

SPALDING CANCER CENTER

2006 Annual Report of the Oncology Program with 2005 Data

Spalding Regional Medical Center



A Report from the Chairperson


For 2005, the Oncology Committee at Spalding Regional Medical Center selected Lung Carcinoma as its cancer site focus. This is because the malignancy is one of the top five offenders and killer tumors nationwide with 174,470 new cases in 2005, according to the American Cancer Society. Of these new cases, the American Cancer Society reported 162,460 deaths. Approximately 5,000 new cases were expected to occur in the State of Georgia, with a death toll near 4,500. It is not surprising that in 2005, Spalding Regional reported 53 new cases.

The high mortality rate of lung cancer is undoubtedly related to the fact that it is usually detected at late stages. Unfortunately, screening tools are not yet available to help significantly improve survival rates. Various techniques have been considered as potential screening strategies, including sputum cytology and/or cytometry, chest X-rays, computed tomography (CT) and fluorescence bronchoscopy. Most likely, the best strategy will be a combination of these techniques. In addition to determining the most cost-effective screening methods, it is necessary to establish guidelines regarding who should be screened. An ongoing clinical trial initiated in 2003 at the National Cancer Institute should soon provide the answer to these issues.

With a high incidence, high mortality and the practical absence of screening methods, it appears lung cancer is unstoppable. Nevertheless, we are not completely without weapons against this killer. New drugs added to the therapeutic arsenal offer new hopes of increased survival to lung cancer patients and their families. Moreover, we can weaken the enemy by attacking its allies – the best known is tobacco use.

It is undeniable that smoking is closely associated to lung cancer, responsible for nearly 90% of all lung cancer deaths. Additionally, the risk of lung cancer is present in second-hand smoking. It is not impacted by the use of filters, change to cigars, and the use of ventilation systems or separate smoking areas. Recognizing these facts, Spalding Regional sponsors smoking cessation classes and is engaged in an ongoing campaign to make the hospital a smoke-free facility.

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As commendable as these efforts are, I still believe that they could be complemented by a third outreach strategy targeting school-aged children, particularly middle and high school. This is because 58% of high school students nationwide have tried smoking (according to the Cancer Facts & Figures 2005 report). In the State of Georgia, the 2005 high school smoking rate was 21%. Furthermore, according to the November 2006 volume of the Pediatric Annals Journal, “approximately 5,000 children and adolescents each day will initiate cigarette smoking, resulting in 2,000 becoming regular smokers.” That means 730,000 new tobacco addicts a year. Many of which will carry their harmful habit throughout most of their lives. We need to educate these children on the risks of tobacco use and enlist teachers and pediatricians to help in our fight against lung cancer. After all, it takes a village to reduce smoking. When that happens, lung cancer may still be around, but it will not be as strong. 

Diana Soriano-Rodgers, MD

Introduction of Oncology Committee

The Oncology Committee at Spalding Regional Medical Center oversees the care of patients in our community that have been diagnosed with a malignancy. In addition to setting goals for improvement, the committee supervises the Cancer Registry, performs chart review, develops Tumor Conference presentations, and is available for consultation.

During 2005, members of this committee planned and participated in the local American Cancer Society Relay for Life event, prostate and breast screening programs, and several patient care evaluations.

Our data was also submitted to the Georgia Center for Cancer Statistics, ONCOPOOL, and the National Cancer

Data Base. We are pleased to offer the summary for 2005.

Committee Members:

William Fogle, MD
William Lazenby, MD
Robbie Medbery, MD
Rao Moravineni, MD
Glen Morehead, MD
Ehi Osehobo, MD
Diana Soriano-Rodgers, MD
William Vazquez, MD
Robbin Clark
Nancy Franklin

Doreen Harrington
Cheryl Ivey
Jim Ledet
Mitzi May
Angela Morey
Machelle Pierce
Kim Stephens
Liz Tarleton
Cindy Woods

Education, Prevention and Detection

Spalding Regional Medical Center supports patient and family education as well as community education in an effort to reduce the risks of cancer, promote early detection and improve quality of life. In addition, a cancer support group is available to patients, family members, and caregivers. A multidisciplinary team actively supports patient and family education by facilitating the development of diagnosis and procedure specific instructional resources such as lesson plans, handouts, and videos. The team has established educational discharge criteria for patients in order to improve their ability to care for themselves and reduce the risks of complications.


The approved printed instructional materials are readily accessible to the staff in each patient care area by computer. Approved video libraries are also available in each area. These core curricula of basic information help to ensure consistency and continuity despite the location of the patient. Enhanced instruction by Oncology Certified Nurses and Registered Dietitians is provided by consult on an inpatient and outpatient basis.

Community programs were sponsored during 2005 to raise awareness of the value of prevention and early detection.

