

Feather River Hospital Cancer Center

Annual Report of 2009 Data



Accreditation



Affiliation



MESSAGE FROM THE CHAIR

In 2009, Feather River Hospital's Cancer Program reached several significant milestones. After four years of program development, the Cancer Program received accreditation from the the American College of Surgeons (ACoS) Commission on Cancer (CoC). Along with accreditation, FRH received six commendations for program excellence. All accredited programs, whether a large academic health system or a small rural hospital must meet CoC standards. The CoC standards ensure quality, multidisciplinary and comprehensive cancer care delivery. Feather River Hospital's Cancer Program is the only accredited Cancer Center in Butte County. Nationally, only 25% of cancer centers adhere to this accreditation.

What this means to our patients and our community is validation of systematic delivery of high quality comprehensive care including: State of the art services and equipment, a multi-specialty team approach to patient care, participation in ongoing cancer clinical trials and new treatments, prevention and early detection programs, along with education and support services.



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In February, the Cancer Program received news that the National Cancer Institute sponsored Feather River Hospital's Clinical Trials program affiliation with Stanford's Cancer Center to participate in nationwide research studies. Feather River Hospital is the only hospital in the region to be awarded this status and is now enrolling patients. Patients enrolled in clinical trials have access to promising new drugs while receiving conventional treatment.

We are proud to share our program's successes with you as we continue to provide our patients and community with care that rivals national academic centers close to home.

Lance Ludington, MD

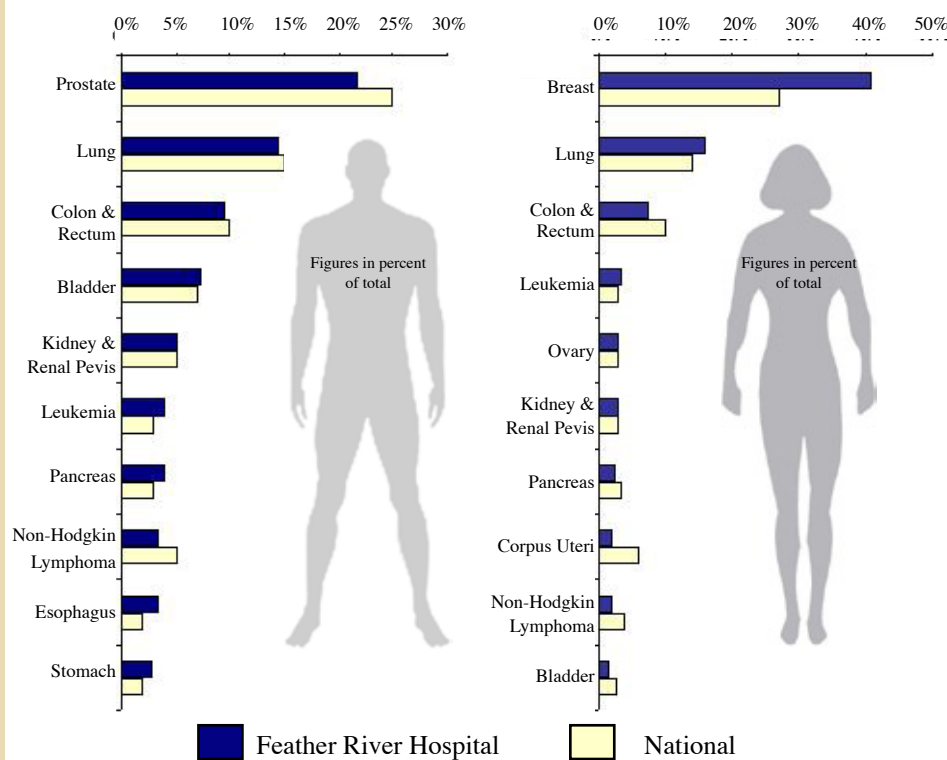
RESEARCH Clinical Trials

In 2009, FRH joined the Eastern Cooperative Group as an affiliate with Stanford University Cancer Center and opened our first Clinical Trial. This affiliation provides our patients access to National Cancer Institute (NCI) sponsored trials.

The Clinical Trials office ensures Feather River Hospital and its physicians are in compliance with state and federal regulations regarding human subject research and assuring adherence to human subjects protection guidelines. Clinical Trials often lead to the development of more effective treatments that can benefit our patients.

MAJOR SITE COMPARISONS BY GENDER

Percent of 2009 Cases



Source: Feather River Hospital Cancer Registry & National data from American Cancer Society 2009 Facts & Figures and Surveillance, Epidemiology and End Results (SEER) Fact Sheets 2009

CANCER REGISTRY

The FRH Cancer Registry collects, stores, and distributes information related to the diagnosis and treatment of our cancer patients.

