



Skin Cancer is Always in Season

Protect your skin throughout the year



In most cases, all three forms of skin cancer will start with noticeable changes to normal skin patterns. **Conducting regular skin self-exams and knowing what to look for when you do them are very, very important.**

— Joseph Ravalese III, MD

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AS THE BODY'S LARGEST AND FASTEST-GROWING ORGAN, SKIN HAS ONE IMPORTANT JOB: PROTECTION. The American Academy of Dermatology likens it to a coat: It helps us stay warm when it's cold, helps cool us when it's hot, protects our insides from the environment, and prevents the body from losing fluids. It's a big job. And when you consider that the first line of defense — the skin's top layer, or epidermis — is only about 1/100th of an inch thick, the skin's work seems even more remarkable. But for all its strength, the skin is also highly susceptible: Skin cancer is, by far, the most common type of cancer.

Most skin cancers fall into one of three main categories: basal cell cancer, squamous cell cancer, and melanoma, named for the three main types of cells that make up the epidermis. According to the American Cancer Society (ACS), approximately 3.5 million cases of basal and squamous cell skin cancer will be diagnosed in the United States this year; some 80% of those skin cancers will be of the basal-cell type. The ACS also projects that more than 73,000 new cases of melanoma will be diagnosed in 2015.

"The non-melanoma skin cancers — basal and squamous cell — tend to remain localized and grow slowly," explains Leever Cancer Center Radiation Oncologist Dr. Joseph Ravalese III. "They are highly curable when found early. Melanoma is a different story. Melanoma cells have a greater chance to spread from the skin to lymph nodes and internal organs, making early detection and intervention vital."

Melanomas often develop from existing moles on the back, shoulders, or the back of the legs; head and neck melanomas are also common. Far less common (but still possible) are melanomas that develop in the eyes, respiratory passages, and intestines.

"In most cases, all three forms of skin cancer will start with noticeable changes to normal skin patterns. Conducting regular skin self-exams and knowing what to look for when you do them are very, very important," says Ravalese.

Continued on page 2 ▶

HOW TO SPOT SKIN CANCER™

USE THIS INFORMATION TO CHECK YOUR SKIN REGULARLY

1 in 5 | Americans will be diagnosed with skin cancer in their lifetime.

ANYONE
CAN GET SKIN CANCER,
REGARDLESS OF SKIN COLOR

THE ABCDEs OF MELANOMA

What to Look for:

Melanoma is the deadliest form of skin cancer. However, when detected early, melanoma can be effectively treated. You can identify the warning signs of melanoma by looking for the following:

- A ASYMMETRY** One half is unlike the other half.
- B BORDER** Irregular, scalloped or poorly defined border.
- C COLOR** Varied from one area to another; shades of tan and brown, black, sometimes white, red or blue.
- D DIAMETER** While melanomas are usually greater than 6mm (the size of a pencil eraser) when diagnosed, they can be smaller.
- E EVOLVING** A mole or skin lesion that looks different from the rest or is changing in size, shape or color.
Example:

SKIN CANCER SELF-EXAMINATION

How to Check Your Spots:

Checking your skin means taking note of all the spots on your body, from moles to freckles to age spots. Skin cancer can develop anywhere on the skin and is one of the few cancers you can usually see on your skin. Ask someone for help when checking your skin, especially in hard to see places.



- 1** Examine body front and back in mirror, then right and left sides, arms raised.
- 2** Examine back of neck and scalp with a hand mirror. Part hair for a closer look at your scalp.
- 3** Bend elbows, look carefully at forearms, back of upper arms, and palms.
- 4** Check back and buttocks with a hand mirror.
- 5** Finally, look at backs of legs and feet, spaces between toes, and soles.



If you find any spots on your skin that are different from others or are changing, itching, or bleeding, make an appointment to see a board-certified dermatologist.

To learn more about skin cancer and find a **FREE** skin cancer screening, visit SpotSkinCancer.org

You should become familiar with the markings, patterns, and moles that occur naturally on your skin. Be sure to look between your toes and fingers, behind your ears, and throughout your scalp. Use a hand mirror to examine hard-to-see places. Know where your moles are and what they look like in terms of color, size, and shape (see sidebar); keep an eye on freckles; look for red, pearly, or waxy bumps; pay attention to scaly, crusted patches; and look for flat, flesh-colored or brown scar-like lesions. If you notice a change in any of these, contact a dermatologist right away.

