, May 31**, will assess what this population wants and needs as young women affected by breast cancer. Their answers will serve not only to enhance LBBC's existing programs but will also be shared with anyone who provides services to premenopausal women with breast cancer. Everyone who qualifies and completes the survey will receive a special coupon for \$25 off a \$75 purchase at Fashion Bug and be entered into a drawing to win a \$250 gift card. This survey is a part of LBBC's Young Women's Initiative, a

program funded by the U.S. Centers for Disease Control and Prevention to address the unique and specific needs of women diagnosed with breast cancer under age 45. Please share this information with your friends, family and healthcare providers via email and your social networks.

Cervical Cancer

- (reminder) [Request for 2012 - 2013 Mini-Award Proposals](#) (5/21/12, CCFKY.org) Contingent upon funding, the Cervical Cancer-Free Kentucky initiative will offer Mini-Awards in the amount of \$20,000 per award. Overall, we anticipate funding approximately eight (8) innovative projects to help impact cervical cancer disparities in Kentucky. Please [click here](#) to see examples of previously funded Mini-Award projects. [Click here](#) to read more and to download a PDF of the application. Deadline to apply is June 15th.

Childhood Cancer

- [Childhood Cancer DNA Research May Lead to New Treatments](#) (5/30/12, healthfinder.gov) The world's largest collection of genetic data on childhood cancers has been released by U.S. scientists in order to hasten the development of new treatments. The U.S. Pediatric Cancer Genome Project team mapped the complete genome (all the DNA) of 260 young cancer patients and their work appears in the journal *Nature Genetics*, *BBC News* reported. The data has already revealed a new treatment for a rare form of eye cancer called retinoblastoma and also provided new information about aggressive childhood cancers of the brainstem and blood. "We have identified unusual, 'cryptic' changes in many patients' cancer cells that we would not have found using other methods," said Dr. Richard Wilson, head of the Genome Institute at Washington University School of Medicine, *BBC News* reported. "We are pleased to be able to share this data with the research community in the hope that others can build upon our initial discoveries," Wilson added.
- (reminder) [Indian Summer Camp – “Oncology Camp” July 22-28th, 2012](#). Indian Summer Camp's Oncology Camp is the camp's longest running program, started in 1981. Oncology Camp is currently hosted at Crossings Cedarmore camp site in Bagdad, KY (Shelby County). The weeklong, overnight oncology camp is open to children aged 6-18 who are either currently undergoing treatment for cancer or are survivors of a childhood cancer. During this week, children with cancer are able to enjoy a wide range of activities including arts & crafts, sports, and swimming, as well as many unique and once-in-a-lifetime experiences. This year's camp theme is “Out of This World”. Pediatric oncology doctors and nurses are present at camp the entire week to care for the medical needs of campers. Please contact Amy Steinkuhl at Amy@kcp.uky.edu for more information.

Colon Cancer

- Recent Journal Article Examines Impact of Patient Navigation on Colonoscopy Rates. “*The Economic Impact of a Patient Navigator Program to Increase Screening Colonoscopy*,” appears this month in the journal *CANCER*. ABSTRACT: Patient navigation can increase colorectal cancer screening rates. The net economic impact of a colonoscopy patient navigator program was evaluated in an

urban public hospital setting. RESULTS: Patient navigation was associated with a 61% increase in average monthly colonoscopy volume at program hospitals, from 114 procedures to 184 procedures, compared with a 12% increase at comparison hospitals. Adjusted for other factors, the navigator program increased colonoscopy volume by 44 to 67 additional procedures per month. Average program cost varied from \$50 to \$300 per patient referred to a navigator. Incremental cost-effectiveness varied from \$200 to \$700 per additional colonoscopy. At 2 hospitals, net revenue associated with increased colonoscopy volume exceeded the program cost per additional colonoscopy, yielding a net financial benefit; at the third hospital, the program yielded a net cost. CONCLUSIONS: Economic evaluation of this colonoscopy patient navigator program in an urban public hospital setting suggests that such programs can be a cost-effective use of limited resources and yield a net financial benefit for providers. [Citation: Elkin, E. B., Shapiro, E., Snow, J. G., Zauber, A. G. and Krauskopf, M. S. (2012), The economic impact of a patient navigator program to increase screening colonoscopy. *Cancer*. doi: 10.1002/cncr.27595]

