

cancerlines

the inside line up



UNC
LINEBERGER



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UNC
CANCER CARE

UNC's Supportive Care's nationally recognized program puts patients first

David Hatch of Raleigh had a strong reaction to the radiation therapy used to treat his colon cancer. The therapy was causing excruciating pain. "Nanette Lobue, my nurse, knew I was hurting and called the UNC Supportive Care team to meet with me and my wife, Carol, during one of my clinic visits. John Valgus and Sandi Jarr listened to what I had to say and took all the time in the world." Valgus, PharmD, is a clinical pharmacist practitioner with the program, and Sandi Jarr, RN, MSN, is the supportive care nurse consultant.

The team developed drug prescriptions and a schedule to keep Hatch's pain under control. "I started with the dosage John recommended. It took three days for me to begin to feel relief, and when I did it was a whole new world. I was surprised that I had such strong pain and could function, even return to work."



Members of UNC's Supportive Care Team meet with cancer patient David Hatch and his wife Carol. Hatch's treatment side effects were managed with help from the team's experts.

The UNC model and the team's unique inclusion of a clinical pharmacist practitioner has attracted national interest. The group has published articles in professional journals describing their program and its positive impact on patient care – establishing UNC as a leader in this specialized practice area of oncology.

The program, begun in 2008, has a team of specialists that includes two advanced practice nurses: Jarr and

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N.C. Cancer Hospital's new circular labyrinth a centering tool for patients, families

"A labyrinth walk can bring comfort and clarity to the walker in the midst of the chaos of cancer," explains Patricia Cadle, oncology chaplain for the N.C. Cancer Hospital. "Cancer patients often talk about their illness as a journey. A walk through a labyrinth is a journey that can bring a sense of peace and connectedness."

Labyrinths date back 3,500 years. A labyrinth, unlike a maze, has a single path leading in to the center with no loops, cul-de-sacs or forks. The UNC labyrinth is a Chartres type, modeled after the one in Chartres Cathedral in France. That 11-circuit labyrinth was built in 1201 AD.

The new labyrinth in front of the N.C. Cancer Hospital was installed by Davis Landscape Company. Arthur Haskell, a former textile artist who now installs labyrinths, supervised the UNC installation. "When I am installing labyrinths, it makes a day worthwhile, with the challenges of the design and knowing for whom it is being installed. It's a rewarding experience for me."

The retaining wall along the labyrinth incorporates



The labyrinth outside of the N.C. Cancer Hospital represents a spiritual practice that dates back thousands of years.

bricks reclaimed from the demolished Gravely building – the former home of UNC's cancer services. The reclaimed portion of the wall is set off by two benches, where patients and families can rest in the fresh air. (See photo on the back page).

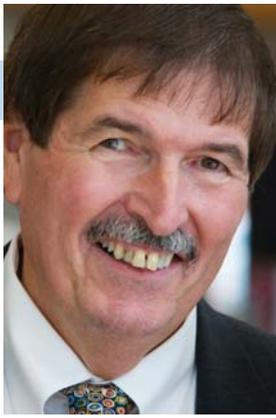
"The labyrinth is a great symbol of how UNC cares for the whole person," Cadle says, "providing not just physical care, but also emotional support and resources for patients and families."

Mary Beck, UNC Health Care Senior Vice President, said,

"The labyrinth was developed to provide a place of respite and reflection for patients and their families. Our hope is that the labyrinth and other humanistic elements of the N.C. Cancer Hospital provide support for the healing process."

One UNC labyrinth walker wrote, "Thank you so much for having this labyrinth. I was out of balance, felt like I was out of control, my emotions were misdirected. After walking through, I began to think clearly, my conscience came back in focus to trust God. The labyrinth brought me back to my center."

A formal dedication of the labyrinth is planned for the fall.



director's message

In past issues of *Cancer Lines*, you've heard about the breadth of our leading edge genetic research with the Cancer Genome Atlas Project, the

power of nanotechnology to treat cancer and the interdisciplinary work we do in chemistry, molecular biology and other fields that leads to fast-track cancer drug development.