Because skin cancers often appear on sun-exposed areas of the body, including the face, ears, lips, neck, and back of the hand, their incidence is often linked to exposure to the sun's ultraviolet (UV) rays. In fact, it is estimated that up to 90% of skin cancers are due to UV radiation. And it doesn't have to be summer for the sun to be dangerous. Any time you are outside, your skin is exposed to UV rays from the sun — even when it's cold, and even when it's cloudy.

“People love the sun. It allows us to be outdoors enjoying all kinds of fun activities, from swimming and barbecues in the summer, to skiing and ice fishing in the winter,” notes Ravalese. “And it is okay to enjoy the sun in moderation, as long as you take appropriate precautions.”

So how can you enjoy the sun while limiting your risk of skin cancer? The World Health Organization (WHO) recommends limiting your time in the midday sun, and seeking out shade whenever possible. If you must be in the sun, wear protective clothing, such as a broad-brimmed hat to protect the eyes, face, and neck. Wear sunglasses that provide 99 to 100% UVA and UVB protection.

And while these methods offer greater protection than sunscreen, it is still

important to lather up. Always use a broad-spectrum sunscreen of sun protection factor (SPF) 30+, and be sure to reapply it often. Make sure your children are protected (and that they understand the importance of protection), and always keep babies in the shade.

“Using sunscreen should be part of everyone’s daily routine, 365 days of the year,” says Leever Cancer Center Executive Director Kevin Kniery. “Today, many daily moisturizers include sunscreen, making it even easier to be sure you are protected — year-round. It doesn’t have to be summer to guard against skin cancer.”



An Ounce of Prevention

- 1 Avoid the midday (10 am – 4 pm) sun as much as possible.
- 2 Wear a hat and protective clothing.
- 3 Apply sunscreen frequently, every day, 365 days a year.
- 4 Wear sunglasses that block UV radiation.
- 5 Beware of photosensitive medications.
- 6 Beware of sunscreen allergies. Use a PABA-free sunscreen.
- 7 Beware of reflective surfaces like water and snow.
- 8 Avoid tanning parlors.
- 9 Teach your children sun protection at an early age.
- 10 Watch for the National Weather Service UV Index for your skin every day!

ask the Doctors

Dr. J. Alexander Palesty
and Dr. Scott Kurtzman
answer your questions
about skin cancer.



Dr. J. Alexander Palesty
Director of the
Residency Training
Program in Surgery;
Director of Surgical
Oncology; Surgical
Director of Clinical
Cancer Research
Saint Mary’s Hospital

Q I understand the danger the sun poses, but I like the look of a tan, especially in the winter. Are tanning beds safer than the sun?

A Dr. Palesty: Many skin cancers can be linked to exposure to damaging UV rays, which most people associate with the sun. But tanning beds and lamps give off the same type of UV rays as the sun, and present the same dangers. In fact, tanning beds give off three to six times the amount of UV radiation given off by the sun. A 2014 study estimated that more than 400,000 cases of skin cancer could be related to indoor tanning in the United States each year — causing 245,000 basal cell carcinomas, 168,000 squamous cell carcinomas, and 6,000 melanomas. Not convinced? The World Health Organization reports that the use of tanning beds before the age of 35 is associated with a 75% increase in the risk of melanoma. UV rays also cause premature skin aging, like wrinkles and age spots, and may also cause cataracts and other serious diseases of the eye. You may miss the look of a tan now, but your skin (and eyes) will thank you in the future.



Dr. Scott Kurtzman
Chairman of Surgery
Waterbury Hospital

Q I have heard that I may be at higher risk of developing skin cancer because of my blonde hair and fair skin. Are there truly risk factors for skin cancer?

A Dr. Kurtzman: Skin cancer does not discriminate: **Everyone** needs to take steps to protect against the sun’s harmful UV rays. But some of us do have a greater risk of developing the disease and need to be even more vigilant, including people with light-colored skin, hair, and eyes. If you or a member of your family has had a prior skin cancer, your risk is also increased. Other higher-risk categories include:

- ▶ People with many or abnormal moles and/or precancerous skin lesions
- ▶ Those who work outdoors or experience excessive sun exposure
- ▶ Those who live in sunny or high-altitude climates
- ▶ People with a history of bad (peeling) sunburns, especially when they were young
- ▶ Those with weakened immune systems
- ▶ Those who are exposed to certain substances, such as arsenic
- ▶ People exposed to radiation

It is important for everyone to conduct regular and thorough self-exams. Know your skin, and watch for changes. When in doubt, always consult a dermatologist.