Statistical reports enable our physicians to evaluate the success of specific treatment modalities as measured by patient's quality of life and length of survival. The hospital data is published on the American Cancer Society's Web site. This information can be viewed by logging onto www.cancer.org and click on "Find a Hospital Locator."



Susan Artin-Daniel, CTR

The Cancer Registry is responsible for life long follow up of our cancer patients, which may lead to early detection, beneficial treatment of recurrences and better follow-up with physicians in order to provide optimal care for our cancer patients.

CURRENT CLINICAL TRIALS

ECOG (Eastern Cooperative Oncology Group)

Phase III Randomized Trial of Adjuvant Chemotherapy With or Without Bevacizumab for Patients With Completely Resected Stage IB (≥ 4 cm) – IIIA Non-Small Cell Lung Cancer (NSCLC).

CALGB (Cancer and Leukemia Group B)

Randomized, Phase III, Double-Blind Placebo-Controlled Trial of Sunitinib as Maintenance Therapy in Non-Progressing Patients Following an Initial Four Cycles of Platinum-Based Combination Chemotherapy in Advanced, Stage IIIB/IV Non-Small Cell Lung Cancer.

SWOG (Southwest Oncology Group) – In Follow-up

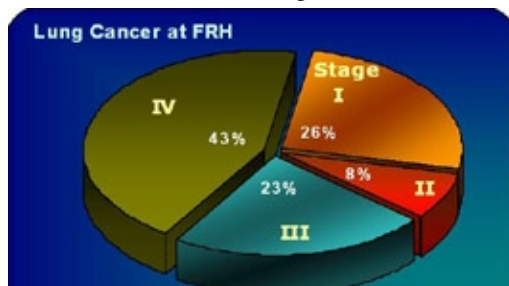
Phase III Trial Bisphosphonates as Adjuvant Therapy for Primary Breast Cancer.

LUNG CANCER NEWS

Lung cancer is the leading cause of cancer death in America, more than breast, colon and prostate cancers combined. In 2009, 159,390 deaths (88,000 in men and 70,490 in women) were estimated. Early detection and aggressive multi-modality treatment are key components that are pushing the odds in our favor against this terrible disease.

Non-small cell lung carcinoma is staged from I (best prognosis) to IV (worst prognosis). Small cell lung carcinoma is classified as limited stage, if it is confined to one-half of the chest and within the scope of a single radiotherapy field; otherwise, it is extensive stage.

Only 15% of all lung cancer patients are alive in 5 years or more after diagnosis. For non-small cell lung carcinoma, prognosis is generally poor. Following complete surgical resection of stage I disease, five-year survival is 45-65% for stage IA and IB. Comparatively, the five-year survival rate of patients with stage IV NSCLC is about 1.8%.



For small cell lung carcinoma, prognosis is also generally poor. The overall five-year survival for patients with SCLC is about 15.5%. Patients with extensive-stage SCLC have an average five-year survival rate of about 1.5%. The median survival time for limited-stage disease is 20 months, with a five-year survival rate of 31%.

[Source: National Comprehensive Cancer Network Practice Guidelines in Oncology, 2010]

ADVANCED TECHNOLOGY FOR LUNG CANCER

EBUS - Endobronchial Ultrasound New Technology at the Outpatient Center

EBUS allows for accurate diagnosis and staging. Confirming spread of tumor to the lymph nodes has traditionally been obtained by performing a biopsy through a variety of surgical procedures. With the EBUS system, biopsies are performed through the trachea using ultrasound rather than surgical incisions. The level of sedation necessary is much less than with more invasive procedures, and is usually completed in less than an hour. In many cases, a preliminary pathology report is available at the completion of the EBUS procedure, although final pathologic evaluation still requires 48-72 hours. The benefits of the EBUS system to patients with thoracic malignancies are very significant.

Ronald Batin, MD championed the EBUS program at FRH and the first procedure was performed at FRH in October 2009.

Dr. Ronald Batin & EBUS



The EBUS Radial Prode (UM-BS20-26R) extends from the bronchoscope channel. The balloon is filled with saline. Photo courtesy of Olympus Corporation.

RADIATION THERAPY

At Feather River Hospital, the Cancer Center team delivers advanced Radiation Therapy and is comprised of a Radiation Oncologist, a Physicist, a Dosimetrist and Radiation Nurses and Therapists. Using the 64 slice CT, images are transferred to a sophisticated planning system where either 3D conformal or IMRT (intensity-modulated radiation therapy) plans are designed and calculated.