This issue focuses on the human side of our research and practice in areas like survivorship and supportive care, as well as the spiritual support we provide at the N.C. Cancer Hospital. The UNC Supportive Care program, led by Steve Bernard, is gaining national recognition. I'm also proud of the research that faculty like Deb Mayer are doing into survivorship issues – a real strength of UNC Lineberger, thanks to Deb and other faculty like Marci Campbell and Don Rosenstein. Marci and Don have put Carolina Well, UNC Lineberger's survivorship program, in an elite group of Lance Armstrong Foundation's (LAF) national centers of excellence. The support of generous donors, LAF, and the V Foundation for Cancer Research helped us put survivorship on the map at a time when awareness of survivorship was in its infancy.

You'll also read about my friend Carolyn Sartor, a radiation oncologist and cancer researcher whose personal experience has led her down a new path with her New Life After Cancer. I have no doubt that the passion for excellence that

served her well in her clinical and research career will carry over into this new endeavor, to the benefit of survivors.

The impact of what we are doing in North Carolina is attracting interest. This spring I was invited to present an overview of the UNC Lineberger Cancer Network at the National Cancer Institute's (NCI's) cancer centers Directors' Retreat. The network, led by Tom Shea, has three components.

First, we reach out to physicians and patients across the state through telemedicine. Telemedicine allows doctors to collaborate with our multidisciplinary clinical teams from specially-equipped conference rooms at facilities across North Carolina or – in many cases – from their webcam-enabled desktop computer. Patients and doctors benefit when community oncologists can present a case or get additional input without leaving their home facility. Telemedicine can also patients to access specialty services – such as cancer-specific mental health counseling and genetic counseling – without traveling long distances. Don Rosenstein, who also leads the UNC Comprehensive Cancer Support Program, will be evaluating the outcomes of this effort.

Second, the network coordinates collaborative research and education – providing in-person and telemedicine enabled continuing education, looking at the impact of nurse navigators on patient care in collaboration with Mission Healthcare in Asheville, East Carolina University and Dare County/Outer Banks Hospital, looking at issues of survivorship and quality of care, and providing education and support services for patients and caregivers.

Finally, the network uses master agreements to create an integrated clinical trials infrastructure at sites across the state. Connected through both telemedicine and a data system, researchers and doctors can offer both cooperative group trials and studies initiated by UNC Lineberger clinical researchers to their patients at a local site. Clinical trials accruals via the network have increased more than 20 percent year over year. This effort is key to building the infrastructure that the Institute of Medicine has recommended to NCI, aimed at improving clinical trials speed and efficiency, making optimal use of scientific innovations and fostering broader participation by patients and physicians.

Our presentation of UNC Lineberger's collective network efforts was very well-received at the NCI and I am proud to say that our outreach to North Carolina will be at the vanguard of similar national efforts.

I have one other somewhat sad, but very important, part of this cancer center's history and legacy to acknowledge. On February 10th, Anna Boyce Rankin Lineberger passed away peacefully at the age of 97. Mrs. Lineberger was the last of the generation of a family whose generosity helped build this cancer center into what it is today and whose pride in our accomplishments never wavered. She was a person who was always engaged in the world around her, whether through community involvement, world travel or as an avid reader and world-class gardener. Her keen interest in making the world better extended into her 90s, as she attended meetings of the Board of Visitors and travelled to Chapel Hill to see the new N.C. Cancer Hospital just before it opened. 8



Greensboro Board of Visitor members hosted an event at the home of Tom and Judy Mincher on May 26. Guests heard updates from UNC Breast Center director Lisa Carey, MD and UNC Neuro-oncology program director Matt Ewend, MD. Pictured: Tom Mincher, Cathy Green, Judy Mincher, Adair Armfield, Dr. Shelley Earp and Buddy Weill.

A special tribute



Anna Boyce Lineberger, January 18, 1914 – February 10, 2011, shown here in the fall of 2010 with Dr. Shelley Earp and Dr. Joe Pagano.

