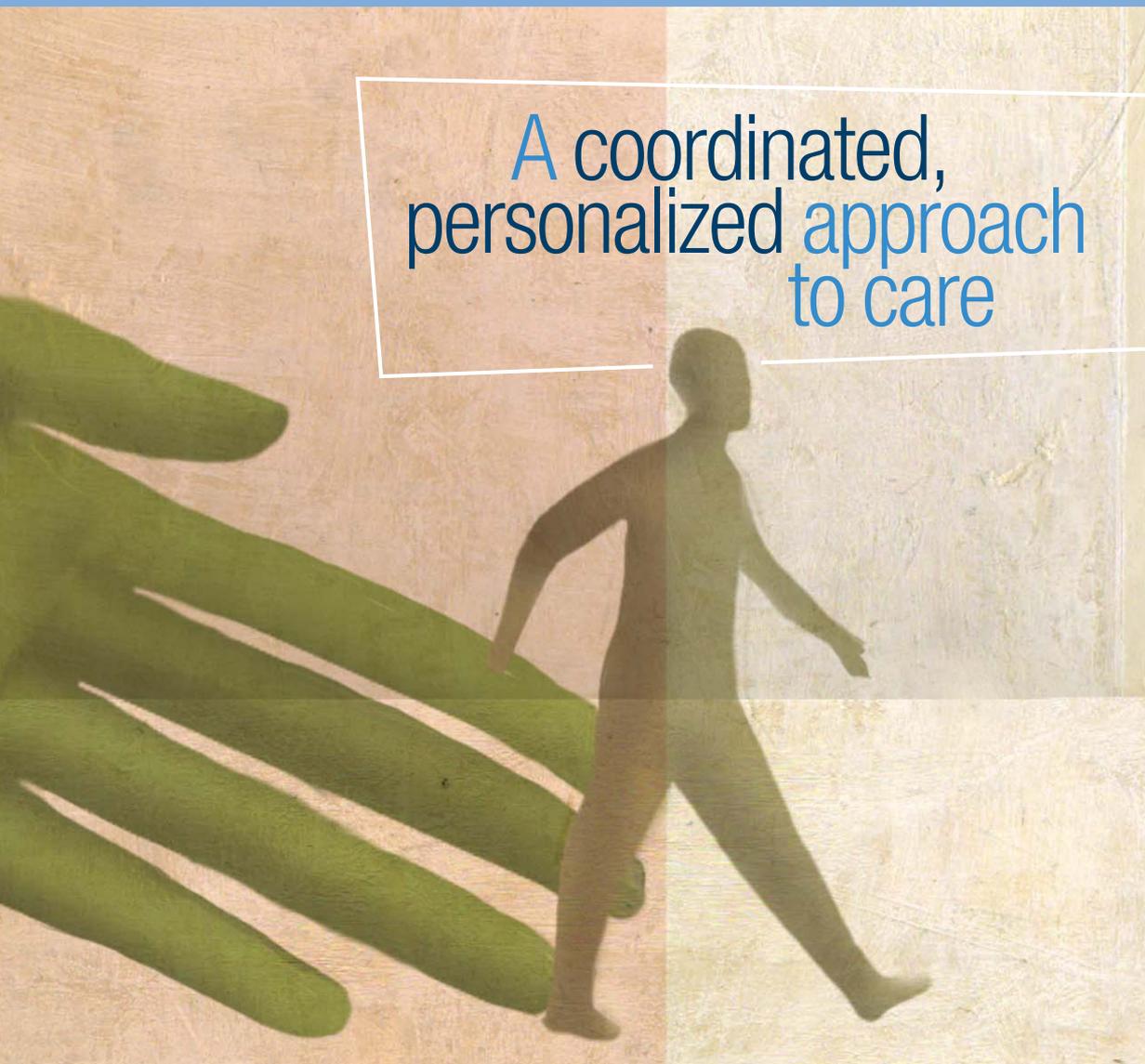


cancer

D I S C O V E R Y & C A R E

A coordinated,
personalized approach
to care



UPMC Cancer Centers *and*
University of Pittsburgh Cancer Institute

cancer
DISCOVERY & CARE

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PROVIDING A PERSONALIZED APPROACH TO CARE

Navigating the complexities of our health care system is becoming increasingly challenging for patients. *The New York Times* recently lamented the disparities in cancer care available to patients in a landmark article highlighting the importance of a coordinated care approach to achieving good outcomes for patients.