Soy and Breast Cancer: Is There a Link?

By Karen Sabbath, MS, RD, CSO

“Now that I have breast cancer, should I stop eating all soy foods?”

“Soy foods make breast cancer grow, right?”

These questions and others like it are probably among the most commonly asked by breast cancer patients and survivors. And because soy foods and other soy products have made their way into much of our food supply, it is a discussion that is not only important, but has far-reaching implications.



What’s all the fuss about?

One of the nutrients in soy foods, called “isoflavones,” has a chemical structure similar, but not identical to the estrogen found in a woman’s body, which is where the term phytoestrogen or plant estrogen originated. High levels of estrogen are linked to increased risk of breast cancer. Concerns arose at the possibility that consuming phytoestrogens could present a risk to women who had estrogen-receptor positive (or ER+) breast cancer. However, soy foods do not contain estrogen, and eating soy foods does not lead to increased estrogen levels in humans.

What does the research say?

Research is abundant and confusing, but it appears that eating whole soy foods (soy milk, tofu, edamame, soy nuts) in moderation is not only safe, but may prove to be beneficial in preventing breast cancer.

The controversy began in the late 1990s when studies in rats and mice seemed to indicate that high doses of soy isoflavones (specifically genistein) increased the growth of ER+ breast cancer cells. Subsequent studies showed that rodents metabolize isoflavones differently than humans, because they lack the immune cells known to attack

breast cancer. It turns out that human consumption of soy products may actually have a tumor-suppressing effect, especially if consumed over a lifetime.

Another study, recently published in the *Journal of the National Cancer Institute*, compared women with invasive breast cancer who took soy powder supplements in an amount equivalent



Soy Serving Sizes

Soy Food	Portion equal to one serving
Tofu or tempeh	1/2 cup
Soybeans (cooked and edamame)	1/2 cup
Miso	1 tablespoon
Soybeans (roasted)	1/2 cup
Soy milk	1 cup
Soy yogurt	1 cup
Soy cheese	1 ounce



Adapted from PennMedicine.org/Abramson and Oncolink.org

to about one quart of soy milk, for two to three weeks prior to surgery, to those who took a placebo. Although the researchers found that the women taking soy powder had higher levels of the soy isoflavones in their blood, the levels did not appear to have any effect on the growth of the tumor.

Many human studies in both the United States and Asia, involving thousands of women, consistently show that women who regularly consume whole soy foods in moderation, especially if consumed over a lifetime, have a lower breast cancer risk and possibly a lower risk of breast cancer recurrence. It's important to note that these studies are observational, meaning that the researchers collect diet information for many years and see who gets breast cancer. It is possible that the overall lifestyle of individuals who consume soy, including eating less fat and more fruits and vegetables, or being leaner, can also play a role in the risk of breast cancer. In other words, an observational study does not necessarily show cause and effect, but can still provide valuable information.

Does soy play any role for men with prostate cancer?

According to the American Institute for Cancer Research (AICR), some studies have shown that consuming soy foods may lower the rate at which PSA increases and may therefore be of benefit to prostate cancer survivors. Results varied between individuals, and it remains unclear if genetics or individual metabolic differences are responsible.

Are there any other health benefits to eating soy foods?

Yes! Soy foods are excellent sources of plant protein, and can play an integral role in a heart-healthy diet. In fact, people who consume soy foods as part of a plant-based diet tend to have lower rates of heart disease and lower

cholesterol. Again, these individuals may be likely to eat less red meat and fats, fewer processed foods, and more whole grains, fruits and vegetables, all of which can also contribute to lower rates of disease.

What's the bottom line?

For women who are cancer-free, studies show that eating a moderate amount of soy food does not increase the risk of breast cancer or any other cancer. Soy foods may, in fact, offer modest protection against breast cancer, especially if consumed during childhood and adolescence.

If you are a breast cancer survivor, consuming moderate amounts of soy foods is safe and not likely to increase the risk of recurrence or death, according to current recommendations of the American Cancer Society and American Institute for Cancer Research and other research institutions. Moderate intake is defined as two to three servings of whole soy foods a

day. Although likely to be safe, it is recommended that soy powders, supplements and other processed foods containing pure isoflavones be avoided or minimized until more information is available.

