



Enlighten

A Newsletter of the **NavigateCancer Foundation**

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NCF Services for Spanish Speaking

As the fastest growing population in the United States, the Hispanic/Latino population is experiencing increasing need for quality cancer care.

According to the US Census Bureau, Hispanics/Latinos comprise 16% of the US population; this group totals over 50 million people.


The American Cancer Society reported that cancer is the second leading cause of death in this population. It is estimated that throughout their lifetime, 1 in 2 Hispanic/Latino men and 1 in 3 women will be diagnosed with cancer. Of those diagnosed, 1 in 6 women and 1 in 5 men will die.

The mission of NavigateCancer Foundation is to meet the needs of all cancer patients and that includes at-risk, vulnerable, and underserved populations throughout the US. We plan to increase services to the Hispanic/Latino population in efforts to reduce disparities in cancer treatment.






To provide sufficient, quality services to this population, we will identify barriers to serving Hispanics/Latinos, translate our website and printed materials into Spanish, and hire a Spanish-speaking oncology nurse.

We are so thankful to the Amgen Foundation, the philanthropic arm of US-based biotechnology firm Amgen, for its generous grant that will allow us to start this process. We look forward to keeping you apprised of our progress as we continue to seek grant funding in order to make these services possible.



NavigateCancer
Foundation
EMPOWERING CANCER PATIENTS AND FAMILIES

To follow us go to:
www.navigatecancerfoundation.org

Dear Friends,

It is with great pride that I update you on the continued momentum and reach of the NavigateCancer Foundation. The success of this non-profit continues to be validated everyday by both the feedback we are receiving from program participants and the adoption of our model of health advocacy. We hope this newsletter is just one more way of serving you by providing a few tidbits toward your improved ability to self-advocate.

In this edition, you will find information on the cancer drug shortages and about the effects of excessive radiation exposure as well as useful tools for understanding your treatment plan and limiting these consequences.

I'm pleased to introduce you to the latest nurse consultant for the NavigateCancer Foundation. Ms. Anna Strickland is a great addition to the team. I am so glad to hear that so many of you are already benefitting from her talent and care.



You will read about our continued commitment to the underserved with outreach to the Hispanic/Latino community. We are thankful to the Amgen Foundation who is funding a grant that will allow us to start converting our publications and services into Spanish so we can better serve this community.

NavigateCancer is helping more patients every month. We are exceeding our goals and are thrilled to be reaching those that need our help. Your support is essential to our mission and it is time for our Annual Campaign.

In just a few weeks, you will be receiving a letter asking you to help support a nurse consultant for a year. I hope you will thoughtfully consider this request. Our supporters have already been so generous. We are very grateful. I look forward to the winter newsletter to share the success of this campaign and the progress of the Foundation.

All the best,

Sharon M. Bigelow
Executive Director and Co-Founder

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NCF Welcomes a New Oncology Nurse

We are pleased to introduce our newest Oncology Nurse Consultant, Anna Strickland, who joined NavigateCancer Foundation in January 2012. She has long been an advocate for assisting cancer patients in developing an understanding of their disease and finding their voice in making treatment choices.

Prior to joining NavigateCancer Foundation Strickland worked in medical oncology research; patient care; and patient and staff education in hospital settings, research facilities, and outpatient clinics. She brings with her 34 years of nursing experience and a career highlighted by serving as a Lieutenant in the US Navy including three tours in the US and abroad. Strickland worked at The National Institutes of Health, Regional Cancer Care, and Cancer Centers of NC.

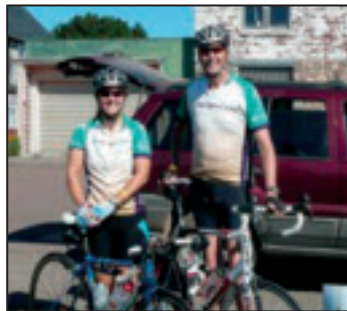
Strickland holds a BS degree in nursing from Barton College as well as a MS degree and Nurse Practitioner from Duke University. She has memberships and board certifications from the American Association of Nurse Practitioners and the Oncology Nursing Society.

Strickland lives in Raleigh with her beloved Shih Tzu, Finley, named after Carter-Finley Stadium.



