



The Syncure Report

Published By The
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Cancer Education... SynCure Continues Successful Public Education Symposium Series...

Tallahassee – Virtually every family has confronted or will confront the diagnosis of cancer. When diagnosed with cancer, patients:

- Face fear, anxiety and confusion.
- Encounter a vast array of treatment options including clinical trials of emerging therapies.
- Often require on-going treatments... in some cases, for a lifetime.

Therefore, patients and their families have a real need and intense desire to learn more about their disease and the latest advances in cancer research and treatment.

One of our key missions at SynCure is providing that information. SynCure's *UPDATE 2004: Cancer Research and Treatment* has been structured to provide cancer patients, their family members, healthcare support personnel and members of patient-support groups with:

- Current information on advances in the war on cancer, in non-technical language, by a panel of cancer specialists.
- An informal, yet highly professional, forum in which they can ask questions of leading experts.

SynCure's initial *UPDATE* program was conducted on February 8, 2003, in New York City. The audience response, based upon completed assessment forms, was universal praise for "the most informative and well structured public cancer education program ever conducted in New York City!" The panel of cancer specialists shared the audience's opinion.

Based upon the success of the initial *UPDATE* program, SynCure planned and conducted additional highly successful programs throughout the nation including:

- Ft. Lauderdale, Florida (Holy Cross Hospital, Bienes Cancer Center, February 7, 2004).
- Englewood, New Jersey (Englewood Hospital and Medical Center, March 13, 2004).
- North Florida/South Georgia (Tallahassee Memorial Hospital, April 10, 2004).
- McHenry, Illinois (Centegra Sage Cancer Center, September 25, 2004).

The *UPDATE* programs include presentations by cancer specialists, followed by an intensive Q&A session with the audience. Topics covered in previous programs include:

- An Overview of the War on Cancer
 - Advances in Radiation Oncology
 - New Generation Cancer Drugs
 - Innovations in Diagnosing Cancer
 - Advances in Immunotherapy
 - The Critical Role of Clinical Trials
- and many others.

Attendance at SynCure programs is free for the public; all program related costs have been funded via a combination of corporate donations and the sponsorship of participating medical institutions. Many of the nation's leading healthcare companies have been extremely supportive and generous in underwriting the *UPDATE* programs: Amgen, AstraZeneca, Biogen, Bristol Myers-Squibb, Celgene, Eli Lilly, Genentech, GlaxoSmith-Kline, Mead Johnson, MedImmune, Myriad Genetics, Ortho Biotech, Pfizer, Roche, Taxolog, Vitas, and Wyeth.

UPDATE programs have featured speakers from many of the nation's leading cancer centers, all of whom have served without remuneration. Some of the institutions represented on our panels have included:

- Harvard/Dana-Farber Cancer Institute
- Memorial Sloan-Kettering Cancer Center
- The Mayo Clinic
- National Cancer Institute
- H. Lee Moffitt Cancer Center & Research Institute
- Columbia-Presbyterian Cancer Center
- University of Chicago Cancer Center
- M.D. Anderson Cancer Center
- Cancer Institute of New Jersey

For 2005, SynCure has plans for an extensive schedule of *UPDATE* programs to be conducted at locations throughout the nation. Please visit our website (www.syncure.org) for information on the schedule of programs as it becomes available.

An Exciting New Public Cancer Education Initiative...

New York City – SynCure and the New York City Department of Health & Mental Hygiene are currently in the process of structuring a program series titled *UPDATE 2005: CANCER and the AMERICAN WOMAN* to be conducted at locations throughout the city. This program will focus primarily on breast and gynecological cancers with emphasis on diagnosis and treatment modalities.

SynCure Is Pleased To Announce...

Tampa – Dr. Adam I. Riker of the H. Lee Moffitt Cancer Center and Research Institute, Tampa, Florida, has joined SynCure's Scientific Advisory Committee. Dr. Riker received both his B.S. and M.D. degrees from the University of South Florida followed by eight years of surgical training at Loyola University in Chicago and the National Cancer Institute in Bethesda, Maryland. He then served as an Assistant Professor of Surgery at Loyola before joining Moffitt in 2003. He is affiliated with the Department of Interdisciplinary Oncology, the Cutaneous Oncology Program, the Comprehensive Breast Cancer Program and the Experimental Therapeutics Program. Dr. Riker has conducted research on immunotherapies for melanoma and has published 28 research papers in distinguished research journals.

continued

Dr. Riker is recognized within the oncology community for his innovative research, commitment to patients and his support of cancer education.



