

CA CONNections

Member Newsletter of The Connecticut Cancer Partnership



March 2017

March is Colorectal Cancer Awareness Month

Colorectal Cancer

Colorectal cancer is the second most common cause of cancer deaths in the United States among cancers that affect both men and women, although it is preventable. Screening and surveillance are effective ways to prevent colorectal cancer and find it early, but screening rates remain relatively low, especially among low-income, uninsured, and underinsured people.

A Call to Action

Join the American Cancer Society, local city and state leaders, and medical professionals as we raise awareness and work together to increase colorectal cancer screening rates to 80% by 2018. We urge you to come and discuss challenges and barriers with us.

Thursday,
March 16th

9:00am - 10:00am

Hartford Public Library, Downtown Branch
Center for Contemporary Culture
500 Main Street, Hartford, CT 06103

Connecticut health and business leaders have pledged to support efforts to increase screening rates. Hear what these partners are doing for their communities and learn how other can contribute to this important undertaking.

New Hampshire Colorectal Cancer Screening Program : The Patient Navigation Model

The New Hampshire Colorectal Cancer Screening Program (NHCRCSP) patient navigation model has been highly effective in increasing the completion and quality of colonoscopy screening among these groups. The results of a comparison group study showed that NHCRCSP-navigated patients were 11 times more likely to complete colonoscopy than non-navigated patients. Given its success, CDC and

The Connecticut Cancer Partnership unites the members of our state's diverse cancer community -academic and clinical institutions, state and local government health agencies, industry and insurers, advocacy and community groups, and cancer survivors. Together, the coalition has developed and is now implementing a comprehensive plan to reduce the suffering and death due to cancer, and improve the quality of life of cancer survivors throughout Connecticut.

Visit our newly improved website:
ctcancerpartnership.org

Expanding Lynch Syndrome Screening: From Research to Reality

Tuesday, March 21, 2017, 2:00 p.m. to 3:00 p.m. ET

Lynch syndrome (LS) is an inherited disorder that raises a person's risk of developing colorectal, endometrial (uterine), ovarian, stomach, and other forms of cancer. Expanded screening for Lynch syndrome has been widely

NHCRCSF developed a manual to help others replicate the model. This manual provides specific information and tools to replicate the NHCRCSF patient navigation model. We provide detailed information on implementing a model that improves completion of colonoscopy and follow-up, increases patients' knowledge about their tests and results, and improves overall screening quality and patient satisfaction.

[New Hampshire Colorectal Patient Navigation Manual](#)

Screen to Save

Increasing colorectal screening rates in the U.S. is a national priority and part of the 10 recommendations by the Blue Ribbon Panel for the Cancer Moonshot announced in October 2016 and endorsed by the National Cancer Advisory Board. In response to these recommendations, the NCI Center to Reduce Cancer Health Disparities (CRCHD) launched the national Screen to Save (S2S): NCI Colorectal Cancer Outreach and Screening Initiative. S2S seeks to increase colorectal cancer screening rates among men and women ages 50-75 from racially and ethnically diverse communities and in rural areas, including: American Indians and Alaskan Natives, Asians, Blacks/African Americans, Hispanics/Latinos, and Native Hawaiians and other Pacific Islanders.

[Learn more about disparity reduction efforts here](#)

[More info here](#)

[Resources for colorectal awareness month](#)

Center for Hospice Care Cancels Plans to Build Hospice House

Norwich, CT (January 26, 2017) In spite of having raised nearly \$6 million towards a \$7.5 million Hospice House Campaign fund raising goal, Center for Hospice Care announced that it has canceled plans to build Hospice House on its campus in Norwich because unforeseen changes in healthcare conditions would have caused Hospice House to have unsustainable operating deficits.

Peter Greenwald Joins Advisory Committee of Connecticut Cancer Partnership

Peter Greenwald was (retired 2016) the Associate Director for Cancer Prevention at the National Cancer Institute, NIH and an Assistant Surgeon General in the U.S. Public Health Service. The Division of Cancer Prevention, which he established, covers a broad spectrum from basic research through clinical and public health research, pursuing a significant reduction in cancer incidence, morbidity and mortality. Research areas include basic and pre-clinical chemoprevention studies through first-in-human to phase III clinical trials, biomarker discovery and validation, basic nutritional science, biometry and systems approaches to cancer prevention. Dr. Greenwald received his medical degree from the State University of New York College of Medicine in Syracuse, and his Master degree and Doctorate in Public Health from the Harvard School of Public Health. He is Board-certified in both Internal Medicine and Preventive Medicine.

recommended due to the potential benefits to both patients and their family members, but has not yet been fully implemented throughout the United States. [Register here](#)

Submissions

Please submit articles and/or suggestions to:

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Dr. Greenwald began his career in the USPHS Commissioned Corps as an Epidemic Intelligence Service (EIS) Officer at the Centers for Disease Control assigned to the Ohio Department of Health. His best known EIS investigation was of an insulation worker who died of anthrax; he also worked on a vanguard study for the smallpox eradication program and tracked down vaccine-associated polio. Then he did a medical residency at Boston City Hospital, earned a doctoral degree in cancer epidemiology from Harvard, and was assistant in medicine at Peter Bent Brigham Hospital. After serving as director of epidemiology at the New York State Department of Health - with associated appointments at Albany Medical College and as Adjunct Professor of Biomedical Engineering at Rensselaer Polytechnic Institute - he joined the NCI in 1981 as a commissioned officer.

At the NCI, he provided leadership against the use of tobacco, starting the American Stop Smoking Intervention Study (ASSIST), and nutrition education with the 5 A Day program in partnership with industry and the private sector. Dr. Greenwald started a community clinical oncology network which conducted the first clinical trials in cancer prevention. Among these were the Breast Cancer Prevention Trial which showed that the occurrence rate of breast cancer in high risk women could be cut in half, and the Prostate Cancer Prevention Trial which reported a 25% reduction in prostate cancer from daily use of the drug finasteride. His current work relates primarily to human cancer prevention trials, nutritional science, biomarker research, training, and cancer control. Dr. Greenwald is the author of about 300 scientific papers.

Welcome Dr. Grennwald!