On the opposite page is a list of different soy foods and the amounts equivalent to one serving.

Soy-based foods including soy sauce, soybean oil and soy lecithin DO NOT contain any isoflavones.

In conclusion, the two most important things you can do to lower your risk of cancer and/or a cancer recurrence are to get your weight as close to ideal as possible, and exercise 150 minutes a week. In terms of the food you eat, it's important to consume a varied plant-based diet, containing an abundance of fruits, vegetables, whole grains, lean protein from fish, poultry, dairy and plants (including soy foods in moderation), and healthy fats. Try to cut down or eliminate sugars, processed foods, excessive salt and empty calories.



Questions about nutrition? Contact Leever's nutritionist Karen Sabbath, MS, RD, CSO, at 203-575-5510 or email her at ksabbath@leevercancercenter.org.

Spotlight on:

Marisol Luna, Patient Financial Counselor

The health insurance landscape has undergone sweeping and dramatic changes in recent years, often causing confusion and anxiety for patients. When the diagnosis is cancer, the team at The Harold Leever Regional Cancer Center wants to reduce that anxiety by providing support and guidance to patients undergoing radiation therapy who are navigating the sometimes-complex world of healthcare costs and coverages. Marisol Luna, Leever's Patient Financial Counselor, does just that.

"I work with our patients, doctors, and insurance companies to be sure that everything is in place in advance, making each of their visits a little less stressful," said Marisol, who speaks both English and Spanish. "I am also often the middleman between patients and billing departments. I can help with the communication, taking that burden off the patient."

Throughout her 15 years in the healthcare industry, Marisol has always worked in high-contact, patient-centered roles. It is in her current position at the Leever Cancer Center, however, that Marisol has been able to help patients the most.

"It is a different level of care — a different level of interaction with our patients," noted Marisol. "Knowing that they will leave my office with a smile because they don't have to worry about the financial piece is very rewarding."

At their first visit to the Leever Cancer Center, all patients and family members have the opportunity to meet with Marisol. Patients may also request to meet with her at a time that is convenient for them. Marisol communicates with doctors and other staff members after the patient's first visit to learn more about their prescribed course of treatment, then works with insurance companies on approvals and coverage. If patients choose not to meet with Marisol, she will still communicate with their physicians to make sure that, from a financial perspective, everything is in place for every patient.

"We see all patients," explained Marisol, "not just those with insurance. We will work with patients to determine if they qualify for any kind of financial assistance to help with the cost of treatment."

Recently, Marisol helped a patient secure insurance coverage from a former employer. Her knowledge and persistence secured coverage for the patient through the Consolidated Omnibus Budget Reconciliation Act, commonly known as COBRA. COBRA requires most businesses with group health plans to offer

employees the opportunity to temporarily continue their coverage after leaving their employment. Her focus is on providing patients with the best possible care, with the least amount of stress and worry.

"Patients should know that I always have a sympathetic ear and that my door is always open," said Marisol, "even if they just want to stop by and say hello."

“I can help with the communication, taking that burden off the patients.”

— Marisol Luna



Spotlight Update:

The Lung Screening Program

In November 2014, The Harold Leever Regional Cancer Center, with our partners Saint Mary's Hospital and Waterbury Hospital, brought members of the local medical community together to offer no-cost lung cancer screenings for higher-risk patients. The results were significant: the screenings led not only to cancer diagnoses in some patients, but also to the discovery of aneurysms, pulmonary embolisms, and other important findings. Dr. Jo-Anne Cosgriff, Alliance Medical, Diagnostic Radiology Associates, Franklin Medical Group, Naugatuck Valley Radiology, and Waterbury Pulmonary Associates embraced this national movement and donated their time to benefit the 354 local patients who qualified for the screenings.

This year marks the onset of the next phase of this important screening program, designed to ensure compliance with Centers for Medicare & Medicaid Services (CMS) guidelines and the Patient Protection and Affordable Care Act. The most significant change is that screening is now a covered service for people who may be at a higher risk of developing lung cancer. A patient's primary care physician, or other physician of their choosing, will now determine whether they are at risk and should be screened using the following criteria. Patients should:

- ▶ be between the ages of 55 and 77
- ▶ currently be a smoker or have quit smoking within the past 15 years
- ▶ have smoked 30 or more pack-years (This is the number of packs of cigarettes smoked per day. For example, one pack per day for 30 years equals 30 pack-years.)
- ▶ receive a written order for the LDCT lung cancer screening

If you think you meet these criteria and would like to be considered for screening, contact your primary care physician or the doctor of your choosing. If you want to reduce your chances of developing lung cancer, quit smoking now! The Leever Cancer Center runs smoking cessation groups periodically throughout the year. Contact Sandra Micalizzi, APRN, at 203-575-5573 for dates, times, and more information.

