

# BITS & PIECES

A PUBLICATION FROM PHOENIX COMMUNITY CANCER CENTER

## INTRODUCING *BITS & PIECES* AND THE PHOENIX COMMUNITY CANCER CENTER

In the course of a lifetime, one in four individuals will be diagnosed with cancer. With these staggering statistics, it is highly likely that each of us will be impacted by this disease at one point or another. Whether you are personally afflicted or a friend or a loved one is stricken, being informed and educated about this disease is an important first step in learning to cope. With this in mind, the staff at Phoenix Community Cancer Center (PCCC) would like to welcome you to *Bits & Pieces*, an informational publication intended to keep local residents like you informed about cancer-related events and activities, news in the field of cancer care, the types of services that are provided through PCCC and more. On a quarterly basis, this newsletter will be circulated throughout north central Connecticut. We hope you take advantage of this resource and the opportunity to increase your knowledge about cancer.

For those who are unfamiliar with us, PCCC is a state-of-the-art facility, located on the grounds of Johnson Memorial Medical Park in Enfield, that provides a full spectrum of cancer care



services ranging from radiation therapy to medical oncology and more. Since its opening in 1998, PCCC has

revolutionized cancer care in this region, enabling local residents coping with cancer to access virtually all the care

they need right in their own community.

PCCC features a radiation therapy service owned and operated by Northeast Regional Radiation Oncology Network (doing business as Community CancerCare), a unique partnership of hospitals including Johnson Memorial (JMH), Hartford Hospital, Manchester Memorial and Rockville General. In fact, PCCC's sister site, The John DeQuattro Community Cancer Center, operates out of the Manchester Memorial Hospital Campus. Because clinical oversight for the radiation therapy service is

*continued on page 2*

## ADJUVANT CHEMOTHERAPY:

### *Reducing the Risk of Cancer Recurrence After Surgery*

By Dennis Morgan, M.D.

As those of you who have had to cope with cancer may already know, three applications of chemotherapy exist: palliation, cure and prevention. Palliation of incurable cancer is intended

to improve the length and quality of a patient's life. Curative treatment, on the other hand, is possible in some cancers, especially tumors of the lymph glands (lymphoma) and a few others. When chemotherapy is used as a preventative technique to prevent recurrence, it is termed "adjuvant

chemotherapy."

Adjuvant chemotherapy has proven most useful in many patients with breast or colon cancer in particular, especially for those in whom nearby lymph glands have trapped tumor cells. Lymph node involvement is associated with an increased risk of residual disease that

*continued on page 4*

# THE EVOLUTION OF RADIATION THERAPY

Jaqueline Lyon, M.D.

With the discovery of x-rays by Roentgen in 1895 and radium by the Curies in 1896, the beneficial effect of radiation in the treatment of malignant tumors was soon recognized. The first patient reported cured of cancer by radiation was in 1899. It took the next 50 years to perfect machines that could adequately deliver accurate, reproducible and penetrating x-rays. With the invention of the Cobalt-60 machine in the early 1950s and the linear accelerator in the late 1950s and early 1960s, the specialty of radiation oncology was revolutionized. Today, linear accelerators are capable of delivering very accurate and penetrating radiation beams to tumors anywhere in the body. They are also capable of treating tumors conformally, a process by which sophisticated computerized planning techniques are used to direct the radiation beam mainly at the tumor, with significant sparing of the surrounding normal tissues. Conformal therapy also has the advantage of treating tumors with higher doses of radiation more safely, resulting in improved tumor control.

Besides perfecting the delivery of radiation externally by linear accelerators, significant advancements have been made in delivering radiation internally with radioactive

isotopes. Since the discovery of radium, other radioactive isotopes have been manufactured that are safer to handle and easier to place accurately in or near tumors. These safer isotopes usually come in the shape of small seeds that can be precisely implanted into tumors and then deliver very high doses of radiation just to the tumor, with minimal radiation to the normal tissues. This method actually administers radiation even more conformally than external radiation from a linear accelerator.

