

# Cancer Lines

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

Spring 2004



## Researchers Breathe Life into Anti-Tobacco Initiatives for Young People

### Putting Out Youth Tobacco Use

Reducing and preventing tobacco use is a touchy subject for North Carolinians. Long before becoming famous for superior collegiate basketball, North Carolina was known simply as Tobacco Road.

Cigarette smoking is the nation's leading cause of premature sickness and death, accounting for over 400,000 deaths each year. More than 47 million adults and 4 million teenagers smoke.

The use of tobacco is particularly troubling among young people. Research from the Centers for Disease Control and Prevention found that every day more than 4,000 Americans between the ages of 12 and 17 try their first cigarettes. And while smoking is declining among all other age groups, it remains high among 18 to 24 year olds, rising 23 percent between 1991 and 2001.

Researchers at UNC Lineberger are helping to combat these rising statistics. Here's a look at some of the tobacco-related projects under way.

### Influencing Childhood Decisions: Stopping Youth Smoking Before It Starts

Evidence from an eight-year study by Christine Jackson, associate professor of health behavior and health education, showed that the more cigarettes a child smoked at an early



Kurt Ribisl and UNC Tobacco Use and Prevention and Control Training Project members look over tobacco products obtained by underage youth over the Internet. Pictured above left to right: Kurt Ribisl, Rebecca Williams, Annice Kim, and Sarah Pearcy.

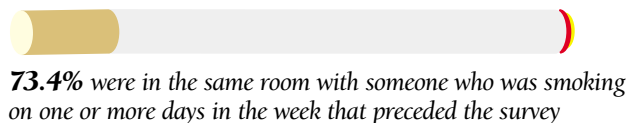
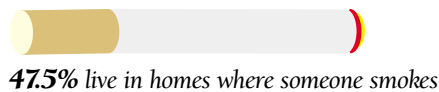
age, the more likely they were to be a daily smoker as a teen. The study included 737 children from central North Carolina. Their cigarette use was measured at ages 8 and 10 and again at age 17.

"This study was the first to examine whether cigarette use in early childhood was associated with all levels of smoking in adolescence or with nicotine-dependent (daily) use specifically," Jackson explains. The study investigated what level of cigarette use in childhood increased the odds of smoking in adolescence.

Among those who did not smoke any cigarettes in early childhood, 10 percent became daily smokers by age 17, whereas 39 percent of those who smoked more than 20 ciga-

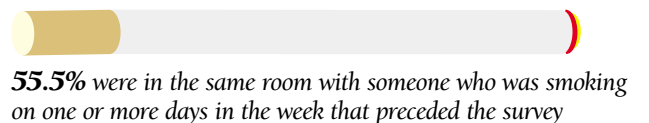
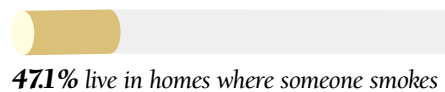
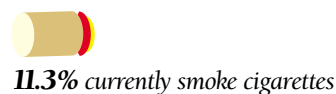
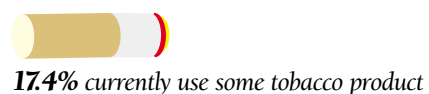
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### NC High School Students Tobacco Use



Source: 2001 NC Youth Tobacco Survey

### NC Middle School Students Tobacco Use



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# Director's Message



Dr. H. Shelton Earp, III

Every five years, the National Cancer Institute evaluates the progress of each comprehensive cancer center and adjusts the federal budget supporting the Center's research and infrastructure. This so-called NCI core funding is one of the largest grants at UNC Chapel Hill, and the process, simply because of its importance, is a "nail biter."

To prepare for this five-year review we initiated a strategic planning process.

During the last twelve months our program leaders involved virtually all 235 Cancer Center members in a stimulating exercise to plot the course of cancer discovery at UNC. First, we challenged the faculty to think broadly about what discoveries and strategic directions are likely to make an impact on cancer over the next five to ten years. Next, we considered what we at UNC do best and how we could apply our strengths to the faculty's prediction of pivotal and strategic directions. Lastly, we asked ourselves whether there are some areas that are just so important that we need to build, if necessary from scratch, to supplement our current strengths.

What makes our Cancer Center and this planning process so unique is the tremendous breadth of our membership; they represent so many disciplines across societal and biomedical research. If you were to tour the UNC campus to find Cancer Center members, you would start near the arboretum at the Department of Psychology, turn left at the Old Well to walk through Polk Place with the School of Information and Library Science on your left and the Schools of Journalism and Computer Science on your right. Then you would wind

up Columbia Street past Chemistry, Biology, the Schools of Pharmacy, Nursing, and Public Health, before turning on Manning Drive past the home of one of the greatest medical sciences faculties in the country, and end up at the door of our clinical facilities at UNC Hospitals.

It is our goal to combine all these strengths and be a major contributor in the national and international fight against cancer. The first step was our completed 10-page strategic plan; resulting from the above process; the second step, an NCI grant request, extolling our virtues and laying out an increased budget in a "succinct" 1,700 page document, weighing 36 pounds, and measuring 701 cubic inches. On May 26, some of the nation's best scientists will come to Chapel Hill to assess our strategy for the next five years. We are confident that we have right stuff, and we will let you how we do.

## The New NC Cancer Hospital: A Growing Need

Speaking of those clinical facilities, the number of cancer patients coming to UNC Lineberger seeking treatment is increasing dramatically. We appreciate their confidence and trust in our physicians, nurses and our multidisciplinary approach. They love the care that they receive, but not the facilities in which it is delivered.

Many of the advances in cancer diagnostics and therapy you learn about from the media are available at UNC, but it's difficult to provide leading-edge technology and therapies in a clinical center occupying a vintage 1950's tuberculosis sanatorium facility. We have renovated as much as we can to make the space safe and functional for our staff and patients, but we're out of room. We need a new facility!