Oral, Head and Neck Cancer Screening 2015



Again this year, The Harold Leever Regional Cancer Center offered oral, head, and neck cancer screenings. During a two-hour period on an April afternoon, 10 healthcare professionals volunteered their time to screen 81 patients. Of the total screened, 56 were referred for routine follow-up with their primary care physicians; 19 were referred for further head and neck evaluations.

Thanks to all those who volunteered their time for this important initiative: Dr. Mahesh Bhaya, Dr. Neil Schiff, Dr. Raymond Winicki, Dr. Christopher Loughlin, Dr. Ratnaker Mendava, Dr. Douglas Housman, Dr. Joseph Ravalese, Dr. Jeffrey Bitterman, Jaclyn Sylvia, PA, and Deborah Mastroianni, APRN.

Event statistics 2013 – 2015	NUMBER OF PEOPLE SCREENED	NUMBER OF REFERRALS			
		For routine follow-up	For further head and neck evaluation	Suspected malignancies	Other referrals
APRIL 2015	81	56	19	0	6
APRIL 2014	131	96	30	5	0
APRIL 2013	77	58	14	0	5



The 2015 Waterbury Hospital Summer Bridge class visited HLRCC in July for a tour and informational presentation.

Waterbury Hospital Summer Bridge Program 2015

The Summer Bridge Program is offered as part of Waterbury Hospital's Youth Pipeline Initiatives. It allows students to take academic and SAT prep classes for six weeks over the summer, while also taking field trips to medical centers and shadowing physicians. During the summer, 30 local students completed Waterbury Hospital's annual Summer Bridge Program, which provided them with a six-week comprehensive program in SAT Math, SAT English, Vocabulary, Job Readiness, and Job Shadowing in more than 20 hospital departments. The program served students from the Greater Waterbury area, as well as children of Waterbury Hospital employees.



Above, left to right: Karen Hammond, Dr. Kert Sabbath and Marlene Lichtz.

Below, left to right: Kevin Kniery, Eyob Mathias, Dr. Victor Chang, Katrina Chang, Nan Bergamo, Sofia and Mireille Chang



Relay for Life 2015 Working Together

More than 50 people represented Team Leever on June 6 and 7 during their annual pilgrimage around Waterbury's Crosby High School track as part of the international phenomenon that is Relay for Life. This year, Team Leever more than tripled their fundraising goal for the event.

"Every year our team is made up of passionate and caring members of the Leever Cancer Center family," said Operations Manager Deborah Parkinson, "and this year was no exception. Patients, families, survivors, physicians, and staff all joined Team Leever on the track. Our tagline for the event represents that mix — and our mission—perfectly: 'Cancer is a puzzle we will solve together.'"

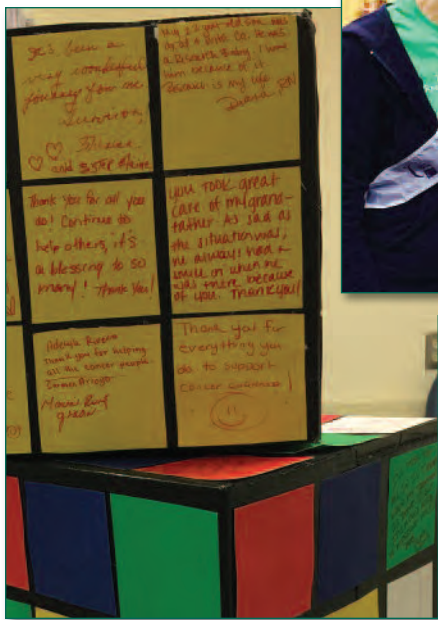
Now in its 30th year, Relay for Life has raised nearly \$5 billion worldwide in its fight against cancer. Relay participants maintain a 24-hour presence, honoring those who have won and lost battles with cancer, honoring caregivers who take up the fight with their friends, family and loved ones each day, and raising funds to maintain programs for patients and survivors, while continuing the search for a cure. For more information, visit www.relayforlife.org.



