

ILLINOIS CANCERCAREs

Free Patient Newsletter
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OUR MISSION

To provide comprehensive, compassionate care that enhances the lives of patients and their families

OUR VALUES

- Patients first
- Treat others with respect and compassion
- Open and timely communication
- Commitment to research
- Invest in personal and professional development
- Take ownership in our practice
- Positive attitude



Clinical Trials: At the Forefront, On the Home Front

By Dr. Sachdev Thomas, MD and Dr. Pankaj Kumar, MD Illinois CancerCare, P.C.

When a patient is diagnosed with cancer, there are no compromises: you just want the best. The best possible care often includes participation in a clinical trial. People may have misconceptions about clinical trials. The term alone can conjure up descriptions such as “guinea pig”, “experimental testing” or “assumptions and speculations not based on fact.” However, quite the opposite is true.

Clinical trials are safe, voluntary, and most important – they are vital to the ongoing goal of increasing the treatment options and longevity percentages for patients with cancer. Many people don’t understand how clinical trials work, let alone the high quality of care they would receive by participating. Others aren’t even aware of them as an option.

What Are Clinical Trials?

Clinical trials are research studies that involve people. They are the final step in a long process that begins with research in a lab and animal testing. These trials test the safety and effectiveness of new or modified cancer drugs and treatments, new drug dosages, new approaches to surgery or radiation therapy, and different combinations of treatments.

In cancer research, clinical trials are designed to answer questions about new ways to:

- Treat cancer
- Find and diagnose cancer
- Prevent cancer
- Manage symptoms of cancer or its treatment

Successful clinical trials have:

- Increased survival rates of participants with cancer
- Decreased morbidity associated with the surgical treatment of many cancers
- Resulted in the development of new compounds and techniques to reduce the side effects of cancer therapies

Planned in advance, clinical trials follow a rigorous scientific process with built-in safeguards for participants, who are selected carefully from volunteers. The trials are usually conducted in a progressive series of steps, called phases, beginning with small trials that test the safety of an intervention. When testing progresses to larger trials, the effectiveness of the new intervention given to the investigational group is compared to the currently

accepted standard care given to the control group. Typically, everyone enrolled in a clinical trial receives some form of treatment – placebos are rarely given in treatment trials.

Over the past 3 decades access to clinical trials has increased. Previously, cancer patients would have to travel to large research institutions to participate in clinical trials. But today, through special partnerships, national research trials are available in many hometowns – including Peoria and our surrounding communities. There are 30 or so community-based cancer treatment clinics and hospitals in the United States and Canada that are accepted into the Mayo Clinic Cancer Research Consortium (MCCRC), a clinical research group based out of the Mayo Clinic Cancer Center in Rochester, Minnesota.

Another group, created in 1983 by the National Cancer Institute (NCI), the Community Clinical Oncology Programs (CCOP) network allows patients and physicians to participate in state-of-the-art clinical trials for cancer prevention and treatment while remaining close to home in their local communities. There are 47 CCOPS in 35 states across the country. The CCOP program provides a national mechanism for community-based physicians to partner with large academic investigators. The primary goal is to accelerate implementation of NCI clinical trials for cancer prevention, control and treatment while delivering the benefits of scientific discovery to the local communities in the network.

One astounding, irrefutable fact that patients and health care professionals alike must realize is that today’s standard cancer treatments were yesterday’s clinical trials. By participating in a clinical trial, a patient has the opportunity to be one of the first to receive what might be the next new standard treatment for their particular cancer. More clinical trials means more advanced treatment options. When facing the battle of a lifetime, having more options matters.

For more information about a clinical trial, please contact Illinois CancerCare or Illinois Oncology Research Association CCOP at 309-243-3000. Illinois CancerCare is one of only 3 CCOP’s in the state of Illinois outside of the Chicago area. A listing of all clinical trials currently available at Illinois CancerCare is available on our website.

March: Colorectal Cancer Awareness Month – What you know can help you.

By Marsha Kutter, CCRP, Research Business Administrator



Marsha Kutter, CCRP

There's a common saying "What you don't know can't hurt you," but in the case of colorectal cancer, that may not be true. Better public awareness of colon and rectal cancers, commonly linked together under the name colorectal cancer, should lead to better chances of reducing the incidence of colorectal cancers and its potentially lethal course. The more we know

about it, the better equipped we can be to detect and treat it, or better still, to prevent it. March is colorectal cancer awareness month, so we are taking this opportunity to provide some information to increase awareness of colorectal cancer.

According to the American Cancer Society (ACS), colorectal cancers are the third most commonly diagnosed cancer in both men and women, and the third leading cause of cancer deaths in the United States. The Center for Disease Control (CDC) estimates that as many as 60% of colon cancer deaths could be prevented if all people over the age of 50 followed screening guidelines.

