

Cancer Lines

The Cancer Program of UNC-Chapel Hill & UNC Health Care

Fall 2007



North Carolina Legislators Establish University Cancer Research Fund

This summer, the North Carolina General Assembly created the University Cancer Research Fund with the passage of the 2007 state budget. The fund, established to accelerate cancer research at the University of North Carolina at Chapel Hill's School of Medicine and its Lineberger Comprehensive Cancer Center, will provide \$25 million in 2007-2008 and is slated to increase to \$50 million per year beginning in 2009.

With this new funding, the UNC School of Medicine and Lineberger are poised to continue their international leadership in cancer research, officials said. The research funding will serve to improve the quality of life and treatment of cancer patients nationwide and enhance UNC's access to science and technology. It will also increase UNC Lineberger's partnerships with UNC-CH physical sciences departments and the UNC School of Public Health to discover and disseminate knowledge across the spectrum of cancer research, and make real improvements



Dr. Tom Shea, Senate President Marc Basnight, and UNC President Erskine Bowles

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"Having the state government make a long-term investment in decreasing the burden of cancer and, ultimately, the burden of cancer health care costs, is truly visionary."

National Cancer Institute Director
Dr. John E. Niederhuber

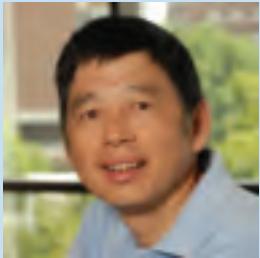


Cancer survivors took part in the news conference. Shown above (left to right) are Senator Walter Dalton; Melissa Blackwell of Mebane; Susan Lamar of Rocky Mount; Representative Hugh Holliman, himself a cancer survivor; Jack Hyer of Chapel Hill; and Eric Bergeron of Raleigh. Lamar and Hyer are members of UNC Lineberger's Board of Visitors.



Senator Linda Garrou; Dr. Carolyn Sartor; Dr. William L. Roper, dean of the UNC School of Medicine and chief executive officer of the UNC Health Care System; and Dr. Lisa Carey.

the inside line up



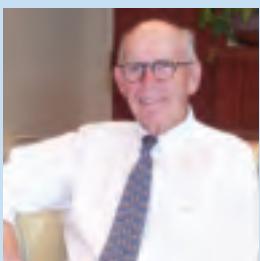
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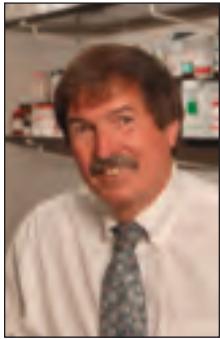


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director's *Message*



Dr. H. Shelton Earp, III

The NC General Assembly and the people of North Carolina took a monumental step this summer by creating the University Cancer Research Fund. This investment, in the pursuit of cancer cures, will also bring the best cancer care in the world within the reach of all North Carolinians.

I promise you that we will be exemplary stewards of this investment. This fund, along with the construction of the North Carolina Cancer Hospital, will dramatically improve the quality of life and treatment of cancer patients across our state. Together they will increase UNC Lineberger's ability to discover and disseminate knowledge across the spectrum of cancer research, and make advances in prevention, early detection and therapies that will benefit all North Carolinians.

So what will happen? And who will make sure that the work that is most vital to North Carolina will be completed?

A committee of seven people, led by UNC President Erskine Bowles, will oversee and approve expenditures and guide the projects. Other UNC committee members include Dr. William Roper, dean of the UNC School of Medicine and CEO of UNC Health Care; Dr. Robert Blouin, dean of the UNC School of Pharmacy; Dr. Barbara Rimer, dean of the UNC School of Public Health; and me. Two national cancer experts will also serve on the committee.

For our first year, we have strategic plans for the \$25 million investment with goals for four broad areas: cancer prevention and control research with statewide application and impact; clinical and translational research; basic science; and multidisciplinary clinical excellence and outreach.

We will initiate community and statewide efforts in epidemiology, prevention, dissemination and outreach. We already have programs such as the Carolina Breast Cancer Study, unique to the United States with its large database of North Carolina women, including a high percentage of African-American women with breast cancer. We will expand and extend this work to other cancers and underserved populations. The Carolina Community Network is currently working with 13 central and eastern North Carolina counties to reduce cancer disparities through education, research, and training.