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- **(reminder) Colon Cancer Alliance Sapphire Awards** The Colon Cancer Alliance (CCA) is pleased to announce the launch of the Colon Cancer Alliance Sapphire Awards. These newly created awards will recognize and celebrate innovators and leaders in the fight against colorectal cancer and will become an integral part of the CCA's annual *National Conference*. Nominations for this year's Colon Cancer Alliance Sapphire Awards are now open and being solicited from many individuals and groups. Simply provide a completed [Nomination Form](#), a short letter for each nomination describing why the candidate should be recognized, and a brief biography of the nominee. You may e-mail your nomination packet to Stephanie Guiffre at sguiffre@ccalliance.org. **Nominations must be received no later than this Friday, June 1.**

General

- **[Physical Activity Linked To Reduced Mortality in Breast and Colon Cancer Patients](#)**
Physical activity is associated with reduced breast and colon cancer mortality, but there is insufficient evidence on the association for other cancer types, according to a study published May 8th in the *Journal of the National Cancer Institute*. Improvements in cancer treatment and screening have allowed cancer survivors to live longer and as a result, cancer survivors frequently look at information about how lifestyle factors like exercise can affect their prognosis. Multiple observational studies and randomized control trials (RCTs) have looked at the effects that physical activity can have on cancer survivors. To examine the association between physical activity and cancer survival, researchers looked at the relationship between physical activity and mortality and/or cancer biomarkers among cancer survivors. The studies were published between January 1950 and August 2011. The researchers found that the RCTs with biomarker endpoints suggest that exercise may provide benefits to survivors' insulin levels, reduce inflammation, and, possibly, improve immunity. The strongest evidence is for breast cancer survivors: most studies showed a statistically significant reduced risk of breast cancer and all-cause mortality associated with exercise. The next strongest evidence was for colorectal cancer survivors.
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- **SAVE THE DATE!!! - July 10th and 11th, 2012.** The Kentucky Department for Public Health is sponsoring a Social Marketing in Public Health Training. The featured presenter will be Carol

Bryant, Ph.D., M.S., Florida Prevention Research Center at the University of South Florida.
Look for forthcoming information on location and agenda.

- (reminder) “[Bridging Local and State Cancer Control Efforts through Evidence](#)”, webinar to be offered on Tuesday, June 12, 2012, 2:00 p.m. – 3:00 p.m. EST. It can be challenging to implement national or state goals and objectives, such as State Cancer Plans, at the local level and incorporate the evidence into programs in the community. The [Comprehensive Cancer Control \(CCC\) National Partnership](#) helps to bridge this divide by supporting CCC coalitions in the development and implementation of comprehensive cancer control plans at the state, tribe, territory, U.S. Pacific Island Jurisdictions, and local levels. The National Cancer Institute’s June Research to Reality (R2R) cyber-seminar will feature examples of successful comprehensive cancer control coalitions using evidence-based public health practice to implement state cancer plans in local jurisdictions. The seminar will explore state and local health department perspectives as Bruce Behringer from the Tennessee Department of Health and Della Rhoades from Nodaway County Health Department in Missouri share their stories of success, lessons learned, and opportunities. Additionally, Brandie Adams from the National Association for County and City Health Officials (NACCHO) will share information on its new upcoming resource guides. Register today at <https://researchtoreality.cancer.gov/cyber-seminars>.
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- (reminder) [Coordinated School Health Symposium](#) Set for Monday, June 25th at the Marriott Griffin Gate in Lexington, this event is sponsored by the Kentucky School Boards Association (KSBA) and the KDE/KDPH Coordinated School Health (CSH) Team. The theme will be “Coordinated School Health: The Missing Link in Unbridled Learning.” Registration information can be found [here](#) and [online](#).