As the public cancer center for the people and state of North Carolina, we hold ourselves to a high standard of care; achieving this goal is increasingly difficult in our antiquated building. Our cancer patient numbers have in-

creased 35 percent in the last six years, and as the population of our state grows and grays, those numbers will rise significantly.

## The New Hospital:

How would it benefit North Carolina citizens?

- more room for a growing patient

population

- specially designed facilities for high-technology tumor imaging, genetic analysis, and novel treatments
- incorporating amenities and support services for all patients.
- enhanced clinical research and innovative care options
- teleconferencing facilities to include community-based physicians in treatment planning for their patients, allowing most treatments to be continued in their home communities.

- pairing cancer care with a preventive clinic focused on surviving patients and their families as well as high-risk individuals and their families

A new NC Cancer Hospital will harness the power of genetics and technology, the foundation of the future individualized cancer care. In the hands of skilled and compassionate physicians, these developments will drive both the standard of care and the clinical research agenda at world-class institutions. The NC Cancer Hospital, complete with a nationally recognized clinical and prevention research agenda, will bring this to all citizens of North Carolina.

## Leadership Change at UNC Health Care

Ending on a personal note I will certainly miss working with Jeff Houpt, my Dean and Health System CEO for the last seven years. Jeff's legacy of facility improvements is all around us and his outstanding leadership appointments have helped build a world class cancer center. At the same time I am very pleased with the appointment of Bill Roper as Jeff's replacement. In the past, Dr. Roper headed both the nation's Medicare program and Centers for Disease Control and Prevention in Atlanta. For the last seven years he was a great Lineberger friend in his role as Dean of the UNC School of Public Health. He is determined to expand on Jeff Houpt's legacy, bringing the best in prevention, early detection and health care to North Carolina. ●



UNC Lineberger is designated a comprehensive cancer center by the National Cancer Institute.

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Dr. H. Shelton Earp, III, Director  
Dr. Joseph S. Pagano, Director Emeritus  
Debbie Dibbert, Director of

External Affairs  
Dianne G. Shaw, Director of  
Communications/Executive Editor  
Margot Carmichael Lester, Editor

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**UNC Lineberger  
Comprehensive Cancer Center**  
CB# 7295  
School of Medicine  
University of North Carolina at  
Chapel Hill  
Chapel Hill, NC 27599-7295  
(919) 966-3036  
<http://unclineberger.org>

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## UNC Lineberger Multi-disciplinary GI Team Use Innovative Research to Treat Rectal Tumors

About 40,000 people develop rectal cancer in the United States every year; however, rectal cancer therapy is currently less than ideal, concedes Ben Calvo, chief of the division of surgical oncology and GI cancer program leader for UNC Lineberger. Although substantial progress has been made, about 40 percent of patients with rectal cancer will eventually die of their disease, and many more will have substantial side effects from the therapy.

In the past, most patients with rectal tumors close to the anus required an abdominal perineal resection, where both the rectum and anus were resected and resulted in patients having a permanent colostomy. Treatment with a combination of radiation and chemotherapy prior to surgery can



UNC Lineberger GI cancer experts discuss the protocol. Left to right: Drs. Joel Tepper, Bert O'Neil, Ben Calvo, H.J. Kim and Michael Meyers.

reduce tumor size in about 30 percent of patients and more frequently allows for operations where the anus is preserved, thus obviating the need for a colostomy—surgery to form an artificial anal opening in the body from the colon.

The UNC Lineberger multidisciplinary GI cancer team includes medical oncologists (Richard Goldberg, Steve Bernard, Bert O'Neil), surgeons (Ben Calvo, H.J. Kim, Michael Meyers), radiation oncol-

ogists (Joel Tepper, Lav Goyal), and laboratory scientists (Chuck Perou, Al Baldwin). One of the main research objectives for this team is to increase the percentage of tumors that will shrink with combination chemo and radiation treatment. This would improve the chances of rectal preservation as well as maintaining the function of surrounding organs such as the bladder and sexual function.

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## Anti-Tobacco Initiatives

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rettes as young children became daily smokers. “This study provides important prospective evidence that relatively small increases in the number of cigarettes smoked during childhood are associated with substantial increases in the proportion of youth reporting smoking at late adolescence,” she says. The study is also characterizing the relations between parental smoking habits and early childhood smoking.

### Surfing for Smokes

Another concern: kids’ access to cigarettes on the Internet. Weak or nonexistent age verification methods make it easy for youngsters to make illegal purchases. Kurt Ribisl was the first researcher to scientifically investigate Internet cigarette sales to minors. Ribisl is assistant professor of health behavior and health education in the School of Public Health and program director for the UNC Pre-doctoral Tobacco Use Prevention and Control Training Program.

His study employed four children aged 11 to 15 whose activities were supervised by adults. “The kids made 83 purchase attempts, paying by credit card 47 times and by money order 36 times,” Ribisl explains. “The Internet vendors sent a total of 1,650 packs of cigarettes to these underage youth—and age was never verified for any of them.”

So why not shut down these vendors? Simple, Ribisl says. “There’s no federal law that bans Internet and mail order cigarette sales to minors and only six states prohibit it. Thus, none of the Web sites in this study was breaking any federal laws by selling to children.

“Our study clearly shows that Internet cigarette vendors are not adequately verifying the age of their customers and that federal action is urgently needed. Pornography sites probably do a better job of verifying the ages of their customers than Web sites selling cigarettes.”

### Youth Empowerment Programs

Smoke-free environments are crucial to reducing and preventing tobacco use among teens. That’s the principle behind the Tobacco-Free Schools (TFS) initiative. According to the Centers for Disease Control and Prevention, a TFS “bans all tobacco use by students, all school staff, and visitors on school property, in school vehicles, and at school functions away from school property.”