These activities included:

- Participation in American Cancer Society programs including the Relay for Life, Prostate Screening, and Breast Cancer Awareness month and the Great American Smokeout.
- Breast Cancer Community Outreach to increase awareness and provide self-exam instruction and

education — throughout the month of October 2005 our Community Wellness Team organized multiple educational seminars throughout our community, with a goal of reaching 800 women. We had excellent participation with over 1000 women and men taking part in the presentations. During each presentation participants learned about risk factors associated with breast cancer and methods of early detection. Participants received educational literature, pink ribbon self-exam reminder stickers to place on calendars, and materials to make wooden bead necklaces. The necklaces were made during the presentation and represented the graduated size of lumps that may be found during breast self-exam, clinical exam, and mammogram. The necklaces, when worn, provide ongoing education to our community as participants explain the purpose of the beads.

- Partnering with local business and industry to promote employee wellness.
- Monthly educational programs for physicians and nurses discussing case studies and new developments.
- Sponsoring community education events on cancer prevention and screenings.
- Community billboards, newspaper advertisements and quarterly community newsletters promoted early detection of prostate cancer and the hospital's free prostate screening programs, discounted mammogram screenings, and community education regarding the importance of self breast exam and early detection of breast cancer. 

Cancer Registry Report

Spalding Regional Medical Center maintains a Cancer Registry, which has data on patients diagnosed or treated for a malignancy at the facility since January 1, 1993 and has more than 3,300 cases currently in the database.

These patients are followed for the remainder of their lives to ensure adequate follow up and to assist with our planning in providing the best care available in the area.

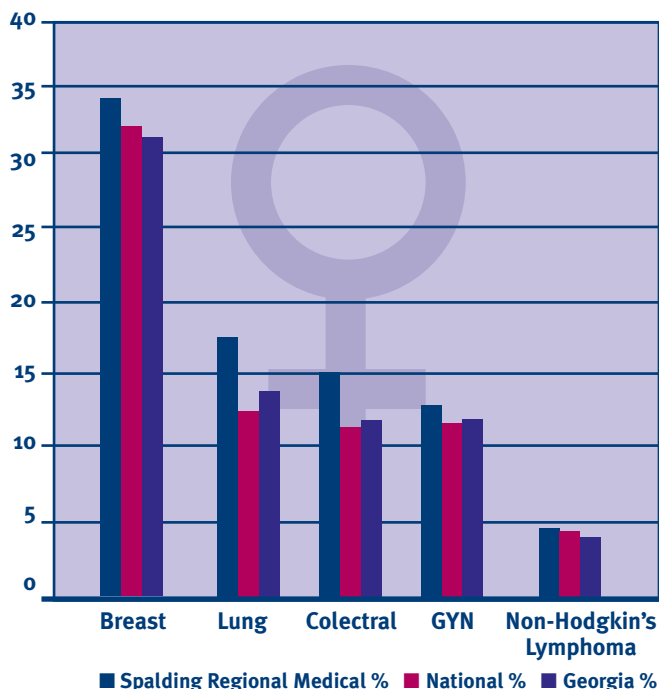
During 2005, 250 new cases (138 males and 112 female) were added to the database. The following tables reflect many details of the patients and their diagnosis and care.

2005 Patients by County

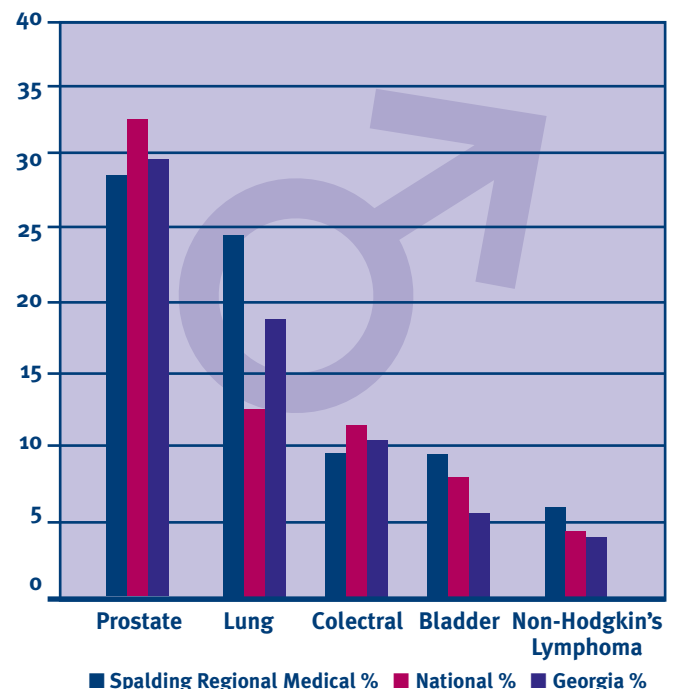
County	# of Patients
Butts	28
Clayton	2
Coweta	2
Fayette	3
Henry	9
Lamar	22
Meriwether	1
Monroe	3
Pike	9
Spalding	157
Upson	6
Other Counties in Georgia	7
Not stated	2