To accelerate our clinical research we will increase the number of clinical trials and will work to move promising laboratory findings to the clinic as quickly as is feasible. Already we are using new knowledge developed at UNC on cancer subtypes to tailor therapy for newly diagnosed patients. We will dramatically expand access to novel genomic testing for UNC Lineberger cancer patients by the end of the first year. We're planning significant outreach efforts to physicians to partner in these clinical trials and innovative programs in nanotechnology, drug discovery, and understanding the complex systems of the cancer cell.

All of these clinical findings flow from basic laboratory discoveries. Our

270 scientists are among the best and brightest, and we will recruit more to join UNC Lineberger. New faculty consistently tell us that one of the key reasons they choose UNC is our collegiality and team approach. Our teams will expand dramatically over the next three or four years and continue to garner significant national grants such as the Carolina Center of Cancer Nanotechnology Excellence and the Cancer Genome Atlas project, both profiled in past issues of *Cancer Lines*.

Referring physicians praise our multidisciplinary clinical teams that provide leading-edge care for each patient based on a treatment plan developed by this group of specialists. But patient and referring physician access through the Multidisciplinary Oncology Program office must continue to improve. Our emphases on patient-centered care, referring physician communication, and outreach to the state are absolutely crucial if we are to grow our clinical innovation. Clinical excellence and clinical research go hand in hand. Our model of the nurse coordinator serving as the patient navigator, guiding the transition among treatment modalities, will be enlarged to provide even better patient and family support. This issue of *Cancer Lines* profiles this great teamwork, but watch for future issues as we detail expanded access.

I can assure you that all of us at the School of Medicine and the entire University of North Carolina at Chapel Hill take this responsibility seriously. We will use these resources to attract and retain the nation's greatest cancer researchers, physicians and other caregivers to North Carolina. We will lead in treatment and discoveries. And we will become the nation's best public cancer center.

This transformative investment will positively touch the life of every family in this state and we are tremendously grateful. ●



UNC Lineberger is designated a Comprehensive Cancer Center by the National Cancer Institute.

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The Phillip W. Hettleman Jr. Laboratory was dedicated at a ceremony at UNC Lineberger on August 17.

The lab recognizes a generous bequest gift made by the late Phillip W. Hettleman Jr., UNC Class of 1976, to support clinical trials and translational cancer research. Joining Center Director Shelley Earp at the celebration are Phil's two sisters (left to right): Jane Porter, Little Neck, NY; and Linda Hanlon, Weston, FL.



CyberKnife Robotic Radiosurgery System Expands Treatment Options at UNC

UNC Health Care has begun treating patients with the CyberKnife robotic radiosurgery system, a groundbreaking medical device that is designed to treat tumors anywhere in the body with sub-millimeter accuracy.

Patient benefits from the CyberKnife System are significant. It can be used to treat tumors previously considered inoperable, and many CyberKnife treatments can be performed on an outpatient basis. In addition, it is possible to treat multiple tumors at different locations in the body during a single or a limited number of treatment sessions. Patients routinely do not require general anesthesia and recovery periods are short.

Dr. Matthew Ewend, chief of neurosurgery and leader of the UNC Lineberger's neuro-oncology program, said, "It's a great step forward for our patients. We are now able to offer minimally invasive therapy to patients who previously had either no or only high risk treatment options."

Dr. David Morris, director of the UNC CyberKnife Program and UNC Lineberger faculty member, said the CyberKnife System "is able to treat many spinal tumors located in areas that are surgically difficult to access because of proximity to the spinal cord." ●

N. C. Legislators

continued from page 1

in prevention, early detection and therapies that will benefit all patients.

UNC leaders expressed their gratitude for the fund: "We are extremely grateful to the members of the North Carolina General Assembly and Governor Easley for providing this groundbreaking funding. It will allow our university's great researchers to make significant advancements against a disease that has touched the lives of nearly everyone," said Dr. William L. Roper, dean of the School of Medicine and chief executive officer of the UNC Health Care System.

"Our legislators have sent a clear signal about the value they place on building even more momentum in Chapel Hill for strengthening the faculty's capacity to conduct life-changing research and improve patient care," said UNC Chapel Hill's Chancellor James Moeser. "The research fund will further enhance the state's wise investment in the North Carolina Cancer Hospital, the University, the Lineberger Comprehensive Cancer Center and UNC Health Care."

"With the support of the General Assembly for construction of the North Carolina Cancer Hospital in 2004, and now this extraordinary cancer research fund, UNC has been provided an opportunity and a challenge - to become the nation's best university cancer center," said Dr. Shelley Earp, director of UNC's Lineberger Comprehensive Cancer Center.