3D conformal is ideal for larger tumors which are not close to critical structures. IMRT is a highly advanced treatment modality which delivers high doses of radiation to targets while reducing or eliminating dose to nearby critical structures. The Varian Linear Accelerator has built in technology to deliver highly accurate targeted therapy in the shortest amount of time.



CANCER COMMITTEE

Physician Members

Lance Ludington, MD
Chair, General Surgery

Ruth McLarty, MD
Cancer Liaison Physician, General Surgery

Doug Hughes, MD
Diagnostic Radiology

Sam Mazj, MD
Medical Oncology

Lee Schwartz, MD
Medical Oncology

Anthony J. Nasr, PhD, MD
Pathology

Steve Wahlen, MD
Radiation Oncology

Richard Zumwalt, MD
Dermatology

Non-Physician Members

Susan Artin-Daniel, CTR
Cancer Registry

Betsy Daniels, RD
Nutritional Services

Wayne Ferch, FACHE, MBA
President & CEO

Matthew Foor
American Cancer Society

Elise Hale, CCRP
Clinical Trials

Jean Higgins, BSN
Quality Risk Management

Christine Mascarenas, MSW
Social Services

Kate McDonald, BSN, OCN
Cancer Center Manager

Chuck Neal
Rehabilitation Services

Paul Miller, RPh
Pharmacy

Ronilee Scofield, PA
Medical Oncology

Keith Stilson, MS
Vice President

LaFreed Thomas, MA, CC
Pastoral Care Services

Pat Watters, RN
Hospice Services

Maureen Wisener
Marketing & Communications

Theresa Yocum, BSN
Inpatient Nursing

Cancer Services

Treatment

- Chemotherapy
- Radiation Therapy
- Immunotherapy
- Hormone Therapy
- Hematology Services
- Clinical Trials

Diagnostic

- Radiology Services
 - CT imaging
 - MRI
 - PET/CT
 - Digital Mammography
 - Ultrasound
- EBUS – Endobronchial Ultrasound
- Vacuum-Assisted Breast Biopsy
- Full Scopic Procedures

Support Services

- Social Services
- Nutritional Consultation
- Rehabilitation
- Lymphedema Clinic
- Prosthetics
- Home Health Care
- Hospice Services
- Reflexology Therapy
- Massage Therapy
- Chaplain

Program Activities

Support Groups

- Let Your Colors Shine – Children’s Support Group
- Sharing the Journey Support Group – for Cancer Survivors
- Breast Cancer Survivor Support Group
- Leukemia/Lymphoma Support Group
- Moments of Peace – Grace-based Spiritual Reflections & Bible Discussions
- Man to Man - Prostate Cancer Support Group
- Finding Fortitude – Men’s Group *New in 2010

Educational Activities

- Brighter Days
- Dinner with the Doctor
- Look Good, Feel Better American Cancer Society - Personal instruction on cosmetics & hair
- I Can Cope American Cancer Society Classes

Community Activities

- American Cancer Society’s Relay for Life (June)
- FRH Health Faire (September)
- ‘Buy Local’ Farmer’s Market (June-Sept)
- Johnny Appleseed Days (October)
- Butte County Think Pink Team (October)

Family and Community

- Let Your Colors Shine Annual Children’s Day Camp
- Renew Support Group for Caregivers *New in 2010
- Healing Through Art Watercolor Class *New in 2010



Let Your Colors Shine support group for kids.

Thank You to our Community

- American Cancer Society
- Cancer Center Volunteers
- Fraternal Order of Eagles
- Morning Star Quilts - Marsha Haunschild
- Paradise Adventist Academy
- Paradise High School
- Paradise Pines POA
- Private Donors

Where Hope and Medicine Meet



Trish Rider

The first thing I noticed when I started receiving treatment at Feather River Hospital Cancer Center was how often I saw the patients laughing, smiling and talking with the staff. I thought it was pretty interesting that people with such scary diagnoses and dubious outcomes could be so jovial. I came to understand that it was all about the cohesiveness among the doctors and staff. We receive small town attention from people with caring hearts, combined with knowledge of state of the art treatment plans for our particular needs. I feel fortunate that I can remain hopeful in spite of my diagnosis while a doctor that any major medical center would be proud to have on its staff is treating me.

Help Bring Hope

Your donation can help support and expand these important services offered to our community.

Contact the Feather River Health Foundation at:
(530) 876-7161

FRH Cancer Center

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