Anna Strickland RN, MSN, ANP-BC

NCF Bicycle Jerseys



Available for sale at \$65, includes shipping and tax. Simply call 919.267.3657 or email info@navigatecancerfoundation.org to purchase one.

Thank you!

Thank you to the following foundations, corporations and donors who gave generously to the NavigateCancer Foundation during the last quarter.

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Are we "Over-Exposed"?

Calculate your risk at: www.xrayrisk.com

Cancer patients are required to take a lot of tests and many of them leave one with a little more than they bargained for...radiation exposure. The cancer community is growing concerned that an "over-usage" of CT scans and other radiation tests may be causing more harm than good, and survivors are especially at risk. Many patients know little about the long term risks associated with these imaging tests and even less about how to help themselves.

First a bit of perspective—we are exposed to radiation every day; radioactive elements are found in rocks, soil, water, power lines, cell phones, microwaves, cosmic rays, dental x-rays, mammograms, and even food. All organic matter, both plant and animal, contain some small amount of radiation. It is unavoidable...to a point.

Let it be said that many of these tests are necessary and in fact, life-saving. But has the medical community gotten a bit too relaxed when it comes to using x-rays and scans? Yes.

Radiation is a hidden danger because you don't feel it and any damage may not show up for years. Taken individually, these tests pose little risk, but over time it adds up. Doctors don't keep track of radiation given to their patients and, except for mammograms, there are no federal guidelines on radiation doses.

It is important to educate patients and families to advocate for a measured and reasonable plan of care to avoid any unnecessary or duplicative tests; to minimize radiation exposure; and to provide a long-term, healthful outcome.

Helpful hints:

Get Educated: Understand your plan of care. Many patients do not know what is planned or when. If you know the overall plan you will be able to coordinate.

Coordinate: Cancer patients have at least 3 doctors involved in their treatment plan and each one has their own agenda. If you know the overall plan, you can then coordinate to avoid duplication or unnecessary tests.

Be Proactive. Let your doctor know that you are interested in a reasonable plan but one that minimizes radiation risk. Together, decide on a schedule of tests that will use blood tests, physical exams, and non-radiation tests such as ultrasounds and MRI to offset the CT and PET scans.

Question. It is perfectly okay and necessary for you to ask your doctor if the particular test is necessary. Ask your doctor to explain why it is needed at this time and if there could be an alternative to the test that would give just as much information.

"Check the fear": Although easier said than done, don't allow fear to cause you to have unnecessary tests- trust your doctor's opinion on those "weird pains."

Personal annual radiation dose calculator

<http://www.nrc.gov/about-nrc/radiation/around-us/calculator.html>

When getting dental x-rays, chest x-rays or any upper body x-ray, ask for a "thyroid collar" to shield the thyroid gland – it isn't routinely offered.

Update on Drug Shortages

Cancer drug shortages are becoming epidemic and affecting patient outcomes. The reasons are many

- ◆ Increased demand for these drugs
- ◆ Decreased production and suppliers of generic drugs
- ◆ Lack of raw materials (ie:Taxol is made from the Pacific Yew tree)
- ◆ Inability to import drugs due to differences in product quality
- ◆ Manufacturer market manipulation

What causes one drug shortage may not be the reason for the other. Part of the problem is that no drug manufacturer is currently required to report shortages or how long it is likely to last. As a solution to this aspect, there was nearly unanimous and bipartisan support in passing the US House bill H.R. 5651 FDA Reform Act while last week, the Senate passed the FDA Safety & Innovation Act (S. 3187) Members will quickly resolve the differences between the two bills to ensure that the strongest drug shortage provisions are included in the final legislation.

As of this printing: 6/1/12, the following are some of the more common agents in short supply:

Cisplatin	Doxil (late 2012)	Cytarabine	Taxol
D Daunorubicin	Etoposide	5 Fluorouracil- limited concentrations	
Leucovorin	Leupron	Mitomycin-C	

Visit www.FDA.gov/drugs/drugsafety/drugshortages/ucm050792.htm to check for the latest information on your specific drugs.



Give

Online at www.navigatecancerfoundation.org/donate or mail your donation to
5448 Apex Peakway, #328, Apex, NC 27502

Donations can be made in memory or in honor of a loved one.

NCF is a non-profit, 501c 3 organization and donations made to the foundation are tax deductible.