Kurt Ribisl is involved in this effort as well. “Studies have shown that school smoking restrictions are worth pursuing. The student smoking rates at schools that have and enforce smoking restrictions are 11 percent lower than at schools without smoking restrictions,” says Ribisl, principal investigator for the NC Youth Empowerment Study (NC YES), a research project designed to evaluate youth-led, adult-supported programs that create effective policies and activities to reduce tobacco use.

Unfortunately, only 16 percent of NC school districts are smoke-free, says Ribisl. To improve that number, NC YES examined how 15 districts secured passage of 100 percent tobacco-free school policies. Those tactics will be shared with other schools in an effort to improve their efforts at passage.

## Tackling Smoking

Smoking at high school athletic events is also targeted via the Tackle Smoking Project. This project, led by Eric Pevzner, a doctoral student in health behavior and health education in the School of Public Health, examines TFS compliance at football games. On average, observers recorded far fewer instances of smoking at games at TFS schools than they did at non-TFS schools. The lower rate is

attributed in part to no-smoking signs and public announcements in stadiums to inform spectators of the policy.

Pevzner has expanded the study to determine if supplemental signage, public announcements and warnings by security staff will decrease the amount of smoking and exposure to secondhand smoke at high school football games. ●

## Activist shares life story, anti-tobacco message with kids

Gary Miner, a cigarette smoker of over 35 years, developed throat cancer in 1999. But even after his initial diagnosis and a grim forecast, Miner continued the habit—or addiction, as he likes to call it.

It wasn’t until he entered UNC Hospitals for his laryngectomy in 2000 that Miner decided he needed to change. He smoked a pack of cigarettes before leaving for the surgery, but once he set foot into the facility, his attitude changed.

Miner’s surgery removed his voice box and half of his throat, taking away his ability to talk without the aid of an electronic voice box, as well as his senses of taste and smell.

The combined impact of these physical changes compelled him to become an advocate for tobacco use prevention.

“I had a drive that just kept on eating at me,” Miner said. “I knew one day I’d leave work and speak to every kid and talk to them about the hazards of tobacco.”

Miner left his job as director for the Marine Corps’ East Coast Regional Development Center and pursued his new career. He traveled throughout the state with his wife, Janet, promoting his own tobacco cessation program.

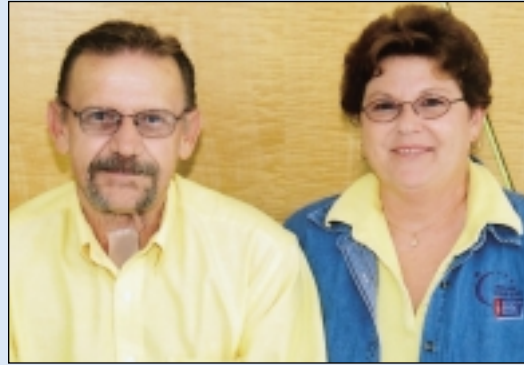
“The school kids told me I had a great message, but needed to do something about it,” Miner said. “During our talk, they said we should have started the program yesterday.” As a result, he founded Students Teaching

Resistance Information 2 Kids Everywhere (Strike2) for students in Onslow County.

Now in its third year, Strike2 has trained 46 high school students and hopes to expand to all eight Onslow County high schools. Students at each high school educate children in

middle and elementary schools and produce programs to spread the word.

When he can, Miner attends the educational sessions. To drive his point home, he struggles for breath as he presses a rubber valve in his throat to activate his



Gary and Janet Miner

voice box, which produces a startling sound. The kids are always speechless.

Strike2 is having an impact. The group created an anti-tobacco public service announcement that began airing on Jacksonville-area television stations in March and convinced the Onslow County board of education to declare its district smoke-free.

With the program in full swing, Miner is spreading his influence to a wider audience. He and Janet are back on the road, traveling throughout North America to reach more young people with his message. Last year, they visited schools in 32 states and Canada.

Miner sees his experience with throat cancer as an opportunity to keep others from similar outcomes.

“All we’re trying to do is deliver a message that tobacco can and will harm your body,” Miner says. “Why take the chance?”

## UNC Lineberger has changed its web address



Our new address is [www.unclineberger.org](http://www.unclineberger.org).

The old address (<http://cancer.med.unc.edu>) still works, but we thought the new address might be easier to remember.

# Profile

“Try to enjoy what you’re doing every day you’re doing it.”

That’s the philosophy Carolyn Sartor brings to her work as an assistant professor of radiation oncology at UNC Lineberger. Sartor’s work focuses on the epidermal growth factor receptor (EGFR) family and the role these proteins play in breast cancer development and its response to radiotherapy.

Sartor enjoys the challenge of understanding ways to treat breast cancers with less treatment. “It’s fascinating to learn and understand how this cancer works and try to out-think tumor cells,” she says. “But day to day, it’s the interaction with the patients I like the most.”

## Less May Be More

She designed and runs a Phase II clinical trial to investigate the safety and efficacy of the anti-HER2 antibody, Herceptin, as a radiosensitizing agent in the treatment of patients with locally advanced breast cancer. Sartor also is exploring the efficacy of other EGFR family member modifiers as radiosensitizers in preclinical models with the goal of introducing new EGFR family kinase inhibitors in clinical trials in combination with radiotherapy.

“We’ve found that some tumor cells are more sensitive to radiation with Herceptin,” she explains, “so we’re working with new inhibitors in the lab

and in trials with patients who have the most aggressive breast cancers, despite having full surgical, chemo and radiation treatments.”