Grants

- Today HHS announced available funding of \$70 million to improve the health of small communities. The grants are part of the Community Transformation Grant (CTG) program, a prevention and wellness initiative launched in 2011 by HHS and administered by CDC. **NOTE:** In 2011, Louisville Metro Department of Public Health and Wellness was awarded a CTG grant of \$721,594, and was the only Kentucky entity to receive a CTG grant award. The CTG Small Communities program targets intervention populations of up to 500,000 in neighborhoods, school districts, villages, towns, cities and counties in order to increase opportunities for people to make healthful choices and improve health. In addition, HHS is continuing to support the initial group of 68 CTG awardees. The CTG Small Communities Program grantees will work toward one or more of these five priority areas: (1) tobacco-free living; (2) active living and healthy eating; (3) evidence-based quality clinical and other preventive services, specifically prevention and control of high blood pressure and high cholesterol; (4) social and emotional wellness, such as facilitating early identification of mental health needs and access to quality services, especially for people with chronic conditions; and (5) healthy and safe physical environments. CDC expects to make 25 to 50 competitive grant awards, with successful applicants announced in September 2012. The awards are one-time funding with a two year project period. The official funding opportunity announcement for the CTG program Small Communities component can be found at www.Grants.gov by searching for [NCCDPHP.CDC-RFA-DP12-1216PPHF12: “PPHF 2012: Community Transformation Grants - Small Communities Programs financed solely by 2012 Prevention and Public Health Funds](#). The letter of intent due 6/18/12

and application due 7/31/12. For an overview fact sheet about the Community Transformation Grant program, visit:

<http://www.healthcare.gov/news/factsheets/2011/09/community09272011a.html>.

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- Patient-Centered Outcomes Research Institute (PCORI) has released its first primary research funding announcements to support comparative clinical effectiveness research that will give patients and those who care for them the ability to make better-informed health care decisions. PCORI will award \$120 million this year for innovative projects that effectively incorporate patients and stakeholders in research teams and address the areas of focus of PCORI's National Priorities for Research and Research Agenda. The four [PCORI Funding Announcements \(PFAs\)](#) involve up to \$96 million in funding and correspond to the first four areas of focus in PCORI's National Priorities for Research and Research Agenda: 1) **Assessment of Prevention, Diagnosis, and Treatment Options**- for projects that address critical decisions that patients, their caregivers and clinicians face with too little information 2) **Improving Healthcare Systems** - for projects that address critical decisions that face health care systems, the patients and caregivers who rely on them, and the clinicians who work within them 3) **Communication and Dissemination** - for projects that address critical elements in the communication and dissemination process among patients, their caregivers and clinicians 4) **Addressing Disparities** - for projects that will inform the choice of strategies to eliminate disparities. All application materials can be downloaded from the Funding Opportunities section of PCORI's website. A fifth PFA on Accelerating Patient-Centered and Methodological Research, involving up to \$24 million in funding, will be issued during the summer. For more information, please see our [press release](#) or visit pcori.org.

Lymphoma

- **Stanford study identifies early-life risk factors for non-Hodgkin lymphoma** (5/23/12, NCI Cancer Center News) Factors influencing early life non-Hodgkin lymphoma (NHL) incidence include family characteristics, high fetal growth, older maternal age, low birth order, and male gender, according to a study published May 22 in the Journal of the National Cancer Institute. In order to determine the cause of NHL incidence in children, adolescents, and young adults, researchers from the Department of Medicine at Stanford University conducted a national cohort study of more than 3.5 million people born in Sweden between 1973-2008 who were followed for NHL incidence through 2009. [Click here to read full press release](#) .
- *(reminder)* Professional Education Opportunity: “Non-Hodgkins Lymphoma – The Changing Landscape”. The Leukemia and Lymphoma Society, in partnership with local sponsor Frankfort Regional Medical Center, is hosting a professional development opportunity on Thursday, June 7, 2012, from 6-8PM at Serafini’s Restaurant; 243 W. Broadway; Frankfort, KY 40601. Speaker: John Hayslip, MD University of Kentucky College of Medicine, Division of Hematology, Oncology and Blood & Marrow Transplantation. Objectives: At the conclusion of this program participants should be able to: What NHL is and how it develops; How NHL is diagnosed and how it is staged; NHL treatment options; and how the symptoms and side effects are treated. CEs will be provided for nurses and social workers. Complimentary dinner will be served. Please

contact Debby Phillips, Patient Services Manager, to register for the program at 1-800-955-2566 ext. 542 or Deborah.Phillips@LLS.org Pre-Registration for this free program is required. Please RSVP by this upcoming Monday, June 4th.