Screening

The American College of Gastroenterology (ACOG), ACS and the CDC all recommend that colon screening should begin at age 50 for men and women and continue to age 75. ACOG and ACS recommend beginning colon cancer screening at age 45 for African Americans.

What kind of screening should people get?

- Colonoscopy (every 10 years).
- Flexible sigmoidoscopy (every 5 years).
- High-sensitivity fecal occult blood test (FOBT) (every year).

Screening can be divided into two types of testing: cancer prevention and cancer detection.

Screening for cancer prevention – ACOG, ACS and CDC all recommend that patients first be offered cancer prevention testing which can detect both cancers and polyps. The preferred prevention method is a colonoscopy every 10 years beginning at age 50 (45 for African Americans) for men and women alike. Alternatively a person can have a sigmoidoscopy, which is similar to a colonoscopy in that a bowel prep is needed, but this test only views part of the colon (the left side) instead of the entire colon. Another alternative is a CT colonography, also called virtual colonoscopy. It is recommended that either a sigmoidoscopy and CT colonography be done every 5 years if a colonoscopy is not done.

How can a test prevent cancer? Colonoscopy certainly detects cancers that have developed in the colon, but it also detects colon polyps. Most colon cancers develop from precancerous polyps that change into cancers over time. During a colonoscopy, the physician can remove these polyps before they can become cancerous.

Screening for cancer detection – if a person declines or economically cannot afford the prevention tests, there are reasonably inexpensive methods of colon cancer detection. This screening test looks for the presence of blood in the stool and is called fecal testing. The most commonly used fecal test is the guaiac-based Hemoccult II® test which, for best accuracy, requires collecting small stool samples over three days and putting each of these samples on a special card that is supplied. These samples are tested for the presence of blood in the samples. A similar kind of test is called a fecal immunochemical test (FIT) and requires only one sample, but the test is much more expensive. Both tests can detect blood

(continued on next page)



in stool, which, if found, might indicate the presence of a colon cancer and certainly would suggest additional tests are needed to find out what is causing blood in the stool. It is recommended that people get fecal tests every year.

There are reasons other than colon cancer that might cause a positive fecal test. Certain foods can make the test appear positive when it really is not. This is why it is important to follow directions when obtaining fecal test samples.

Increased risk – People who may be at an increased risk of colon cancer may require more frequent testing. A strong family history of colon cancer may be one of these risk factors. If a first-degree relative has been diagnosed with colon cancer before the age of 60 or if any two first-degree relatives regardless of age have been diagnosed with colon cancer, experts recommend that screening tests begin at age 40 or at 10 years younger than the age of diagnosis for the youngest affected relative.

Lifestyle approaches – There is no scientific evidence proving certain behaviors or lifestyles lead to colorectal cancers. However, since obesity and smoking are risk factors for colon cancer, it stands to reason that if a person quits smoking (or never smokes) and maintains a healthy body weight, the

risk of developing colon cancer should decrease. The Mayo Clinic, in addition to quitting smoking and maintaining a healthy body weight, also recommends eating a diet rich in fruits, vegetables and whole grains, drinking alcohol only in moderation or not at all, and exercising most days at least 30 minutes as additional ways to prevent colon cancer from developing.

Ask your physician if you have questions concerning any of these colon screening suggestions, especially if you are age 50 or older and have never had any colorectal screening tests. The National Cancer Institute estimates that in 2011 49,380 American men and women died from colorectal cancer. Screening for prevention and early detection could help decrease this number.

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Cancer Terms

Being diagnosed with cancer can be very overwhelming. The hope of this new section of the newsletter is to help you feel not so overwhelmed by all the medical terms you may come across during the course of your treatment. Each newsletter will feature a few common cancer related terms and their definition. If you are unsure of anything during your treatment, please consult your doctor.

Metastatic Tumor: A tumor that forms as a result of spread of cancer from the place where it started (the primary site).

Sarcoma: A malignant tumor growing from connective tissues, such as cartilage, fat, muscle, or bone.

Differentiation: In cancer, refers to how mature (developed) the cancer cells are in a tumor. Differentiated tumor cells resemble normal cells and tend to grow and spread at a slower rate than undifferentiated or poorly differentiated tumor cells, which lack the structure and function of normal cells and grow uncontrollably.

Carcinoma: A cancer that begins in the lining layer (epithelial cells) of organs. At least 80% of all cancers are carcinomas.

Carcinoma in situ: A group of abnormal cells that remain in the place where they first formed. They have not spread. These abnormal cells may become cancer and spread into nearby normal tissue.



