

2014 Cancer Program

ANNUAL REPORT



The Jewish Hospital 

 **MERCYHEALTH**

2013 Cancer Program summary

The Jewish Hospital — Mercy Health is proud to present the 2014 Annual Report of our 2013 cancer program data. Over 1,000 new cancer cases were accessioned into our cancer registry, 838 of which were analytic cases.

The Jewish Hospital — Mercy Health cancer program provides the highest quality of cancer care as evidenced by the ongoing accreditation of our cancer program by the American College of Surgeons, Commission on Cancer (ACoS-CoC) as well as accreditation of our Blood and Marrow Transplant Program by the Foundation for the Accreditation of Cellular Therapy (FACT). Under the leadership of the Cancer Committee, our cancer program has been reaccredited by the CoC with commendation. Meeting and exceeding the standards published by these two auspicious organizations as demonstrated by accreditation assures our patients, their families and our community that they will receive the best of care throughout the cancer care continuum.

The Jewish Hospital — Mercy Health offers the full spectrum of cancer diagnostic and treatment services, both on-site and through our partnership with Oncology Hematology Care (OHC), the largest group of oncologists in the Cincinnati area. In addition to the diagnostic and treatment services, our hospital offers a wide range of supportive care services as patients and families cope with a diagnosis of cancer. Our support services include: nutritional counseling, psychosocial support, rehabilitation, spiritual support and palliative care. The cancer program also offers educational programs to the community we serve, sponsors cancer support groups and, in partnership with OHC, offers access

to clinical trials. The Blood and Marrow Transplant Program's relationship with the Center for International Blood and Marrow Transplant Research (CIBMTR) and the National Marrow Donor Program (NMDP) ensure blood cancer patients have access to diagnosis and treatment, specific clinical trials and the opportunity to participate in cutting edge hematology research.

The Cancer Committee of the Jewish Hospital — Mercy Health continually strives for clinical excellence and works tirelessly to improve the care and services provided to our cancer patients and families. Each year the committee reviews the quality and quantity of services provided, identifies gaps, sets goals to fill these gaps and oversees the conduct of care improvement activities to ensure we are always exceeding expectations.

In 2013 the Jewish Hospital — Mercy Health implemented a number of patient care improvements, sponsored community outreach activities and provided education to physicians and staff throughout Mercy Health. In addition, the hospital introduced state of the art, targeted, stereotactic radiotherapy treatment of brain tumors through the rollout of Gamma Knife services.

The Jewish Hospital — Mercy Health Cancer Committee

The Surgical Oncology Specialty Quality Committee is a multi-disciplinary team comprised of hospital employees, staff physicians and members from the American Cancer Society. The committee meets quarterly to monitor the performance of the hospital's cancer program, and to review the available services and programs.

Our mission is to provide a patient-focused, integrated and comprehensive cancer program. We will serve in a compassionate and efficient manner, providing state-of-the-art technology and research, through caring for people one individual at a time.

2013 Cancer Committee membership

Physician Members

Shyam Allamaneni, MD
CLP, Surgeon

Miguel Islas-Ohlmayer, MD
Medical Oncology

Michael Berger, MD
Pathology

Elizabeth Levick, MD
*CoC Chair, and Radiation
Oncology*

Elizabeth Weaver, MD
Diagnostic Radiology

Allied Health Members

Rebecca Allen
Cancer Program Administrator

Mary Alliston
Oncology Nurse

Elena Stein, MAHL, BCC
Pastoral Care

Kathy Smith, RN, MSN
Patient Services

Jenny Martin, RN, MBA
Quality Management

Gina Whitt, RHIT, CTR
CTR/Cancer Registry Coordinator

Robin Hite, R.T. (R)(T)
Radiation Oncology

Cathy Beumer
Pain Management

Michael DeVoe, Pharm.D
Pharmacy

Casey Faber
American Cancer Society

Lyn Sontag, Psy.D, ABPP
Clinical Psychologist

Annette Shepherd
Mammography

Vickie Estridge, BSN, RN, OCN
Clinical Manager, BMTU

Jack Hill
Administration

Linda Miller, RN, MSN
Patient Services

Vickie Estridge
Blood and Marrow Transplant Center

Debra Steinbauch, MA, CCC-SLP
Rehabilitation Services

Brittney Browne
Research Nurse

Elyse Burke
Social Services

Yvonne Duhart, RHIT
Cancer Registry

Cancer Program Coordinators

Michael Berger, MD
Quality of Registry Data

Yvonne Duhart, RHIT
Cancer Conference

Mary Lou Cieslak, RN
*Community Outreach,
Cancer Liaison Physician*

Jenny Martin, RN, MBA
Quality Improvement

Deb Powell RN
Quality Improvement

Cancer Conferences

Cancer Conferences provide a multidisciplinary format for the development of a plan of care for the cancer patient. The conferences are integral to improving care and providing education to physicians and hospital staff. Consultative services and education are optimal when physicians representing all oncology related disciplines participate in the discussion. Patient identities are kept confidential.

