

CANCER PROGRAM REPORT - 2010

By **John W. Hoyt, MD**
Cancer Committee Chairman

Care of patients suspected or diagnosed with cancer remains a central responsibility of Whidbey General Hospital and a major focal point of many medical and surgical specialists and other providers who provide this care. Cancer care is coordinated through office visits, diagnostic studies and reports, monthly Tumor Board and work of the multidisciplinary Cancer Committee and Cancer Care Committee. We are confident we will see continued growth in the quality and scope of cancer care on the Island in the years to come.

CANCER CARE GOALS FOR 2011

- Cancer Committee held a retreat in March 2011 to consider further refinements and directions for the practice of cancer care on the Island.
- Completion of the certification process for Susan Johnson as Cancer Registrar. Lynda Walrath graciously continues to provide program oversight remotely.
- Engage the medical and larger community more fully in programs of cancer awareness, prevention and education. The following cancer focus months were scheduled:
 - March-Colorectal
 - April-Men's Health
 - May-Skin
 - Sep-Prostate
 - Oct-Breast
 - Nov - Lung
- Continue to incorporate scientific studies and regional/national standards of care into the WGH cancer program in order to maintain excellent, comprehensive and cost-effective care for Island citizens.
- Enhance nutritional education via quarterly classes and continued availability of our nutritionist for personal consultation.
- Complete the Electronic Medical Record project in the Medical Ambulatory Care unit.
- Complete the Cancer Navigation program and begin its implementation.

2010 Cancer Care milestones included:

A welcomed new format for Tumor Board presentations (all digital visuals) and a new meeting time to better accommodate busy community physicians was created. Several short talks and presentations were incorporated into the Tumor Board to provide updates in the care of patients with breast and prostate cancer. Additional educational offerings related to cancer care continue to be scheduled at WGH.

Dr. Gabe Barrio, who serves as Cancer Liaison physician, was honored with the Outstanding Physician Liaison Award by the American College of Surgeons Commission on Cancer for his excellent work in cancer care on Whidbey Island. He is one of 39 recipients out of a pool of 1,600 who serve in this capacity across the country. This is a superb recognition not only for Dr. Barrio, but for the entire WGH Cancer Care program.

The Cancer Navigation Program at WGH received emphasis, study and discussion. The goal is to complete this in 2011.

The Cancer Committee has been enhanced and streamlined in its essential processes, now meeting quarterly following Tumor Board.



John W. Hoyt, MD

TOBACCO PREVENTION/CESSATION

Katherine Riddle, RRT, CTTS, Tobacco Cessation Specialist

Last year, Whidbey General Hospital and Island County Health Department collaborated to provide an evening of tobacco cessation classes to 28 attendees. Free vouchers were given for 2 weeks worth of NRT patches, funded by the cancer care committee and dispersed through the Hospital Foundation. The average quit rate at one year has been 40%. Individual classes were offered for teens and others who could not attend the evening classes.

Additionally, both agencies offered community presentations for prevention/cessation education to 252 people. These were offered in juvenile detention centers, drug recovery centers, nursing student programs, and life transition classes. We continue to offer presentations to any school or community group that invites us.

Whidbey General Hospital and its associated clinics went Tobacco Free in October! The transition from a tobacco free facility to a tobacco free campus occurred with the help of a committee which met for over a year planning education and policy implementation. There have been several employees who have reported success at becoming tobacco free in the last year as well. Congratulations to everyone who has been involved in this successful transition.

We appreciate the many ways this program has been supported and received in the community. We anticipate that in 2011 we will continue these successes throughout our community.

WHERE DO PEOPLE GET THEIR CANCER CARE?

