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Fight against ovarian cancer bonds friends for life

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Patient and family supportive needs are focus for new multidisciplinary team

LIVER TUMOR CLINIC
Extensive expertise in a single location brings new hope to patients
Dear Friends,

A diagnosis of cancer makes most people think of what they can’t do. But to us, the most important part of the word cancer is “can.”

In this latest issue of Hope, you’ll have a chance to read just what this means for cancer survivors and their families, our medical team and our many friends, supporters and volunteers.

After surviving ovarian cancer, Aileen Lema created a wig bank to fit cancer patients with clean, re-styled wigs to make them feel whole again. The same disease has driven Gail and Dick Purtan to personally donate and raise funds for desperately needed research. It was kidney cancer that fueled Jim and Jean Marie Weeks’ passion for helping others. Their stories demonstrate how an unimaginable cancer diagnosis can motivate any of us to achieve the unexpected.

These are just a few of the many remarkable stories at the Karmanos Cancer Institute that are possible because of your commitment and support. I hope you enjoy this issue.

Sincerely,

John C. Ruckdeschel, M.D.

PRESIDENT AND CHIEF EXECUTIVE OFFICER
BARBARA ANN KARMANOS CANCER INSTITUTE

It was a diagnosis of ovarian cancer that brought Gail Pur坦 and Linda Wittstock-Massaro together for life. The women talk at least weekly, supporting one another as they ride a roller coaster of emotions.

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Thank you to our outgoing members: John D. Crissman, M.D.; John T. Caldwell, Jr.; Deborah I. Dingell; Elaine Hartman and Todd P. Smith
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Friends

Gail Purtan & Linda Wittstock-Massaro acknowledge all they’ve been through together.

“We tell each other, ‘Don’t you dare die.’”

– GAIL PURTAN
Gail Purtan sits beside Linda Wittstock-Massaro, the person who’s become one of her closest friends.

The two share a friendship as well as both being ovarian cancer patients at the Karmanos Cancer Institute. Linda is at Karmanos largely because of the connection, a mutual friend having introduced her to Gail in the early days of her diagnosis.

Linda is talking about her experience with the disease, wiping an occasional tear from her face – smiling as Gail’s husband, Detroit radio legend Dick Purtan, joins the conversation.

Linda’s next words cause her to choke up with emotion. "If I hadn’t met Gail and Dick, I’d be dead."

Since connecting with the Purtans, Linda and her husband Brian Massaro, M.D., a specialist in internal medicine at Henry Ford Medical Center, have seen over and over the benefits of that support.

Indeed, the bond Linda and her husband have established with the Purtans is not unlike that experienced by soldiers fighting together in a war. And it has been a war.

A former nurse who now sells real estate, Linda was diagnosed in August 1998. Each year, around 25,000 women will receive the same news Linda heard, and about 15,000 women will die annually, a much higher ratio than any other gynecologic cancer.

The Purtans are trying to improve the odds, notably by the fundraising and advocacy efforts of the Gail Purtan Ovarian Cancer Research Fund at the Karmanos Cancer Institute. Gail recalls Dick announcing it on his weekday morning show (on Oldies 104.3 WOMC). She was in bed, recovering from chemotherapy and the effects of major surgery to remove cancerous tumors.

"It was the first time Dick had talked about it on the air," she says. "Someone had asked him about being off the air for a few days. And he told people that I had been diagnosed with ovarian cancer and that he was starting a fund."

Gail says she was overcome with emotion.

"I cried my eyes out. First of all, you never think you’re going to hear cancer and your name in the same sentence."

But it was the beginning of an ongoing fundraising effort that has dramatically improved the ability of Karmanos physicians and researchers to fight a disease that is called the silent killer. Ovarian cancer is aggressive, usually progressing quickly without obvious symptoms.

Linda, who says the disease returned “with a vengeance” just 18 months after her initial diagnosis and surgery, came to Karmanos after being urged to do so by Gail.

“The doctors here know what’s available and have access to drugs and clinical trials that aren’t available elsewhere.”

Since then, Linda and Gail talk at least weekly, supporting one another in the days before their regular tests and helping to connect others who themselves are going through the battle.

“A lot of it is just listening,” says Linda. “I’ll get calls from different women and Gail will say ‘let’s just take her out to lunch.’ It’s an ever-widening circle of support.”

Linda’s husband Brian is clearly part of that circle of strength.

“He’s been very supportive,” says Linda. “All the way through...”
this, he’s been someone who offers words of encourage-
ment and wisdom.”

Even as both couples ride a roller coaster of emotions
(waiting for blood, PET and CAT scan test results), it’s
been a collective mission to promote early diagnosis of the
disease.

The test, known as CA 125 (“Cancer Antigen”), measures
the level of protein known to be in ovarian cancer cells.
It can be used not only as an initial diagnostic tool, but
is always used as a follow-up method for measuring any
change in a patient’s condition.

The problem, and the reason many doctors are said to be
reluctant to call for the initial test, is the relatively high
percentage of so-called “false positives.”

Dick Purtan acknowledges this, but adds “it’s the only
early warning blood test we’ve got.”

