Collaborating for Breast Health

Avera Queen of Peace Cancer Center

Avera Queen of Peace Foundation

You’ll Never Walk Alone Foundation

Heart & Sole Association

Susan G. Komen for the Cure

American Cancer Society

Cuts for Cancer

Char Greenway Memorial Fund

Hometown Pink

Public Report 2011-2012
Mobile Digital Mammography

Digital Mammography provides a means for breast cancer to be detected as early as possible. MOBILE digital mammography is a means for breast cancer to be detected as early as possible for women in rural areas.

Mobile “digital” mammography services through Avera Queen of Peace were first made available in November 2010. Women in surrounding communities receive the benefit of a digital mammogram without the hardship of driving a long distance. So far, area communities being served by Avera Queen of Peace Mobile Digital Mammography are:

- Plankinton
- Chamberlain
- Lower Brule
- Howard
- Corsica
- Woonsocket
- Salem
- De Smet
- Burke
- Fort Thompson
- St. Joseph Indian School

The goal of screening exams for early breast cancer detection is to find cancers before they start to cause symptoms. **Screening** refers to tests and exams used to find a disease, such as cancer, in people who do not have any symptoms. **Early detection** means using an approach that lets breast cancer get diagnosed earlier than otherwise might have occurred.

Breast cancers found during screening exams are likely to be smaller and still confined to the breast. The size of a breast cancer and how far it has spread are some of the most important factors in predicting the prognosis (outlook) of a woman with this disease. Breast cancers that are found because they are causing symptoms tend to be larger and are more likely to have already spread beyond the breast.

Doctors feel that early detection tests for breast cancer save thousands of lives each year, and that **many more lives could be saved** if more women took advantage of these tests.

<table>
<thead>
<tr>
<th>Date</th>
<th>Number Screened</th>
<th>Add'l Studies</th>
<th>Comments</th>
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<tbody>
<tr>
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<td>28</td>
<td>2</td>
<td>2 - invasive Ductal Carcinoma in Situ;</td>
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<tr>
<td>Oct. 2, 2007</td>
<td>25</td>
<td>5</td>
<td>5 - Six month follow up</td>
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<tr>
<td>May 18, 2008</td>
<td>23</td>
<td>5</td>
<td>4 - negative; 1 - six month follow up</td>
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<tr>
<td>May 7, 2009</td>
<td>28</td>
<td>0</td>
<td></td>
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<tr>
<td>Oct. 24, 2009</td>
<td>50</td>
<td>4</td>
<td>2 - Ultrasounds, 1 - a breast cyst,</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>1 - six month follow up</td>
</tr>
<tr>
<td>May 1, 2010</td>
<td>45</td>
<td>2</td>
<td>2 - six month follow up</td>
</tr>
<tr>
<td>Oct. 23, 2010</td>
<td>38</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Oct. 27–Nov. 11</td>
<td>36</td>
<td>5</td>
<td>4 - additional views; 1 - six month follow up ultrasound</td>
</tr>
<tr>
<td>Oct. 6, 2012</td>
<td>24</td>
<td>3</td>
<td>1 - six month follow up,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 - additional views</td>
</tr>
</tbody>
</table>

**Total** 297 26

Avera Queen of Peace Breast Cancer Screening 2007-2012

The Eighth Annual ’a Splash of Spirits’ was a HUGE success! A crowd of over 350 people enjoyed the delicious food, fabulous assortment of wine and beer, and over 50 auction items. Due to the generosity of our sponsors and donors, we netted over $96,000 to provide support for cancer screenings for those in need in the Mitchell region. The biggest change this year was making the celebration personal and more focused on the mission. The event was about cancer survivors, those people who have lost their battle, and about how we can come together as a community to raise awareness about the disease.
What is hereditary breast cancer?
A small percentage of all breast cancers run in families. Hereditary cancers are those associated with inherited gene mutations. When genes themselves are damaged, they can develop changes called “mutations.” When mutations occur in these genes, cells can grow out of control and cause cancer.

What is the most common cause of hereditary breast cancer? Actually, for both hereditary breast and ovarian cancer the most common cause is “hereditary breast and ovarian cancer (HBOC) syndrome.” This syndrome is associated with germline mutations in the tumor suppressor genes.