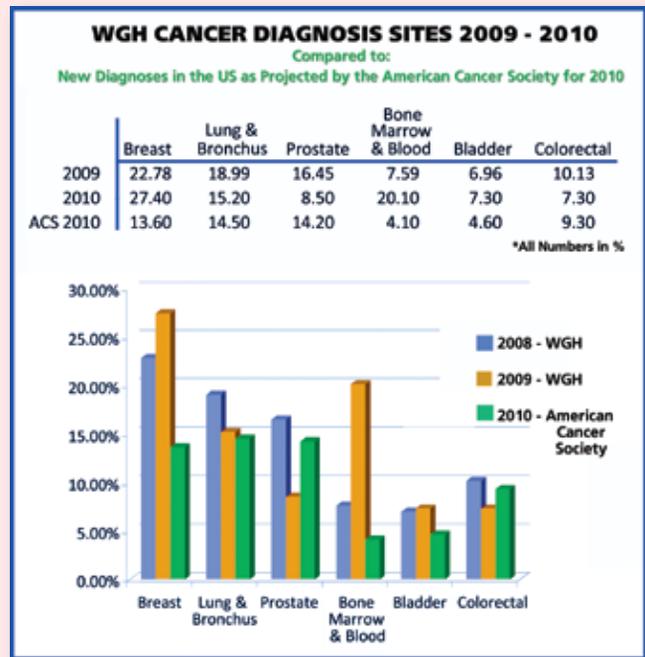
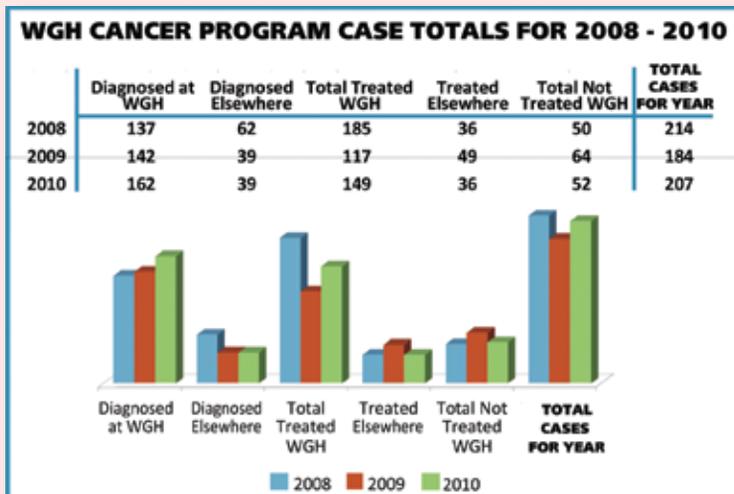
By Renee Yanke, ARNP, MN, AOCN
Cancer Program Manager

Where do people who are diagnosed at WGH with cancer go for their care? The data from 2008 through 2010 can tell the story. WGH grew 12% in the total number of cases diagnosed and cared for in 2010 with 207 people. This is up from 184 in 2009. Surgery is often the start of care for people—for the initial diagnosis and removal of the tumor. There was growth in the number of cases diagnosed, from 142 to 162 cases, supported by the fact that Drs Bahiraei and Oman arrived in late 2009/early 2010.

One category that we look at is surgery – people often choose to have the initial surgery elsewhere, but return to WGH for treatment. This may be due to specialized surgery that is not done here, such as gynecological oncology. This group, those who had surgery/diagnosis elsewhere and received all or part of their treatment here, grew and we will continue to monitor this trend. Comparing the trends on the bar graph below, more people have chosen to receive all or a portion of their care at WGH. There was a decline in the number of people who had their cancer diagnosis and treatment elsewhere.

The numbers are overall small, but they do indicate a trend that people are returning to WGH for their cancer care. This may be with surgery, chemotherapy, hormonal and immunotherapy. Radiation therapy continues to be coordinated with United General in Sedro Woolley, Skagit Valley in Mt. Vernon and Providence in Everett.

While these trends are an improvement, there is room for growth as people learn about the services that are available and that personalized, high quality oncology care is available on the island.



TOP 6 CANCER DIAGNOSES AT WGH

The top 6 diagnoses at Whidbey General are shown above, with some interesting comparisons between the years 2009 and 2010, as well as the 2010 estimates from the American Cancer Society. The figures used are percentages of the cases of cancer at WGH and the national levels; and the overall percentages are consistent with the ACS estimates for 2010.

The growth in breast cancer of 20% from 36 cases to 45 cases is most likely in response to the arrival of our newest surgeon, Dr. Oman. Her expertise in breast surgery has encouraged many women to choose Whidbey General for their surgery and subsequent treatment.

The registry started collecting data on blood and bone marrow diseases such as myelodysplastic syndrome and thrombocytosis that were not considered malignant prior to 2010. This explains the reason for the 300% increase from 11 to 33 cases. Prostate cancer cases at Whidbey fell in 2010, possibly due to new screening guidelines from the American Cancer Society in 2010. New guidelines put emphasis on assessing the man's overall health and longevity before screening for prostate cancer. Lung, bladder and colorectal cancer cases remain fairly consistent with national estimates, and will bear ongoing monitoring.