Why I Work Here - Lorey Bice

Name: Lorey Bice

Position: Purchasing/Central Supply

Years at Illinois CancerCare: 14 years in February

We all have a story to tell. Everybody has a reason for why they work at Illinois CancerCare. This recurring feature tells the stories of the Illinois CancerCare staff and why they work here.

Do you ever wonder who makes sure all of the supplies are there when you need them? It is the hard work of Lorey Bice that makes sure the staff and patients have what they need each day. "I purchase all supplies for Illinois CancerCare except drugs and IT related items," says Lorey. That includes needles, IV tubing, bandaids, alcohol pads, cups and coffee to name just a few. Lorey also manages Illinois CancerCare's Group Purchasing Organization (GPO) and negotiates all contracts for specific pricing and products. Her ultimate daily goal is to keep the staff happy, the shelves stocked and the patients as comfortable as possible.

Before joining Illinois CancerCare, Lorey worked as a CNA at Hospice and got to know many of the Illinois CancerCare doctors and staff during visits with patients. In 1992, Lorey's Dad was diagnosed with small cell lung cancer. She took a year off work to take care of him and her newborn son, Zeke. When her father passed away a year later, Lorey began working at Methodist Medical Center and ended up on the oncology



Lorey Bice

floor. That was when she knew she wanted to join the Illinois CancerCare team. "During my Dad's treatments, I saw the staff working together and loved how they cared for their patients including my Dad," say Lorey, "I also continued to see it in my time at hospice and on the oncology floor so I set out on a campaign to get hired at Illinois CancerCare."

Lorey started at Illinois CancerCare as a Roomer in 1998. After a co-worker left Illinois CancerCare, she also began ordering medical supplies and gradually began taking on all ordering for Illinois CancerCare. The road to her

current position evolved to what it is today. "I enjoy my job because it is different every day," she says, "the staff has varying requests each day, and we are trialing new products all the time in hopes it will help improve patient care and make the staff's jobs safer."

In her 14 years at Illinois CancerCare and beyond, Lorey has seen that cancer is the great equalizer --it doesn't matter the color of your skin or the clothes you wear or how old you are. But, Lorey says, "There is nobody braver than the patients I see come through our doors." When she hears of a friend or family member that has been diagnosed with cancer, she says "I tell them Illinois CancerCare is the BEST place they can go."



Illinois CancerCare Staff Recognizes Our Volunteers for National Volunteer Week

April 15-21, 2012 is National Volunteer Week. At Illinois CancerCare, we want to say to our volunteers a special...THANK YOU!!!



Row 1: Johnnie, Laura **Row 2:** Kristen, Jeanne, Julie, Barb, Judy **Row 3:** Margaret, Ginny, Joan, Barb, Bonnie, Janice, Kim **Row 4:** Shirley J, Marcia, Larry, Ellen, Gladys, Judy, Shirley B, Shirley R, Gen, Ruth **Row 5:** Frank, Becky, Chuck, Carol, Ron, Cathy, Gary, Mary, Linda, Mary Anne, Pam, Susie, Liz, Jim, John **Missing:** Chele, Barb & John

A patient told me that she prefers coming to Illinois CancerCare to other centers where she has received treatment, because here she receives so much pampering from the volunteer staff.

-Sarah, Research

Our volunteers go above and beyond helping our staff, patients, and their families. From directing them around our large facility, to folding pillow cases or stocking blankets, no job they do goes unnoticed. Every single thing they do for us makes a huge difference in our day. We couldn't have a successful cancer center without them!

-Holly Jo, Nursing

Today, I heard a patient say, 'I just love when the volunteers bring that cart of cookies around!'

-Caitlin, Research

The real "A" Team!--our staff of volunteers continue to be a constant source of support, patience and kindness not only to the patients but to the staff at Illinois CancerCare as well."

-Julie, Nursing

In January, a volunteer rushed to aid in making the icy walkways safe for patients to cross.

-Jenny S., Research

In the IV Room when things can be a hopping and there is no time for stopping...we call you all up to come a bopping for drugs that need a dropping....IV Prep and Staff appreciate you all so much when drugs are needing to delivered to our patients!

-Jennifer, IV Prep

We have a great group of volunteers here at Illinois CancerCare. They offer their time, compassion, strength, and support to our patients with such generosity. Each one has their own individual reasons for being here and their experiences and perspectives are so valuable. When the patients arrive to check in they often ask for the volunteers by name. We are truly blessed to have them.

-Tracy, Front Desk

When you're in need of a cookie they're always there for you and the patients!

-Nancy D., Nursing

My daughter was one of the summer volunteers and always enjoyed her time at Illinois CancerCare with not only the patients but with the wonderful staff of volunteers.