## Navigating Medicine

The daughter of a systems analyst/home-maker and an engineer, Sartor says, “Medicine was always held up to be an honorable profession. That reputation pulled me in more than anything.”

Though always interested in medicine as a career, Sartor didn’t originally pursue oncology. “I was intrigued by neurosurgery, mostly because I’d never met or seen a neurosurgeon,” she admits.

She studied biomedical sciences in college at the University of Michigan and decided on oncology there. That’s also where she met her husband, Nick, during college orientation.

“We were hating the winters,” she recalls. “We went to a movie with a leader about North Carolina.” Two things about the state were hard to resist: “the phenomenal experts in my area like Ed Liu, Bev Mitchell and Shelley Earp; and great sailing.”

An avid sailor, Sartor has three boats and sails whenever possible. She and her husband spent a year sailing the inland waterway from Michigan to Florida. Her ideal trip: “Sailing the coast of Spain. But I also love the Intracoastal Waterway.”



Carolyn is shown here with Dr. Shelley Earp, Lineberger director, and Nick Valvano, CEO of the V Foundation. See article on page 8 for additional story on The V Foundation – a Slam-Dunk for Cancer Research.

## Local Angle

Though internationally noted, Sartor’s research has a lot of value here in the state. “There are a lot of patients in North Carolina with locally-advanced disease that is less likely to be controlled with standard therapy,” she explains.

In 2004, the American Cancer Society estimated 6,000 North Carolina women would be diagnosed with breast cancer and 1,100 will die from it. “Many women don’t have access to radiotherapy centers, so a lot of people don’t get appropriate therapy,” she explains. Some can’t afford to travel to the centers, others can’t afford to miss work.

“If we can come up with safer, better ways to treat these people with shorter radiation therapy courses, it could make a huge difference.” ●

# Briefs

## Combination Treatment Helps Patients With Advanced Colorectal Cancer

Results of a five-year study of 795 advanced colorectal cancer patients show that a new combination of chemotherapy drugs, known as FOLFOX 4, outperforms the standard chemotherapy treatment.

Patients receiving the new combination lived an average of 19.5 months after beginning treatment, the study found, compared to 14.8 months for patients receiving the standard IFL treatment. FOLFOX 4 patients also had fewer serious side effects such as infections, diarrhea and vomiting and severe hair loss.

FOLFOX 4 is a chemotherapy regimen including the recently approved drug oxaliplatin (Eloxatin) combined with 5-Fluorouracil. IFL is a treatment which uses the chemotherapy drugs irinotecan (Camptosar, CPT-11) with 5-FU and leucovorin.

“This is the greatest increase in survival time recorded to date with a new treatment used by

patients enrolled in a large randomized study of colorectal cancer in the United States,” says Richard Goldberg, the study’s lead researcher, and the Lineberger Center’s associate director.

“Based on these findings, we conclude that the FOLFOX 4 treatment should be considered as a first-line treatment over IFL and IROX for patients with advanced colorectal cancer.”

The phase-3 clinical study was sponsored by the National Cancer Institute and conducted by the North Central Cancer Treatment Group, based at the Mayo Clinic in Rochester, Minn.

## Study Identifies Key Step Allowing Cells To Migrate

Lineberger researchers discovered a prime regulator of the mechanism by which human cells migrate in health and in illness, a process crucial to sustaining life. Their work helps explain how cells can stick to a surface long enough to pull themselves and move forward and then release that grip so that they can continue and not be anchored to one spot. Understanding the complex cascade of molecular events could become a key to solving the mystery of how to stop cancer cells in their tracks, like nailing shoes to the floor.

Cai Huang, a UNC graduate student in cell and

developmental biology, led the study which was published in the journal *Nature*. He and colleagues showed for the first time that an important enzyme known as JNK, which is involved in many cell regulatory pathways, also controls a central and complex step in the biochemical process.

“Cell migration is involved in a variety of normal and pathological events in life, including embryo development, wound healing and the abnormal, life-threatening movement of cancer cells that doctors call metastasis,” explains co-author Ken Jacobson, professor of cell and developmental biology and Lineberger member. “Cai’s work demonstrates how phosphorylation of a single serine residue of an important protein component of cell adhesion, paxillin, can regulate cell migration.”

The study’s other co-authors are Lineberger member Michael Schaller, professor of cell and developmental biology; Zenon Rajfur, research assistant professor of cell and developmental biology; and Christoph Borchers, assistant professor of biochemistry and biophysics and faculty director of the UNC Proteomics Core Facility.

## Study Finds Racial Differences In Survival Rates After Prostate Cancer Treatment

A new study shows black men tend to have poorer overall survival rates than white men after being treated for localized prostate cancer, with the great-



# Cancer Patients Seek Answers, Support on the Web

Knowing as much as possible about disease, treatment and lifestyle changes is crucial for cancer patients and those close to them. To augment the information they receive from their care teams, many patients turn to the Internet for help. Yet little is known about which “eHealth” resources they use, how they use them or whether and how patients benefit from them.

Patients using the Internet report positive health effects ranging from decreases in pain and inappropriate health care use to improved quality of life through decreased anxiety and/or depression. Using Web-based resources also appears to improve patients’ knowledge and increases their confidence in asking questions. This gets them more involved in their treatment and care.

Caregivers, friends and family also may benefit from the using the Internet. Online communities help these people deal with their own depression and create an opportunity to connect with others going through similar experiences related to quality of life, coping with loss, etc.

“Given the immense size of the online health support community, it’s time to assess its impact on participants,” says Barbara Rimer, professor of Health Behavior and Health Education (HBHE) and deputy director of Population Sciences at the Lineberger Center.

est disparity among men who undergo surgery.