Prevention/Genetics/Causes

- **Save The Date! 2012 Kentucky Conference on HIV/AIDS and Viral Hepatitis** -- "*Kentucky: Turning the Tide*", August 14 - 15, 2012, Clarion Hotel - Lexington, Kentucky. The Kentucky Cabinet for Health and Family Services, Department for Public Health, is proud to announce The 2012 Kentucky Conference on HIV/AIDS and Viral Hepatitis. The conference will be held on Tuesday, August 14th and Wednesday, August 15th 2012. The conference will be held at the Clarion Hotel is located at 1950 Newtown Pike Lexington, KY 40511.  [click here to download a "Save The Date" flyer.](#) Questions? Contact conference Co-Chairs michael.hambrick@ky.gov or beverly.mitchell@ky.gov or call them at 1-800-420-7431.
- [HRT Update: Therapy May Reduce Fractures, Boost Some Risks](#) (5/28/12, HealthDay News) -- Updated evidence on hormone replacement therapy for menopausal women presents good news for those at risk of osteoporosis, but a mixed bag of results regarding breast cancer and other chronic diseases. While estrogen-only and estrogen-plus-progestin formulations reduce the risk of fractures, both increase the odds for stroke and other conditions including gallbladder disease, according to a new update of available evidence compiled for the U.S. Preventive Services Task Force, an independent expert panel that is revising its guidelines. Estrogen-plus-progestin therapy raises the risk of breast cancer and probable dementia, while estrogen alone reduces the risk of breast cancer, the researchers found. "We looked at all the published studies on hormone therapy for the prevention of chronic disease," said Dr. Heidi Nelson, who led the update. "What is new here is, we've taken all the results from the last 10 years and tried to distill them into the latest, most current results and how they might apply to individuals." The findings are published online May 29 in the *Annals of Internal Medicine*. Now, with about 11 years of follow-up to the Women's Health Initiative, researchers have a fuller picture, which the task force will use to update its existing guidelines. The recommendations concern only chronic disease, not the use of hormone therapy for reducing symptoms of menopause, such as hot flashes.
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- **PSA test part of trend: Fewer screenings for well people** (5/27/12, USA Today) Many men were surprised this week when a government advisory panel recommended that doctors stop using the PSA test to screen healthy men for prostate cancer. Yet health experts say the recommendations by the U.S. Preventive Services Task Force are a part of a broader trend that's been building for years. People are taking a closer look not just at cancer screenings, but at all medical tests and procedures, says Steven Woloshin, co-director of the Center for Medicine and the Media at the Dartmouth Institute for Health Policy and Clinical Practice. Concern about "overtesting" and "overtreating" patients is growing because of a rising recognition that these interventions often have risks and serious side effects. Doctors are taking a "less is more" approach on several fronts. Last month, for example, nine physicians' groups launched the "Choosing Wisely" campaign to discourage 45 frequently overused tests and procedures. The groups, which included the American College of Cardiology, noted many common interventions are unnecessary, including stress tests during routine annual exams.

And in the past four years, medical groups have voted to restrict several types of cancer screenings. That's partly because science has evolved to help doctors better understand how cancers progress and how best to use screening technology, and also because doctors better understand the risks and limitations of treatment, says Lisa Schwartz, also co-director at the Dartmouth Center.

- In 2008, for example, before the task force voted against the PSA entirely, it recommended offering it only to men under age 75, reasoning that older men would not likely be helped by a test that largely detects slow-growing cancers.
- In 2009, the task force recommended against routine mammograms for women under 50, and suggested women over 50 get screened every other year, instead of annually. That recommendation drew fierce protests from women, radiologists and many politicians.
- In March, in a less controversial move, the [American Cancer Society](#) revised its cervical cancer recommendations, suggesting that women get screened every three years, instead of every year, between the ages of 21 and 29. Older women can wait five years between tests, and stop screening at age 65, a change that reflects the slow-growing nature of these tumors.
- Last week, medical groups endorsed using CT scans to screen for lung cancer, but only in a very specific group: smokers and ex-smokers ages 55 to 74 who smoked the equivalent of a pack a day for 30 years, and who still smoke or quit within the past 15 years.