Dr. Ben Calvo, professor of surgery and UNC Lineberger faculty member, spoke at the March 18 meeting of the Southern Pines Rotary Club. Following his talk about directions in cancer research and UNC Lineberger he paused for a moment with (left) Brenda Hiscott, UNC Lineberger Board of Visitors member, and (right) Carol Haney, president of the Rotary Club.



Carolyn Sartor, MD, charts her New Life After Cancer

Radiation oncologist Carolyn Sartor, MD, experienced what she calls a “critical teaching moment” after her breast cancer diagnosis and a recurrence. “It was a prime opportunity for a change,” she explains. “A chance to pause, re-evaluate and move forward.”

A skilled sailor, Sartor translated her own navigation of the cancer experience into a new direction in her life and a program for breast cancer patients who have completed therapy called “New Life After Cancer.” The program is a volunteer-run, tax-exempt non-profit organization and seeks to provide the knowledge and insight to help breast cancer survivors to embrace change and adopt healthy, sustainable lifestyles that will improve quality of life and outcomes.

“It’s important to me to make a difference and to continue to use my skills as a physician and scientist. As a patient I have learned so much, and this program is a way to promote healthy behaviors and lifestyles at the ‘critical teaching moment’ for patients, when they are keenly interested, as I was, in learning healthy behaviors, then living them.” Sartor is the former chair of Radiation Oncology at UNC and before retiring was a nationally recognized breast cancer researcher.

There are lectures and hands-on workshops, most at no cost to participants. For example, nutrition information will be shared in the “Nine Lives Cooking School,” followed by a participatory cooking session, incorporating easy recipes with healthy foods.



Carolyn Sartor, MD, and Loretta Muss discuss the preparation of pears as part of the Nine Lives Cooking School – part of New Life After Cancer – as program participants look on.

Another workshop, titled “Arm Against Lymphedema,” pairs survivors with a certified lymphedema/physical therapist, and a certified sports trainer/physical therapist, along with Sartor, to combat lymphedema, the uncomfortable swelling that is often a side effect of lymph node removal during treatment.

Retreats, or as Sartor calls them, “think tanks of change,” offer patients a chance to make a “mental regrouping.” A cruise provides the time to consider “What Now?”

“Patients have finished treatment, and are picking themselves up, dusting themselves off. This retreat gives them

the time and space to develop an action plan for moving on with their lives, re-evaluating their strengths and dreams to help chart a course.”



Carolyn Sartor, MD (right) and Alice Glover (center) talk fresh ingredients with a participant. Glover says that New Life After Cancer “changed my life.”

Sartor seeks feedback on all the activities and is growing the program slowly, developing topics of greatest value to participants. “Like the newest ‘targeted’ anti-cancer treatments we design ‘targeted’ survivorship support,” she explains.

She developed her program after talking with many people, including Jo Anne Earp, ScD, an expert in patient advocacy. Earp is professor and chair of the Department of Health Behavior and Health Education in the UNC Gillings School of Global Public Health and a member of UNC Lineberger. New Life After Cancer also has a Board of Directors whose members share her goal of improving the lives of breast cancer survivors.

Alice Glover of Chapel Hill has participated in every program. She first attended a daylong retreat that she says, “. . . changed my life. I didn’t realize how important what you put in your mouth is to the cells in your body. My ‘ah ha moment’ came because Carolyn has the unique ability to bring the complicated science of nutrition to a level that those of us who are not scientists can understand. When I got home after the workshop, I purged my pantry, joined Community-Supported Agriculture and never looked back.”

Glover learned about Sartor’s program when she consulted with Val Collins, a physical therapist and certified lymphedema therapist, who was working with Glover on preventing lymphedema. “I attend Carolyn’s programs because I want to be proactive about my health. In her programs Carolyn explains the why behind the science of nutrition, and practices such as yoga and meditation. It’s such an enriching part of my life.”

For more information about upcoming programs or on how to get involved, go to <http://www.newlifeaftercancer.org>.