Dr. Shelley Earp, Anne Wilson, advocate from Morganton, Dr. Kim Rathmell, and Edwina Woodbury, chair of the UNC Lineberger Board of Visitors, gather outside the legislative building before visiting legislators to talk about the proposed fund.

"We must and will develop pathways to move prevention, early detection and therapeutic research into the clinic and the community, the outcome of which will be improved cancer care, grounded in the latest research findings," said Earp.

"As a cancer survivor, the University Cancer

Research Fund makes me optimistic about a solution to cancer," said Kate MacIntyre, a UNC Health Care lung cancer patient who lives in Davidson,

N.C. "The state of North Carolina is putting a stake in the ground, emphasizing the importance of cancer research to make very real progress under a dedicated program unlike any we have ever had. North Carolina is saying 'We can do this'." ●

University Cancer Research Fund

The fund will enable interdisciplinary research in three major areas by:

- creating a statewide cancer assessment and prevention program
- continuing to undertake groundbreaking basic and translational research
- enhancing multi-disciplinary clinical care and research teams.



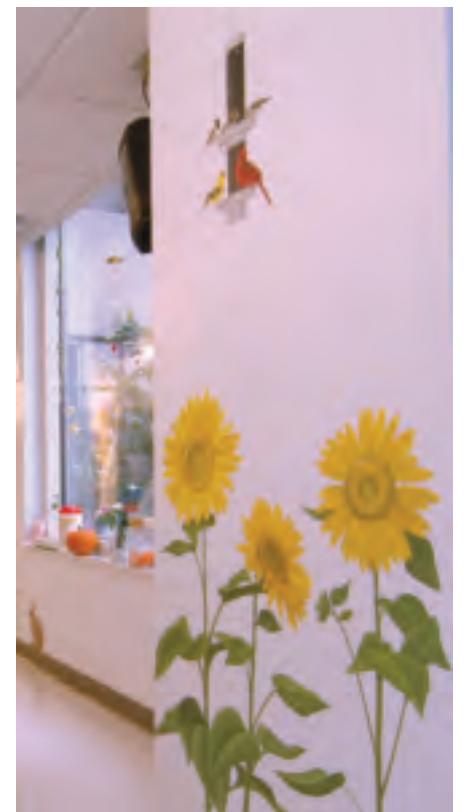
Scenic Murals Brighten Infusion Suite for Gyn Oncology

Patients coming to the infusion area in Gynecologic Oncology have a choice to make when they arrive: do they want to sit in the garden, at the beach or in the mountains?

Realistic wall murals, painted by Raines Thompson and sister-in-law Earle Klutz Thompson adorn the walls, creating a healing environment for patients as they receive their therapy.

The two artists make up Klutz Thompson Designs and have done projects within UNC Hospitals for the past seven years.

Painting the murals took about three weeks, and nurses brought patients in to watch the process (see pictures of the process at www.unclineberger.org). Rabbits, sunflowers, and a birdbath with a bluebird and nuthatch perched on the side are part of the garden landscape. The beach and mountain landscapes are pictured to the left. ●



Profile

As a child in China, Yue Xiong had no plans to become a scientist. "I dreamed of many different types of professions when I was a kid," he says. "A surgeon, a diplomat or an army general, but not a scientist."

Now a professor of biochemistry and biophysics and leader of UNC Lineberger's cancer cell biology program, Xiong believes it was good fortune that his admission scores to Shanghai's Fudan University fell short for acceptance to the math department, one of the top programs in China. Instead, he was admitted to his second choice: biology.

Finding A Path

During a postdoctoral fellowship in the United States, Xiong became interested in how normal cell proliferation is controlled. "It became increasingly clear to me, and to many other researchers in the field, that if we could better understand how normal cells control their proliferation, we could better understand how tumor cells proliferate in an uncontrolled manner," he explains.

At UNC, Xiong's research focuses on cell proliferation control and tumorigenesis. "Our research is directed at understanding how the cancerous tumors are developed and where we could identify a target for therapeutic intervention," he says.

Chronically tumor cell growth is vitally important in understanding the development and

progression of cancer. Nearly one-quarter of deaths in North Carolina are related to the disease.

"Knowing and seeing that our research could directly, and hopefully in the near future, benefit the people in the state, as well as around the country, is one of the most rewarding aspects of my work," says Xiong.