-Sarah K., Nursing

We give a special thanks to Volunteer Coordinator, Laura Matus, who moved to Virginia in February 2012.

Who Are Clinical Laboratory Scientists Anyway???

By Sarah Berberich, MLS (ASCP) MT (AMT), Laboratory Services Supervisor



*Front Row: Carrie Pruett, Jenny Reffett
Back Row: Denise Lorenz, Susan Skinner, Nina Williams, Sarah Berberich, Tracy Anderson
Not Pictured: April Atkins, Marci Linne, Kalli Mathus, Amy Mientus, Cindy Schroeder, Lana Wernsman*

Real laboratory professionals do incredible things every day. Did you know that 75 to 80% of the diagnoses made are based on laboratory results?

Receiving chemo treatment? We are monitoring your progress.

Have fever and chills? We can tell if you have H1N1.

Think you may be having a heart attack? We can determine if that is the problem or if it's only that batch of spicy chili you ate last night.

Need a blood transfusion? We can test the donated blood to make certain that is compatible with yours.

Have you ever had a sinus infection, ear infection, or an abscess? We can tell you what medicine will provide most effective treatment.

So who are the lab workers who are coming up with these necessary answers? We're detectives in white lab coats (or green scrubs at Illinois CancerCare!).

We are highly specialized 4 year college graduates that have passed a national registry exam. We have also completed an intense clinical internship at a teaching hospital. Continuing education is an ongoing process in our careers.

We're experienced lab professionals who have been on the bench for years. We're the new ones who have just graduated from school.

We're not in the spotlight. We aren't asked to sign autographs. We work behind the scenes, helping your doctor provide the best care for you.

You may not see us; but we're here for you.

We give special thanks to our laboratory staff at Illinois CancerCare during National Medical Laboratory Professionals Week April 22-28.



Gnocci

Recipes from Sharon

Recipe adapted from Terese Fortier
 Preparation/Cooking Time: 30 minutes/15 minutes
 Yield: 5 servings (serving size: 1/2 cup)

Ingredients

- 1 egg
- 1 carton (15 ounces) of ricotta cheese (part-skim)
- 2 cups of flour

Directions

1. Mix all ingredients in bowl until they come together in a ball
2. Roll out like a snack on a floured cutting board
3. Cut into small half inch pieces
4. Place pieces into a large pot of salted water
5. Boil until they float to the top and wait one more minute until draining
6. Serve with parmesan cheese or tomato sauce

Nutritional Information (per serving)

- Calories: 330
- Fat Calories: 77.4
- Fat: 8.6g
- Saturated fat: 4.6g
- Protein: 18 g
- Carbohydrate: 44g
- Fiber: 1.3g
- Cholesterol: 69 mg
- Sodium: 121 mg
- Calcium: 245 mg



Sharon Windsor is a Registered Dietician for the Cancer Center for Healthy Living.

Sudoku & Word Search

G	E	W	T	R	U	G	O	Y	H	N	M	I	L	K
H	A	S	H	B	R	O	W	N	S	G	G	Y	A	H
M	E	D	G	A	P	R	S	B	R	D	F	O	F	A
J	S	G	B	A	C	O	N	A	W	E	I	E	I	Y
M	F	N	B	S	H	A	U	N	N	T	G	S	A	O
U	G	R	L	E	O	T	B	E	O	I	O	P	G	G
F	S	L	O	E	W	M	Y	R	S	L	G	A	S	U
F	C	S	E	J	A	E	G	G	S	P	W	N	S	R
I	E	K	S	G	O	A	S	O	O	A	L	C	S	T
N	O	A	T	R	E	L	G	J	A	P	W	A	E	A
A	M	N	A	A	S	S	E	N	J	A	E	K	N	C
M	E	O	F	N	S	I	L	T	U	A	E	E	L	E
U	L	B	T	O	S	A	F	E	I	S	E	S	A	R
O	E	M	E	L	R	A	F	L	C	E	U	J	F	E
L	T	O	S	A	U	S	A	G	E	T	M	E	L	A
E	S	T	S	N	K	U	W	S	E	B	A	G	E	L

	2		9		7		8	
	3	4	8		2			7
5							9	
			7	4	3			6
	5						4	
3			2	8	5			
	9	3						1
1		5	6		9	8	2	
	6		4		1		3	

- Bacon
- Bagel
- Cereal
- Eggs
- Granola
- Hash Browns
- Juice
- Waffle
- Milk
- Muffin
- Oatmeal
- Omelets
- Pancakes
- Sausage
- Toast
- Yogurt