Supportive Care Program

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Charlotte Rowe, a nurse practitioner; two oncology-trained pharmacists: Valgus and Aimee Faso, PharmD, and oncologist, Steve Bernard, MD. Other consultations with nutritionists and counselors are arranged as needed. Team members meet with patients during clinic visits, saving patients an additional appointment and trip.

Bernard, lead physician with the program, explains, “We’re here for our patients and families. The diagnosis and treatment of cancer can have serious effects on quality of life and normal activities of daily living. We work with patients and families to create care plans to manage symptoms, treatment, and other cancer-related concerns such as psychological or emotional issues.”

The evidence that supportive care works to help patients is compelling. In an analysis of 49 patients seen by the UNC team, improvements were shown in all symptom scores, including

pain, nausea, and constipation, by the second visit. On average, patients were seen three times. The reduction in symptom scores was maintained in the third visit and beyond.

The team makes the entire treatment process more efficient and effective. By working with patients and families in the clinic, teaching them about the agents involved in their chemotherapy regimen, the nurses who used to provide the instruction can devote more time to other patient care duties and the patients don’t feel rushed. “We take the time to answer all the patient’s questions and discuss managing side effects,” says Valgus. This service is also available in Spanish.

In another initiative, the team worked with the infusion clinic to increase efficiency for patients receiving the biologic agent Rituximab. The outcome decreased each infusion for these patients by over 1.5 hours per visit and was equally as safe as the previous longer method of infusion.

Looking at the treatment process from the patient’s point of view is at the center of the Supportive Care team’s philosophy. Carol Hatch met with Jennifer Spring, RD, LD, the program nutritionist. “We needed to maintain David’s weight and hydration level. Jennifer helped me to match his appetite with his interest in food, and to establish target numbers such as grams of protein to aim for each day.”

“The team took the time to explain things in great depth. They synthesized things for us. They really helped us,” said David and Carol Hatch.

Additional program associates are Pam Durham, MS, patient counselor; Tina Shaban, RN, BSN, OCN, manager, Patient and Family Resource Center; Liz Sherwood, RN, MS, APN-C, patient counselor; and Joanne Scroczyński, MSW, LCSW, patient counselor.



Deborah Mayer, PhD, RN, AOCN, FAAN

"I will do anything that's involved with improving cancer care," says Deborah Mayer, PhD, RN, AOCN, FAAN, associate professor of nursing and

member of UNC Lineberger's Cancer Prevention and Control program. Her work improves cancer care locally and nationally, and nursing was always her career choice. "I wanted to be a nurse since I was five years old," she says. "I never wavered." While she started her career as a neonatal ICU nurse after graduating from Pennsylvania Hospital in Philadelphia, destiny led to a position as a chemotherapy nurse. Mayer explains, "Working with Dr. Richard Smalley, one of my mentors, was a real opportunity. He encouraged me, and I learned so much. I decided that oncology nursing was what I wanted."

She worked in nursing and went to school, earning her nurse practitioner certificate, and master's and doctoral degrees in nursing. Prior

to joining the UNC School of Nursing faculty in 2007, she held academic appointments at Tufts University, the University of Toronto and Massachusetts General Hospital's Institute of Health, had her own consulting business and served as Chief Medical Officer for a dot com company called CancerSource.

In her 30+-year career, she has served as president of the Oncology Nursing Society, the 35,000-member professional organization, and is now editor of its bimonthly publication, *Clinical Journal of Oncology Nursing*. "I love meeting and working with new authors, investing in the next generation of oncology nurses."

She was the first nurse to serve on the National Cancer Institute's National Cancer Advisory Board, a Presidential appointment. This group advises the NCI director and the Secretary of Health and Human Services. There she worked with another mentor, Dr. Vincent DeVita, former director of the NCI and the Yale Cancer Center. "He's the master of big picture thinking, and I learned the value of taking that perspective in my work." She also served on the NCI's Board of Scientific Advisors, a group that provides advice on scientific program policy, progress, and future direction for NCI's extramural research programs and other committees evaluating the National Cancer Program.