Younger people, or those who smoked less, are not advised to get screened for lung cancer, because the odds of being harmed by the test — which can lead to invasive lung biopsies — is so high, and the chance of being helped is much lower, says Peter Bach, director of Memorial Sloan-Kettering's Center for Health Policy and Outcomes, who wrote an analysis of available evidence published May 20 in the *Journal of the American Medical Association*.

- [Which American cities are fittest?](#) (5/23/12, Los Angeles Times) Minneapolis-St. Paul is the nation's fittest metropolitan area, with Washington, Boston, San Francisco and Hartford right behind it, according to a comprehensive "Fitness Index" drawn up annually by the American College of Sports Medicine. **At the bottom of the list** were Oklahoma City; Detroit; **Louisville, Ky.** (ranked 48th out of 50); Dallas; and Birmingham, Ala. Public health officials are trying to light a fire under Americans about the perils of obesity and sedentary behavior, and increasingly, they are focusing on the environmental factors that surround Americans' food and exercise choices. Their playbook -- build and maintain parks, encourage walking and jogging and bicycling to work, make physical education and free play a part of every kid's school day -- pretty well defines what makes a fit metropolitan area. Community social networks matter too: A city where few smoke, and lots exercise and eat their vegetables, gets a bump in fitness points in the ACSM index, which is conducted with support from the WellPoint Foundation. The American Fitness Index might well become the score card for cities looking to attract health-conscious companies and people to settle in for a spell. It draws on parks and recreation data from the Trust for Public Land, on nutrition and health behavior collected by the Centers for Disease Control and Prevention, and on federally tallied school report cards to learn about school policies that promote fitness. [Read more on Louisville's score on pages 58-59 of the report.](#)

Program Planning

- (reminder) **2012 Training series: Health for a Change: Ignite - Unite - Act!** The Foundation for a Health Kentucky values the work of people like you who strive to make Kentucky communities healthier places to live, work, study and play. FHK is set to launch a training series designed to offer the topics most valuable to advocates, non-profit staff and public health professionals, and has procured excellent speakers to present best practices and proven models of these skills in a combination of electronic webinar format and in-person workshops. The series starts in May with two webinars demonstrating how you and community partners can find and use data sources to identify and quantify the health needs of your community:
 - June 20th workshop will provide training on coalition building and maintenance. Later this summer, webinars will help you identify the differences between advocacy and lobbying, find policies and programs that are evidence-based, plan a budget and successfully apply for grant funding

Resources

- **Obesity Links, Tools, and Resources Added to Cancer Control P.L.A.N.E.T.** Coordinated efforts are needed to address the problems of obesity and other chronic diseases. New links to obesity resources are now available on **Cancer Control P.L.A.N.E.T.**, a Web portal that provides access to data and resources that can help planners, program staff, and researchers to design, implement, and evaluate evidence-based programs. The resources on **P.L.A.N.E.T.** make it easy to find the right tools and resources to help translate research into action. Obesity resources include:
 - **Data:** State Cancer Profiles (<http://statecancerprofiles.cancer.gov/>)
Statistics for prioritizing cancer control efforts
 - **Collaboration:** Research to Reality (<https://researchtoreality.cancer.gov/>)
Interactive community of practice for discussion, learning, and enhanced collaboration around evidence-based practice
 - **Research Synthesis:**
Recommendations for population-based intervention approaches, screening, counseling, preventive medications, and additional guidelines
 - **Programs:** Research-tested Intervention Programs (<http://rtips.cancer.gov/rtips/>)
Summary statements, ratings, and program materials from cancer prevention and control studies
 - **Evaluation:** Reach Effectiveness Adoption Implementation Maintenance (RE-AIM) (<http://cancercontrol.cancer.gov/is/ream/>)
Explanation of and resources for those wanting to apply the RE-AIM framework
 - **Plan:**
Links to Comprehensive Cancer Control Plans, guidelines for developing plans, policy and legislative resources, and school policy resources
- **Joint American Cancer Society/St. Elizabeth Resource Center opening in Edgewood** (5/30/12, Cincinnati.com) Today, the American Cancer Society and St. Elizabeth open their joint resource center, which will provide cancer information, services and programs for Northern Kentucky cancer patients and their families. The Center is located at the St. Elizabeth Cancer Care Center at 1 Medical Village Drive in Edgewood. “The Cancer Resource Center will be a vital link in the entire cancer experience, not only for those diagnosed, but also for their families and caregivers,” says Lisa Meier, health initiatives representative for the American Cancer Society in