The Fate of Unused Medication

By Rodney Lutes, PharmD Candidate, University of Illinois, Chicago

Proper disposal of unused medicines is a growing concern that spans a broad range of issues including human and environmental health, water quality, waste management, law enforcement, and the health care industry. From 2005-2008, the percentage of the American population actively taking one prescription in the last month was 48% and the percentage taking three or more in the last month was 21%. Both of these statistics are a 10% increase when compared to the years of 1988-1994. From 2005 through 2008, the annual expenditure on prescription drugs has increased 6.75% on average and approximately \$234.1 billion was spent in 2008. With these increases in the amount of medications being dispensed, so has the concerns about the effect they may have on the environment. Multiple studies have found traces of pharmaceutical compounds in water resources such as rivers and streams. It is also thought that these compounds may be harmful to aquatic organisms. So, what can we do to properly dispose of medication?



Original artwork by Rachel Gibson

or to a pharmacy technician at any of our satellite locations. Our pharmacy staff will place unused medications with other hazardous materials to be destroyed safely by incineration. Patients can refer to the website <http://disposemy meds.org>, to find pharmacies by city or zip code that will always accept medication for disposal. The Illinois Environmental Protection Agency website, <http://www.epa.state.il.us/medication-disposal>, also lists police stations and fire stations that are willing to accept medication for disposal.

If a take-back program isn't a viable option, medication may be disposed in household garbage. However, certain steps should be taken prior to discarding. First, remove or deface personal information from medication containers or information that identifies the remnants as medication. Dissolve the medication in a small amount of water or alcohol or grind the medication into a fine powder. Mix with a nonpalatable substance such as coffee grounds or kitty litter. Place this mixture in a plastic bag before disposing of into the garbage. This prevents discarded medications from accidental ingestion by children or pets.

There are several resources to properly dispose of medications that are practical. If they are properly utilized, we take a step in protecting our environment.

One resource to utilize would be medication take-back programs. Occasionally, community pharmacies will have medication disposal days in which they will take back most medication brought in by the public. Other pharmacies are always willing to accept medication for disposal. Illinois CancerCare patients can return unused medications to the pharmacy window in Peoria

Sudoku & Word Search Solutions

G	E	W	T	R	U	G	O	Y	H	N	M	I	L	K
H	A	S	H	B	R	O	W	N	S	G	G	Y	A	H
M	E	D	G	A	P	R	S	B	R	D	F	O	F	A
J	S	G	B	A	C	O	N	A	W	E	I	E	I	Y
M	F	N	B	S	H	A	U	N	N	T	G	S	A	O
U	G	R	L	E	O	T	B	E	O	I	O	P	G	G
F	S	L	O	E	W	M	Y	R	S	L	G	A	S	U
F	C	S	E	J	A	E	G	G	S	P	W	N	S	R
I	E	K	S	G	O	A	S	O	O	A	L	C	S	T
N	O	A	T	R	E	L	G	J	A	P	W	A	E	A
A	M	N	A	A	S	S	E	N	J	A	E	K	N	C
M	E	O	F	N	S	I	L	T	U	A	E	E	L	E
U	L	B	T	O	S	A	F	E	I	S	E	S	A	R
O	E	M	E	L	R	A	F	L	C	E	U	J	F	E
L	T	O	S	A	U	S	A	G	E	T	M	E	L	A
E	S	T	S	N	K	U	W	S	E	B	A	G	E	L

6	2	1	9	5	7	4	8	3
9	3	4	8	6	2	5	1	7
5	8	7	3	1	4	6	9	2
8	1	9	7	4	3	2	5	6
7	5	2	1	9	6	3	4	8
3	4	6	2	8	5	1	7	9
4	9	3	5	2	8	7	6	1
1	7	5	6	3	9	8	2	4
2	6	8	4	7	1	9	3	5



Letter from the Director – Katharine Francis

Spring is just around the corner! While the coming of each new season marks a time of transition, springtime holds the special promise of HOPE and renewal. It is a time of expectant hope – we know the snows will melt, the gray skies will dissolve into blue, and the sun’s warmth will coax new growth.

Spring’s familiar cycle is an appropriate metaphor for our progress toward cures for cancer. Like spring, clinical cancer research trials hold a special assurance of HOPE of their own – we know that promising new studies are breaking through to faster diagnoses, better treatments, and one day, a cure for cancer.

The Illinois CancerCare Foundation’s mission of paving the way to a cure for cancer can best be accomplished through funding essential clinical cancer research trials. People faced with cancer in our community are living longer healthier lives as a direct result of these trials and the advanced treatment options they provide.