Mayer's specialty is cancer survivorship and she is conducting research on survivorship care plans. "With better cancer treatments available, patients are living longer, so survivorship issues are critical for them. The big challenge is fostering collaboration between oncology teams and primary care professionals for the long-term care of survivors. The health care system needs to develop these models, and patients need to be integral members of their team especially with projected workforce shortages."

In addition to her School of Nursing teaching responsibilities and mentoring students, Mayer sees breast cancer patients a half-day a week in the UNC Lineberger Survivorship Clinic and Breast Center, working with Dr. Lisa Carey.

"Once patients complete their therapy, it's time to lift their heads up and assimilate what they have been through. It's a scary and exciting time, moving from acute care to surveillance, with lots of strategies and opportunities to promote living a healthy life."

Mayer does take time for family and hobbies. "It's important to have a good work life balance but it is always a challenge." She enjoys needlepoint, reading, movies, bicycling and spending time with her daughter, Amelia, who is a freshman at UNC majoring in journalism and public health. 

UNC Cancer Outreach Nurse Navigators Improve Patient Care

Thurman "Tim" Nelson and his wife Paula of Greenville are glad that he can get excellent cancer treatment at East Carolina University's Leo Jenkins Cancer Center. Having spent more than 25 years in law enforcement and another ten years in risk management at Pitt County Memorial Hospital, Nelson has seen the effort that the hospital puts into caring for patients and knows how complex a process like cancer treatment can be.

That's why he feels justified in saying that UNC Lineberger Cancer Outreach nurse navigator Judy Koutlas, "is one of the finest nurses I've ever had the occasion to work with and I'm thankful to have her on the team."

When he was diagnosed with cholangiocarcinoma in 2009, ECU's Dr. Emmanuel Zervos removed a bile duct tumor. When he went to meet with his medical oncologist, Dr. Prashanti Atluri, he met Koutlas, who works with patients diagnosed with gastrointestinal malignancies as a nurse navigator, part of a project funded by the University Cancer Research Fund to measure the impact of these highly-trained professionals on the quality of cancer care and cancer outcomes.

Nurse navigators like Koutlas, who is an oncology-certified nurse with advanced training, help cancer patients, their families and their caregivers with both medical and nonmedical concerns. The navigator's goal is to address barriers to care, helping patients and their loved ones with the challenges they face after receiving a diagnosis of cancer. Koutlas is just



Judy Koutlas, RN, UNC Cancer Outreach Nurse Navigator

one of a team of navigators who work with UNC Cancer Outreach and local cancer care providers at several sites in eastern and western North Carolina, Dare County, Greenville and Asheville.

Nelson says, "She's made a difference in the quality of

my care and treatment. I appreciate it and so does my family. I wasn't sure what her role was going to be early on, but it became apparent to us pretty quickly that she is definitely a liaison between the doctor and our family and she does a terrific job of that. My recommendation would be that anyone who could use the skills of a navigator should strongly consider finding a program that offers one. That little bit extra means so much to the patient and family and that's truly good patient care."

"That's the primary goal," says Jean Sellers, RN, OCN, who provides leadership to the program as part of her role as UNC Lineberger Cancer Outreach's Clinical Director. "Studies show that patients who work with navigators have overall

better outcomes as measured by survival and quality of life. Judy Koutlas is just one of a group of truly dedicated professionals in our network whose goal is to help deliver true patient-centered cancer care and demonstrate the impact of these efforts so that others can duplicate our model."

Cancer is not something he thinks anyone should go through, but "working with Judy throughout my cancer treatment was a delightful experience, considering the circumstances," says David Poythress of Goldsboro. "I don't see how we would have done it without her help."

She coordinated multiple appointments and ensured that all of his physicians – surgical, medical and radiation oncologists – had the latest pieces of his medical information. "She has probably saved us hundreds of dollars from not having to make multiple trips to Greenville and back," notes the retired military officer. Poythress was diagnosed with stomach cancer in 2009 as the result of a routine cardiac test. Surgery to remove his stomach resulted in complications, landing him in the hospital for a month.