The study’s lead author is Paul Godley, associate professor of medicine and epidemiology at the University of North Carolina at Chapel Hill, Lineberger member and leader of the UNC Program on Ethnicity, Culture and Health Outcomes. He was joined by researchers from UNC’s schools of medicine and public health, Medical Review of North Carolina and Massachusetts General Hospital.

The study involved 5,747 black men and 38,242 white men with clinically localized prostate cancer. Researchers found that among those who had surgery, the median survival time for black patients was 1.8 years less than for white patients (10.8 years versus 12.6 years, respectively). The differences in median survival times between black and white patients were smaller among patients treated with radiation therapy (.7 years) and among patients who had non-aggressive therapy, also called “watchful waiting” (1.0 years).

“Figuring out why survival among blacks is worse and why surgical patients have the largest disparity will take more research,” Godley says. Several reasons could account for these disparities. One is that black patients had reduced access to specialized radiation therapy, which is preferred over surgery for patients in whom locally advanced cancer is suspected. Another possible explanation is genetic differences between races in response to prostate cancer treatment.

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## Online Communities

“To assess the impact of ACOR listservs on chronic disease management for cancer patients, we are using a multi-method evaluation based on recommended Internet research procedures,” she explains.

ACOR is the Association of Cancer Online Resources, Inc., an Internet-based clearinghouse for cancer information. Its listservs deliver about 1.8 million messages a week to cancer patients and others.

Rimer’s team consists of partner Gilles Frydman, founder and president of ACOR; Michael Bowling, assistant professor of HBHE; Andrea Meier, research assistant professor, UNC School of Social Work; Carol Golin, assistant professor, UNC School of Medicine and HBHE; Kurt Ribisl, assistant professor, HBHE; Bernard Glassman, owner, 3am Communications; Tara Strigo, project manager; Michael Forlenza, post-doctoral research associate; and James Rosen, social research assistant, UNC Lineberger.

## Why and How

The Health eCommunities study, which will be complete in mid-2006, addresses several priority areas:

- Factors influencing use of online interventions over time
- Effects of patient-provider interactions on the use of eHealth interventions
- The benefits and drawbacks of participation in listservs

The study focuses on nine listservs that function as electronic support groups (ESGs) for patients and others (family members, caregivers, friends, etc.). The primary focus will be on patients, but data will be collected on “others.” About 3,360 new patients will be studied, along with a similarly-sized population of “others.”

“If we learn how quality of life is enhanced for



participants, we can promote that knowledge to health providers and encourage them to offer ‘Internet prescriptions’ — and other referrals — to the listservs,” Rimer says. “But what if we learn that there are some downsides of participation, for example, that some patients uncritically seek dangerous alternative therapies as a result of their participation? That, too, could be vital knowledge. By the way, we believe this is unlikely.”

## Exemplary Work

The study was one of only 18 projects awarded \$4.8 million in grants by The Robert Wood Johnson Foundation through its Health e-Technologies Initiative (HeTI). The program seeks to evaluate and support the use of interactive technologies to improve health behavior and disease management

“We were particularly interested in this project because it’s providing a qualitative and quantitative analysis of the discourse on listservs and the impact of the communication,” said David Ahern, HeTI’s national program director. “ACOR is an impressive service, particularly for rare cancers, providing support, guidance and information. So an analysis and evaluation of the impact of ACOR listservs in cancer care is very important.” ●

## Carolyn Christoph (Chris) Johnston Endowment Established

The Carolyn Christoph (Chris) Johnston Endowment for New Ideas in Cancer Research was established by Charles W. Johnston of Chapel Hill, NC in February 2004 to target research impacting ovarian and other women’s cancers. Mr. Johnston decided that this would be a meaningful way to honor his late wife’s memory and help find a cure for cancer with a living, permanent memorial.

Chris Johnston had been a nurse for many years at UNC Hospitals and died of ovarian cancer in 1994. She had been a patient of Dr. Butch Fowler. Chris was diagnosed in 1992 and given three weeks to live, but opted for more aggressive treatment (taxol) and survived two more years.

If you are interested in contributing to this fund, please contact Debbie Dibbert at 919-966-5905.



Charles Johnston and his late wife Chris.



# Lineberger



## NCCU Holds Fifth Annual Walk to Cure

North Carolina Central University held its fifth annual Walk to Cure on Saturday, January 31. The walk, sponsored by the Iota chapter of Phi Beta Lambda Inc., has raised over \$2,800 for breast cancer research at UNC Lineberger.



## Zeta Tau Alpha 5K Raises Funds for Breast Cancer Research

The UNC-Chapel Hill chapter of Zeta Tau Alpha Sorority held its 15th annual Franklin Street 5K. UNC Lineberger is one of the recipients of funds raised by the race. Shown here are Dr. Michael O'Malley, associate director of UNC Lineberger, and Paige Vickory, 5K chair.



## UNC Breast Center Turns 10

November 10-14, 2003 was the 10th birthday of the UNC Breast Center. This clinic was one of the first to be organized in a multidisciplinary way, and the successful approach was then used to organize most of the other cancer clinics.

To celebrate the occasion, banners flew on Franklin Street, cake was served by volunteers in all the clinics and the departments of Surgery and Medicine held Grand Rounds titled: "The UNC Breast Center: A Decade of Progress."

Pictured are speakers and Breast Center faculty: (left to right) Dr. Mark Graham (Medical Oncology), UNC Breast Center co-leader; Cary Oncology; Dr. Carolyn Sartor (Radiation Oncology), UNC Breast Center co-leader; Dr. Lisa Carey (Medical Oncology), UNC Breast Center co-leader; Dr. Nancy DeMore (Surgical Oncology); Dr. David Ollila (Surgical Oncology), UNC Breast Center co-leader; and Dr. Ben Calvo (Surgical Oncology), division chief for Surgical Oncology.