Since the first Peoria patient was entered on a clinical cancer research trial in January 1979, nearly 1,400 clinical cancer research trials have been conducted right here in our community by the physicians of Illinois CancerCare. To date nearly 9,000 cancer patients in our community have participated in these trials. Each successful trial raises the standard of care to a higher level – every trial brings us closer to cures.

Since its inception, the Illinois CancerCare research program has received over \$11.5 million in federal research grants. However, costs are rising while available dollars are shrinking and many new trials don’t have the funding needed to cover all of the costs. If money cannot be secured to fund the rising extra costs related to research, the future of clinical trials could be in jeopardy.

The Illinois CancerCare Foundation helps defray these costs through local fundraising efforts. Whether earmarked to fund individual trials, specialized research equipment, or general research costs, every dollar spent on research makes a difference in the lives of cancer patients in our community. Every \$1,000 allocated toward research is enough to allow one more neighbor, friend, or loved one to enroll in a local clinical cancer research trial.

It is the Foundation’s expectant hope that our research funding initiatives will bring us closer to developing the cures for the more than 100 diseases that are cancer.

In addition to research, Foundation funds help support cancer education, awareness, and patient comfort care through special programs that reach our patients in need.

We are grateful for the scores of volunteers and donors who bring this mission to life through the devotion of their own time, talent, and treasure. We offer very special heartfelt thanks and a fond farewell to Laura Matus, Volunteer Coordinator, for her years of loving and dedicated service to cancer patients in our community and we wish her the very best in her move to Virginia.

Happy Spring!

Katharine Robinson Francis
Interim Executive Director
Illinois CancerCare Foundation



Our Giving Community

Our Giving Community

First Annual Eric Albers Memorial Softball Tournament April 14-15, 2012 PeKin Avanti's Diamonds



*ALL PROCEEDS BENEFIT THE ILLINOIS CANCERCARE FOUNDATION
(THE FOUNDATION ASSOCIATED WITH ERIC'S TREATMENT CENTER IN PEKIN)*

To register in the softball tournament, please contact Elise Albers at 309-840-4198 or Liz Albers at 309-256-6960. The registration fee is \$200 per team. First and second place winners will receive a cash payout. Must be 18+ to play and teams may consist of male and female players. Donations are welcome from those that are not able to play. Please send checks made payable to: Eric Albers Memorial Softball Tournament to Havana National Bank, 300 S. 2nd Street, San Jose, IL 62682.

The Eric Albers Memorial Softball Tournament is in Loving Memory of Eric Albers who was diagnosed with Ewings Sarcoma, a type of bone cancer, in May of 2009. Eric lost his battle with Ewings Sarcoma in June of 2011. This tournament will be held annually so that those who knew him may never forget him, and those that didn't have the honor of knowing Eric will get to know his story through the tournament.



Specializing in Cancer and Blood Disorders

Save the Date!

Swing for a Cure

Saturday, June 16, 2012 ~ 6:30 pm
O'Brien Field

Who do you go to bat for? Illinois CancerCare and the Illinois CancerCare Foundation are once again teaming up with the Peoria Chiefs to recognize Cancer Survivors as well as acknowledge caregivers and those we have lost. Please check back in the June/July issue for more information about how Survivors can get free tickets to the game.



Trust in Hope



Illinois CancerCare Staff member, Kendall Howard, picks up the gifts she delivered to one of the families for Christmas.

Thanks to the support of the Illinois CancerCare staff and the generosity of many donors, the Illinois CancerCare Foundation Trust in Hope fund provided Thanksgiving meals and Christmas gifts to cancer patients and their families. Started with love by Marti Williamson, one of Illinois CancerCare's clinical medical office assistant and draw tech, the Trust in Hope fund helps provide a little extra compassion and support for some of our cancer patients and their families during the holidays.

Trust in Hope receives tremendous support from the employees of Illinois CancerCare. The program provides an important way for them to give from their hearts to meet some very special needs of the patients they serve.

In 2011, 79 fully cooked meals were prepared by Kickapoo Creek Winery and delivered to patients in need for Thanksgiving. Seven families of cancer patients were provided with Holiday gifts – both needs and wants – for their 20 children along with a generous gift card for each family's needs.

To the staff and additional volunteers who helped with Trust in Hope, we give you our sincerest gratitude for your support of this program!

Lisa's Ride

In September 2011, Lisa Osborne and her friends and family held Lisa's Ride, a motorcycle run event. Lisa, an Illinois CancerCare patient, said she wanted to give back to the place that has helped keep her fight strong. Lisa's Ride 2011 raised \$7,500 for the Illinois CancerCare Foundation for research.

Although Lisa lost her battle with cancer in January 2012, her friends and family along with the Marshall County Motorcycle Club plan to honor her wishes for another ride. They are planning Lisa's Ride 2012 for August.