Both Gail and Linda say the test should be standard, not
optional, even if an insurance company won’t pay for it.
They point out the men’s PSA blood test for prostate cancer
is covered even though the “false positive” rate is the same.

Gail recalls the story of a local doctor who, after hearing
her advocacy story, gave the CA 125 blood test free of
charge to a group of 140 women at a health fair. The test
detected four cases of ovarian cancer, in women who had
no symptoms.

The Purtans say their experience at Karmanos has included
the emotional as well as medical support needed to carry on.

For Gail, any regrets she has are for her husband and her
six daughters.

“Aside from what I might have passed on to my girls, I feel
they’ve been cheated out of a lot of fun in their lives. They
do wonderful things, but I’m a constant worry to everyone.”

And Linda, who is a member of the Karmanos “Blooms
for Tomorrow” support group for gynecological patients
and their families, says it’s an experience not without its
own share of sorrows.

Again, the tears.

This time, it’s Gail who smiles at her friend Linda,
acknowledging all they’ve been through together. “We
tell each other, ‘don’t you dare die.’”

Fighters both, they’re planning to survive.
Good ideas don’t generate research money. That’s what Michael Tainsky, Ph.D., learned when he and his team set out to develop new blood tests to identify women likely to have early forms of ovarian or breast cancer.

“It’s difficult to get grant funds for this kind of work,” says Dr. Tainsky, director of the Molecular Biology Genetics Program at the Karmanos Cancer Institute.

Then the Purtans arrived on the scene.

Oldies 104.3 WOMC radio personality Dick Purtan, who started the Gail Purtan Ovarian Cancer Research Fund after his wife was diagnosed with the disease, has seen the initiative bring in close to one million dollars since its beginnings in 1998. When the fund was launched, conversations with various researchers included Dr. Tainsky’s efforts to find early ways to detect ovarian cancer.

“Those funds were the seed money that allowed us to buy equipment we needed to do the early experiments, which were critical to proving the approach had promise,” says Dr. Tainsky.

It also opened the door for approximately $7 million in grants, money that has since advanced the quest to find genetic markers for ovarian cancer. That effort has now broadened after research published by the group at Karmanos prompted teams in other cancer centers to take up the cause.

Karmanos clinicians and scientists are now setting their sights on improved ways of treating ovarian cancer. Patients with ovarian cancer often go through several rounds of chemotherapy as they fight the cancer, but with each successive round of therapy, the number of treatment options decreases.

However, with advances in understanding the molecular causes of ovarian cancer, Karmanos has the ability to use the molecular profile of a patient’s cancer to rationally choose the next course of standard therapy and to begin to incorporate targeted therapy into the regimen. All of the newest cancer drugs being developed are targeted agents; that is, the drugs attack specific molecules that drive the cancer in individual patients. In this way, Karmanos is working on new ways to “personalize” the patient’s treatment both in the early and the later phases of their disease.

To accomplish this, a team of Karmanos doctors led by Dr. Tainsky, Robert Morris, M.D., Associate Professor, Gynecologic-Oncology; Veronica Schimp, D.O., Associate Professor, Gynecologic-Oncology, and others are spearheading the effort to do “molecularly based chemotherapy and targeted therapies”. Dr. Morris noted that, “in ovarian cancer as in other cancers, we are moving toward individualized targeted therapies for patients based on the molecular profile of their tumor. We are leading this effort in the Ovarian Cancer Program.”

The money raised by the Purtan fund has been instrumental in moving the research forward. It takes Karmanos away from a ‘one-size-fits-all’ therapy and into the new age of personalized therapy based on molecular diagnostics. The Purtans agree that the funding they have personally provided and have worked so hard to raise should be used for this very exciting research.

Dick and Gail Purtan
Doctors at the Karmanos Cancer Center will often make the point: Having the right set of tools is critical to a successful outcome. A good example is a decidedly high-tech instrument that reaches deep inside the brain of a cancer patient to attack a tumor without damaging surrounding tissue.

Using the Gamma Knife now for more than a dozen years at Karmanos’ radiation oncology center, it continues to give cancer experts options that might not otherwise be available.

To call it a “knife” at all may be something of a misnomer; the revolutionary technology uses precisely targeted beams of radiation — instead of scalpel incisions — for brain surgery. It’s a powerful tool for attacking a brain tumor, but the decision to use it depends on a number of factors.

“It’s not for everyone,” notes Sandeep Mittal, M.D., a neurosurgeon and co-leader of the Multidisciplinary Neurooncology Team that includes surgical and medical neurooncologists, radiation oncologists, neuroradiologists, neuropathologists, radiation physicists, neurooncology and radiation oncology nurses, and neurosurgery physician assistants. “But the beauty of the Gamma Knife is its precision. Once we identify the area of the brain that’s to be targeted, we know that the Gamma Knife will treat that area and only that area. The surrounding tissue is left intact.”

The decision to use a Gamma Knife is dependent on not only where the tumor is but the specific characteristics of the tumor, including how sensitive it will be to radiation treatment, as determined by the radiation oncologist. While the Gamma Knife is sometimes used as a follow up to conventional surgery, in other cases the location of the tumor itself may rule out standard surgical treatment altogether.