What is a tumor suppressor gene?
It is a gene that protects a cell from one step on the path to cancer. When this gene is mutated to cause a loss or reduction in its function, the damaged cell can progress to cancer, usually in combination with other genetic changes. The most common breast cancer tumor suppressor genes are breast cancer type 1 (BCRA1) and breast cancer type 2 (BRCA2) susceptibility genes.

How are individuals identified for being at risk for breast cancer?
An assessment tool has been developed as a collaborative effort between the Avera Queen of Peace Cancer Center and the Avera Cancer Institute. If consultation with a genetic counselor is deemed necessary, this will be arranged locally, for patient convenience.

What is a genetic counselor?
A genetic counselor is a qualified member of the health care team who will identify families at risk, investigate the problems present in the family, interpret information about the disorder (cancer in this case), analyze inheritance patterns and risks of recurrence, and review available genetic testing options.

What does the genetic counselor review?
The genetic counselor will review the maternal and paternal history independently. Some characteristics that increase the risk of hereditary syndrome include:
- the number of affected relatives
- the closeness of the relationship between the affected relative and the individual being assessed
- young age at diagnosis

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- young age at diagnosis

What tests could a genetic counselor order? If an individual is found to be at increased risk, this risk will be communicated and a recommendation made to the individual and oncologist to determine if ordering genetic tests is appropriate. The oncologist and the genetic counselor will work together to order the appropriate tests.

Where can these genetic tests be performed? Most testing consists of a blood draw which can be done at the Avera Queen of Peace Cancer Center. The individual and physician are notified of results within a few weeks.

Why the assessment? Why not just test everyone? Genetic testing can be very expensive. Selection of individuals most appropriate for genetic testing for mutations in BRCA1 and BRCA2 is important to eliminate unnecessary testing.

What do the results of the genetic tests mean? Women and men who are found to be positive for BRCA1 or BRCA2 mutations are at a greater risk to develop breast cancer (table 1). Not only are they at risk for breast cancer, but at an increased risk for ovarian cancer and men are at an increased risk for prostate cancer.

Are there further treatment options for patients that test positive for BRCA1 or BRCA2 mutation? The patient should discuss additional preventative measures with the oncologist.

Who is at an increased risk for breast cancer?
Many personal and environmental factors may influence an individual's risk of developing breast cancer. These factors include:
- gender
- age
- ethnic background
- history of previous breast cancer
- certain changes in breast tissue
- hormonal factors

A history of breast cancer in closely related family members is also an important risk factor, particularly if the cancer occurred at an early age.

<table>
<thead>
<tr>
<th>Risk of Breast Cancer</th>
<th>Percent of Population</th>
<th>Percent of All Breast Cancer Cases</th>
<th>Average Risk of Breast Cancer to Age 70</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive family history of breast cancer</td>
<td>~10</td>
<td>15 to 20</td>
<td>10 to 13 Percent</td>
</tr>
<tr>
<td>Positive BRCA1 or BRCA2 mutation</td>
<td>~.01</td>
<td>5 to 6</td>
<td>50 to 85 Percent</td>
</tr>
<tr>
<td>Without positive family history and without BRCA mutation</td>
<td>~90</td>
<td>80 to 85</td>
<td>7 Percent</td>
</tr>
</tbody>
</table>

An interactive tool to help estimate a women’s risk of developing breast cancer can be found at the following link http://www.cancer.gov/bcrisktool/
The stylists at Hollywood Style stopped cutting long enough to pose for our camera.

Cancer Center Director Charlene Berke accepts a check from students at Hanson High School. Funds were raised at their Hometown Pink events.

Miss South Dakota Calista Kirby was a guest speaker at the You’ll Never Walk Alone Breast Cancer Foundation Girls Night Out Event.

Proactive Breast Health
The Avera Queen of Peace Cancer Center, participates in a number of health fairs and other health related events in Mitchell and surrounding communities to help educate the public on the importance of cancer education and screenings for early detection. Please check our “Calendar of Events” to find out when the Cancer Center will be attending an event in your community; then plan to participate! If you have an event planned for your community and would like to let us know, please contact us at 605-995-5756.

www.AveraQueenofPeace.org
Est. 2001

“a Splash of Spirits” is held in November to benefit the Cancer Care Fund at Avera Queen of Peace. The event includes wine and beer tasting, lots of delicious food, live music and a silent and live auction.