Below: MaryAnn Daukas and Maureen Renkun.



Above, left to right: Mikal Minter, Peter Sanchez, Jane Bares, Cheryl Guetens, Vaughn Guetens, Tom Belzek, Deb Parkinson, Jacob Belzek, Dr. Nicole Sookhan and Dianne Bedard.



Left: Team Leever's Rubik's cube display was decorated with messages of hope, humor and good wishes from our patients, caregivers and staff.

Right: Nicole Jusef, Melissa Danaher, Jack Danaher, Katie Bowen and Deb Parkinson.



CT Challenge 2015 On a Roll!



Special thanks to 2015 Team Leever fundraisers and riders (left to right): Deborah Parkinson, Emmalee Caisse and Richard Caisse. Not pictured: Kevin Knieri and Chris Mulhall.

Dedicated cyclists sporting bright green Team Leever jerseys pedaled through Fairfield County in July to raise money for cancer survivorship programs throughout the state of Connecticut.

"We are at a truly remarkable point in our history," notes Leever Cancer Center Executive Director Kevin Knieri. "More and more people are surviving cancer. As the survivor population grows, so does the need for survivor services. The CT Challenge provides much-needed funding for those unique and targeted programs and services."

Now in its 11th year, the Connecticut Challenge raises funds to support clinics, allied support services, and networks that organize post-treatment care for the 14 million cancer survivors in the United States. Locally, the Connecticut Challenge supports "Stepping Forward," the Leever Cancer Center's survivorship program. Founded in 2011, "Stepping Forward" offers an effective post-treatment plan for care, disease prevention, and support. Program staff includes nurses, nurse practitioners, a physical therapist, a registered dietitian, and a social worker. Survivors are also encouraged to attend our community health series and YMCA programs.

"We are proud to offer these services locally to patients in Greater Waterbury, and grateful to CT Challenge and all of our supporters, donors, and riders," said Knieri.

Donations to Team Leever for this year's ride can be made until the end of September: <http://2015ctchallenge.kintera.org/teamleever>.

"We are at a truly remarkable point in our history."



The providers who participated were (left to right): Prasad Sureddi, MD; Matthew Bushey, MD; Kert Sabbath, MD; Beth Sieling, MD; Nicole Sookhan, MD; Jeffrey Bitterman, MD; Anamika Katoch, MD; Ellen Polokoff, MD; Philip Corvo, MD; Eric Hyson, MD; Molly Shipman, MD; Scott Kurtzman, MD; Rachel Must-Ettinger, MD, and Stanley Foster, MD.

Multidisciplinary Breast Cancer Conference 2014 In Action

Last year's mock breast cancer conference was a great success. Our multidisciplinary team of breast cancer physician specialists reviewed and discussed breast cancer cases (radiologic, pathologic, and surgical findings) and showed how a consensus is reached on the best form of treatment for a "mock" patient.

This year's program is titled "Mythbusters in Breast Cancer" and will be held on Monday, October 12 at 5:30pm. For reservations, please call 203-575-5548 or e-mail dparkinson@leevercancercenter.org.

A Community of Caring

The Harold Leever Regional Cancer Center wishes to express its appreciation and a sincere thank you to its neighbors and friends by recognizing the spirit and hard work of the members of our community in fulfilling the Mission of the Leever Cancer Center.

With gratitude:

To Patricia Kay Murray-Farris for gifting the Leever Cancer Center with artwork created by **Trinett Foote-Hemmer**.

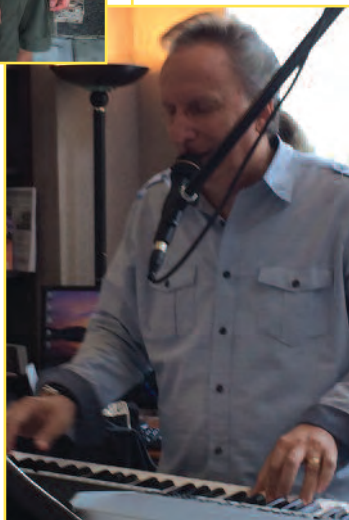
Foote-Hemmer, a registered nurse, traveled throughout the US responding to critical nursing shortages, and to third-world countries to volunteer her services once or twice each year. Her art reflects her experiences, knowledge, and feelings from her travels around the globe.

To Shelby Walton and the One Putt Golf Tour for hosting the first annual Mike Franks Cancer Awareness Golf Tournament at the Southington Country Club in July, to benefit The Harold Leever Cancer Center.