Still, Dr. Mittal explains, the Gamma Knife is not without its own set of limitations, including the size and number of tumors it can treat. But for areas of the brain where standard surgical treatment is not advisable or even possible, the Gamma Knife can be a life saver.

While the Gamma Knife treatment itself is non-invasive — meaning no surgical incisions are necessary — the overall procedure is considered minimally invasive since the patient must first be fitted to a stereotactic frame to eliminate head movement. Once the patient is in position, MRI or CT scans identify the exact location of the tumor in three dimensions, enabling neurosurgeons and radiation oncologists to align radiation beams on the target with incredible precision.

The actual treatment time can last from 30 minutes to two hours, depending on the tumor. During treatment, patients are free to listen to music and relax, with the doctor in contact via intercom and closed circuit television throughout the procedure.

Happily, a great many patients at Karmanos have enjoyed success from the Gamma Knife treatment. Now in remission, Barbara Schell, of Fremont, Ohio, came to Karmanos after hearing about a clinical trial of a treatment not available elsewhere. Schell’s cancer, which originally appeared in her lungs, had spread to her liver. But before the treatment could begin, doctors at Karmanos discovered two small lesions in her brain.

“One of the things that helps us use Gamma Knife is that it’s very precise,” says Schell, who had her Gamma Knife surgery in February.

Another Gamma Knife patient is Deanna Wright, a retired middle school teacher who lives in South Lyon, Mich. It was 1994 when Wright was first diagnosed with breast cancer; five years later the cancer reappeared and later spread to her lungs. Now at Karmanos, Wright is participating in a trial looking at ways to block proteins that attack the lymph nodes, but her first MRI (ordered by Karmanos doctors) revealed two small spots on her brain.

A second MRI done just before Gamma Knife surgery in early March revealed four additional spots, all of which were treated in the same procedure.

Dr. Mittal says the experiences of Schell and Wright are among many.

“It’s a sophisticated and well-tested treatment,” says Dr. Mittal. “There have been tens of thousands of patients treated worldwide.” The fact that about 25 percent of patients with cancer in other parts of their body will see the disease spread to the brain makes the Gamma Knife a particularly useful treatment.
Like many other treatments for cancer, results of Gamma Knife surgery will vary. “In the best case scenario, the tumor is going to shrink or disappear completely,” says Sandeep Mittal, M.D. “But one effect might be the tumor staying the same size but with the cells not growing.”

The results of any Gamma Knife procedure are likely to appear over time with patients asked to return for periodic follow-up imaging to determine the success of treatment and to evaluate any side effects.

Many brain abnormalities have proven to be helped by Gamma Knife surgery, says Dr. Mittal. Those include several types of non-cancerous tumors, including acoustic neuroma, meningioma, pituitary adenoma, glomus jugulare tumor, chordoma, craniopharyngioma, hypothalamic hamartoma and hemangioblastoma.

Among the cancerous type of tumors known to be successfully treated by the Gamma Knife are metastatic brain tumors, glioblastoma, astrocytoma and some skull base malignancies. Blood vessel abnormalities such as arteriovenous malformations and dural arteriovenous fistula as well as trigeminal neuralgia, a type of facial pain, have also been successfully treated by the Gamma Knife.
Supportive Oncology (SO) is the latest addition to the Center’s multidisciplinary team (MDT) lineup. Unlike the other MDTs, which are specific to a particular cancer type, the SO team brings together medical experts in the areas of symptom control, pain management, psychosocial support, rehabilitation medicine and hospice.

John Finn, M.D., clinical associate professor at Wayne State University School of Medicine, leads the SO team. In addition to his strong background in medical oncology, Dr. Finn completed a palliative medicine fellowship in Great Britain and was chief medical director of the Maggie Allesee Center for Quality of Life at Hospice of Michigan, one of the largest hospice programs in the state. Dr. Finn is also past president of the American Academy of Hospice and Palliative Medicine and certified by the American Board of Hospice and Palliative Medicine.

“There are already well established areas of excellence at Karmanos in supportive oncology,” Dr. Finn says. “My job is to strengthen this program by recruiting new talent and by providing the team with a new focus and direction to become a stronger MDT. This will give supportive care professionals the expertise to provide the highest quality care to patients.”
One of the most important aspects of cancer care is managing pain caused by the disease, its treatment or a concurrent disorder. To help enhance the customized pain-management plans for individual patients, the Supportive Oncology Multidisciplinary Team includes the Karmanos Cancer Center’s Cancer Pain Service.

“Pain management is vital to cancer treatment and a service that will help patients learn how to discuss pain with their physicians,” says Clinical Nurse Specialist Linda Vanni of the Cancer Pain Service.

Created about 25 years ago, pain management is a relatively new specialty. But it’s evolved significantly within that time and doesn’t rely solely on medication. Aromatherapy, music therapy and therapeutic touch are among the more recently developed treatments.