"When I did get out, we started working with Judy. My wife Jeanine would call her for everything, for symptoms, when to worry and how to manage side effects of treatment. I will tell anyone considering where to get treatment that if you can, you should go to a place with the nurse navigator, they will take care of you and ensure that things are as streamlined for you as they can be." 

UNC breast cancer program recognized as national model

The North Carolina Breast Cancer Screening Program, based at UNC Lineberger, has been designated a Research-tested Intervention Program by the National Cancer Institute.

The program – which began in 1993 and was active in the community for 10 years – was designed to reduce breast cancer in older African-American women living in eastern North Carolina. It addressed disparities in breast cancer rates between African American and white women due to later-stage diagnosis of the disease among black women. Now, other researchers and public health practitioners use the study's data and materials to design new interventions.



Jo Anne Earp, ScD

The program trained more than 200 community members from five rural eastern North Carolina counties (Beaufort, Bertie Martin, Tyrrell and Washington) as lay health advisors or community outreach specialists, promoting routine mammography screening among women 50 years and older; in the community it was known as the Save our Sisters program.

Jo Anne Earp, ScD, the study's principal investigator, said the program helped reduce the racial gap in screening in all five counties, closed it in two of them, and increased mammography screening among low income, less educated women.

"This designation affirms that a dedicated effort between community and university partners can make a crucial difference in screening rates for those most in need," said Earp, professor and chair of the Department of Health Behavior and Health Education in the Gillings School of Global Public Health.

Weili Lin, PhD appointed director, UNC Biomedical Research Imaging Center

Weili Lin, PhD, has been appointed Director of the UNC Biomedical Research Imaging Center (BRIC). Dr. Lin has been serving as interim director of the center since July 1, 2010. His research focuses on innovative biomedical applications of magnetic resonance imaging (MRI) including the use of nanotechnology, brain imaging in cases of cancer, stroke, early brain development and both genetic and developmental brain abnormalities. He is a professor in the Departments of Radiology, Neurology, and Biomedical Engineering at UNC and holds a joint appointment as Professor in the UNC Eshelman School of Pharmacy. He is also a member of UNC Lineberger Comprehensive Cancer Center and serves as the Vice Chair of Basic Research, Department of Radiology.

The BRIC was established in 2005 to serve the imaging needs of UNC-Chapel Hill biomedical researchers and to advance the rapidly developing science of biomedical imaging. The center enables a better understanding of disease, including cancer and neurologic diseases and studies the effects of genetic changes on disease development and progression. The center will develop new imaging technologies for a host of medical uses. Advanced imaging will be a key factor in physicians' ability to determine whether new therapies work, for example, does a new treatment stop cancer progression even before it shrinks the tumor or will a treatment limit brain damage from stroke. The BRIC will also enable drug discovery and development for many diseases and track the success of nanotechnology in drug delivery.

For more information, go to bric.unc.edu



UNC Lineberger scientist receives innovative research grant from Stand Up to Cancer

Angelique Whitehurst, PhD, assistant professor of pharmacology, has been awarded one of 13 Innovative Research Grants from Stand Up to Cancer, the scientific partner of the American Association of Cancer Research.

SU2C's Innovative Research Grants Program, which made its first round of 13 grants in December 2009, was designed specifically to support work that incorporates new ideas and new approaches to solve critical problems in cancer research.

Whitehurst will use the grant to study how genes, otherwise required only for human reproduction, contribute to tumor cell survival. She will evaluate these genes to determine which are most critical for tumor survival and how they support growth of tumor cells. Ultimately her work will find new therapeutic targets that will selectively destroy tumor cells and leave normal tissue unharmed.

View Whitehurst's video by visiting <http://unclineberger.org/articles/su2c-grant-whitehurst> or putting "whitehurst" in the search box.

Angelique Whitehurst, PhD (Photo by Dan Sears)



Representative David Price visits UNC Lineberger

On May 19, UNC Lineberger hosted the NCI Director's Consumer Liaison Group as part of their quarterly meeting. This meeting focused on partnerships to promote health and reduce the cancer burden. Attendees at the reception included Monair McGregor, Director of Community Programs for Susan G. Komen Race for the Cure, NC Triangle Affiliate, and U. S. Representative David Price.