The Cancer Conferences are prospective, patient-oriented and multidisciplinary by design. Medical Oncology, Radiation Oncology, Diagnostic Radiology, Pathology, and General Surgery specialties are present to discuss diagnostic evaluations and possible treatment options for the types of cancers presented at the conferences. Physicians from all specialties, including Medical and Surgical residents are invited to attend.

Treatment options that are based on national guidelines and AJCC staging are the foundations of the discussions. National Comprehensive Cancer Network (NCCN) Practice Guidelines in Oncology, information on open clinical trials, NCDB and cancer registry data are provided for the cancer sites presented.

The Jewish Hospital — Mercy Health Cancer Conferences

The **Breast Cancer Conferences** are conducted weekly on the first four Wednesdays of the month.

The **Thoracic Cancer Conference** is held on the first and third Fridays of the month.

The **GI Cancer Conferences** are held on the second and fourth Fridays of the month.

The **General Cancer Conference** is held on the second Tuesday of every other month

The **Bone Marrow Transplant Multidisciplinary Team Meeting** is held each Wednesday.

Cancer Registry

The Cancer Registry is a vital component of the Cancer Program, providing data for programmatic and administrative planning, research, and for monitoring patient outcomes. Data are collected according to the current standards of the Commission on Cancer to create a detailed cancer-focused record for all reportable tumors diagnosed and/or treated at our hospital. Each record entered into the database contains information on the diagnosis, extent of disease, treatment received, recurrence of disease and lifetime follow-up for each patient. Aggregate data is analyzed and published without patient identifiers to protect the confidentiality of each patient entered into the cancer database according to Ohio state laws and HIPAA regulations.

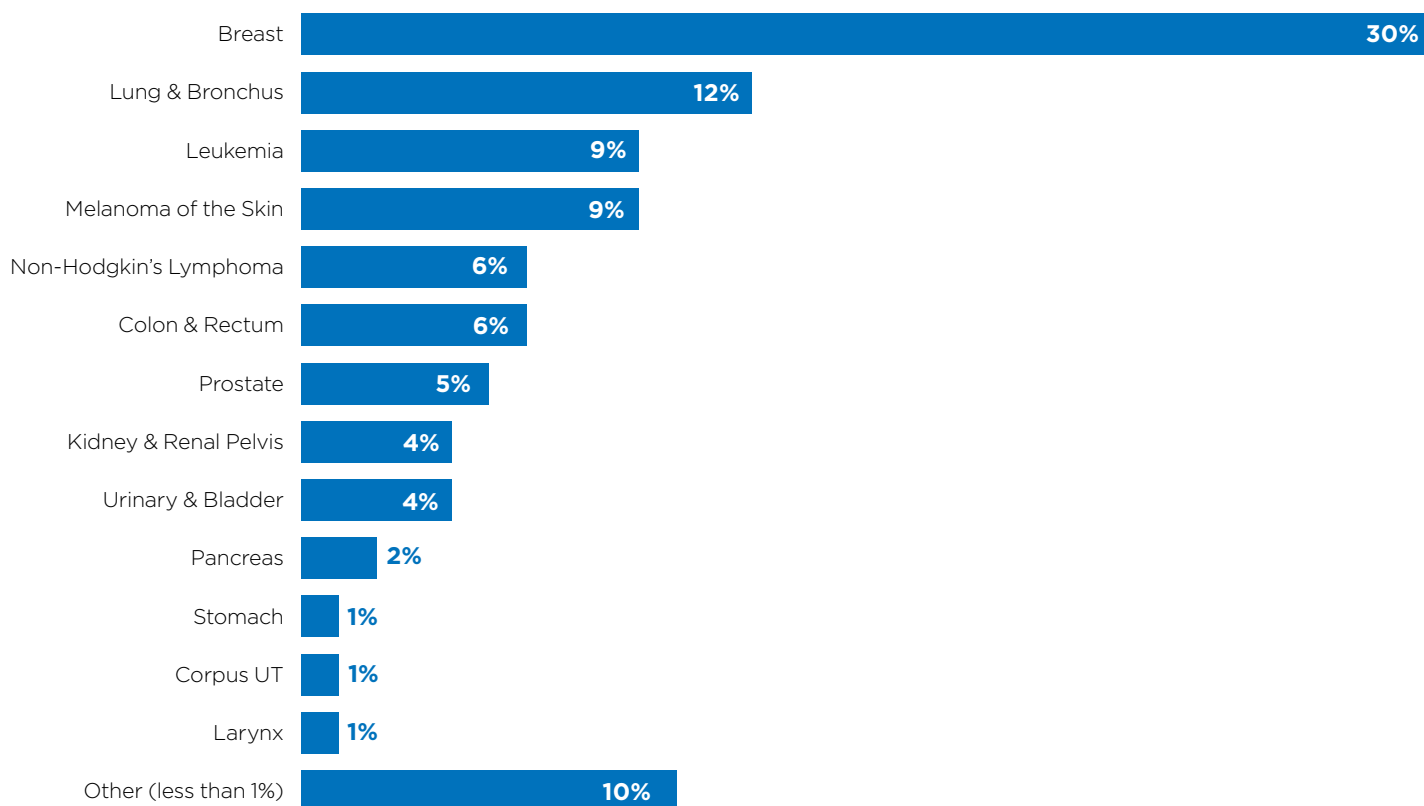
A Cancer Registrar performs the collection, interpretation, analysis and reporting of cancer data. The National Cancer Registrars Association defines Cancer Registrars as “data management experts who collect and report cancer statistics for various healthcare agencies.” Registrars work closely with physicians, administrators, researchers, and health care planners to provide support for cancer program development, ensure compliance with reporting standards, and serve as a valuable resource for cancer information with the ultimate goal of preventing and controlling cancer. The Cancer Registrar is involved in managing and analyzing clinical cancer information for the purpose of education, research, and outcome measurement.