SynCure's Scientific Advisory Committee is composed of leading cancer experts:

- David A. Scheinberg, MD, Ph.D., Director Molecular Pharmacology and Chemistry Program, Memorial Sloan-Kettering Cancer Center, New York.
- J. Paul Eder, MD, Professor of Medicine, Harvard Medical School, Dana-Farber Cancer Institute, Boston.
- Alan M. Gewirtz, MD, Professor of Medicine, University of Pennsylvania School of Medicine, Abramson Cancer Center, Philadelphia.
- Howard L. Kaufman, MD, Professor of Medicine and Vice Chairman of Surgical Oncology, Columbia University College of Physicians & Surgeons, Irving Comprehensive Cancer Center, New York.
- Hyam I. Levitsky, MD, Professor of Oncology and Medicine, Johns Hopkins School of Medicine, Kimmel Comprehensive Cancer Center, Baltimore.
- Drew Pardoll, MD, Ph.D., Professor of Medicine, Johns Hopkins School of Medicine, Kimmel Comprehensive Cancer Center, Baltimore.
- Carol Portlock, MD, Assistant Professor of Medicine, Cornell-Weill School of Medicine, Memorial Sloan-Kettering Cancer Center, New York.
- Jerome Ritz, MD, Professor of Medicine, Harvard Medical School, Dana-Farber Cancer Institute, Boston.
- Roger K. Strair, MD, Ph.D., Professor of Medicine, Robert Wood Johnson School of Medicine/UMDNJ, Cancer Institute of New Jersey, New Brunswick, New Jersey.



Sportsmen and Sportswomen Support SynCure...

Millbrook, New York - Sporting Clays is the nation's fastest growing sport shooting activity. On May 22, 2004, clay target shooters, both men and women, from New York, New Jersey, Connecticut and Pennsylvania participated in The SynCure-Beretta Sporting Clays Classic-2004, at the Orvis-Sandanona Shooting Grounds in Millbrook, New York.

Orvis-Sandanona is the oldest sports shooting venue in the United States and was built during the presidency of Thomas Jefferson. The grounds and facilities are magnificent; dense woods, rolling fields, trout streams and historic log buildings create a wonderful outdoor sporting environment.

Beretta USA, Inc., was the event's lead sponsor; additional sponsors were the National Shooting Sports Foundation, Taxolog, Inc., and Nile Associates.

Everyone participating in the event agreed that Sandanona's target-setting was up to standard; an exciting assortment of presentations that complimented the diverse nature of a unique course making for a challenging and exciting day in the woods. The clay target shooting portion of the event was completed in the early afternoon and participants were treated to a gourmet luncheon featuring fresh salmon, sliced steak, a fabulous chicken dish and all the trimmings.

Steve Roman, a volunteer advisor and organizer of the event, made a short speech thanking everyone for their participation and acknowledging the sponsors for their generous support. Prizes and trophies were awarded to individuals and winning squads.

The SynCure-Beretta Sporting Clays Classic was a tremendous success raising over \$25,000... the shooters had a fun-filled day while simultaneously supporting an extremely important cause, cancer research and education.

Note...

Based upon the success of the SynCure-Beretta Sporting Clays Classic-2004, Beretta USA and SynCure are exploring the feasibility of a national tournament series to be conducted at seven or eight prestige venues throughout the United States.



Some Suggested Web Sites...

There are hundreds (perhaps thousands) of web sites focused on cancer... some good, some bad and many mediocre. We believe the following list represents some of the best. Naturally, one should always consult his or her physician before initiating any course of action pertaining to cancer:

National Cancer Institute

www.cancer.gov

University of Pennsylvania Cancer Center

www.oncolink.upenn.edu

Memorial Sloan-Kettering Cancer Center

www.mskcc.org

H. Lee Moffitt Cancer Center & Research Institute

www.moffitt.usf.edu

M.D. Anderson Cancer Center

www.mdanderson.org

Columbia University-Irving Cancer Center

www.ccc.columbia.edu

Cancer Institute of New Jersey

www.cinj.org

American Society of Clinical Oncology

www.asco.org

Selected Cancer Questions & Answers

IMPORTANT: The following information has been extracted from NCI publications and the NCI web site (www.cancer.gov). Always consult your personal physician for guidance in matters pertaining to your health and that of your family.