Living The American Dream

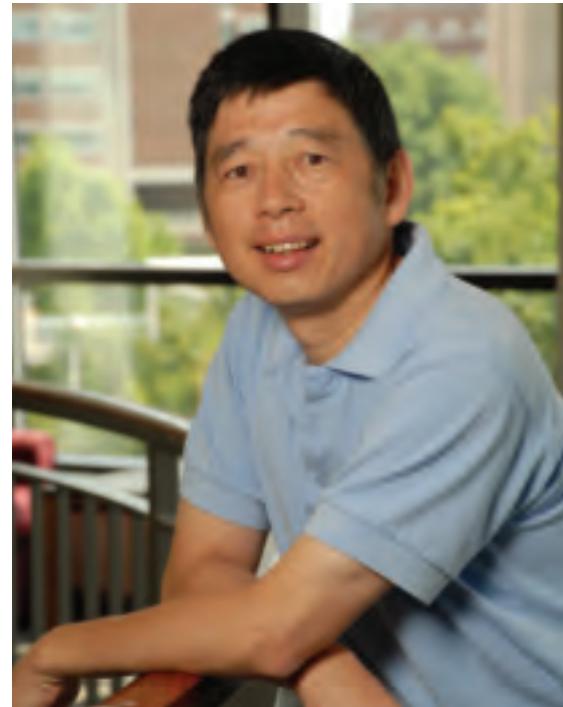
Xiong grew up in the Jiangxi province in the southern part of China in what he describes as extremely poor living conditions.

"Somehow all I remember from those days are the fun, playing and no stress brought on by exams or job anxiety," he says. "This was during a period in China known as Cultural Revolution, when all colleges were closed and everyone went to farms in the rural countryside after graduating from high school."

Xiong's father had planned a career as either a bureaucrat or a college professor. "He was stripped of his profession by the political repression during the years of so-called anti-right movement and then cultural revolution," Xiong says. "Instead, he spent most of his adult life as a farmer."

After receiving a bachelor's degree in microbiology from Fudan University, Xiong completed a year of training in an English School at Zhongshan University in Guangzhou and a year of research experience at the Chinese Academy of Science in Shanghai. He came to the United States in 1984 to begin his doctoral study at the University of Rochester and joined the faculty of UNC in 1993.

"For an immigrant like me, I can't ask for more of the American Dream," Xiong says. "I came here as a poor college graduate with \$500 borrowed from the Chinese government. I received my education here, got a challenging yet fulfilling job, and I am living in one of the 'best places' in the country -- I'd say in the world as well. I am working with something I love very much and getting paid for it, surrounded by wonderful friends and colleagues, and watching my daughter going to college soon. Life is good." ●



Yue Xiong

research Briefs

Defects in critical gene lead to accelerated lung tumor growth

Scientists at UNC Lineberger and Harvard reported that a tumor suppressor gene called LKB1 is mutated in almost a quarter of all human lung cancers. In mice, these mutations result in tumors that are more aggressive and more likely to spread throughout the body.

"Defects in this gene appear to result in a much nastier form of lung cancer, a disease that is bad to begin with," said Dr. Norman Sharpless, an assistant professor of medicine and genetics in the UNC School of Medicine, a member of the UNC Lineberger Comprehensive Cancer Center and a senior author of the study.

The study, published online August 5, 2007, in the journal *Nature*, also presents the first mouse model of the most lethal malignancy in man, a form of lung cancer called squamous cell carcinoma.

Sharpless added, "This mouse model will enable us to determine how this gene is important for lung cancer and to develop therapies targeted in a way that can help human patients."

To determine whether the model mirrors the genetic events of human lung cancer, the

researchers analyzed DNA from non-small cell lung cancer patients treated at UNC and affiliated hospitals.

"Based on this study and ones like it we should be able to sort patients into groups based on exactly what genetic lesion is causing their cancer," said Dr. Neil Hayes, an

assistant professor of medicine in UNC's School of Medicine, a member of UNC Lineberger and co-author of the study. "Then we can make better treatment decisions depending on which therapy is most likely to target that defect."

Sun exposure linked to specific skin cancer gene mutation

New research from the UNC Schools of Medicine and Public Health shows that different subtypes of melanoma are associated with sun exposure. Exposure to sun between birth to 20 years old may increase the risk of melanomas with BRAF gene mutations (about half of all melanomas). This is some of the first data to link early-life sunlight exposure to a specific mutation in melanomas.

"The findings suggest that melanoma subtypes have different causes. This is important for learning more about how to prevent and treat skin cancer," says Nancy Thomas, associate professor of dermatology in the UNC School of Medicine, a member of UNC Lineberger and lead author of the study. She hopes the results will strengthen current recommendations to protect children

from sun exposure.

The findings come from the initial phase of an ongoing study that will ultimately include more than 1,000 patients from the U.S. and Australia.