The Illinois CancerCare Foundation gives a special thanks to everyone who supported Lisa and Lisa's Ride. Your generosity will help us continue to bring HOPE home.



Lisa Osborne presents the \$7,500 check to Illinois CancerCare's Dr. Diane Prager.



Lisa poses with her daughter, Jordan Moore.

Calendar of Events

Calendar of Events



March 2012

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 6:00 pm—Kids Connected 5:30 pm—Yoga with Lisa	2 9:00 am—Living Strong 10:00 am—Cancer Support Group	3
4	5 9:00 am—Aqua Survivor 6:00 pm—Breath of Joy Yoga 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	6 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	7 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	8 5:30 pm—Yoga with Lisa	9 9:00 am—Living Strong 10:00 am—Cancer Support Group	10
11	12 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:00 pm—Kids Connected 6:30 pm—Beyond Beginner Tai Ji 6:30 pm—Tai Ji Circle	13 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	14 7:30 am—Senior's On the Go Health Fair 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	15 5:30 pm—Yoga with Lisa	16 9:00 am—Living Strong 10:00 am—Cancer Support Group	17
18	19 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:00 pm—Kids Connected 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	20 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	21 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 5:30 pm—Natural Secrets Workshop 6:30 pm—Beginner Tai Ji	22 5:30 pm—Yoga with Lisa	23 9:00 am—Living Strong 10:00 am—Cancer Support Group	24
25	26 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	27 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	28 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	29 5:30 pm—Yoga with Lisa	30 9:00 am—Living Strong 10:00 am—Cancer Support Group	31

April 2012

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:30 pm—Beyond Beginner Tai Ji 6:30 pm—Tai Ji Circle	3 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	4 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	5 4:00 pm—Cancer Basics 101 5:30 pm—Yoga with Lisa 6:00 pm—Kids Connected at Bass Pro Shops	6 9:00 am—Living Strong 10:00 am—Cancer Support Group	7
8	9 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:00 pm—Kids Connected 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	10 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation	11 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	12 5:30 pm—Yoga with Lisa	13 9:00 am—Living Strong 10:00 am—Cancer Support Group	14
15	16 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:00 pm—Kids Connected 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	17 9:00 am—Aerobics Noon & 5 pm—Healthy Cooking Demo 5:15 pm—Mindfulness Meditation	18 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 5:30 pm—Sound Therapy Workshop 6:30 pm—Beginner Tai Ji	19 6:15 pm—Yoga with Lisa	20 9:00 am—Living Strong 10:00 am—Cancer Support Group	21
22	23 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle	24 9:00 am—Aerobics 5:15 pm—Mindfulness Meditation 5:30 pm—Lymphedema Workshop	25 11:00 am—Yoga with Jean 1:00 pm—Cancer Support Group 6:30 pm—Beginner Tai Ji	26 5:30 pm—Yoga with Lisa	27 9:00 am—Living Strong 10:00 am—Cancer Support Group	28
29	30 9:00 am—Aqua Survivor 5:00 pm—Breath of Joy Yoga 6:30 pm—Beyond Beginner Tai Ji 7:00 pm—Tai Ji Circle					



Calendar of Events Descriptions

For Cancer Center for Healthy Living (CCHL) programs, please call 309-693-8139 to pre-register.

Support Group Information

Living & Coping with Cancer Support Groups (CCHL/ACS) – A gathering of cancer survivors and their caregivers who discuss issues and concerns that come up from a cancer diagnosis and its impact on daily life. Wednesday 1pm at CCHL on Knoxville, Friday 10am at Illinois CancerCare Classroom.

Kids Konneted – Do you know a child who is struggling with a parent or caregiver's cancer diagnosis? Kids Konneted is a child support group for children ages 5-18 whose parent, grandparent or caregiver has or had cancer. Each month there is a special event – a Kid Friendly cooking demo in March and Bowling at Bass Pro Shop in April. This group meets the first Thursday and third Monday of each month at 6PM at the Hult Health Education Building. For additional information please call 692-6650.

Healthy Living Classes

All classes below are open to the general public with a \$5 per class fee unless specifically noted. All classes below are free to cancer survivors. Classes are located at the Cancer Center for Healthy Living office at 5215 N. Knoxville in the Hult Health Education building unless noted otherwise.

Yoga with Jean – open to all yoga levels.

Yoga with Lisa– Restorative yoga class.

Movements adapted to individual needs.

Breath of Joy Yoga with Lisa –Open to breast cancer patients and survivors only

Living Strong– strength training class. All levels welcome.