## Odum Lab Dedication

Family and friends joined to dedicate the Jane Lowe Odum Laboratory at UNC Lineberger Comprehensive Cancer Center on October 13, 2003. Fountain Odum, a loyal advocate and supporter of the Cancer Center, sponsored a very successful benefit golf tournament in Charlotte for a number of years to raise money for UNC Lineberger and to honor the memory of his late wife Jane who died of pancreatic cancer. *Left to right:* daughter, Amy Williford; Fountain Odum, holding grandson William; son, Matthew Odum; and son, David Odum.

## McNeills Committed to Cancer Research

Ronald and Cyndi McNeill, members of the UNC Lineberger Board of Visitors from Wilmington, NC, are strong supporters of the Cancer Center and its nationally recognized research program. In January, they made a leadership gift of \$100,000 to support cancer research and the development of novel therapies. Discovery is our best hope and this is an exciting time for cancer research. UNC Lineberger researchers are constantly generating new ideas for preventive, diagnostic, treatment and symptom management for all types of cancer. The Ronald and Cyndi McNeill Fund for Cancer Research will have an immediate impact on these efforts to discover new and more effective treatments to fight and conquer cancer.



# Scrapbook



## Meeting the Marrow Donor Who Gave David Harrell His Life Back

Cancer patient David Harrell from Ocean Isle Beach, NC, met his transplant donor Kim Seibert on December 5 when Kim and her husband, Jeff, flew from Barton City, Michigan, to NC to meet David, his wife, Jeannie and their family, including daughters Kelley Tucker of Winston Salem and Shelley Roupas of Fayetteville. Patients may not meet their donors until a year after the transplant. They all came to UNC Hospitals for a visit and a party to celebrate the successful transplant and to thank Kim for being a donor. *Left to right:* David Harrell, Kim Seibert, and Dr. Tom Shea, director of the UNC Bone Marrow and Stem Cell Transplantation Program.



## Sisters Network Holds Walk and Health Fair to Raise Awareness of Breast Cancer

The recently formed Sisters Network, a support and outreach group for North Carolina African-American breast cancer survivors, held a walk and health fair for its members and the community on October 25, 2003. *Pictured (left to right) are:* Dr. Mark Graham, UNC oncologist; Carolyn Thornton, co-chair of the "Gift for Life" Walk; Mary Jackson, chair of the "Gift for Life" Walk and UNC Bone Marrow and Stem Cell Transplantation Program social worker; and Kim Huck, UNC oncology nurse and coordinator of the Study of Tamoxifen and Raloxifene (STAR) breast cancer prevention trial.

## Center Receives \$1.5 Million Bequest from Phillip Hettleman, Jr.

Proceeds from a bequest from Phillip Hettleman, Jr., UNC Class of 1976, who died of cancer in June 2003 have been used to establish the Hettleman Fund for Cancer Research at UNC Lineberger Comprehensive Cancer Center. Mr. Hettleman worked as a manager for TD Waterhouse and lived in La Jolla, California. His estate is still being settled but the bequest is expected to total over \$1,500,000.

While the gift was unrestricted, the proceeds from Mr. Hettleman's estate will support the Center's efforts to bring fundamental knowledge regarding cancer and its progression to the patient in the form of clinical trials that test novel approaches to therapy.

In his last conversation with Shelley Earp, Lineberger director, Phil discussed his personal experience and the paucity of appropriate clinical trials for his disease. He understood the regulatory burden and increasing expense of clinical trials, the teamwork necessary to build a trials group and the need for a great University faculty to create new avenues for clinical success.

According to Earp, Phil's legacy "will have an enormous impact on our ability to bring new ideas from the laboratory to the patient and to test them rigorously through clinical trials. The Hettleman Fund will help our faculty test novel cancer therapies and, most importantly for groundbreaking ideas in human disease treatment, determine not only whether they work but why they work or why they fail."

The Hettleman family had a long association with UNC and Phil talked specifically of his parents' love for the University. Phil's parents, Phillip Hettleman '21 and Ruth Rea Hettleman, established the Hettleman Prize, the Hettleman Chair in Business School, and the Hettleman Young Faculty Awards. Phil's father and his stepbrother, Thomas Hettleman '56, also died of cancer. Directing this major legacy from Phil Hettleman, Jr.'s life work to support clinical trials and translational cancer research at UNC seems a most fitting tribute to Phil and his family. ●

### Briefs

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#### New Prostate Cancer Surgery Procedure Offered At UNC Hospitals

Prostate cancer patients at UNC have a new surgical option. Rather than undergoing the traditional radical prostatectomy, they may choose to have the procedure done laparoscopically, which can reduce recovery time as well as post-operative pain. Currently, UNC Hospitals is the only medical center in the area offering this procedure.

"Having a prostatectomy done laparoscopically means less post-operative pain and a shorter recovery time," said Eric Wallen, assistant professor of surgery and a Lineberger Center member. "With the traditional surgery, the recovery period is usually six to eight weeks, whereas following the laparoscopic procedure, the time is reduced to two weeks. There is also less need for blood transfusion during surgery."

For Wallen, another advantage is what he is able to see. Like the traditional surgery, the new procedure carries a similar risk of incontinence and impotence. However, Wallen says, "I have a better view of the edges of the prostate and the nerves that are so crucial to the preservation of erections." Anyone with a prostate cancer confined only to the prostate is a candidate for this procedure.

For further information about this procedure or to make an appointment, please call (919) 966-9696. ●





### UNC Lineberger Honors 2003 Oncology Nursing Excellence Award Winners

2003 Oncology Nursing Excellence Award winners were honored at the fall UNC Lineberger Board of Visitors meeting and at a January 8 reception. Jerome Schiro, who works in the adult outpatient Hematology/Oncology clinic, won the Charmayne S. Gray Award. The award is named in memory of UNC Lineberger nurse practitioner Charmayne Gray who died in an automobile accident. Michele Busshart, who works in the Hematology/Oncology medicine unit, won the inpatient award.