The study was published in the May 2007 issue of the journal *Cancer Epidemiology Biomarkers and Prevention*.

False-positive mammograms have long-term negative consequences

U.S. women experience about 10 to 15 times as many false positives as European women, more than any other country in the world.

"Women are scared by these abnormal tests, and their feelings of anxiety linger, sometimes for years," said Noel T. Brewer, Ph.D., assistant professor of health behavior and health education. "This kind of stress is unnecessary and unproductive to both their physical and mental well-being." Brewer is a member of UNC Lineberger Comprehensive Cancer Center. As a result of the false-positives, American women were more likely to conduct breast self-examinations, and were more likely to come back on time for their next mammogram.

The findings have implications for health care policy, too. "This study should prompt policy makers to require mammograms to be more accurate," Brewer says. "We also need to have the abnormal mammograms resolved as quickly as possible, because studies have shown that women who get their final results sooner are less anxious."

The results were published in the April 2, 2007, issue of the *Annals of Internal Medicine*.

Coordinating Care for Better Results

Compassion. That's the word Barbara Freeman uses time and again to describe her experience with the UNC Lineberger. When her local doctor detected spots on her lungs, she reviewed several cancer treatment centers. The Pinehurst resident decided on UNC and was ushered into treatment via the Multidisciplinary Oncology Program (MOP) office of program assistants and nurse coordinators for the 13 clinical oncology programs. Started 15 years ago, this group is the coordinating center for patient entering the multidisciplinary cancer site-specific oncology service.

"Whenever I spoke with Dr. Patricia Rivera at UNC Lineberger, I felt as though I was the only one who mattered," says Freeman, a Pinehurst resident with lung cancer. Freeman's chemotherapy and radiation treatment were conducted at her local physician's office, so she didn't have to travel to Chapel Hill. "Dr. Rivera coordinated with my doctor so that I had the best care and the most comfort possible. Nurse Joan Kurczak is as much a friend as a medical professional. I have a heart problem, which complicates my treatment. Joan is on top of my treatment requirements."

Coordinated Care

That's what it's all about, says Bobbi Marks, administrative director of oncology services, who runs the program office. "We understand and appreciate the anxiety one feels with a new

diagnosis," she explains. "We work diligently to bring patients and their families into our center in the best possible timeframe and to create for them a solid evaluation and plan of care."

The MOP expedites access to very specific and specialized care. "The first visit is the one that accounts for diagnosis and treatment plans," Marks explains.



On subsequent visits patients meet with multiple physicians for multiple treatments, often on one day. This high level of coordination allows for the most advanced specialty care for cancer patients. "As a result, what could take a patient weeks to orchestrate happens here within this first very concise consultation. It's one-stop shopping."

Improving Outcomes

In addition to benefiting patients, it also helps physicians in the field who value access to the latest medical treatments. "We want to help providers find a way through a difficult and complicated system," Marks says.

Mark LaVigne, an ear, nose and throat specialist in Laurinburg, N.C., has been working with the MOP program office for 10 years. He describes the team of doctors and nurses as "in tune" with patients' needs, and in tune with those patients' doctors.

"Laura Miller [MOP program assistant] immediately grasps the issues and pulls together the information required," he says. "That makes for good treatment. The MOP is a great resource for me to have for my patients."

"We're here for patients, families and healthcare professionals," said Marks. "Coordinating care while making it easy for everyone- that's our priority." ●

The Multidisciplinary Oncology Program (MOP) team: Front row (left to right): Beth Fogel; Susie Whorley; Joan Kurczak; Sam Sharf. Second row (left to right) Ann Steagall; Tasha Dawson; Amanda Hall; Leslie Williams; Susan Hayden. Third row (left to right): Betty Hinshaw; Laura Miller; Jean Sellers; Aimee Shea; John Pisko; Inetha Cousin; Ava Pettiford; Lisa Licht; and Belinda Gunn.

Lineberger members receive grants

The new \$8 million "Investments for the Future" program, sponsored by the UNC School of Medicine, awarded funding to three UNC Lineberger members.

Improving Palliative Care Quality: develops and tests a model intervention for its impact on the quality of palliative care and expands UNC's capacity for future initiatives in clinical research and training. Project leader: Dr. Laura Hanson, department of medicine, division of geriatric medicine, and co-director of the UNC Palliative Care Program. The Palliative Care Program co-director is Dr. Steve Bernard.