“Many patients think they’re going to suffer terribly when they begin cancer treatment, but it doesn’t have to be that way,” Vanni says. “In fact, cancer pain can be treated in 85 to 95 percent of patients. We use all kinds of wonderful therapies to help patients progress through their treatment comfortably.”

As a strong advocate for patient rights, Vanni emphasizes patient-doctor communication as a key to pain control.

“All too often patients are reluctant to talk about their pain with their physician, because they associate pain with disease progression or think pain is inevitable,” Vanni says. “But the pain may be due to something completely different that we can rectify. And because pain affects every aspect of treatment – how a patient eats, sleeps and takes their treatment – it’s important to talk about it as descriptively as possible with the treating physician so we can pinpoint the cause and determine the proper control option. Every patient has a right to pain management, and we have specialists who can help.”

For more information on the multidisciplinary approach at the Karmanos Cancer Center, visit www.karmanos.org.
When doctors at the Karmanos Cancer Center diagnosed Aileen Lema with ovarian cancer at age 49, she knew she would lose her hair as a side effect from chemotherapy. Though she was prepared, she was still upset after waking one morning and finding a patch of hair on her pillow.

“It happened three weeks to the day after my first treatment,” recalls Lema, who had a full recovery and is now cancer free. “I expected to lose my hair and didn’t panic, but it was still a traumatic experience. My husband, who was wonderfully supportive throughout the whole treatment process, got the clippers and cut my hair. It was better for me to have it all cut at once than to lose it slowly.”

To help patients like Lema and others who experience hair loss from chemotherapy, the Karmanos Department of Patient and Family Support Services maintains a Hair Loss Resource Guide. In addition to advice on how to prepare for hair loss, the guide lists more than 45 metro Detroit hair salons and boutiques that offer natural-looking wigs and other head coverings at low or no cost to cancer patients. As many cancer patients continue working, attending school and caring for their families while receiving outpatient treatment, wigs can help them maintain a sense of normalcy and a positive outlook through this emotionally and physically trying time.

“I think it’s important for cancer patients to do all they can to feel good about the way they look and think positively – it’s a big part of healing.”

– AILEEN LEMA
OVARIAN CANCER SURVIVOR

Patient and Family Support Services first developed the resource guide about 20 years ago when it began receiving large donations of wigs from the public.
“We once received a donation of close to 200 wigs,” says Sharon Cure, director of Patient and Family Support Services. “Aware of the need which exists with our patients, we keep a supply of hats and caps, but we don’t have the storage space or expertise to devote to wigs and wig fitting. So we compiled a list of various salons and shops in the metropolitan Detroit, tri-county area that will accept our donated wigs, restyle and refurbish them if necessary, and make them available to cancer patients. We also visit the salons before listing them in the guide to ensure that they provide excellent, caring service to patients.”

Joli Beauty Salon in St. Clair Shores, where Lema works as a hairdresser, is one of the resources listed in the guide.

“I helped fit cancer patients with wigs at the salon for about five years before my cancer diagnosis, so I was very familiar with the service,” Lema says. “Right after my husband cut my hair I put a hat on and went out to get a wig. I think it’s important for cancer patients to do all they can to feel good about the way they look and think positively – it’s a big part of healing.”

Cure estimates that about 300 patients a year use the resource guide and visit a salon for a wig.

“Most people identify who they are by what they’re used to seeing in the mirror, and hair loss can be very stressful for patients,” Cure says. “Wigs help give patients a huge lift and make them feel whole again. They almost always come back to us after visiting a salon to show off their wig and express how much they appreciated the shopping assistance. You can definitely see the twinkle back in their eyes.”

LIFE AFTER CANCER

Lema and her salon assistant continue to fit cancer patients with clean, re-styled wigs and provide helpful, caring advice.

“I make sure I book an hour at the salon for a patient consultation, which is free,” Lema says. “We have about 70 wigs for people of all ages and hair colors at no charge. Patients deserve to feel good and I want them to look nice, so we only accept donated wigs that are in good shape.

They’re light, natural-looking and easy to care for. But if we don’t have a wig they like I can also order one for them at cost, which can be as low as $29.

“When patients learn that I’m a cancer survivor, they ask me about what to expect during treatment, and I give them advice about how to talk with their doctor. I always tell people they can call me or come back to talk. Making that person feel good – whether it’s through a wig, helping with their makeup or answering their questions – is what really counts.”

Lema also participates in a support group at Karmanos for gynecological oncology patients called “Blooms for Tomorrow.”

“I look at my experience with cancer as God’s blessing,” Lema says. “I feel I must have been put here to beat cancer so I can help mentor other patients and their families. I’m proof that there is life after this disease. Through the salon and support group, I want to help people look good, feel good and think positively.”

Patient and Family Support Services provides dozens of support groups and programs to Karmanos patients, including financial subsidies, transportation, complementary therapies, patient seminars and more. To learn more, call 1-800-KARMANOS.
While the multidisciplinary team approach to treating cancer remains at the forefront of modern medical care, the new Liver Tumor Clinic at the Karmanos Cancer Center has taken the “many eyes” approach one step further—by reviewing all cases with team members together in one room.