Even though radiation can now be administered more accurately and in higher doses resulting in better cure rates for certain cancers, it is often combined today with surgery and/or systematic therapy, namely chemotherapy or hormonal therapy, to obtain even better tumor control. In many cases, radiotherapy alone will not completely eradicate a cancer because of (1) large size, (2) type of cancer, (3) the location near vital organs that could be damaged by radiation, and/or (4) the spread of tumor to distant body sites. Surgery plays an important role in that the bulk of a tumor can be removed, often leaving only residual microscopic tumor cells that can be easily eradicated by lower and safer doses of radiation. Chemotherapy and hormonal therapy will treat metastatic tumor (tumor cells that have spread to distant sites of the

body) that radiation cannot encompass. In addition, a number of chemotherapeutic drugs can be administered in conjunction with radiation and are capable of rendering the radiation more effective in tumor cell kill. Finally, both chemotherapy and hormonal therapy will significantly reduce large tumors, allowing radiation to be more effective. It has been well understood for some time that radiation eradicates smaller tumors better than larger ones.

The delivery of radiation over the years has evolved significantly, both in the way it is delivered and how it is integrated with other treatment modalities. Because of this evolution, it is important for the

radiation oncologist to interact not only with the patient, but with all those who are involved in the delivery of radiation to the patient. Close interaction is also necessary with those representing other specialties such as medical oncology, surgical oncology and pain control, in addition to various support services. Because a facility such as Phoenix Community Cancer Center provides many of these services all under one roof, it allows for easier integration of all treatment components. The end result is that cancer patients benefit from the highest quality of care and, thus, better rates of recovery and survival. ■

---

*Dr. Lyon is one of two Hartford Hospital physicians who treat patients at PCCC and provide clinical oversight for PCCC's Radiation Therapy Service.*

---

## INTRODUCING BITS & PIECES AND THE PHOENIX COMMUNITY CANCER CENTER

*continued from cover* provided by Hartford Hospital's highly-acclaimed Helen & Harry Gray Cancer Center, those undergoing radiation therapy at PCCC or its sister site can be assured of receiving the same high quality of care found at metropolitan hospitals.

Patients at PCCC also have access to a wide variety of programs offered by JMH and its affiliates, including social work services, nutrition consultation, educational programs, pastoral care consultation, support groups,

visiting nurse services and much more. In addition, the Cancer Center is home to the North Central Oncology Hematology Practice and a satellite office of the American Cancer Society.

For more information about PCCC please call Patricia Shannon, Cancer Center Coordinator, at (860) 272-3030. Your comments and suggestions regarding this newsletter are also welcome. If you would like to read about a particular cancer-related topic, please let us know. ■

# COPING WITH HAIR LOSS DUE TO CANCER TREATMENT

Those coping with cancer often report that one of the most difficult things to accept is hair loss, otherwise known as alopecia, due to chemotherapy or radiation therapy treatments. Even though this loss is temporary and physicians make every effort to prepare patients in advance, it can be very discouraging and depressing, especially during what is already a very emotionally challenging time. If you or someone you love is coping with cancer, here are some simple recommendations that can help ease the frustration of hair loss:

- Get a short, stylish cut prior to beginning your treatments. This will help prepare you, and others, for the change in your appearance. Some patients even shave their heads so they do not have to deal with the hair falling out.
- If you are considering a wig, make an appointment with a wig stylist before your treatments begin. This will enable the stylist to match the wig to your natural hair color and texture.
- Ask your doctor for a prescription for a wig, since some insurance companies pay for them.

- Once treatments begin, use mild shampoo and conditioner and soft hairbrushes. Be sure to comb hair gently without tugging.
- Avoid hair dyes, rollers, curling irons or perms. If it is necessary to use a hairdryer, use only low heat.
- Sleep on a satin pillow to avoid friction between hair and scalp.
- Consider scarves, hats, and turbans in addition to, or instead of, a wig.

For those considering a wig to help them cope with hair loss, below are a few local businesses specializing in this service:

**Janice Wigs by Parenti**  
28 Carol Lane  
Holyoke, MA  
(413) 534-7282

**Nicholas Hair Designs**  
38 Waterside Park  
Windsor Locks, CT  
(860) 627-8811

**Now Trend-Caring Touch**  
610 College Highway  
Southwick, MA  
(413) 569-0239

**Turnpike Barber Shop**  
21 Ella Grasso Turnpike  
Windsor Locks, CT  
(860) 623-8376 ■

Sources: University of Pennsylvania Cancer Center website ([www.oncolink.upenn.edu](http://www.oncolink.upenn.edu)), *Oncolink Oncotip: Hairloss*.