The Oncology Nursing Excellence Awards are given in recognition of the nurses' extraordinary hard work, care and dedication that they bring to the field each day. *Pictured, left to right: Jerome Schiro, Dr. Earp, and Michele Busshart.*



## The V Foundation— A Slam-Dunk for Cancer Research

The late legendary basketball coach and ESPN sportscaster Jim Valvano established The V Foundation for Cancer Research in 1993 to support cancer research and create greater public awareness of the importance of working to eradicate cancer.

Working with ESPN, The V Foundation sponsors the Jimmy V Women's Basketball Classic, which features the best women's college basketball teams in the country and brings attention to the importance of cancer research.

A portion of the proceeds from the 2003 Jimmy V Classic held on November 23, 2003, at the RBC Center in Raleigh was used to fund breast cancer research being conducted by

Dr. Carolyn Sartor, co-leader of the UNC Breast Center. Carolyn accepted her award on national TV at half-time of the Purdue vs. Duke game.

The V Foundation also has a "V Scholars" program that provides funding for research projects being conducted by some of the brightest laboratory scientists pursuing basic cancer research. UNC Lineberger is proud that both Kim Rathmell and Jason Lieb, new young professors at UNC and Lineberger faculty, are recipients of these two-year, \$100,000 V Scholars grants. ●

## Innovative Research to Treat Rectal Tumors

*continued from page 2*

### Chemotherapy and Radiation

Combination therapy prior to surgery is now standard therapy for patients with moderately advanced tumors still localized to the pelvis. "The challenge is to make the non-surgical portion of the therapy even more effective to increase the chance of preserving the normal anus and sphincter function as well as decreasing the chance of the tumor recurring, all while minimizing the side effects from the therapy," states Joel Tepper, chair of radiation oncology at UNC and one of the leaders of the Multidisciplinary GI Group.

Some rectal tumors are even more advanced in the pelvis, so that surgery alone is unlikely to produce a cure. UNC physicians use specialized radiation techniques to give a boost—or extra—dose of radiation during surgery, where the radiation would be less likely to damage adjacent normal tissues but better able to control the tumor. These intraoperative radiation therapy techniques (IORT) have proven useful in many situations where conventional therapy is not sufficient to give a good chance of controlling the disease. UNC Lineberger is one of the few centers in the U.S. to have dedicated intraoperative radiation therapy.

### Molecular Biology Research

Other innovative research involves studying tumor molecular profiles—called microarrays—that detect the molecular signature of the rectal tumor. "If we can profile the tumor, we'll be better able to give the patient something that works with their tumor's characteristics," Perou notes. Perou is assistant professor of genetics at UNC. "We hope that this approach will make the treatment more effective, speeding recovery."

### Combination Therapies

Bert O'Neil, assistant professor of medicine and GI cancer program member, is leading a team investigating the use of a new kind of drug (Velcade) with fewer side effects than typical chemotherapy agents that, when teamed with radiation therapy, will potentially result in a more effective combination treatment without increasing the side effects dramatically. "We will be the first center to pair Velcade with both chemotherapy and radiation in rectal cancer," O'Neil notes. The team is looking at biologic therapies based on new molecular advances. Combined with radiation therapy, these innovative chemotherapy agents could prove more effective than standard treatment. Currently, patient accrual to a clinical trial using these drugs is just beginning.

As summarized by Dr. Tepper, "our overall goal is to design therapies directed for the individual patient which have a better chance of controlling the tumor while minimizing both the acute and the long-term side effects. This requires a combination of understanding the basic biology of the tumor as well as the best manner in which to individualize the use of these therapies for each patient."

For more information about the clinical trials mentioned in this story, please call the Protocol Office at 919-966-4432 or toll-free 877-668-0683. ●



# Scrapbook



## Sibling Donates Marrow to Two Other Brothers; Donor: 'It has been a blessing for my family'

Mike Bednar of Pittsboro, NC, and his brother Martial of Rochester, NY, share more than the family name. They share an immune system, thanks to Martial's donation to Mike, who needed a transplant to treat his multiple myeloma. When Martial's marrow type proved a perfect match for Mike, it would be the second time for Martial and what is believed to be the first time in the United States that an adult donor had given marrow to two siblings.\*

In 1996, Martial first donated his marrow to his brother Merrick, a Roman Catholic priest who had a lengthy and complicated medical history of cancer and heart disease and who died awaiting a second heart transplant.

In summer 2003, Martial donated his marrow again, this time to his eldest brother, Mike, who received it in November as part of a clinical trial sponsored by Cancer and Leukemia Group B (CALGB) through the Lineberger Protocol Office.

Dr. Don Gabriel, professor of medicine in UNC's School of Medicine and member of the Lineberger Center, is Mike Bednar's physician. "When you're facing a deadly disease as Mike Bednar is, hope is inexorably linked to an available donor. Mike is fortunate that his brother was a perfect match. But not everyone has a brother who is a perfect match.

"Being a donor takes time out of your life; it's not something you have to do. Donors are heroes as well as the recipient and the families. Martial Bednar's experience as a donor shows that it's not dangerous. He's done it twice!

"We hope that people will consider getting registered with the National Registry. They can save someone's life. The more potential donors we have in the registry, the greater the chance that a match can be found for a patient."

\*The United Network for Organ Sharing, the University of California at Los Angeles Immunogenetics Center and the Fred Hutchinson Cancer Research Center revealed no other known instances of a donor giving marrow to two different siblings. The International Bone Marrow Transplant Registry was contacted, but does not track such data.