Bringing Genetics to Clinical Medicine: works to close the gap between advances in genetics and their practical application in patient care. Project leader: Dr. Jim Evans, department of genetics, and leader of the UNC Lineberger Clinical Cancer Genetics program.

Outreach Network for Cancer Care and Research: develops a network of cancer centers throughout the state which will provide patients with superior cancer services while undertaking cutting-edge research that translates laboratory discoveries into improved patient- and population-based care. Project leader: Dr. Tom Shea, department of medicine, and director of the UNC Bone Marrow and Stem Cell Transplantation Program.

Protein identified in advanced prostate cancer recurrence

A growth-promoting cellular protein, Ack1, triggers recurrence of advanced prostate cancer in men undergoing drug treatment to shut down their sex hormones, or androgens. UNC Lineberger researchers were the first to make this link.

Because chemotherapy after recurrence extends life by only a few months, the new research, "raises the exciting possibility that we can develop a specific drug against this," said senior study co-author Dr. Young Whang, associate professor of medicine and UNC Lineberger member.

The study appeared in the May 15, 2007, issue of the *Proceedings of the National Academy of Sciences*.

"Our experiments show that this heretofore understudied protein Ack1 may be crucial in at least a portion of these tumor recurrences," explains senior study co-author Shelton Earp, director of the cancer center, Lineberger Professor of Cancer Research and professor of pharmacology and medicine. "The study is telling us this is a target for therapy and perhaps a very important target for therapy."

UNC Study Questions FDA Guidelines for Cancer Drug

Not everyone needs a genetic test before taking the cancer drug irinotecan, and the U.S. Food and Drug Administration should modify its prescription guidelines to say so, according to UNC researchers.

Irinotecan, also known by its brand name Camptosar, is used mainly as a second-line treatment for colorectal cancer. The FDA recommends screening patients for a gene that could make them more susceptible to the harmful

side effects of the drug, the most worrisome of which is neutropenia, an abnormally low number of white blood cells.

UNC researchers analyzed data from nine previous studies of irinotecan. They found that patients who received a medium or high dose of the drug had greater risk of neutropenia if they had two copies of a variation of the gene UGT1A1, known as UGT1A1*28. At lower doses, however, the risk was the same regardless of what UGT1A1 gene the patients had.

"Our review showed that at low doses the drug is well tolerated and can be taken by most people," said Dr. Howard McLeod, senior study author, director of the UNC Institute for Pharmacogenomics and Individualized Therapy, and UNC Lineberger faculty member. "As the dosage increases, genetics become a larger factor in determining what side effects patients experience, and then testing becomes essential."

Dr. Richard Goldberg, study co-author, associate director of UNC Lineberger and physician-in-chief of the North Carolina Cancer Hospital, said, "Studies like this one give oncologists the tools needed to take better care of patients while avoiding tests and expenses that aren't needed."

The authors recommended that the FDA amend the product information for irinotecan to describe the association between irinotecan dose and risk of hematologic toxicity among patients with two UGT1A1*28 genes.

Their findings were published in the August 28, 2007 issue of the *Journal of the National Cancer Institute*.

To read about more UNC Lineberger research, visit www.unclineberger.org/research. ●

Online Communities Provide Information, Solace, Hope

"Right after my diagnosis 11 years ago, I was looking for information on the Internet," explains Deborah Bell of Kansas City, Mo. "I found a listserv about ovarian cancer by chance."

The experience of talking to other women in similar circumstances helped her deal with her own. "Realizing that other people are living with cancer - not dying from cancer - helps a great deal," says Bell, who now serves as the list's co-owner. "It gives hope. This really is a community, with people sharing their lives as well as clinical information."

Web Resources

Online communities are a growing part of the patient care experience, says associate professor of health behavior and health education in the UNC School of Public Health, Kurt Ribisl. "Faced with a recent cancer diagnosis, many patients turn to the Internet for information on treatment options and prognosis," he explains. "The Internet also allows people to give and receive emotional support to help them cope with cancer. Many caregivers also use the Internet to learn more about cancer so they can be helpful."

The most popular online communities (including the one Bell manages) are hosted by the Association of Cancer Online Resources (ACOR). There are about 159 communities posting more than 1 million messages annually.

Ribisl, a member of UNC Lineberger, and a team of UNC researchers recently completed the first large-scale quantitative study of how cancer survivors provide support on cancer-related Internet mailing lists. The results show that the most-discussed topics were treatments and communicating with health-care providers.

"We also found that a relatively smaller proportion of African-Americans were using these

online cancer communities than white cancer survivors," he explains. "It will be important to bridge the digital divide and ensure that all cancer survivors benefit from these resources."