2005 Top 10 Primary Sites	# of Patients	# Male	# Female
Lung	53	34	19
Prostate	40	40	0
Breast	38	1	37
Colon	26	11	15
Bladder	18	13	5
Non-Hodgkin's Lymphoma	13	8	5
GYN	14	0	14
Kidney	8	6	2
Leukemia	6	4	2
Rectal	4	2	2

Female Top 5 Incidence Compared to American Cancer Society Projections, 2005 (%)



Male Top 5 Incidence Compared to American Cancer Society Projections, 2005 (%)

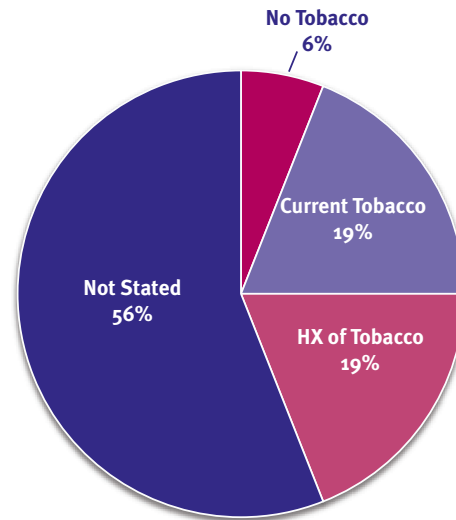


Lung Cancer Incidence at Spalding Regional Medical Center

10 Year Incidence for Lung Cancer

Year	Incidence
2005	53
2004	41
2003	45
2002	51
2001	40
2000	42
1999	40
1998	47
1997	49
1996	34

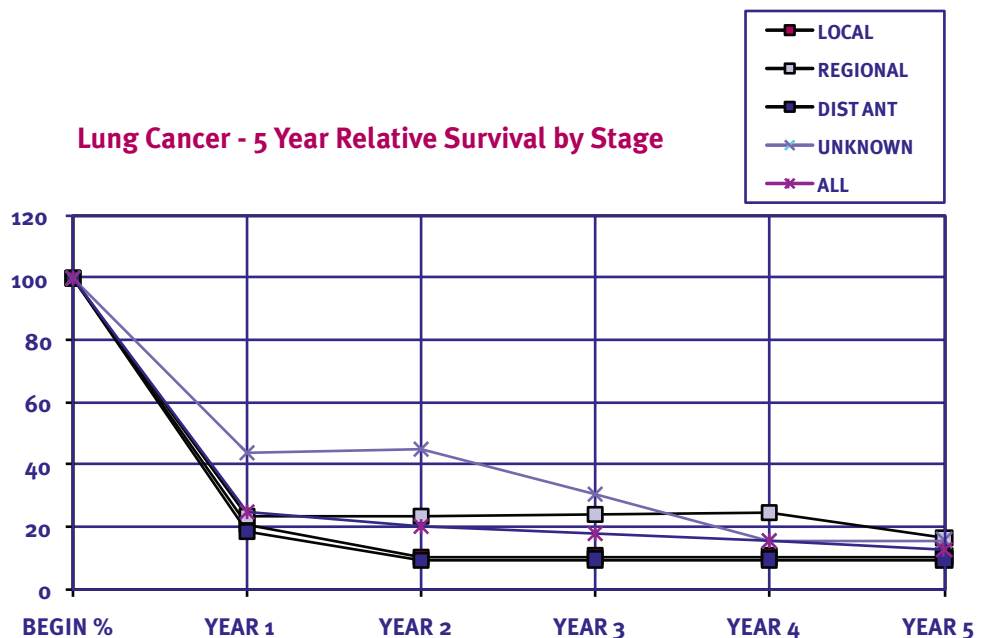
Lung cancer remains in the top five primary sites seen at this facility and nationally with 535 analytic cases in the registry database. For 2005, it was the highest reported malignancy with 53 new cases. According to the American Cancer Society Cancer Facts report, nationwide lung cancer accounts for 13% in males and 12% in females of all cancer diagnoses. In Georgia, lung cancer accounts for 19% of all cancer diagnoses in males and 13% for females. Of the 53 new cases at Spalding Regional, 34 were male and 19 were female, representing 24% and 17% of the total reported cases respectively.



Early detection techniques for lung cancer have not yet been demonstrated to reduce mortality. Furthermore, 67% of all lung cancers diagnosed in Spalding County and the surrounding communities are diagnosed at a late stage. This number falls midpoint between 57% and 77% as measured with other counties in the state.