## From Our Patients

In the year and a half since its opening, Phoenix Community Cancer Center has improved the quality of life for many cancer patients and their family members by enabling them to access virtually all the care they need in a location that is convenient and close to home. The positive response from these individuals has overwhelmed PCCC's staff members and provided them with the greatest motivation to give it their all every day. In each issue of *Bits & Pieces*, we will share with you some of the comments from our patients and their loved ones so that you, too, can celebrate the tremendous difference that this wonderful facility has had on our fellow community members who are coping with cancer.

•••

"I'm a 33 year old breast cancer patient who was very scared. My doctors wanted me to go to Hartford for my treatments, but I insisted on going to the Center here in Enfield. I met with Dr. Morgan and his staff, and they were wonderful. They took a very hard time in my life and made it easier. I don't think I could have gotten through without my nurse. I would encourage anyone I know with cancer to go to the Center."

— Taryn Heeber-Doody, *Chemotherapy Patient*

•••

"The care I received at PCCC was first class. I was especially impressed by the professionalism of the radiation techs, Jerry and Debbie."

— Bob Clark, *Radiation Therapy Patient*

•••

"Participating in the Cancer Support Group has helped me in a lot of ways. When you are going through the many stages of cancer (which can be very frightening), it is very helpful to have a place to go where you feel safe and can hear that you are not alone or the only one with these symptoms. The manner in which some of the members deal with these symptoms is very helpful in arriving at the decision of how you will cope with your situation. You take a roomful of strangers, and after a while you become friends with a common thread. When you are down, they lift you up, and when you are up, you in turn help someone else. Patty and Carolyn bring a lot to the group as our leaders. When we have speakers/programs, I personally find the topics very interesting and helpful.

"My husband comes with me (he looks forward to the meetings as much as I do), and that draws us closer. In a way, it is a night out with friends!! The bottom line is that everyone cares."

— Barbara  
*Cancer Support Group Participant*

# PLAYING IT SAFE IN THE SUN

By Sharon Christie, M.D.

With summer quickly approaching, now is the time to remember the dangers of sunbathing. Chronic sun exposure may result in premature aging, wrinkling, brown spots, precancerous conditions and a variety of skin cancers. Skin cancer research shows that the risk of developing skin cancer doubles with just one blistering sunburn prior to the age of 18. Since Melanoma, the most serious form of skin cancer, has been linked to sunburning, the following “sun safety” suggestions may help to minimize your chances of sun damage:

- Avoid sun between 10 a.m. and 4 p.m., when the sun is the most intense.
- Keep infants under six

months of age out of the sun (sunscreens are not approved for infants under six months old).

- Wear protective clothing such as long pants, long-sleeved shirts, broad-brimmed hats and sunglasses to protect commonly exposed body parts.
- Use a broad-spectrum sunscreen that protects against UVA and UVB (ultraviolet rays) and has a sun protection factor (SPF) of at least 15 for daily use and 30 or higher for intense sun exposure (sailing, golfing, swimming, biking, skiing, etc.).
- Keep in mind that sunscreens with SPF 15 absorb 93% of the sunburning rays, while those with SPF 30 absorb 97% of the sunburning rays. Contrary to what many people believe, SPF 30 does not offer double the protection of SPF 15. No sunscreen can protect you from sunburning 100% of the time.
- Use sunscreens all year, including cloudy days.
- Look for sunscreen products containing Zinc Oxide, Titanium Dioxide (UVB block) and Parsol 1789 (UVA block) to protect against sunburning and tanning. UVA causes tanning, and UVB causes sunburning.
- Apply sunscreens 20 to 30 minutes before going outdoors. Reapply sunscreens every two hours if you are sweating or in water, including cloudy days.
- Remember that no tan is a good tan. Tanning results from ultraviolet light stimulation of pigment in your skin to protect your cells from sun damage. Therefore, a tan is a sign of injury.
- If you have sensitive skin, use a sunscreen made for sensitive skin or for babies. For acne-prone or

oily skin, use a gel-based or oil-free sunscreen. For dry skin, use a cream-based sunscreen.

- Beware of indoor tanning. This produces two to three times more UVA than outdoor light. UVA penetrates more deeply than UVB and results in photoaging (wrinkling) and a variety of skin cancers. Cosmetic use of sunlamps and tanning beds is discouraged by the American Academy of Dermatology. ■

*Dr. Christie is a dermatologist whose practice, Enfield Dermatology, L.L.C., recently opened at 140 Hazard Avenue in Enfield, on the grounds of Johnson Memorial Medical Park. To make an appointment or for more information, please call her office at (860) 272-2998.*

Sources: New England Dermatology & Laser Center “Sun Safety” Handout. Dermatology Insights. “Protect Yourself Against Skin Cancer.” Spring 2000 Issue. American Academy of Dermatology.