The approach, say Bassel El-Rayes, M.D. and Madhu Prasad, M.D., who lead the clinic, is unique—and essential given the complexity of the cases seen.

“There are a large number of treatment options available,” says Dr. Prasad, a surgical oncologist at Karmanos. “That alone makes it far more complex than the average oncology clinic.”

Many of the patients seen at the Liver Tumor Clinic frequently require more than one of the available approaches, including surgical removal; use of radio-frequency ablation that destroys tumors with heat; cryosurgery to freeze a tumor; radiation therapy; chemotherapy; chemo-embolization, a treatment that clogs small blood vessels and blocks the flow of blood to a tumor to selectively deliver chemotherapy directly to a tumor; and portal vein occlusion, which can make surgical removal of certain tumors easier.

And, in most cases, time is of the essence.

Together in a single location, members of the Liver Tumor Clinic can speed up that process, the result being new hope for patients whose cancer had started elsewhere but spread to the liver.

“Only a small number of cancers start in the liver,” says Dr. El-Rayes, a medical oncologist. “The vast majority of tumors start out in one place and spread to the liver. With the Liver Tumor Clinic, we’re able to coordinate all the various options available to fight the disease, each of which offers an incremental improvement. Together, however, it’s making a big difference in the overall success, with more than half the patients living more than five years.”

Dr. Prasad echoes the feeling of hope members of the Liver Tumor Clinic are able to deliver to patients.

“The survival rate was less than five percent 15 years ago,” he says. “People didn’t recognize that surgery even had a role to play in these patients. Today, the typical five-year survival rate has increased dramatically.”

Still, it’s the “in-one-setting” approach to evaluating patient care and treatment options that is making one of the biggest differences, say both Drs. El-Rayes and Prasad.

Each clinician within the Liver Tumor Clinic has extensive experience treating these diseases. Other members of the Liver Tumor Clinic include:

- Philip Philip, M.D., medical oncology
- Christopher Steffes, M.D., surgical oncology
- Donald Weaver, M.D., surgical oncology
- Todd Getzen, M.D., interventional radiology
- Monte Harvill, M.D., interventional radiology
- Peter Littrup, M.D., interventional radiology

“Our goal is to keep individualizing the therapy based on each patient’s unique circumstances,” says Dr. El-Rayes. “It’s having the group of physicians involved that allows us to do that.”

The clinic is held Wednesdays from 1 to 4 p.m. in the Wertz Clinical Cancer Center. For more information or to make an appointment, call 1-800-KARMANOS.
Thanks to an increasing number of affiliate network hospitals and physicians, thousands more cancer patients across Michigan and Ohio have access to expert opinions, selected clinical trials and specialized care from the Karmanos Cancer Center.

The Marquette General Health System in Marquette, Michigan; and ProMedica Health System in Ohio are the latest to complete affiliation agreements with the Institute. ProMedica, a Toledo-based network, consists of 11 hospitals in 20 counties in northern Ohio. The Marquette General Health System offers specialized cancer treatment options and provides access to higher-level clinical trials to patients in Michigan’s Upper Peninsula.

Creating such partnerships is part of the Center’s regional strategy to collaborate on cancer care and research with community hospitals and health care systems.

“Our goal is to deliver high-quality service to community hospitals and physicians across the region and establish partnerships to provide top-notch patient care,” says Lynn Sinclair, director of affiliations for Karmanos Cancer Institute. “Our affiliates refer patients to us who can benefit from the latest therapies and specialty services we provide and participate in clinical trials. In turn, we want to help patients receive the best treatment closer to home. If we know a patient has traveled to us for treatment and would benefit by receiving care from an affiliate in their area, we can make that patient referral with confidence.”

For many patients outside southeast Michigan, traveling to an unfamiliar hospital for treatment can seem challenging. But the Institute’s Physician Concierge Service helps those patients feel at ease about coming to Karmanos for treatment.

“When an affiliate refers a patient to Karmanos, we take care of everything from the time they’re scheduled to the time they arrive,” Sinclair says. “We ensure their initial intake is assigned and the proper multidisciplinary team is in place, obtain their reports and oncology studies, track down authorizations and referrals, and ensure they receive the most thorough evaluation possible. We also help familiarize the patient with the Karmanos campus when they arrive and arrange guest housing. So patients know exactly what to expect. It’s a very patient-friendly process, and the referring physician only has to make one phone call.”

Affiliate institutions also benefit from the cancer center’s clinical research and education programs.

“Once we have an affiliate, we target their specific education and programming needs,” Sinclair says. “ProMedica has needs in terms of physician recruitment and we can help with that through our fellowship program. The Marquette General Health System wants to ensure that their patient care is backed up by an academic center like ours. Affiliations really establish a strong collaborative and collegial atmosphere, and it’s the right thing to do for our patients.”

For more information on the Karmanos Affiliate Network, visit www.karmanos.org or call 1-877-KARMANOS.
It would be difficult to underestimate the importance of the volunteer community at the Karmanos Cancer Institute, says Patricia Fadell, director of volunteer administration and guest services, speaking of a core of more than 1,200 who serve on a regular basis. Last year alone, they donated 53,000 hours of their time.

