



Enlighten

A Newsletter of the **NavigateCancer** Foundation

Spring 2014

Volume 4, Issue 1

Dear Friends,

It is my pleasure to greet old friends and welcome new ones. Our NCF family continues to grow daily. We are proud to share that we consulted with over 3,000 patients and families in 2013! We are amazed at the growth and the opportunity to promote our model of advocacy as we change lives.

This past year, our model has been studied and validated. In September at the 40th Annual American Academy of Nursing Conference, our model was presented and published. Additionally, the LIVESTRONG Foundation completed a research study showing that NCF improved patient outcomes!

To build upon this data, we are taking the next step. NCF opened a **research study** to specifically look at our model (please see inside for details or to participate). We look forward to sharing our results at the end of the year.

In addition, we are happy to report that we trademarked **Be An Expert Patient**®. An Expert Patient maximizes outcomes and minimizes costs. We believe this mark defines what we do in a short and simple statement and we will be using it wherever we can.

The Affordable Care Act impacted our patients and families both positively and negatively. When you face financial and insurance challenges, be sure to discuss them with your NCF nurse consultant who will guide you to the resources that you need.

Our **2014 Annual Appeal** will be mailed next month. This is the only time in 2014 that you will receive this request. (As an organization, we will not endlessly solicit.) Scaling to meet the needs of our increasing participant load is very challenging. I understand that you have limited charity dollars but I respectfully ask you to consider NCF and give generously. We are great stewards of every dollar and there is no other organization that does what we do...**the gap is wide and the need is deep.**

I am forever grateful for each of you and the support that you provide to care for and create Experts Patients who have a better chance of beating this monster that we all call cancer.

With Humble Thanks,

Sharon M. Bigelow
Executive Director & Co-Founder



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NCF Opens Prostate Cancer Navigation Study



UNC
CANCER CARE

In conjunction with the LIVESTRONG Foundation and UNC- Chapel Hill, NCF has opened a research study to measure the impact of our model of advocacy and navigation on patient outcomes. This study is available to all newly diagnosed prostate cancer patients who have not received any treatment and have access to the internet and a computer. If you are interested, please call the LIVESTRONG Foundation at (855) 220-7777 and ask for the Prostate Cancer Study.

LIVESTRONG

FOUNDATION

Thank you!

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

Marjorie Anderson in memory of Ron Anderson
Christiana Boyd in honor of Janet Dickmader
Claudia Brooks in honor of Elsie Varnerin
Joseph Burke in memory of Bradeene Vail
Evelyn Byers in memory of Ron Anderson
Ronald D. Bynum in memory of Michele Heroux-Bynum
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Michelle E. Grove in memory of Ron Anderson
Rick & Anne Gutekunst in memory of Buzz Skinner
Laura Harbin in honor of Sarah Searcy
Ann Hatcher in memory of Bradeene Vail
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Daniel S. Ivey in memory of Aubrey Duffer
Bruce & Elizabeth Jobe in memory of Bradeene Vail
Jeanne Kennedy in memory of Ron Anderson
Marie Kochek in honor of Elsie Varnerin
Wilma Konkell in memory of Ron Anderson
Neal T. Marple in memory of Linda Marple
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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.

Linda & Barnes Tatum in memory of Bradeene Vail
Kim M. Thore in memory of Bradeene Vail
Marcia Truswell in memory of Ron Anderson
Phil Whit in honor of Pam Schmid
William Quinn in memory of Peggy Samolyk
National Association of Postal Supervisors
in memory of Ron Anderson

www.navigatecancerfoundation.org

Be an Expert Patient®

Genomic Profiling: What is it and why do I need to know about it?

Genomics is a fancy name for the information about your genes. Genomic Profiling, or Molecular Profiling, is being used to discover why certain people get certain diseases or why people respond differently to the same drug. Genomic Profiling identifies the DNA alterations or mutations that may drive the growth of a cancer.