Have you checked out our new look?
Explore our updated web site at
<http://unclineberger.org>



Thanking our Volunteers

Baseball for the Cure organizer and UNC baseball player Chase Jones poses with Dr. Stuart Gold at UNC Lineberger's Volunteer Recognition Event. Chase shared his experience as a cancer patient and his appreciation of the impact of volunteers on the well-being of cancer patients at UNC.

Greek Week

Greek Week student leaders pose in front of the Old Well before their 5k race benefitting UNC Lineberger.



Regional event - Wilson, NC

Dr. Jen Jen Yeh, UNC Lineberger Board of Visitors members Betty Ray McCain and Susan Hudson, and Dr. Shelley Earp pose at Hudson's home in Wilson, NC, where she hosted an event in May for UNC Lineberger supporters. Guests heard an update from Dr. Yeh on pancreatic cancer research and from Dr. Earp about UNC Lineberger's recent progress.

Franklin 5K

Zeta Tau Alpha sorority members get ready to pace the pack at the Franklin Street 5k. Over 800 runners participated. The ZTAs have raised over \$100,000 for UNC Lineberger since 1993.



St. Baldrick's Day

Dr. Stuart Gold, chief of the division of pediatric hematology and oncology and program leader for UNC Lineberger's pediatric oncology program, gets his head shaved as part of the a St. Baldrick Foundation event held on May 21 at the Crunkleton Bar in Chapel Hill. The event raised over \$10,000 for the Foundation, which has given almost \$200,000 to UNC Pediatric Oncology to fund an interpreter, a fellowship and other services for pediatric patients.



Tar Heel 10 Miler

Endurance Magazine presented UNC Lineberger with a check for more than \$10,000 – proceeds of the Tar Heel 10-miler and Fleet Feet 4-miler races where Team Lineberger came out in force.

philanthropy update

Tar Heel fans with a plan

Tar Heel fever is contagious - just ask Gilda Cree. When Philip, her husband of 42 years, introduced her to UNC-Chapel Hill at his 25th class reunion in 1977, she fell head over Heels for Carolina.

After living in Florida for years, the couple decided to relocate to Fearington Village, just south of Chapel Hill. From being members of the Fearington Village Carolina Club to members of the University Library to seeing shows at PlayMakers, they enjoy the best of what UNC-Chapel Hill and the surrounding community has to offer.

Their love for everything Carolina blue inspired the Crees to give by including a bequest for UNC Lineberger Comprehensive Cancer Center in their estate plan. They chose UNC Lineberger because of the center's impressive work and their personal experience with center faculty and staff.

"I see my dermatologist every six months to monitor my skin. During one visit he mentioned a freckle that was under my eye. He didn't think it was a problem, but wanted to check it out anyway," said Philip. "Forty-eight hours later, I received a call from my doctor who told me to go to UNC." After being seen at UNC, Philip had surgery to remove the malignancy.

"I was very impressed by my surgeon, Dr. Michael Meyers," explained Philip. During his visit, they had discussed the new cancer hospital being built and the impact it would have on the cancer program. "I remember him



Philip and Gilda Cree show their UNC spirit outside the N.C. Cancer Hospital

saying that completion of the hospital would make UNC Lineberger world class."

Philip believes that "there is absolutely nothing worse than a wasted opportunity." For the Crees maximizing their opportunities and being generous go hand in hand. From Gilda volunteering at the hospital, to Gilda and Philip donating their bodies to science, to leaving bequests to multiple UNC departments in their estate plan, they're ensuring no wasted opportunities, but opportunities created for many. 

A million dollar evening

In just eight years the Beach Ball has raised \$1 million for cancer research and patient support at UNC Lineberger, thanks to the hard work of dedicated volunteers, generous sponsors, strong community support and hundreds of participants. New to this year's auction was electronic bidding where bidders used their smart phones to bid on items. DJ A-Minor provided music that kept the dance floor packed, and hungry dancers and guests enjoyed the great food. The 2011 event attracted 450 guests and netted \$146,200. This year's event, held at the Chapel Hill Country Club, had the theme The White Party.