“This organization was built on volunteerism,” says Fadell, who launched the Clinical Volunteer Program when she joined Karmanos nearly 10 years ago. “Many come here having a significant emotional connection, either because they have family who has lost a loved one to cancer or perhaps because they are survivors of cancer themselves.”
And employees at Karmanos are often among those volunteering, notably at special events in support of the organization.

Among those who regularly volunteer is Jim Weeks, a retired commercial pilot and truck driver who is also a survivor of kidney cancer. Weeks volunteers two days a week at the day treatment center, offering refreshments or “whatever the patient needs.”

Weeks, who travels from his home in Warren, MI, began volunteering at Karmanos—not as the result of his own treatment, which began with a 1996 operation to remove kidney cancer—but after his next-door neighbor lost a battle with bone marrow cancer.

“He was at Karmanos,” says Weeks. “He was my fishing buddy and it was a very emotional time for me. One day, when I went to visit him, I came into a room and a patient who was in the room next door began talking with me. When I mentioned that I had gone through cancer, he said ‘sit down, I want to talk with you.’ That’s when I decided to be a volunteer. I knew I could make a difference.”

Today, his wife, Jean Marie, joins him on one of the two days a week he volunteers. When she discovered how she, too, could also make a difference, she signed up.

“Some days it’s hard to go,” Jean Marie says. “But you feel like you’re giving back to someone who might need an extra friend.”

Jim also serves as a member of Karmanos’ Patient and Family Advisory Council. But it’s the twice-weekly volunteering that gives him the most satisfaction.

“It’s knowing that you’re helping someone that’s going through a very, very difficult time,” says Weeks. “There are several things out there that are as deadly as cancer, but there’s something about cancer when the doctor lays that word on you, the first thing you think is that you’re going to die. The mental side of cancer is devastating. It’s tough.”

As a cancer survivor who returns for periodic tests, Weeks says he understands the anxiety that comes from being a patient, something that helps him relate to those he serves as a volunteer.

“I’ve got a test coming up,” he says. “It won’t bother me before that day, but then I’ll start to get a little nervous. When I’m volunteering, sometimes a nurse will ask me to go over and talk to someone, especially those who are in for the first time. Because I’m a survivor, I can ease their anxiety a little bit.”

Among the volunteers at Karmanos, perhaps half are students entering the medical field, says Pat Fadell. And there is always a need.

“Our number one concern is the patient,” says Fadell. “From volunteer Navigators who greet patients when they first enter the building, to volunteer patient advocates or the volunteering done by Jim and Jean Marie Weeks in the Day Treatment Infusion Center, there are many, many opportunities to serve.” She said this includes helping in the administrative and clinical areas as well as at community events.

Fadell says Karmanos asks prospective volunteers for a two-year commitment, with the minimum service consisting of one, four-hour block per week.

“Many do much more than that,” she says. “For some, it’s almost full-time service. They are the ‘Caring Hearts’ of the Institute, to whom we owe much gratitude and appreciation.”

And while the need is ever present, Fadell says there has never been a shortage of those willing to serve.

“I’ve never once had to recruit for volunteers.”
The Barbara Ann Karmanos Cancer Institute captivated nearly 1,000 guests at its recent 25th Annual Dinner, “An Evening of Allure,” at the Rock Financial Showplace. The event raised $930,400 toward helping Karmanos continue its ongoing commitment to the prevention, early detection, treatment and eradication of cancer.

“This year’s annual dinner exceeded our expectations, while entertaining guests and paying tribute to our many friends, whose tremendous philanthropic support helps advance cancer research, treatment and patient care,” said Karmanos President and Chief Executive Officer John C. Ruckdeschel, M.D. “With overwhelming community support, we will continue our fight against cancer as Michigan’s only independent cancer hospital.”

The evening included a special tribute to late Dearborn Mayor Michael A. Guido presented by Executive Chairman Bill Ford on behalf of the Ford Motor Company Fund and an edgy fashion show presented by Linda Dresner, noted Birmingham and New York City fashion maven and cancer survivor treated at Karmanos.

Lead sponsor was Ford Motor Company Fund, entertainment sponsor was Compuware Corporation and Master of Ceremonies was Dick Purtan, Oldies 104.3 WOMC Radio personality.
Mammogram screenings are vitally important in the early detection and prevention of breast cancer. Since a mammogram can sometimes show a lump before it can be felt, and because the disease is very treatable when caught early, these screenings are an integral part of a woman’s regular medical exam.

But for many low-income women without insurance or transportation, getting a mammogram is almost impossible. The Karmanos Cancer Center is reaching out to these under-served women by taking its services on the road – literally. The Mobile Detection Center – or “Mamm Van” – provides top-quality mammogram screenings for women over 40 at clinics across the tri-county area and at state correctional facilities. Businesses can also schedule a van visit by appointment so their female employees can conveniently access these services. Compuware, GM-UAW and Guardian Industries are among the companies using this service.