The study was reported in the *Journal of Medical Internet Research*.

Multiple Benefits

Robin Martinez of Denver runs the kidney-onc list. "Our community of patients and caregivers deals with everything from the practicalities to the philosophy of living," she explains. "We share disease information, medical contacts, scientific references and research, clinical trials, success or failure with various treatments, emotional support, coping devices and practical matters. We often form strong friendships -- like a real kinship bond in many cases -- that help us face the crisis of cancer

together, with hope and courage rather than in isolation and fear."

Listserves also help patients become better informed, says Martinez, who joined after her husband was diagnosed with kidney cancer. "Members join without knowing any of the scientific language and end up speaking fluently about their cancer and treatment options within a matter of weeks," she says.

The communities also can serve as match-makers for clinical trials. Martinez found a trial for her husband, Lusindo.

Though Lusindo died in 1998, Martinez continues to participate in the community, now serving as its owner, or manager. "To me, the reward of involvement is knowing that our personal ordeal can help other patients' families have an easier time -- and in many cases, more success." ●



"We often form strong friendships ... that help us face the crisis of cancer together, with hope & courage rather than in isolation & fear."



Dr. Ned Sharpless, associate professor of medicine and genetics and member of UNC Lineberger Comprehensive Cancer Center, joined Dr. Bruce Lyon, Chairman of the Greensboro Golfers Against Cancer, at their August kick-off event. The group has supported Dr. Sharpless' melanoma research the last two years.

UNC Lineberger Welcomes New Board Members

We welcome the following individuals who joined the UNC Lineberger Board of Visitors beginning in July:

Chapel Hill: Becky and Munroe Cobey
Julia Sprunt Grumbles and William Grumbles
Mary Ann and Rodney Long

Charlotte: H. Allen Tate, Jr.

Durham: Vernon Averett
Dale and Jim Strickland

Goldsboro: Charlotte Maxwell Weaver
and Nick Weaver

Greensboro: Cooper Brantley

Rocky Mount: Susan and Wardlaw Lamar

California: Bill and Dana Starling



Betty Ray McCain, vice chair, and Edwina Woodbury, chair of the UNC Lineberger Board of Visitors, at a retreat of the board's executive committee held in August.

leaving a Legacy

Jim Hedrick and his late wife Pansy have been involved with UNC Lineberger Comprehensive Cancer Center for more than 10 years as members of the Board of Visitors. Jim served as Chair of the Board of Visitors from 2000-2005 and received UNC Lineberger's Outstanding Service Award in 2002.

When Pansy was diagnosed with lymphoma in the early 1990's, they saw firsthand the great strides that UNC Lineberger was making in the fight against cancer. Jim says that Pansy directly benefited from all the research and clinical trials available at comprehensive cancer centers like UNC Lineberger.

After Pansy's death in 1999, Jim decided to honor her legacy further by creating a bequest in his will that will benefit UNC Lineberger. He realizes that the key to saving the lives of his family and friends is the groundbreaking



Jim Hedrick

research being conducted at UNC. He wants UNC Lineberger researchers and physicians to have the resources they need to develop innovative therapies and provide leading-edge treatments to those suffering from this dreaded disease as quickly as possible.

A bequest to UNC Lineberger can be made for a specific amount, for a percentage of your estate, or even for a portion of the

residual of your estate after you have made bequests to your family and others. You may make a bequest when you execute a new will or you can add it to an existing will through a codicil. For more information, please call Debbie Dibbert at 919-966-5905. ●

The Super Colon Visits Chapel Hill

A 20-foot long, 8-foot high replica of the human colon - Super Colon - visited Chapel Hill's Meadowmont Village on May 18-19 when more than 900 people toured the exhibit. UNC nurse volunteers staffed the exhibit and answered questions and handed out information about colon cancer prevention and screening. On Saturday, children's activities included a visit from Calvin the Clown as well as a face painter and a moonwalk, while the adults enjoyed the sounds of Chapel Hill band, the Nomads.

Thanks to organizing committee members Dave Hill, manager of the Meadowmont Community Association; Gary Humphrey, oncology district manager for sanofi aventis; and Janis Tillman, owner of Moondance Gallery in Meadowmont Village and longtime UNC Lineberger volunteer.