According to the American Cancer Society Cancer Facts report, tobacco accounts for 30% of all cancers in the U.S. It also accounts for 87% of all lung cancers in Georgia. The chart below shows the rate of tobacco use by lung cancer patients seen at Spalding Regional in 2005.

The five-year relative survival according to the American Cancer Society for all stages is 15.2%. The five-year relative survival for patients first seen in 2000 is shown below.



Oncology Program Services

- 160 ACUTE MEDICAL/ SURGICAL BEDS
- MONTHLY MULTI-DISCIPLINARY CANCER COMMITTEE MEETINGS
- COMPUTERIZED CANCER REGISTRY
- ACCREDITED BY THE JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS
- AMERICAN COLLEGE OF RADIOLOGY ACCREDITED MAMMOGRAPHY SERVICES
- BOARD-CERTIFIED PHYSICIAN ONCOLOGY SPECIALISTS
Medical Oncologists
Radiation Oncologists
Specialists in: Pathology, Urology
General Surgery
Radiology
- OTHER ONCOLOGY SPECIALISTS
Oncology Certified Nurses
Certified Tumor Registrar
Bone Marrow Transplant Referrals
- Clinical Trial Participation and Referrals
- CLINICAL EDUCATION CONFERENCES
Monthly Tumor Conferences
- PATIENT SUPPORT SERVICES
Individual Patient Teaching
- PULMONARY SERVICES
Basal Metabolic Rate (Indirect Caloric Expenditure)
Better Breathers
Cardiac Rehabilitation
Freedom from Smoking
Pulmonary Function Studies
Blood Gas Analysis
Bronchial Hygiene
Oxygen Therapy
Pulmonary Rehab
- REHABILITATION AND ANCILLARY SERVICES
Wound Care
Occupational Therapy
Lymphedema Management
Physical Therapy
Speech Therapy
Swallow Therapy
Enterostomal Care
- LABORATORY
Carcinoembryonic Antigen CA 125, CA 15-3, CA 19-9
Prostate Specific Antigen and Other Tumor Markers
- DNA Probes
Immunochemoluminescence
Surgical Pathology
Cytology
Automated Hematology/Coagulation, Microbiology, Parasitology, Mycobacteriology
- Blood Bank Transfusion Service, Including Therapeutic Phlebotomy
- Automated Blood Chemistry Analysis
- Automated Electrophoresis
Radioimmunoassays
Virology Testing
Toxicology
Immunocytochemistry
Therapeutic Drug Monitoring
- PHARMACY
Laminar Flow Biological Safety For Preparation Of Chemotherapy Agents
Pharmacokinetic Drug Monitoring
Patient Controlled Analgesic Program
Pharmacist Consultation and Monitoring
Medication Counseling Service
Total Parenteral Nutrition Monitoring Service
Pharmacist Run Anti-Coagulation Clinic
- DIAGNOSTIC IMAGING
Mammography
Angiography
Ultrasonography
Magnetic Resonance Imaging
Nuclear Medicine
Spiral Computerized Tomographic Scanning
Imaging Directed Biopsies
Interventional Radiologic Techniques For Relief Of Biliary and Urological Obstruction
Localization and Drainage Of Neoplastic and/or Infected Fluid Collections
- DAY SURGERY FACILITIES
Bone Marrow Biopsies
Brachytherapy
High Dose Brachytherapy
Paracentesis, Thoracentesis
Incisional and Excisional Biopsies
Outpatient Chemotherapy
Major and Minor Procedures
Fine Needle Aspirations
- RADIATION SERVICES AVAILABLE THROUGH GRIFFIN REGIONAL RADIATION THERAPY CENTER

Tumor Conference Dates and Discussions

Jan. 13, 2005	Colon, Breast, Kidney, Parotid	Jun. 23, 2005	Lung, Lymphoma, Bladder
Feb. 1, 2005	Testis, Breast, Prostate	July 7, 2005	Breast, Colon, Kidney
Feb. 17, 2005	Uterus, Cervix	Aug. 18, 2005	Bone Marrow, Breast, Edometrium
Mar. 1, 2005	Bone Marrow, Ovary, Lymphoma	Sept. 6, 2005	Lymph Node, Endometrium, Parotid
Apr. 5, 2005	Stomach, Breast, Melanoma	Oct. 4, 2005	Skin, Breast, Colon
Apr. 15, 2005	Breast, Pancreas, Kidney, Unknown Primary	Nov. 1, 2005	Prostate, Kidney, Bladder, Ovary
May 7, 2005	Lung, Prostate, Kidney	Dec. 6, 2005	Kidney, Colon, Leukemia
May 23, 2005	Lung, Lymphoma, Bladder		
Jun. 7, 2005	Lung, Kidney, Prostate		