Many thanks to our \$10,000 sponsors: L&N Andreas Foundation, Chapel Hill Herald, Chris & Ann Cox, Butch & Tammy Davis, Eurosport, Siemens Medical and Skanska.



The 2011 Beach Ball Committee: Jennifer Bowman, Anna Holland, Mary Seagroves, Director of Special Events at UNC Lineberger, Suzie Havens, Dina Bray, committee chair Christy Bray, Brooke Dever, Deb Shah and Krista Magnuson.



Pictured above (clockwise): White Party guests entering the Chapel Hill Country Club; Vijay and Deb Shah, her sister Suzie Havens, and Suzie's husband Kevin Cohan (photo by Sam Girton); Elaine O'Neil, Dr. Tom Shea, Dr. Kathy Shea, and Glenn O'Neil.



DJ A-Minor gets the crowd moving in his custom made booth, which thanks our Million Dollar Club sponsors; guests make bids on their smart phones on a wide array of auction items.



calendar of events

August

27th Cocktails for Cancer
The Great Room at Top of the Hill, Chapel Hill
7:00 - 11:00 p.m.

October

We'll **Turn the Town Pink** in October!
Our Community Partners will participate in numerous
events and promotions throughout the month.

1st Dozen Doughnut Run
Starts at the Old Well
Time to be determined

14th Roy Williams' Fast Break Against Cancer
Dean E. Smith Center, Chapel Hill
7:30 a.m.

22nd Get Heeled 5K Race
Starts at the William & Ida Friday Center, Chapel Hill
Time to be determined

To purchase tickets or for more information about these events and other
UNC Lineberger news, visit www.unclineberger.org, or follow us on

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Photo by Brian Strickland

Frances Gravelly and Susan Gravelly pose with the commemorative plaque recognizing their grandparents, Mr. and Mrs. Lloyd Lee Gravelly of Rocky Mount, NC. The Gravelly building, named in honor of Mr. and Mrs. Gravelly, was home to outstanding health care to thousands of North Carolinians from 1953-2010. When the Gravelly building was demolished in 2010, bricks from the building were used to build part of the support wall surrounding the labyrinth.

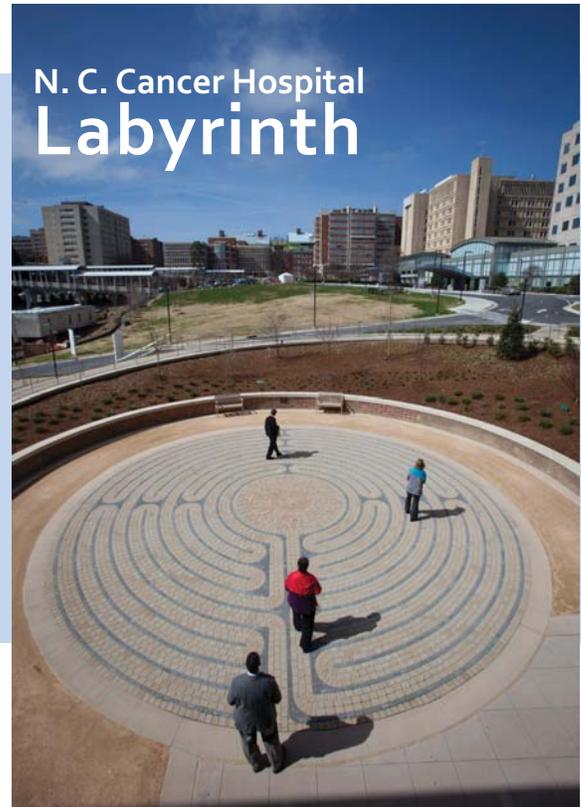


Photo by Brian Strickland

N. C. Cancer Hospital Labyrinth

Walkers cast a shadow as they meditate on the
pattern of the N.C. Cancer Hospital's new labyrinth.
See the full story on page 1.