The 39-foot, 26,000-pound truck offers the same services women would receive at a doctor’s office. Through a partnership with the state’s Breast and Cervical Cancer Control Program (BCCCP), women also receive clinical breast exams and pap smears during Mamm Van visits. The BCCCP reimburses all screening fees.

After 13 years of service and more than 20,000 patients served, the Mamm Van is due for retirement. The Susan G. Komen Foundation recently made two generous grants to Karmanos that will enhance its mobile detection services. A $50,000 gift will provide electronic equipment linked to the Karmanos scheduling system to facilitate data entry and retrieval, and a $378,000 grant will pay for a new truck, currently being built by Armor Mobile Systems in Mason, Ohio.

Still, there is a great need for upgrades in the truck’s mammography equipment, explained Laura Zubeck, administrative manager of the Mobile Detection Center.

“The current equipment on the truck is analog and getting older,” Zubeck says. “We’re working with darkroom equipment and developing film on the spot. Right now we serve about 12 to 15 patients per day. But new digital equipment would allow us to process images more quickly and serve even more patients. We’re seeking funds and preparing grant requests for the equipment.”

It’s estimated that the costs for this state-of-the-art equipment will be about $375,000.

“There is a huge need for our services,” Zubeck says. “Many of the women we screen are low-income and do not have insurance or transportation. But they are able to get to their neighborhood clinic and take advantage of our visits. It’s all about destroying barriers and providing access. Digital mammography equipment will allow us to provide more services to the patients who need it most.”

For information on giving opportunities to help support the Mobile Detection Center and ensure that breast cancer screening remains accessible throughout the community, contact Deborah Fellberg, major gifts manager at Karmanos, at 313-576-8102 or fellberd@karmanos.org.

To schedule a Mamm Van visit at your workplace, contact Laura Zubeck at 313-578-4426 or zubeckl@karmanos.org.
One morning each summer, the asphalt of Woodward Avenue turns into a sea of pink. This year was no different as thousands joined together in a spirited fight to end breast cancer at the 2007 Susan G. Komen Detroit Race for the Cure®, presented locally by the Karmanos Cancer Institute. The Race, now in its 16th year, took place Saturday, June 16 outside Comerica Park in midtown Detroit.

In addition to the 5K race and one-mile walk, there were more than 20 bands and musical performers, a children’s area with games and upbeat educational information, plenty of sponsor giveaways and some cool, new surprises.

Governor Jennifer Granholm and First Gentleman Daniel Mulhern were this year’s honorary chairs, and Detroit Mayor Kwame Kilpatrick and First Lady Carlita Kilpatrick were honorary co-chairs.

More than 30,000 people attended this year’s festivities. “We fill up midtown Detroit with an incredible positive spirit,” says Maureen Keenan Meldrum, race chair and director of Breast Cancer Special Programs at the Karmanos Cancer Institute. “The Race for the Cure is a really empowering and inspiring celebration of breast cancer survivorship.”

Since its inception in 1992, the Komen Detroit Race for the Cure® has raised $11.1 million and made a tremendous impact on the local community through breast cancer research, screening, treatment, support and education programs. Last year’s Race raised a record $1.7 million. With donations still coming in, event organizers are hoping to shatter that record this year by reaching the $2 million mark.

“Metro Detroiteres are extremely generous and have shown vigorous support despite the current economic challenges,” Meldrum says. “We’re very proud of the breast cancer research grants we’ve made to the Karmanos Cancer Institute, which has a history of making an impact on breast cancer. People can be sure that by coming to support us and helping to raise funds, they are truly making a difference in our community.”
MAKING A DIFFERENCE

Getting involved is one of the ways young people can join Karmanos in the fight against cancer.

Three young men from Clarenceville Middle School in Livonia are proof that individuals can make a difference. Committed to saving lives, eighth grade students Matt Arnaut, Matt Kurdziel, and Andrew Pyon successfully led their school in a breast cancer awareness and fundraising activity last fall and raised $630 for the Karmanos Cancer Institute.

Photo: Clarenceville Middle School students pose with their teacher. From left are Matt Arnaut, teacher Cindi Gibson, Matt Kurdziel and Andrew Pyon.

FIFTH ANNUAL INTERNATIONAL DRAGON BOATS FOR THE CURE FESTIVAL

This summer’s fifth annual International Dragon Boats for the Cure festival, sponsored by French Dressing Jeanswear (FDJ), once again benefited the Barbara Ann Karmanos Cancer Institute. Cancer patients, survivors and other paddlers from Canada and the United States participated in the event raising funds to fight breast cancer.

Thanks to the success of the 2006 event, $10,000 was donated by FDJ in support of the Karmanos Cancer Center Mobile Detection Center, better known as the “Mamm Van.” It brings top-quality mammogram screenings to women over 40 and offers the same services women would receive at a doctor’s office. FDJ plans to generously support breast cancer research this year.

FRIENDS RAISING FUNDS

For more information on how you can get involved in an Institute or fundraising event, contact Lauren Miller at 313-576-8121 or millerl@karmanos.org.
When Andrew Goldman was a little boy, he always knew his mother wouldn’t be home on Thursdays. What he didn’t realize until he was older was that she was taking his grandmother, Sharron Adell, for breast cancer treatment at the Karmanos Cancer Institute.