The Cancer Care Fund primarily assists with cancer screenings and education including breast, colorectal, prostate and potentially other screenings.

www.AveraQueenofPeace.org
Est. 2000

Hometown Pink
School events held by area high schools including Hanson High School to help support free breast screenings and education events.

Char Greenway Memorial Fund
Funds were raised through an Annual Bowling Tournament and Silent Auction to support breast health screenings and educational events.

Cuts for Cancer
Annual day-long haircut event held at Hollywood Style in Mitchell, SD. The proceeds support The Cancer Care Fund at the Avera Queen of Peace Cancer Center.

American Cancer Society
The American Cancer Society is the nationwide, community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives and diminishing suffering from cancer through research, education, advocacy and service.

www.cancer.org
Est. 1913

The purpose of the Heart and Sole Cancer Walk/Run is to raise money to help those with cancer. The monies raised by the Heart and Sole Cancer Walk/Run stays local. The money is distributed through the Heart and Sole Cancer Assistance program.

www.MitchellHeartandSole.com
Est. 1998

The purpose of the “You’ll Never Walk Alone” Breast Cancer Foundation is to provide support and assistance to breast cancer patients, survivors and their families.

www.YNWAOne.com
Est. 2009

Collaborating together for breast health
There was lots of activity at the Silent Auction held during the Char Greenway Bowling Tournament.

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www.AveraQueenofpeace.org

Est. 2000

www.Komensouthdakota.org

Est. 2005

The goal of the Komen South Dakota Affiliate is to help everyone in our state become aware of, and have easy access to, information on breast health, education and services in our area. The South Dakota Affiliate of Susan G. Komen for the Cure began serving the state in 2005.

Our team had a great turn out for the American Cancer Society Relay for Life held in January!

The Participants were entertained at the Heart & Sole Cancer Walk/Run.

“a Splash of Spirits” is held in November to benefit the Cancer Care Fund at Avera Queen of Peace. The event includes wine and beer tasting, lots of delicious food, live music and a silent and live auction.

The Cancer Care Fund primarily assists with cancer screenings and education including breast, colorectal, prostate and potentially other screenings.

www.AveraQueenofpeace.org

Est. 2000

www.Ynwalone.com

Est. 2009

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www.Ynwalone.com

Est. 2009

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www.Komensouthdakota.org

Est. 1982

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Shannon Daly Interview: Thoughts Regarding Diagnosis, Treatment and Family

It was time for Shannon to get her annual mammogram, but she was just not finding time to get it done. She started noticing all the breast cancer materials around and the TV ads, and she said the ‘third boat’ was when she went to her primary care physician’s office and there was a sign-up sheet for mammograms. She signed up. “Thank goodness for all the emphasis on breast cancer and the need for annual mammograms. Between radio, TV, doctor’s office, and other women, I finally got the hint and went in for my annual mammogram.”

Although Shannon has breast cancer in her family, she has had no reason to believe she would get cancer, and she was shocked by the diagnosis. “I’m so thankful that God left my family alone, and I just thought to myself, ‘bring it on God…I can handle it.’ I’m so blessed – everyone from my husband and children to my siblings helped me through the process from the shock of diagnosis to the surgery. My doctor came into the room and was surprised to see all the family members...he said, ‘You have one heck of a support system’ and I just smiled.”

Shannon’s advice for other women, “It’s okay to ask questions and ask lots and lots of questions, and if you don’t understand the answers, ask them to re-explain. If you still can’t understand, ask for a second opinion. It’s okay! Heck, getting a second opinion is like going used car shopping, and you always have to get quotes and look at your options before you decide!”

Shannon, thinking about some of the hard times with her family, particularly the children, “They knew I was sick and they were afraid for me and themselves, but I just said to them, ‘We’re going to go through some mud, but I can see green grass ahead.’ They knew what I meant.”

Shannon had great health care and great support. She received her radiation therapy at the Avera Queen of Peace Cancer Center and enjoyed the pink bag she received from the You’ll Never Walk Alone Foundation, and her family really appreciated the computers in the lobby, as it made it easy for them to keep in contact with work or home. “A couple of sisters and I participated in the Look Good Feel Better program after I completed my radiation therapy treatments…it was like a slumber party but without the sleepover part! It’s a great program cosponsored by the American Cancer Society.”