To Boy Scout Troop 5 from Middlebury (above) who sold flower bulbs through their “Be a Garden Angel” program. The bulbs will be planted in community spaces, including the Leever Cancer Center.

Pastor John DeSorbo (right) provided music for the comfort and enjoyment of Leever patients.



The Sarandrea sisters (right) from Oakville, **Haley** (age 7) and **Izzy** (age 11), donated beautiful fleece blankets for patient comfort.

To the group “March’s Soul,” who provided music for patients at Leever. The group features **Nina Cipriano** (vocalist), who is also a volunteer at our front office, and **Hal Afholderbach** (guitarist).

To the Wallace Middle School Leo Club, a community service and leadership organization, for their very generous donation.

Brooke Harris (right) presents Leever Operations Manager **Deborah Parkinson** with a generous gift from the **Watertown High School Swim Team**.

To the Naugatuck Fire Department for donating funds raised during two fundraisers: pink shirts for breast cancer awareness in October, and “Movember,” the national no-shave initiative that supports men’s health.

To Waterbury Hospital’s Health & Wellness Committee for their very generous donation, raised through their “Breast Cancer Awareness tree” in October.

To Woodbury Middle School’s fall sports teams, who wore pink socks, shoelaces and t-shirts as part of their October Breast Cancer Awareness initiative. Thanks to the boys and girls soccer, boys and girls cross country, and field hockey teams, along with all the other students and staff at WMS.

To everyone at Waterbury’s Generali School for so generously donating proceeds from their “Fun Shirt Friday.”

To a very special third-grader named **Madison Capozzi**, who worked hard and raised a very generous sum of money for HLRCC.



To **Bobbi “Funkee Boy” Tamaro**, for donating 20% of proceeds from his benefit “Triumph Concert” to the Leever Cancer Center.

To **Rosanne Chrzanowski** for the donation of a stunning mandala (right), which now hangs in the Meditation Room at HLRCC.

To **Girl Scout Troop 64171**, who created and donated more than 50 comfort bags for Leever patients.

To **WATR**, Waterbury’s favorite radio station, for hosting a benefit dance in April at the American Legion Hall in Oakville. The Rockin’ Heartbeats played to a sold-out crowd. Thanks to all who attended; the event raised \$1,500 for our “Stepping Forward” survivorship program.

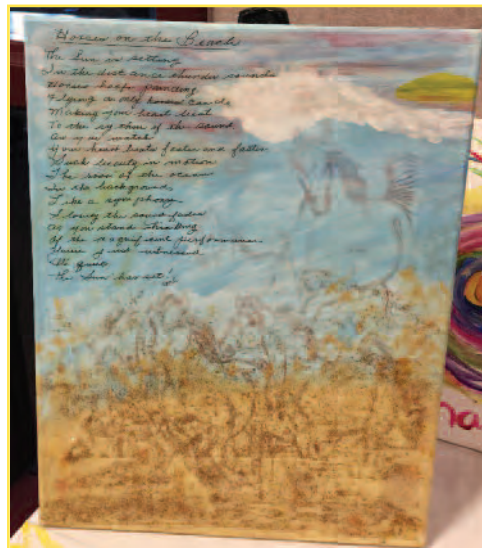
To the law firm of **Bendett & McHugh**, who hold a “Blue Jeans Day” every year to benefit HLRCC. We appreciate your ongoing commitment to us, and are grateful for your very generous donation.



We are grateful to everyone at **Waterbury’s North End Middle School** for their generous donation to HLRCC, which reflects the proceeds of a Breast Cancer Awareness fundraiser.

We’re not just about patients at the Leever Cancer Center; we are about families. The very special daughter of a very grateful patient gifted us with this drawing of two radiation therapists (left).

We continue to be amazed by the incredible artwork created by patients in our Art Therapy group (below). We celebrated all of our artists with an art show in June.



We are immensely grateful for the generosity of our donors!

You can now donate to The Harold Leever Regional Cancer Center online.

Please go to our website, leevercc.org, use the “Donate here” button on the home page, and donate online on the “Giving Opportunities” page.

AWARE!

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We encourage your feedback.
If there is a cancer topic you would like covered, to respond to an article you’ve read, or to be put on our mailing list, please call 203-575-5555 or email: dparkinson@leevercancercenter.org

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Making Strides Against Breast Cancer 2015 Lace 'em up!