## 2004 Lineberger Club Luncheon and Basketball Game

The 2004 Lineberger Club lunch and winning basketball game against UConn was a big success. The lunch is held in recognition of Lineberger Club members who give an annual gift of at least \$1,000 to the Center.

Sponsors for the event were: Lee-Moore Oil Company, Stock Building Supply, Sprint, Cafe



Carolina and Wachovia. Speakers were Dr. Patricia Rivera, assistant professor of medicine and member of the Multidisciplinary Thoracic Oncology Program (MTO), and Katherine Wilson, a UNC Nursing School student from Morganton, NC, and lung cancer patient.

Katherine is shown in the top photo with her family (*front, left to right*): mother, Anne Wilson; Katherine; boyfriend Brian Wood; (*standing, left to right*): brother, Fletcher; father, John; and brother, J.D.

Lower left photo (*left to right*): Lineberger Board member John Burress of Winston-Salem auctioned off the basketball signed by the UNC men's team and coaches. The winners were Flo and Charles Winston of Raleigh.



## Great Human Race

UNC Lineberger was the only UNC group participating in the Great Human Race, a fundraising event organized by the Volunteer Center of Durham held on Saturday, March 27 at the Durham Bulls Athletic Park.

The 16-member team of walkers raised close to \$2,000 for cancer research at UNC Lineberger. Pictured getting warmed up for the walk are (*left to right*): Michelle Johnson, Mia Jones, Megan Crow, Lisa Miser, and Amy Mansfield.

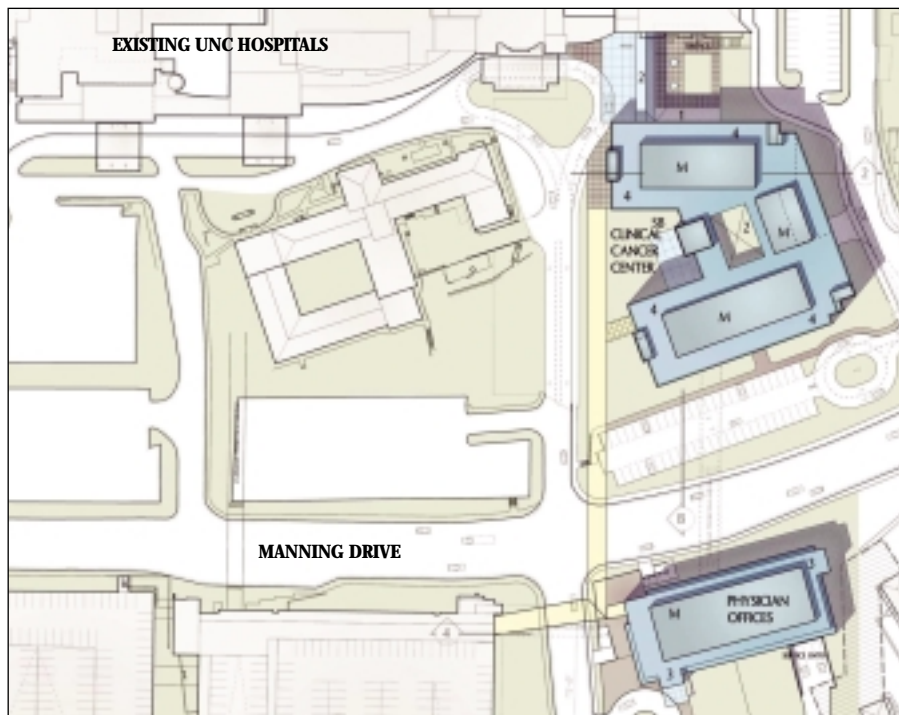
## New NC Cancer Hospital Plans Continue

Architects have continued planning for the proposed new NC Cancer Hospital pending authorization by the NC General Assembly. Funding for the over 300,000 square foot hospital will be considered by legislators during the upcoming short session beginning in May 2004.

Over 50 groups have been meeting with the architects

to plan a facility that will make UNC Lineberger and its clinical program among the most advanced in the nation. It has been exciting for these multiple groups—patients, oncology nurses, physicians, support personnel and other staff—to participate in this planning process. The building will face a new green space developed once the existing Gravelly Building is torn down. The new building will connect through the lobby spaces for NC Women's, Children's, Neurosciences and NC Memorial Hospitals.

A clinical cancer office building will be constructed directly across Manning Drive. ●



## Grant Awarded for New Cancer Research

The United States Department of Defense Prostate Cancer Research Program has awarded a \$9.9 million grant to a new consortium of top U.S. cancer researchers trying to discover why prostate cancer deaths are more than twice as common in black men as in white men and why such deaths also vary significantly from state to state. Dr. James Mohler of UNC Lineberger and Roswell Park Cancer Institute will serve as consortium director of the three-year study. This project and others examining prostate cancer will be featured in the fall issue of **Cancer Lines**.

## calendar *of events*

**April 24**

**UNC Lineberger Beach Ball.** University Mall, Chapel Hill, NC. For more information: <http://unclineberger.org>

**June 12**

**NC Triangle Susan G. Komen Breast Cancer Foundation Race for the Cure.** Raleigh, NC.

**September 18**

**Leukemia & Lymphoma Society Light the Night.** Raleigh, NC.

**September 21**

**Gynecologic Cancer Awareness Luncheon.** Cary, NC.

**September 24**

**Board of Visitors.** Lineberger Cancer Center, Chapel Hill, NC.

**October 7**

**Pretty 'n Pink Women's Cancers Luncheon.** Squid's Restaurant, Chapel Hill, NC.

UNC Lineberger Comprehensive Cancer Center  
CB# 7295  
School of Medicine  
University of North Carolina at Chapel Hill  
Chapel Hill, NC 27599-7295  
(919) 966-3036  
<http://unclineberger.org>

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