At UPMC Cancer Centers and the University of Pittsburgh Cancer Institute, the close collaboration of medical, radiation, and surgical oncologists with the referring physician ensures that patients are being evaluated more quickly and entering treatment sooner — when the cancer is most treatable. Our multidisciplinary model of care is not only enhancing the patient experience, but also advancing the science of cancer prevention, detection, and treatment, as the treatment team works closely with researchers to incorporate the latest clinical trials into each patient's treatment strategy.

Our multidisciplinary model of care is not only enhancing the patient experience, but also advancing the science of cancer prevention, detection, and treatment

We understand that cancer treatment can take a significant toll on the patient and their family. That's why we are committed to treating the whole person, through ancillary services such as behavioral medicine, rehabilitation, social work, palliative care, nutrition, genetic counseling, and patient education, to provide a personalized approach to care from diagnosis through treatment.

Our patient navigators and support staff work closely with each patient and their family to assist with coordinating appointments, referrals to support services, and identifying financial assistance options when necessary.

UPMC Cancer Centers has been designated a "Blue Distinction Center for Complex and Rare Cancers" by the Blue Cross Blue Shield Association, due in part to the cutting-edge therapies and technologies being developed here in Pittsburgh. This distinction recognizes our strong commitment to superior and expert cancer care for every patient.

By streamlining the complexities of cancer care we are easing the burden of this devastating disease.



Ronald B. Herberman, MD

Hillman Professor of Oncology
Director, UPMC Cancer Centers and the University of Pittsburgh Cancer Institute





Lifting a Financial Burden for Patients

Like most of the country, western Pennsylvania has felt the financial impact of the current economy. Record high gas prices and the rising cost of food have forced many Americans to tighten their budgets.

Now imagine being diagnosed with cancer. Patients receiving cancer treatments are often unable to work due to the impact of both the disease and the therapy. In addition to normal day-to-day expenses, patients are dealing with costs for doctor visits, lab work, and other specialty care. Even with health insurance, the deductibles and out-of-pocket expenses can strain any budget.

According to medical oncologist Barry C. Lembersky, MD, a cancer diagnosis can place tremendous financial stress on a person.

“It is well-known that a cancer diagnosis has a wide-reaching effect on a patient’s life,” says Dr. Lembersky. “The disease can create an undue burden on those already with financial needs. In some cases, a patient may make the decision to forego treatment, with dire consequences for survival and quality of life.”

In 2005, UPMC Cancer Centers established the Patient Assistance Fund to help cancer patients across the network overcome some of the financial barriers associated with completing their treatment. The fund is designed to provide partial, short-term assistance to help eligible patients with care-related costs such as transportation, medical equipment, nutritional supplements, prosthetic devices, and lodging for themselves or family members.

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Making choices to make ends meet

When Darryl Wilson was diagnosed in 2006 with non-Hodgkin's follicular lymphoma, he and his wife were not prepared for all the extra expenses associated with cancer treatments.

Like many cancer patients, Darryl faced costs associated with his treatment that seemed overwhelming. Darryl was unable to work due to the rigorous treatments, and his wife was working a limited schedule to take him to appointments. Although he was receiving sick pay, it was not enough to cover the additional expenses related to his care. Then the plant where Darryl had been working shut down. The couple needed to find a way to make ends meet.

A patient navigator at UPMC/Jameson Cancer Center helped the Wilsons to explore ways to ease their financial burden. Darryl and his family had no idea that programs like the Patient Assistance Fund existed. They credit the fund with helping them to pay for gas while he finished his radiation therapy.

"I realize that everyone has problems, but overcoming obstacle after obstacle became the central theme throughout my treatment. The Giant Eagle gift cards came at the right time, and enabled me to finish my radiation therapy," Wilson said.