Sunday, October 18, 2015

1:00 pm

Library Park

267 Grand Street, Waterbury

For the second year, the American Cancer Society is bringing their non-competitive walk, "Making Strides Against Breast Cancer," to Waterbury! The Harold Leever Regional Cancer Center is proud to be a sponsor at the event.

For more information, please visit:
makingstrides.acsevents.org.

Join Team Leever or make a donation:
main.acsevents.org/goto/teamleever.



Dr. Ellen Polokoff, Dr. Beth Sieling and Dr. Nicole Sookhan cut the pink ribbon to begin last year's event. Enthusiastic participants helped make the first "Making Strides" a great success.

COMMUNITY EVENTS AND MONTHLY SUPPORT GROUPS

MULTIDISCIPLINARY BREAST CANCER CONFERENCE: Monday, October 12, 5:30 PM

"Mythbusters in Breast Cancer" RSVP 203-575-5548 or email dparkinson@leevercancercenter.org

2015 SURVIVORS DAY CELEBRATION: Thursday, November 5, 5:30 PM – 7:00 PM

Featuring guest speaker: Charlie Lustman, "Hope for the Holidays" and "Shine A Light" to honor those impacted by lung cancer. RSVP 203-575-5544 or email dparkinson@leevercancercenter.org

ACTIVATE THE CURE: Interdenominational prayer gathering, weekly, Tuesday, 10 AM – 11 AM, contact Joellen Putnam at 203-213-6495

AMERICAN CANCER SOCIETY: LOOK GOOD, FEEL BETTER!: monthly, 1st Monday, 2 PM – 4 PM, contact the ACS at 203-756-8888

AMERICAN CANCER SOCIETY: REACH TO RECOVERY: by appointment, contact the ACS at 203-756-8888

AMPUTEE SUPPORT GROUP: monthly, 3rd Friday, 5:00 PM, contact Dila Hassiem: 203-597-8818

ART THERAPY: monthly, 2nd and 4th Friday, 2 PM, contact Deborah Parkinson: 203-575-5564

BETTER BREATHING CLUB: monthly, 3rd Friday, 1 PM, contact Rachel Kirchner: 203-757-4991

BRAVE AT HEART BREAST CANCER SUPPORT GROUP: monthly, 1st Wednesday, 7 PM – 9 PM, contact Anne Pringle: 203-910-7582

CANCER CAREGIVER SUPPORT GROUP: monthly, 3rd Monday, 12:00 PM – 1:00 PM, contact Melissa Seres, MSW: 203-575-5511

COMPASSIONATE FRIENDS: monthly, 2nd Wednesday, 6:45 PM – 10:00 PM, contact Sharon: 860-384-1398

CT MULTIPLE MYELOMA FIGHTERS SUPPORT GROUP: monthly, 2nd Tuesday, 6 PM – 8 PM, contact Robin Tuohy: 203-206-3536

ENERGY THERAPY: Tuesday and Wednesday, contact Melissa Seres, MSW: 203-575-5511

FREEDOM FROM SMOKING: An 8-week smoking cessation series, please call 203-575-5573 for information on the start of the next series

HOPE MUTUAL AID GROUP FOR PATIENTS AND THEIR LOVED ONES: monthly, 1st and 3rd Tuesday, 12 PM – 1 PM, contact Melissa Seres: 203-575-5511

JOURNALING: A WAY TO HEAL FROM YOUR CANCER EXPERIENCE: Fridays, 10 AM – 11:30 AM, contact Bob Devito: 203-910-3107

QUILTS THAT CARE: monthly, 1st and 3rd Mondays, 6:30 PM – 8:30 PM, contact Deb V: 860-945-0184

THYROID CANCER SUPPORT GROUP: monthly, last Tuesday, 6 PM – 7 PM, contact Dot Torretta: 203-756-3481

WATERBURY AREA OSTOMY SUPPORT GROUP: monthly, 1st Monday, 6:30 PM – 8:30 PM, contact Don Grocki: 203-695-3340

WOMAN TO WOMAN BREAST CANCER SUPPORT GROUP: monthly, 3rd Tuesday, 7 PM – 8:30 PM, contact Theresa Lombardo: 860-274-2200

Call contact person to confirm that group is as scheduled. Meeting times may be rescheduled to accommodate holidays or special meetings. See leevercancercenter.org for ongoing events.