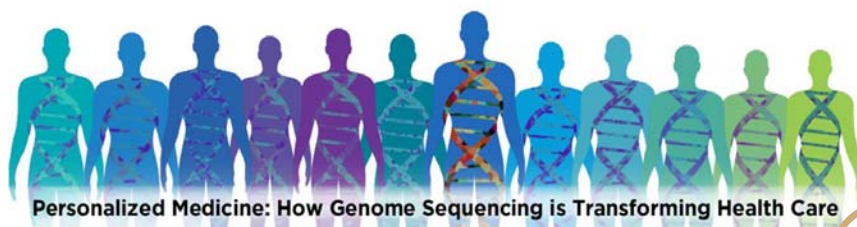
Our body cells are made up of DNA. The structure of DNA is like beads on a string. Around 10,000 beads make up a single gene, and each human has approximately 20,500 genes. Genomic profiling is looking for a mutation in just one bead—the deletion of one bead, the addition of extra beads, or changes in the patterns of beads—which may have caused the cancer cell to develop.



As we learn more about these altered pathways or “targets,” drugs are being developed to attack these targets and to stop the growth of the cancer cells. Such drugs are called Targeted Therapies. There are currently over 32 FDA approved Targeted Drugs with more being approved all the time.

It is the standard of care for physicians to investigate the tumor cell to look for mutations that may have caused the cancer cells to mutate and grow unchecked. In addition, when a tumor progresses, the doctor may look at the tumor again and compare the original tumor sample to the progressed tumor sample to determine why the cancer has advanced. Many of you have taken

targeted therapies already and more will do so in the future. Not all cancer tumors have identified markers at this point, however, researchers predict all tumors will have a genomic profile to help guide therapy in the near future.



Personalized Medicine: How Genome Sequencing is Transforming Health Care

To treat or not to treat...that is the question

Molecular profiling can be used to help guide treatment decisions. There are predictive (tumor tissue assays) tools available to newly-diagnosed, hormone-positive breast cancer patients, stage II and III colon cancer patients, and early-stage prostate cancer patients. A validated tool analyzes the molecular subtype of the tumor and determines a “recurrence” score. Knowing whether the cancer has a low or high risk of recurrence can be a valuable piece of information to help guide a patient’s treatment decisions.

New Recommendation for

Endometrial and Colon/Rectal Cancer

The National Comprehensive Cancer Network (NCCN) now recommends that these tumors be tested for Lynch Syndrome, a genetic condition that can cause many cancers. If there is no tumor tissue available, talk to your doctor if you are a candidate for genetic testing.

What do you know about the cancer tumor profile? If you have the following cancers, ask your doctor about its genomic profile:

Breast, Colon, Non-Small Cell Lung, and Melanoma

Sample List of Targeted Therapies

Disease	Target	Drug
Non-Small Cell Lung Cancer	EML4-ALK	Xalkori® (crizotinib)
Non-Small Cell Lung Cancer	HER1 or EGFR	Tarceva® (erlotinib)
Breast Cancer- Her2 positive	Her2	Herceptin® (trastuzumab)/Tykerb® (lapatinib)
Melanoma	BRAF	Zelboraf® (vemurafenib)
Chronic Myeloid Leukemia	Bcr-Abl	Gleevec® (imatinib)

Here Comes the Sun...

May is Skin Cancer Awareness Month. Make sure you know the facts so you can **Be Proactive** and **Beat Cancer**.

Myth: Tanning beds increase Vitamin D levels.

Fact: Tanning beds do not increase Vitamin D but they do increase the risk of the deadliest form of skin cancer (melanoma).

Myth: Do not use sunscreen to get more Vitamin D

Fact: Sunscreen does not prevent your body from making Vitamin D. Use sunscreen, seek shade and wear sunglasses and hats. Have your Vitamin D levels checked and take supplements if necessary.

Be Sun Smart!