Throughout the UPMC Cancer Centers network, managers, social workers, and at some sites, patient navigators are available to counsel patients experiencing financial hardships about available resources.

"When a patient has needs that are not met after exhausting external programs, our staff can recommend the patient for assistance through the fund," says Lyn Robertson, DrPH, associate director, Cancer Control Services, UPMC Cancer Centers.

The Patient Assistance Fund can provide up to \$500 in support to a qualifying patient during a 12-month period. Giant Eagle gift cards are popular, because patients can use them to purchase gas, groceries, and nutritional supplements. The funds also can be used to pay for durable medical equipment and wigs.

A supportive community

Over the years, the fund has received support from a variety of sources. Local businesses, including Eyetique, Silpada Designs Jewelry, and Little's Shoes, have held special promotions and donated a portion of their sales to benefit the fund. Kids and a Cause, a philanthropic organization put together by local children, makes and sells purses to raise money. The members of the organization chose to give the proceeds to the Patient Assistance Fund because someone close to them received great care at Hillman Cancer Center.

Even physicians and UPMC Cancer Centers employees have chosen to put their charitable dollars toward the fund to help patients. Dr. Lembersky, who is a major contributor, sees the fund as a way to help patients like Darryl to meet basic, everyday needs to live life beyond the scope of their treatments.

"The fund helps to make sure the rest of the patient's life gets attended to as well."

Since its inception, the fund has helped more than 700 patients throughout western Pennsylvania.

For more information about donating to the Patient Assistance Fund, please contact UPMC Cancer Centers and UPCI Development Office at 412-623-4700.

DeeDee Sacco's Fight for Life

Undergoing treatment at Hillman Cancer Center for a rare sarcoma of the lung, DeeDee Sacco became friendly with another patient while they were both participating in a clinical trial. The woman appeared to be very ill. When DeeDee asked her why she was so sick, the woman told her it was because she could not afford her prescriptions.

DeeDee decided that it was her mission to give other cancer patients the support that she was so fortunate to have.

Throughout her own treatments she offered fellow patients emotional support, and sometimes even financial support, when needed.

Although DeeDee lost her battle with cancer in 2004, her passion to help other cancer patients lives on through her family and friends. They continue to celebrate her life and her dream by raising funds through DeeDee Sacco's Fight for Life, a non-profit organization benefiting UPMC Cancer Centers' Patient Assistance Fund.

"By providing patients with temporary financial relief, they can concentrate on getting well."

Barry C. Lembersky, MD



Alana Sacco, DeeDee's mother and chairman of the board for the organization, has found a sense of joy in raising money for the Patient Assistance Fund.

"Knowing this is what DeeDee would have wanted got the committee started," says Mrs. Sacco. "Having helped so many families get through difficult times keeps us going."

In January 2008, DeeDee Sacco's Fight for Life presented UPMC Cancer Centers with a check for \$70,000, bringing the group's grand total to \$155,000 over the past three years.

The volunteer organization has raised more than \$30,000 through the sale of bracelets featuring a rainbow of 12 colors representing different types of cancer. Silvana Conroy, a childhood friend of DeeDee's and president of the organization, says that the bracelets have created a far-reaching bond.

"When I wear the bracelet people approach me and ask where I got it," says Mrs. Conroy. "Then they tell me where they got their bracelet and it usually leads back to our organization. It's been a great experience."

DeeDee Sacco's Fight for Life also hosts an annual cocktail party at the LeMont, located in the Mount Washington section of Pittsburgh, and a golf outing at Hill Crest Country Club, located east of the city.

According to Mrs. Sacco, the organization owes its success to all of the volunteers.

"I can't say enough about how generous our supporters and volunteers have been. We could not have helped as many families without their commitment. DeeDee would have been proud."

For more information about the organization, visit its website at www.deedeefightforlife.org.



Simplifying the Complex World of Cancer

Despite the growing number of advanced cancer therapies, many Americans are still not receiving adequate cancer care. A landmark article in *The New York Times* brought to light this stark reality: **a substantial number of patients are getting lost in our complex medical system.**



This can be especially true in the complex world of cancer care. Developing an effective treatment plan for cancer often involves input from a wide variety of specialists. For many patients the time from diagnosis to the start of treatment can be frustrating and lengthy.