Dr. Vainutis Vaitkevicius, a man affectionately known by patients and staff as “Dr. Vee,” was Adell’s physician.

After 22 years of treatment at Karmanos and a courageous battle against cancer, Andrew’s grandmother died in 2002. Although he had never met Dr. Vee, Andrew showed his appreciation in January by sending a thank you letter to him and making a generous donation of $5,000 from his bar mitzvah to the Institute.

“You kept my nana alive for 22 years,” Andrew wrote in his letter to Dr. Vee. “If it weren’t for you, I most likely would not have met her. Because you gave me the gift of knowing my grandmother, I would like you to have this gift for your research fund. I hope this money will allow you to help other families like you helped mine. Although I have never met you, you are one of my heroes.”

As an internationally acclaimed oncologist, teacher, researcher and past president of the Karmanos Cancer Institute, Dr. Vee remains beloved for his concern and compassion for his patients and unending devotion to his work. To honor him, the Institute’s planned giving society, formerly known as the Legacy Society, has been renamed the Dr. “Vee” Vaitkevicius Legacy of Hope Planned Giving Society.

“I was very touched and humbled by Andrew’s gift,” Dr. Vee says. “I told him the greatest joy a physician can have is helping a patient, and that I was thankful to be able to treat his grandmother. I also told Andrew that I know his grandmother and parents are very proud of you.”

Especially proud are mom Laurie Goldman-Fischgrund and Aunt Julie Verona, commenting that Andrew’s gift is a lasting tribute to their remarkable mother. “Every generation hopes that the lessons and values it passes down are instilled in the next,” said Mrs. Goldman-Fischgrund. “My mom would be so proud to know that what she believed in so deeply – helping others – is a guiding principle for her grandchildren.”

At age 13, Andrew does not yet have an estate plan. But his gift and others made to Dr. Vee’s Legacy of Hope will have a tremendous impact on patient care, cancer research and education programs.

“There’s something very special about a young person like Andrew making such a meaningful, thoughtful and personal gift,” says Nick Karmanos, vice president of the Karmanos Cancer Institute’s development office. “We hope it inspires others to consider naming Karmanos Cancer Institute in their estate plan. Making an estate gift is the ultimate gift a person can make to the Institute. It says they really believe in our mission and want to continue supporting it beyond their lifetime.”

Dr. Vee continues to inspire Andrew, who says he wants to grow up to be an oncologist.

“Because of Dr. Vee and knowing how he helped my nana, I’m thinking of becoming a cancer doctor,” Andrew says. “I just want to say thank you to Dr. Vee as much as I can and hope my donation will help find better ways of curing cancer.”

If you or someone you know would like to arrange a Planned Gift to the Karmanos Cancer Institute, please contact Lynn Fisher at 313-576-8119 or e-mail drveelegacy@karmanos.org.
Event Calendar

AUGUST 11, 2007
Pummill Golf Classic
Gateway Golf Course, Romulus
Patrick J. Delaney
Golf Outing
Pine View Golf Course, Ypsilanti

AUGUST 18, 2007
Western Waterproofing
Golf Outing
Fox Hills Golf Course, Plymouth

AUGUST 27, 2007
14th Annual Partners
Golf Classic
Franklin Hills Country Club

SEPTEMBER 9, 2007
Kenneth J. Scott
Memorial Golf Outing
Fox Hills Golf Course

SEPTEMBER 10, 2007
SKINS Golf Classic
Gowine Golf Club, Mt. Clemens
Julia M. Wilson Memorial
Golf Outing
Hidden River Golf & Casting Club

SEPTEMBER 16, 2007
Gianni Ferrarotti Lung Cancer
Foundation 4th Annual
Lung Cancer Walk/Run & Family Fun Day
Kensington Metro Park

SEPTEMBER 20, 2007
8th Annual Remarkable
Women’s Luncheon
Ritz Carlton, Dearborn

SEPTEMBER 21, 2007
Janice McTigue Golf Outing

SEPTEMBER 27, 2007
Whispers of Hope
San Marino Club, Troy

SEPTEMBER 29, 2007
NAAMA’s Walk for Women’s Cancers
Detroit Zoo, Royal Oak

OCTOBER 11, 2007
WDVD & Gordon Chevrolet
Call 2 Care Radiothon
Gordon Chevrolet, Garden City
Fashion Show
Michigan Design Center, Troy

OCTOBER 13, 2007
Binson’s Chili Cook-off

DECEMBER 2007
Tanith and Ben’s Holiday On Ice
Compuware Sports Arena, Plymouth

For updates or more information about these events, contact (800) KARMANOS or visit www.karmanos.org/events.asp
A diagnosis of cancer makes most people think of what they can’t do. But to us, the most important part of the word cancer is can. It’s confident. It inspires. And it’s driven us to become one of the nation’s leaders in cancer treatments. If you’re fighting cancer, you need expertise. Ask your doctor for a referral or you can call 1-800-Karmanos or visit www.karmanos.org.

Hear cancer. Think Karmanos.