## ADJUVANT CHEMOTHERAPY: *Reducing the Risk of Cancer Recurrence After Surgery*

*continued from cover*  
is undetectable at the time but forms the seed of recurrence. Adjuvant chemotherapy, used shortly following surgery, can in many cases eradicate this microscopic residual cancer. The risk of recurrence and death from cancer can be reduced by as much as 40%.

While the details of treatment vary, one can expect to receive four to eight cycles of adjuvant

chemotherapy treatment consisting of intravenous administration of a combination of drugs. This is done on an outpatient basis, and many patients are able to carry out their normal activities, even continue to work. A few days per treatment cycle may keep some patients at home with an upset stomach, fever or fatigue. Hair loss may also occur with some regimens, but it is usually not a

significant problem for most patients. The major side effect of colon-related treatments are loose stool and minor skin irritation.

A common breast cancer regimen involves drug administration over an hour every three weeks, while that for colon tumors consists of a 30-minute-per-day infusion for five consecutive days. This is repeated every four weeks for six times.

For many patients, the cost and potential side effects of chemotherapy are far outweighed by the potential benefit — freedom from recurrence of cancer. ■

*Dr. Morgan is Medical Director of PCCC. His practice, North Central Oncology Hematology, is also housed in the Center. For more information, please call his office at (860) 763-4027 or visit the North Central Oncology Hematology website at [ncohp.com](http://ncohp.com).*

# MEET THE PCCC FAMILY

**I**n this issue of Bits & Pieces, we would like to introduce you to some of the people you might encounter at Phoenix Community Cancer Center (PCCC). What follows is a brief introduction to the radiation therapy staff. In the next issue, we will highlight those individuals who provide oncology services.

## **Timothy Boyd, M.D.**

Dr. Boyd received his bachelor's degree from Hamilton College and his medical degree from The State University of New York Medical School. After completing a residency at the University of Wisconsin, Dr. Boyd went to work at Hartford Hospital, which provides the clinical oversight for PCCC. He has been treating patients at PCCC since 1999. His outside interests include travel, mountain biking and camping.

## **Jerry Cenigilo**

*Radiation Technician*  
Jerry completed his training in radiation therapy at Hartford Hospital and has been working as a radiation therapist since 1995. His interests include music, playing the guitar, baking and family.

## **Charles Flavin**

*Chief Radiation Technician*  
Charles attended the State University of New York at Syracuse and received his training in radiation at Hartford Hospital. His interests include travel, history, sports, family and politics.

## **Debbie Lesko**

*Radiation Technician*  
Debbie completed her training in radiation at Hartford Hospital and has been working as a radiation therapist for the past three years. Her greatest interest is in constantly learning and challenging her skills.

## **Jacqueline Lyon, M.D.**

Dr. Lyon received her undergraduate degree from the Connecticut College for Women and medical degree from Brown University Medical School. She completed an internship at Danbury Hospital and another internship in radiation at the University of

Pennsylvania. Her interests include travel, tennis, kayaking and other outdoor activities.

## **Holly Phaneuf, R.N.**

*Radiation Oncology Nurse*  
Holly received her bachelor's degree in nursing from the University of Massachusetts and her nurse educator certificate from the University of California at Los Angeles. She has worked as an oncology nurse for nearly 20 years. Prior to joining the staff of PCCC, she was employed by the North Central Oncology Hematology Practice. Her interests include family, gardening and church.

## **Robert R. Rice**

*Physicist*

Bob has an undergraduate and master's degree from the University of Kentucky. He served two years in the Army and joined the staff of Hartford Hospital in 1975 as a radiation physicist. He later became Assistant Administrator of Hartford Hospital's Helen & Harry Gray Cancer Center and, in 1999, was promoted to Director of Radiation Physics. His interests include sailing and enjoying time at his Vermont farm.