The Super Colon visit was sponsored by UNC Health Care and UNC Lineberger Comprehensive Cancer Center. The Super Colon was provided by The Cancer Research and Prevention Foundation through an educational grant from sanofi aventis. ●



As these youngsters explored the Super Colon, they were able to get an up-close look at healthy colon tissue as well as colorectal polyps.

volunteer Spotlight

Robin Hutchison is a breast cancer survivor and an advocate for UNC Lineberger Comprehensive Cancer Center. Robin was diagnosed with cancer at the age of 48 and although her mother and grandmother had both been diagnosed with breast cancer, Robin did not think she would get it in the prime of her life, especially as an active mother of three. Robin went through an aggressive regimen, which included chemotherapy, radiation and surgery as part of her treatment. From the beginning, Robin felt she was part of a "team."

Now, as a six-year survivor, you can find Robin continuing to be involved with her "team" by supporting UNC Lineberger Comprehensive Cancer Center on several fronts as a volunteer. Robin is a member of the Breast Center Advisory Committee where she participates in bi-annual meetings to stay informed about the most up-to-date cancer detection and treatment trends. In addition to her involvement with the Breast Center Advisory Board, Robin has helped Lineberger raise money by telling her story in letters to potential supporters. She also volunteers her time with Lineberger special events, like *Tickled Pink*, an all-pink series of events to raise awareness and funds for women's cancers.

Robin is the Marketing Director for *Carolina Parent Magazine*, where she has worked since 1993. When Robin isn't volunteering to help Lineberger she spends her spare time reading, cooking, exercising and watching movies at the theater. UNC Lineberger is lucky to have an advocate such as Robin. We are grateful for her efforts and continued support. ●



Robin Hutchison

"Hugh Morton's North Carolina" notecards on sale to benefit UNC Lineberger Comprehensive Cancer Center



Cards feature four North Carolina landscapes by renowned photographer Hugh Morton, and are sold in packs of 12 (with 12 envelopes) for \$20. The notecards are available exclusively through UNC Lineberger, and make a wonderful gift for any occasion. To place your order, please visit www.unclineberger.org/gift/events/notecard.asp or call the Office of External Affairs at 919-966-5905.



Komen Race 2007

The 2007 Komen Race was a huge success. UNC's team was 283 strong, including more than 70 Sole Sisters led by captain and UNC nurse practitioner Judy Swasey. UNC breast cancer patient, Karla Werner, with her husband, Frank (right) and trainer Joey Anderson (left). Karla ran the Boston marathon in 2006 after having just begun chemotherapy and won a finisher's medal for her amazing time. Karla is a 20-year runner and recent marathoner. To read more of Karla's story, visit www.nccancerstories.org.

Coast to Coast for Cancer

Seven young men from Chapel Hill and their two team leaders rode 3,700 miles across the United States this summer to raise awareness of and funds for cancer research at UNC Lineberger.

Sincere thanks to: Kit Brown, David Hare, Heath Hudgins, Matt Moulton, Daniel Pearce, Angelo Sharp, Adams Conrad, and their team leaders, Brian Burnham and Chris Allen, for their selfless spirit and tremendous effort.

They touched their tires in the Atlantic Ocean on June 10 in Aberdeen, Maryland and in the Pacific Ocean on August 17 in Anacortes, Washington. Naming the ride WaBu (Washington or Bust), these young men braved fierce lightning, hordes of mosquitoes, and extreme heat during their journey, talking within communities across the United States about the purpose of their trip. In doing so, they have raised close to \$17,000 for cancer research at UNC Lineberger.

They are a credit to their wonderful families and to North Carolina. Cancer patients and their families draw courage and hope from their journey. We salute these inspiring young men and appreciate enormously what they have accomplished. ●



The WaBu Boys in Aberdeen, Maryland on June 10, as their journey began.

3,700 miles and over two months later at the Pacific Ocean in Anacortes, Washington. Pictured left to right: Adams Conrad; Angelo Sharp; Heath Hudgins; Brian Burnham; David Hare; Daniel Pearce; Matt Moulton; Chris Allen; and Kit Brown.



calendar *of events*

OCTOBER 2007

1st Tickled Pink at Twilight for Women's Cancers, Top of the Hill, Chapel Hill, NC

2nd Tickled Pink Women's Cancers Luncheon, Squids, Chapel Hill, NC

4th Tickled Pink Women's Cancers Luncheon, Galloway Ridge, Pittsboro, NC

12th Third Annual Roy Williams' Fast Break Against Cancer, Smith Center, Chapel Hill, NC

NOVEMBER 2007

28th Norma Berryhill Distinguished Lecture, Dr. H. Shelton Earp, Carolina Club, Chapel Hill, NC

JANUARY 2008

19th Lineberger Club Luncheon, Carolina Club, Chapel Hill, NC

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