All approved Cancer Programs are required by the Commission on Cancer to submit registry data that is error free to the National Cancer Data Base (NCDB) annually. As a result of the data submission to the NCDB programs are able to benchmark their performances and outcomes to that of regional, state and national patterns. Major differences between the facility data and the national data are reviewed in an effort to identify the areas of improvement.

In addition, cancer data is submitted to the Ohio Cancer Incidence Surveillance System (OCISS). All reported data is used to support research, track trends, initiate epidemiologic studies, generate journal articles and provide data for allocation of services. The data is analyzed to identify opportunities for community cancer awareness and screening where higher stages (III-IV) of cancers are seen. This data also provides a means of identifying possible cancer clusters within the state.

2013 Cancer data summary and comparisons

THE JEWISH HOSPITAL — MERCY HEALTH PERCENTAGE OF NEWLY DIAGNOSED CASES IN 2013



Top cancer sites in 2013

The American Cancer Society published that about 1,660,290 new cancer cases were expected to be diagnosed in 2013 in the United States. Nationally the top five cancer sites were: Prostate (14%); Breast (14%); Lung (13.7%); Colon/Rectum (8.6%); and Skin (5%).

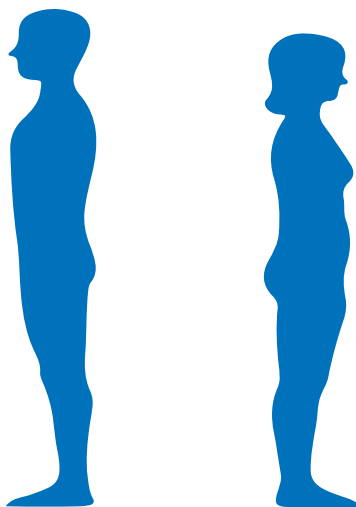
The top cancer sites at the Jewish Hospital — Mercy Health in 2013 were: Breast (259 cases/31%); Lung (100 cases/12%); Skin (72 cases/8.5%);

Blood and Bone Marrow (71 cases/8.5%) and Colon/Rectum (57 cases/7%). We believe that Prostate Cancer is nearly as frequently diagnosed in our community as it is nationally but as a hospital we don't often see these patients. And we believe our Blood and Marrow Cancer cases are higher than the national numbers because of our Blood Cancer Center and our transplant program drawing a larger number of these patients to our program.

Distribution of cases by gender reveals that breast cancer is the top site for females (50%) while lung cancer was the top site in males (13%). The table demonstrates the percentage of cases seen at The Jewish Hospital — Mercy Health compared to the national average incidence for each cancer site.

2013 TOP CANCER SITES BY SEX UNITED STATES VS THE JEWISH HOSPITAL — MERCY HEALTH (TJH)

Male	US	TJH
Prostate	28%	10%
Lung & Bronchus	14%	13%
Colon & Rectum	9%	9%
Urinary & Bladder	6%	8%
Melanoma of the Skin	5%	10%
Kidney & Renal Pelvis	5%	7%
Non-Hodgkin Lymphoma	4%	8%
Oral Cavity & Pharynx	3%	1%
Leukemia	3%	9%
Pancreas	3%	3%