## **Marianne Sullo**

*Administrative Associate II*  
Prior to joining the staff of PCCC, Marianne worked at Hartford Hospital for 30 years. Her interests include artistic projects and family. ■

## A SPECIAL THANKS TO THE PCCC ADVISORY BOARD

Phoenix Community Cancer Center (PCCC) is fortunate to benefit from the support of a number of community residents who have generously volunteered to sit on its Advisory Board. These individuals, representing a variety of towns, local businesses and organizations, congregate quarterly to discuss various aspects of the PCCC milieu. Members of the Advisory Board assist the Center's staff in developing ideas regarding funding, marketing strategies, and the general functions of the Center and its role within the community. For this special effort and support, we would like to offer our heart-felt appreciation to the following individuals:

**Roderick Brooks**, *Hallmark Cards*

**Reanne Burke, R.N.**, *North Central  
Oncology Hematology Practice*

**Bonnie Cassarino**, *Tolland Bank*

**Richard Cressotti**, *Enfield*

**Linda DeGray**, *Enfield*

**Marianne Drake**, *Johnson Health Network*

**Joseph Fallon, Esq.**, *Enfield*

**Julie Fallon**, *Enfield*

**David Gauthier**, *United Technologies*

**Ann Kannen**, *Phoenix Home Life  
Mutual Insurance Company*

**Jill Klus**, *Stafford*

**Alfred A. Lerz**, *Johnson Health Network*

**Jacqueline Lyon, M.D.**, *PCCC*

**Daniel McIntyre**, *Johnson Health Network*

**James Miller**, *Miller Oil Co.*

**Dennis Morgan, M.D.**, *Medical Director, PCCC*

**David O'Connor**, *Enfield Federal Savings and Loan*

**Carol Peters**, *Somers*

**Lynne Pirrello**, *Windsor*

**Rose Roszczewski**, *Stafford Savings Bank*

**Patricia Sansone**, *Hamilton Sundstrand*

**Patricia Shannon**, *PCCC*

## HELPING WOMEN LOOK GOOD AND FEEL BETTER

**W**omen coping with hair loss, dry skin and fatigue as a result of either radiation or chemotherapy treatments are invited to participate in a special program sponsored by the American Cancer Society (ACS). Shown below is chemotherapy patient Taryn Heeber-Doodly, just one of approximately fourteen women from throughout north central Connecticut who have benefited from participation in the "Look Good, Feel Better" Program. A trained cosmetologist works with participants to teach them about various makeup techniques, skin care and wig styles. The program is available to any woman going through treatment. This is an enjoyable activity which boosts women's confidence during a difficult time. If you would like more information or would like to make an appointment, please call the ACS at 1-888-511-3311. ■



## ONCOLOGY RESOURCE LIBRARY OPEN TO THE COMMUNITY

**P**hoenix Community Cancer Center and the American Cancer Society (ACS) invite local residents to take advantage of the books, videos, pamphlets, and computer access available at the ACS

Resource Library located within the Center. Books and videos may be borrowed. If there is anything we can assist you with, please stop by or call (888) 511-3311 or (860) 272-3030. ■

## FINDING THE SUPPORT YOU NEED:

### Upcoming Events and Support Groups

**I**f you or someone you love is coping with cancer or if you simply want to learn more about this disease and ways that you can protect yourself, Phoenix Community Cancer Center (PCCC) may be an invaluable resource for you. The Cancer Center and the members of Johnson Health Network sponsor a variety of programs, events and support groups to assist those with cancer, to educate local residents, and to increase community awareness. Take a look at what's being offered in the months ahead:

#### SEPTEMBER

**"Renewing the Spirit, Healing through Art" Art Exhibit and Sale**  
**Thursday, September 14 —**  
**Saturday, September 23, 2000**  
**PCCC**

A spectacular showcase of works by various local artists. Details will be available in the months ahead. For more information, please call (860) 272-3030.

**5th Annual A Reason for Hope Walk/Run for Cancer**  
**Saturday, September 23, 2000**  
**Starting at PCCC**

A 5K Walk/Run to benefit

the A Ray of Light Capital Campaign for PCCC.

For more information or to be put on a mailing list for a registration and sponsor form, please call (860) 684-8109 or (860) 749-2201, extension 8109.

#### ONGOING

#### Support Groups

A general Cancer Support Group meets from 6:30 to 8 p.m. on the second and fourth Wednesday of every month at PCCC. Call (860) 272-3030 ■

*Phoenix Community Cancer Center has been made possible in part by the generosity of Phoenix Home Life Mutual Insurance Company.*

**Phoenix Community Cancer Center**  
142 Hazard Avenue, Enfield, CT 06082  
(860) 272-3030

 A member of Johnson Health Network • Quality service from people who care