Beginner Tai Ji– Led by Cara Murdoch

Tai Ji– Gentle exercise with Cara Murdoch. All levels welcome.

Tai Ji Circle– Gentle exercise led by all group members

Beyond Tai Ji– Gentle exercise for those

who are no longer beginners.

Aerobics– Gentle exercise with low impact. All levels welcome.

Aqua Survivor – Gentle Water aerobics. All levels welcome. Led by Kathy Smith at Landmark Health Club.

Stretch & Tone – A combination of stretching, pilates and yoga with Yinka Adelota, D.C. All levels welcome.

Special Programs

Mindfulness Meditation (CCHL)

Tuesdays @ 5:15pm

These meditation sessions are led by Dr. Ian Wickramasekera. If you find yourself overburdened with worries or dreams of the future or full of regret or longing for the past, please consider joining us for this weekly, one-hour session. Mindfulness can help in peacefully experiencing the present moment in all its fullness. Comfortable seating is provided, and sitting on the floor is not a requirement. These sessions are open to the public and free of charge.

Individual Reflexology (CCHL)

By Appointment Only

Individual Reflexology sessions are for anyone currently undergoing treatment only. Come see how great your body feels after a 30 minute session with Molly Richmond. For private appointments, you may email Molly at mwhalen1124@yahoo.com with the subject line Reflexology Appointment.

Healing Touch Therapy (CCHL)

By Appointment Only

Individual healing touch sessions are for anyone currently undergoing treatment only. Enjoy a healing touch therapy session with Becky Dailey. Visit Becky's website at www.beckydaily.com.

Sound Healing Workshop (CCHL)

April 18 at 5:30 pm at the CCHL Office inside the Hult Center for Health Education. Come experience the healing energy of Tibetan Bowls, tuning forks, chanting sounds and a 15 minute gong bath. The workshop is led by Becky Cobb.

"Seniors on the Go" Health Fair (CCHL)

March 14 from 7:30 am – 11:30 am

Come and learn about local organizations, programs and services that are available for you to better your health! Over 30 vendors from around the area will be there including three speakers discussing topics such as the aging process and caregiver burnout. The fair is free and open to the public.

Healthy Weight Management Cooking Demonstration (CCHL)

April 17 at noon & 5 pm at Lippert, Inc. – 7719 N. Pioneer Lane, Peoria. Join Sharon Windsor, RD and the OSF Dietetic Interns for a free cooking demonstration and education program which incorporates the cancer prevention guidelines developed by the American Institute of Cancer Research and the World Cancer Research Fund. This cooking demonstration will focus on weight management.

Lymphedema Workshop (CCHL)

April 24 at 5:30 pm

Summertime should be a time for carefree fun in the sun, but maybe not if you suffer from lymphedema. Lymphedema is a swelling that commonly results from cancer surgery and/or radiation. Come learn about lymphedema and new ways to reduce your risk of swelling during the problematic summer months. This workshop is led by Molly Nettles of IPMR.

I would like more information about the following services:

ACS = American Cancer Society

CCHL = Cancer Center for Healthy Living

- Help for children coping with a parent who has cancer (Kids Connected)
- Individual counseling for the patient, family members, or caregivers (CCHL)
- Healthy Living classes (yoga, gentle aerobics, Tai Ji) (CCHL)
- Cancer Basics 101 class (ACS/CCHL)
- Financial assistance for treatment, medications, or medical supplies (ACS)
- Lifeline® Home Emergency Response System (monthly service fee) (ACS)
- Look Good, Feel Better® (ACS)
- Meal resources/home delivered meal programs (fee may be required) (ACS)
- Homemaker services, such as household cleaning, errands, general assistance (per service fees apply) (ACS)

Social services form for patients

- Support Networking groups (CCHL)
- Massage therapy for patients in treatment (\$25 fee/hr.) (CCHL)
- Nutritional counseling (CCHL)
- Living will/power of attorney directives (ACS)
- Transportation assistance for appointments (ACS)
- Wigs, hats, turban resources (ACS)
- Housing/lodging information (ACS)

More information on the reverse side

*All services are free unless otherwise noted.

illinoiscancercare.com

Physicians



Illinois CancerCare Social Services

Illinois CancerCare is proud to partner with the Cancer Center for Healthy Living and the American Cancer Society to provide the services listed on the other side to our patients and their families.

Name: _____

Type of cancer: _____

Date of birth: _____

Today's date: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Would you like more information about or receive any of the following publications?

Clinical Cancer Research Trials

- Illinois CancerCare Treatments/Trends/Tomorrow magazine
- The Cancer Center for Healthy Living newsletter
- Illinois CancerCare monthly newsletter by e-mail
- No, not at the time

Information about programs & services on other side