To eliminate the disjointedness that exists for newly diagnosed patients, UPMC Cancer Centers has developed disease-specific multidisciplinary clinics where patients see the entire team of specialists in a concentrated period of time, expediting the development and implementation of a treatment plan.

A journey from frustration to treatment

Sam Birchfield's journey through cancer began with a simple fall down the stairs while on vacation. After the fall, he developed pain and heartburn that would not go away. At first he and his wife dismissed the symptoms as indigestion, but after returning to his hometown of Dallas the symptoms persisted, so he made an appointment with his primary care physician.

Mr. Birchfield's doctor first suspected that his pain was related to bruising and inflammation from the fall, but testing revealed that his gallbladder wasn't functioning properly. He had surgery to remove the gallbladder, but the pain did not go away. After further testing, a small mass was discovered on his pancreas, which was eventually diagnosed as adenocarcinoma. His surgeon in Texas felt that the mass was inoperable and made recommendations for palliative care to make him more comfortable.

Frustrated, Mr. Birchfield began a nationwide search for alternative treatment options, which ultimately led him to the Pancreatic Cancer Center of UPMC Cancer Centers.

"By the time a patient like Mr. Birchfield has seen all the specialists, valuable time may have passed," says A. James Moser, MD, co-director, Pancreatic Cancer Center. "For certain cancers, the patient may become too frail for treatment which might otherwise have been possible."

At UPMC Cancer Centers, multidisciplinary clinics bring together a team of specialists — medical, radiation, and surgical oncologists; disease-specific specialists such as gastroenterologists, pulmonologists, and neurologists; and pathologists and radiologists — to expedite patient evaluations, saving valuable time. Clinics are setup by cancer type, including adult neurological, breast, head and neck, lung, lymphoma, pancreatic, and thyroid cancers.

Newly diagnosed patients work with a coordinator who serves as the point person for the treatment team — reviewing the patient's history and making appropriate appointments based on the patient's needs and the team's recommendations. Supportive services, such as nutrition experts, behavioral medicine, palliative care, pain and rehabilitation services, oncology social workers, and cancer education specialists, are also part of the multidisciplinary team to enhance the patient experience.

Another important component of the multidisciplinary model is the incorporation of clinical trials in the treatment plan, combining innovative and promising clinical trial options with the best standard-of-care therapies for each cancer type.

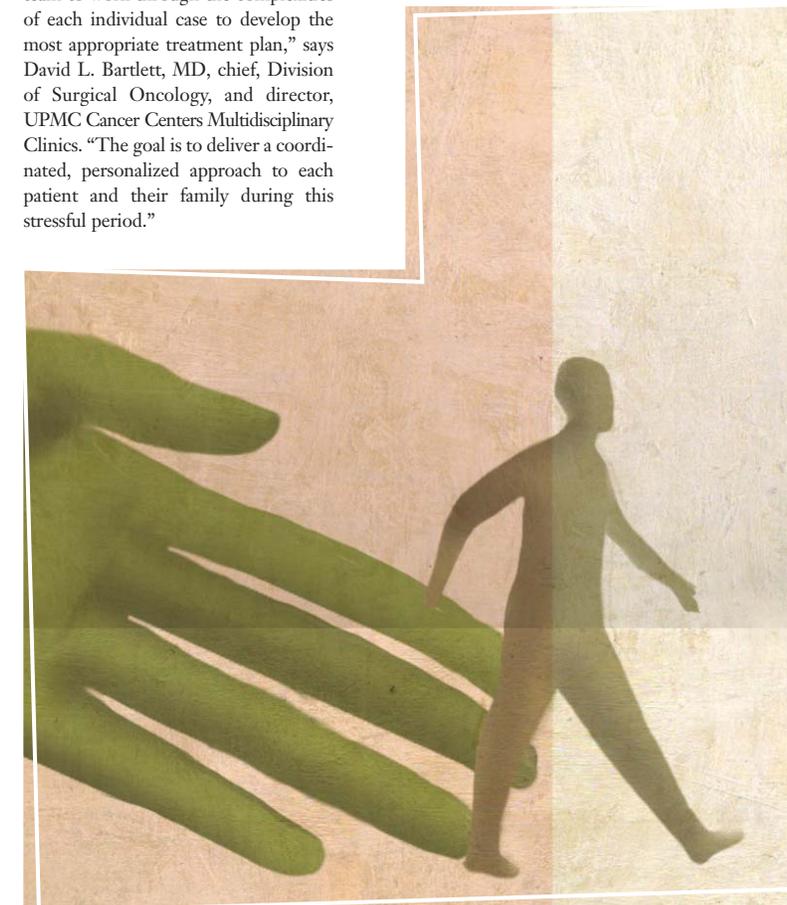
"One of the most important functions of a disease-oriented program is to provide an infrastructure for physicians to collaborate with clinical researchers to develop novel therapies," says Frank Lieberman, MD, director, Adult Neuro-oncology Program. "Clinical trials are significant to the development of new therapies that may improve patient outcomes."