Northern Kentucky. "Cancer Resource Centers are typically located within cancer treatment facilities, with the goal of furnishing their patrons with the most up-to-date information possible about their individual cancer and resources available to them." The center is staffed by volunteers, who have been both recruited and trained by the American Cancer Society and St. Elizabeth Healthcare. Initial hours of operation are Wednesdays 9 a.m. – 1 p.m., Thursdays 12 – 4 p.m., and Fridays 9 a.m. – 1 p.m. Wigs, hats and scarves are also available free of charge at the local American Cancer Society office for those undergoing cancer treatments and facing partial or total loss of hair. To volunteer, contact the Cancer Resource Center at 859-301-5476 or visit www.stelizabeth.com/cancerresourcecenter.

Skin Cancer

- **[Many Still Tanning, Despite Dangers, Survey Finds](#)** (5/27/12, HealthDay News) Despite public education efforts, many young adults still don't understand the dangers of sun exposure and tanning, a new U.S. survey finds. The nationwide online survey conducted by the American Academy of Dermatology found that 58 percent of respondents aged 18 to 29 believe people look more attractive with a tan, and 71 percent agreed with the statement: "Sun exposure is good for your health." In the past year, about 40 percent of respondents in that age group tried to get a tan by using a tanning bed, spending time in the sun, using a self-tanner, or getting a spray tan. The survey also found that one-quarter of respondents aged 18 to 29 were unsure if sun exposure can cause wrinkles. In order to encourage young women to embrace their natural skin color, the academy produced a television public service announcement that asks women to stop tanning. The academy has also launched a new **[SPOT Skin Cancer public awareness initiative](#)** that focuses on how people can protect themselves from skin cancer.

Smoke-free

- **[States Use Only Fraction of Tobacco Revenues to Fight Smoking, Study Finds](#)** (5/24/12, HealthDay News) -- Only a small percentage of the billions of dollars states take in from tobacco revenues goes to anti-smoking efforts, a new federal report finds. Under the 1998 Tobacco Master Settlement Agreement, tobacco companies agreed to reimburse states for Medicaid costs related to tobacco use. According to background information in the new study, the intent of the agreement was to use the money to also help prevent youth smoking, although there was no stipulation that this must happen. However, the new study finds that between 1998 and 2010, states collected a combined total of almost \$244 billion in tobacco industry settlement payments and cigarette excise taxes, but have invested only about \$8 billion in effective state anti-smoking, tobacco control programs. The remainder of the money has been used to pay general expenses or to fund programs other than tobacco control, according to research led by John Francis of the National Center for Chronic Disease Prevention and Health Promotion, part of the Centers for Disease Control and Prevention. If states had followed the CDC's published guidelines on using the funds, they would have invested more than \$29 billion in tobacco control programs during that time, the researchers said. The researchers noted that although total state and federal investment in state tobacco control efforts did rise between 1998 and 2002, state investments in tobacco control have actually fallen steadily every year since. The study appears in the May 25 issue of the CDC journal *Morbidity and Mortality Weekly Report*.

- *(reminder)* [Smoke-free Kentucky Coalition Meeting](#) The Smoke-free Kentucky Coalition will be hosting a meeting to exchange ideas on how to strengthen the Coalition, and needs input in taking their campaign to the next level. The Coalition is inviting their 230 Smoke-free Kentucky organizational and business partners as well as hospital administrators. They will be offering the same session at two different times to accommodate Coalition members' schedules. You only need to attend one session: Tuesday, June 12th from 11:30am -1:30pm, Lunch Included OR Thursday, June 14th from 5:00 p.m.-6:30 p.m., Dinner Included. Location: Central Baptist Hospital-Education Center-Lower Level Building E-Auditorium, 1740 Nicholasville Road, Lexington, KY 40503. RSVP your attendance to Betsy Janes with the American Lung Association at betsyj@kylung.org.