What Is ‘Staging’?

Staging describes the extent or severity of an individual’s cancer based on the extent of the original (primary) tumor and the extent of spread in the body. Staging is important:

- Staging helps the doctor plan a person’s treatment.
- The stage can be used to estimate the person’s prognosis (likely outcome or course of the disease).
- Knowing the stage is important in identifying clinical trials (research studies) that may be suitable for a particular patient.

Staging helps researchers and health care providers exchange information about patients. It also gives them a common language for evaluating the results of clinical trials and comparing the results of different trials. Staging is based on knowledge of the way cancer develops. Cancer cells divide and grow without control or order to form a mass of tissue, called a growth or tumor. As the tumor grows, it can invade nearby organs and tissues. Cancer cells can also break away from the tumor and enter the bloodstream or lymphatic system. By moving through the bloodstream or lymphatic system, cancer can spread from the primary site to form new tumors in other organs. The spread of cancer is called metastasis.

Staging systems for cancer have evolved over time. They continue to change as scientists learn more about cancer. Some staging systems cover many types of cancer; others focus on a particular type. The common elements considered in most staging systems are:

- Location of the primary tumor
- Tumor size and number of tumors
- Lymph node involvement (spread of cancer into lymph nodes)
- Cell type and tumor grade (how closely the cancer cells resemble normal tissue)
- Presence or absence of metastasis

What Are The Phases of A Clinical Trial?

Phase I trials are the first step in testing a new approach in humans. In these studies, researchers evaluate what dose is safe, how a new agent should be given (by mouth, injected into a vein, or injected into the muscle), and how often. Researchers watch closely for any harmful side effects. Phase I trials usually enroll a small number of patients and take place at only a few locations. The patients are divided into smaller groups, called cohorts. Each cohort is treated with an increased dose of the new therapy or technique. The highest dose with an acceptable level of side effects is determined to be appropriate for further testing.

Phase II trials study the safety and effectiveness of an agent or intervention, and evaluate how it affects the human body. Phase II studies usually focus on a particular type of cancer, and include fewer than 100 patients.

Phase III trials compare a new agent or intervention (or new use of a standard one) with the current standard therapy. Participants are randomly assigned to the standard group or the new group, usually by computer. This method, called randomization, helps to avoid bias and ensures that human choices or other factors do not affect the study’s results. In most cases, studies move into phase III testing only after they have shown promise in phases I and II. Phase III trials may include hundreds of people across the country.

Phase IV trials are conducted to further evaluate the long-term safety and effectiveness of a treatment. They usually take place after the treatment has been approved for standard use. Several hundred to several thousand people may take part in a phase IV study. These studies are less common than phase I, II, or III trials.

What Is Immunotherapy?

Immunotherapy (also known as biological therapy) is a relatively new family of cancer treatments that stimulates or restores the ability of the immune system to fight cancer or is used to lessen side effects that may be caused by some cancer treatments. There are many kinds of immunotherapies, including interferons, interleukins, and vaccines. One new approach uses antibodies that have been specially made to recognize specific cancers. When coupled with natural toxins, drugs, or radioactive substances, the antibodies seek out their target cancer cells and deliver their lethal load.

What Are Targeted Drugs?

Targeted cancer therapies use drugs that block the growth and spread of cancer by interfering with specific molecules involved in carcinogenesis (the process by which normal cells become cancer cells) and tumor growth. Because scientists call these molecules “molecular targets,” these therapies are sometimes called “molecular-targeted drugs,” “molecularly targeted therapies,” or other similar names. By focusing on molecular and cellular changes that are specific to cancer, targeted cancer therapies may be more effective than current treatments and less harmful to normal cells. Most targeted cancer therapies are in preclinical testing (research with animals), but some are in clinical trials (research studies with people), or have been approved by the U.S. Food and Drug Administration (FDA).

What Is A PET Scan?

The positron emission tomography (PET) scan creates computerized images of chemical changes that take place in tissue. The patient is given an injection of a substance that consists of a combination of a sugar and a small amount of radioactive material. The radioactive sugar can help in locating a tumor, because fast growing cancer cells often take up or absorb sugar faster than other tissues in the body.