Shannon’s cancer diagnosis affected everyone differently, most of them in a very positive way. “My daughter, Alayne, made 30 or more beaded crosses for patients at the Avera Queen of Peace Cancer Center. Alayne attached the following note to the beaded crosses, asking the cancer patient to share individual stories:”

‘Hi, my name is Alayne, I’m 12 years old. My mother had breast cancer and had gone here for radiation. She is cancer free. I enjoy hearing stories and when you’re ready, would be more than happy to hear yours and add it to my journal. Please send it to 34662 236th Street, Pukwana SD 57370.’

Shannon talks about life today. “Yes, cancer has changed me and I may never get back to a ‘real’ normal, but I found a new normal and I’m okay with that. There’s a lesson in cancer. I’ve learned so much, I see things differently, it’s made me a better person. I notice things, I reach out to others, and I advocate for others.” “I found out who I’m married to and I’m the luckiest woman in the world. My husband has been so supportive.”
Breast Brachytherapy was introduced to the Mitchell Region in 2009 after receiving a $2 million grant from The Leona M. and Harry B. Helmsley Charitable Trust.

Brachytherapy is a time-efficient, accurate, effective and economical way to treat many forms of early stage cancer.

An Iridium-192 source (connected to HDR afterloader, above) is positioned within the center of the Mammosite Balloon to deliver a highly conformal dose to the area immediately surrounding the resected tumor.

Radiation is delivered via a high-dose rate (HDR) remote afterloader under precise computer control. The MammoSite RTS is compatible with Nucletron, Varian and GammaMed® HDR afterloader equipment.

The MammoSite RTS is inflated with saline to allow the surrounding tissue to conform to the balloon. A trocar is used to create a pathway to the lumpectomy cavity for insertion of the catheter.

After the introduction of Breast Brachytherapy, Mitchell physicians wanted to decrease the time frame from when a woman was diagnosed to the time of her treatment. After obtaining information from all those involved in the scheduling and treatment process and developing an action plan, a decrease was seen in the number of weeks between diagnosis and the end of treatment.

Advantages of Breast Brachytherapy

- An early stage breast cancer patient can be treated over a period of five days
- Shorter treatment times
- Fewer side effects because the radiation is targeted to a more specific area

Actions Taken

- Trained and educated physicians and associates
- Hired an Avera Queen of Peace physicist
- Created a streamlined communication process between physician offices, operating room and Cancer Center to accommodate timely and efficient breast cancer treatment

Avera Queen of Peace Hospitality House

Are you or someone you love in need of a home-away-from-home while receiving cancer care at Avera Queen of Peace?

The Avera Queen of Peace Hospitality House, located at 600 East 6th Avenue in Mitchell, offers affordable, temporary housing with a comfortable, home-like atmosphere for patients and caregivers. Located near the Avera Queen of Peace Cancer Center and the Hospital, the House enables individuals to stay in Mitchell and receive the care they need, without the worry and burden of traveling. The facility is especially intended to help patients who are receiving cancer treatment; however, it is also available for those scheduled for same-day surgery, and patients using other ongoing hospital services. A referral form from the Cancer Center or Hospital is required. For more information about the Hospitality House or to schedule a tour, please call 605-995-2466.

Decrease time from Diagnosis to Treatment for Breast Cancer Patients (Based on Brachytherapy Study Completed)

<table>
<thead>
<tr>
<th>Days from Biopsy until Radiation was Completed</th>
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<tbody>
<tr>
<td>approx. 6 wks</td>
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<tr>
<td>approx. 5 wks</td>
</tr>
<tr>
<td>approx. 5.5 wks</td>
</tr>
<tr>
<td>approx. 5 wks</td>
</tr>
<tr>
<td>approx. 3.5 wks</td>
</tr>
<tr>
<td>approx. 3.5 wks</td>
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</tbody>
</table>

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From January 1, 2001 through December 31, 2011 there were 2,484 cases entered into the Avera Queen of Peace Cancer Registry database, with an average annual caseload of 226 cases. In 2011, a total of 206 cases were entered into the database. More than 67% of the patients entered in the Avera Queen Peace Cancer Registry database reside outside of Davison County. For 2011, 23 counties in South Dakota were represented in the Cancer Registry database (see map). The six most common cancers in the Avera Queen of Peace Cancer Registry, in order of frequency, were breast, lung, colorectal, prostate, bladder and Non-Hodgkin’s lymphoma (see graphs).