Smoking Cessation

- *(reminder)* [Two Cooper/Clayton Method to Stop Smoking classes](#) will be offered by the Lexington-Fayette County Health Department this summer. One class series will **begin THIS Tuesday**, June 5th and will be held at the Northside Public Library. The second series will begin on Wednesday, June 20th and will be held at the Public Health Clinic South. Each class series consists of 12-weeks of education on coping skills and how to effectively use nicotine-replacement therapy products. The classes are also provided in a supportive group format. For more information, click on the link above or call Angela Brumley-Shelton with the Lexington-Fayette Health Dept. at 859-288-2395.

Survivorship Events

- **Team Up! For the 2012 Komen Louisville Race for the Cure® Kick-off Breakfast** Tuesday • June 5 • 7-9 am, Oxmoor Center 7900 Shelbyville Rd. Come and enjoy breakfast and find out what's in store for Race 2012! Learn how easy it is to form a team with your family, friends and co-workers. Learn the difference between registering as a team or as an individual. Learn how to navigate the online Registration and Participation Center. Hear fundraising tips from *Team Julianna*, our 2011 Top Fundraising Team. Meet our new Executive Director, the Louisville Race Committee members and Staff. Enter through mall entrance located near Dick's Sporting Goods. RSVP Today! info@komenlouisville.org or 502.495.7824.
- *(reminder)* [American Cancer Society's Relays for Life](#) are being held across Kentucky throughout the Spring and Summer months. Relay is an overnight relay-style event where teams of people (survivors, caregivers, community members) camp out around a track. Members of each team take turns walking around the track for the duration of the event. Food, games and activities provide entertainment and fundraising opportunities, with a family-friendly environment for all. Because it's a Relay, attendees are not required to be there the entire time...but it's so fun, you might find it hard to leave!
- *(reminder)* [Gilda's Club Louisville's](#) Summer Science Camp is part "Mythbusters" and part "Weird Science." The camp will run **NEXT WEEK** from 10am to 3pm, Monday, June 4 to Thursday, June 7 at the clubhouse at 633 Baxter Ave. (On Friday, June 8, campers will meet at the clubhouse and travel to the laboratory at the Speed School of engineering. Friday's program concludes at 1pm) Dr. Gary Rivoli of the Speed School will explore robots, bridges, drawing and drafting – and much more -- with campers – using teamwork, problem-solving, and critical

thinking skills . For youth ages 8-12 (Space is limited and priority will be given to Gilda’s Club and Grief Connection youth; others will be placed on a wait list and notified as openings occur.) If you know someone who may be interested, have them call the clubhouse at 583-0075 to RSVP their attendance.

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- *(reminder)* Camp Gilda, a summer day camp for youth ages 6-11 who are connected to active cancer, will feature fun, field trips, an “Amazing Race” challenge and the Gilda Carnival service project during the week of June 25 to 29. Camp runs daily from 8:30am to 5:30pm at the [Gilda’s Club Louisville](#), 633 Baxter Ave. Priority will be given to campers who have not before attended Gilda’s summer camp; others will be placed on a wait list and notified as openings occur. If you know someone who may be interested, have them call the clubhouse at 583-0075 to RSVP their attendance.

Worksite Wellness

- *(reminder)* **Webinar: Making the Case for Worksite Health, Leadership & Culture**, Monday, June 18th, 1:00 - 2:30 p.m. EDT. The CDC [National Healthy Worksite Program](#) (NHWP) is providing employers and interested organizations nationwide access to worksite health training and resources beginning this summer. Webinars focus on practical, skill-building training for employers to implement comprehensive worksite health programs. This first in the series of five trainings provided by the CDC will discuss the key components of a worksite health program; the relationship between individual employee health and organizational performance; and how to create leadership support and build a strong infrastructure and culture for worksite health. Attendees will also have the opportunity to hear the latest information about the recently implemented National Healthy Worksite Program. Space is limited. [Reserve your webinar seat.](#)