Female	US	TJH
Breast	29%	50%
Lung & Bronchus	14%	12%
Colon & Rectum	9%	6%
Uterine Corpus	6%	3%
Thyroid	6%	1%
Non-Hodgkin Lymphoma	4%	3%
Melanoma of the Skin	4%	7%
Kidney & Renal Pelvis	3%	2%
Leukemia	3%	4%
Pancreas	2%	2%

American Cancer Society Inc., Surveillance and Health Policy Research, Facts and Figures, 2013
U.S. figures are estimated for 2013. Hospital figures are actual

Acute Myeloid Leukemia

Quality study of AML patient care at The Jewish Hospital, 2013–2014

Acute Myeloid Leukemia (AML) is a heterogeneous stem cell disorder arising within the bone marrow. These immature hematopoietic cells proliferate and accumulate in the bone marrow, and peripheral blood among other tissues. AML accounts for approximately 90% of all acute leukemia in adults. In 2014, approximately 18,000 new cases were reported and of these, approximately 10,000 expired due to their disease. The median age at presentation for this disease is 67 years with approximately 6% of patients younger than 20 years of age and 34% of patients 75 years or older. The overall survival for this disease is poor with less than 50% at five years in patients less than 45 years of age and less than 5% in patients over the age of 65 years of age at diagnosis.

Because of the relatively low overall survival associated with this disorder the National Comprehensive Cancer Network (NCCN) guidelines recommend upfront enrollment in a clinical trial.

Nonetheless, the treatment of AML is complex and includes an initial induction phase followed by consolidation chemotherapy. The induction chemotherapy options are divided into those for patients over the age of 60 and those younger than 60 years of age. For patients younger than 60 years of age the induction chemotherapy options include enrollment in a clinical trial, 7+3 (Ara-C/Daunorubicin or Idarubicin), Ara-C + Daunorubicin + Cladribine or HiDAC. For patients older than 60 years of age the induction treatment options include enrollment in clinical trial, standard 7+3 (Ara-C/Daunorubicin or Idarubicin), HiDAC, hypomethylating agents (Decitabine or 5-Azacytadine), low dose Cytarabine, Hydroxyurea or supportive care.

At the Jewish Hospital Blood and Cancer Center, 65 new AML patients were diagnosed between 2013 and 2014. The induction regimens utilized were within NCCN guidelines using 7+3 (Ara-C/Daunorubicin) 60% of time. The remainder of the chemotherapy regimens used consisted of Mitoxantrone/Etoposide (17%), Mitoxantrone/Etoposide/Cytarabine (7%), and HiDAC (5%). In patients over the age of 60, the majority of patients received chemotherapy with either 7+3 or other regimens. These consisted of Decitabine (3.5%), Cytosan/Etoposide (3.5%), FLAG (1.7%), and Vidaza (1.7%). In terms of clinical trial enrollment, 49% (32 of 90 new AML patients) were treated within the context of a national clinical trial. Of the patients that required re-induction 35% (32 of 90 new AML patients) were treated on a national clinical trial. This data compares favorably relative to national levels of enrollment in cancer clinical trials (less than 5%).

Cancer resources

The Jewish Hospital — Mercy Health Cancer Program is committed to making a difference in our community. While we offer a number of educational and screening programs to the community, we want to be sure patients, families and community members are looking at the best sources of cancer information when searching the Web. Listed below are websites we consider credible and reliable.

American Cancer Society Programs and Screening Guidelines

For information on American Cancer Society Programs and Screening Guidelines:

- Visit **cancer.org** or call 1-800-ACS-2345 (1-800-227-2345)

Informational websites

For information on breast and other cancers, call or visit:

- National Cancer Institute at 1-800-4-CANCER or **cancer.gov**
- People Living with Cancer: The official patient information website of the American Society of Clinical Oncology at **cancer.net/portal/site/patient**
- National Comprehensive Cancer Network at **nccn.org/patients**
- American Cancer Society - 1-800-ACS-2345 or **cancer.org**

- National Library of Medicine at **nlm.nih.gov/medlineplus/healthtopics.html**
- US TOO! International, Inc. at **ustoo.org**
- National Coalition for Cancer Survivorship at **canceradvocacy.org**
- Leukemia and Lymphoma Society at **lls.org**

Clinical trial information

For information on access to clinical trials in your area:

- Call the American Cancer Society, Clinical Trials Matching Service (a free, confidential program) at 1-800-303-5691 or visit **cancer.org**
- Visit the National Cancer Institute (NCI) website at: **cancer.gov/clinicaltrials/search**
- Visit the Coalition of Cancer Cooperative Groups at: **cancertrialshelp.org**
- Visit OHC Clinical Trials at **OHCare.com/patient-resources/clinical-trials/#clinical-trials**

References/sources:

American College of Surgeons

American Cancer Society

National Cancer Institute

Electronic Registry System

The Jewish Hospital



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mercy.com