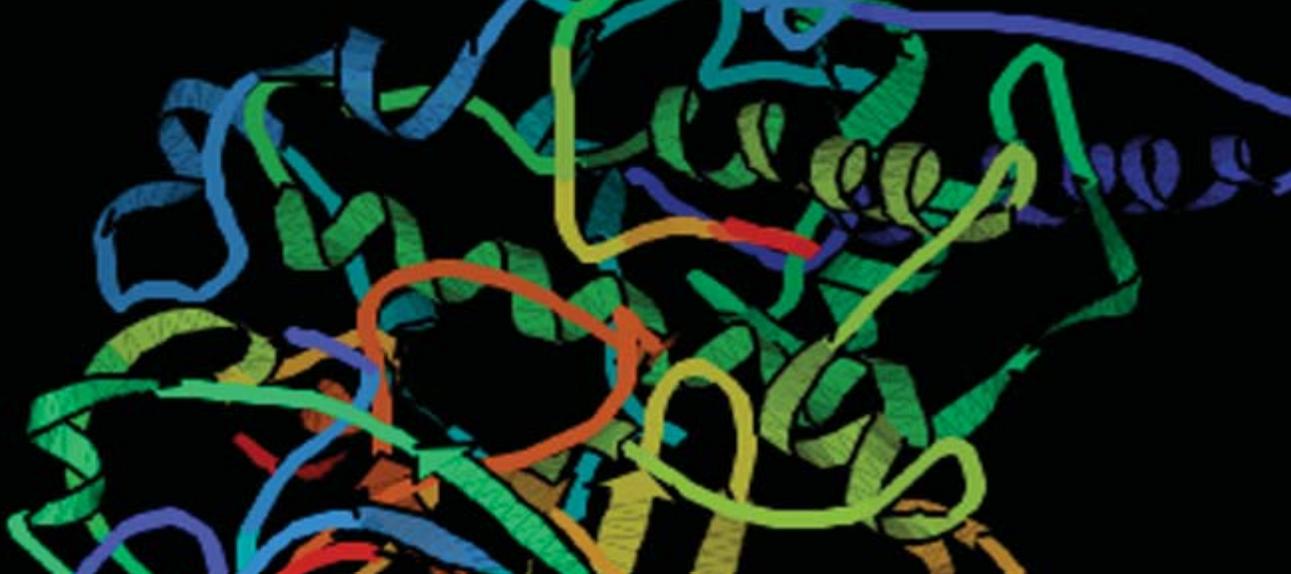
A coordinated, personalized approach

The cornerstone of the multidisciplinary approach is the close coordination with the referring physician. Once a treatment plan has been developed, the team provides immediate feedback to the referring physician to ensure a complete continuum of care.

"The collaborative framework of the multidisciplinary clinics enables the team to work through the complexities of each individual case to develop the most appropriate treatment plan," says David L. Bartlett, MD, chief, Division of Surgical Oncology, and director, UPMC Cancer Centers Multidisciplinary Clinics. "The goal is to deliver a coordinated, personalized approach to each patient and their family during this stressful period."

Mr. Birchfield says that his experience with the Pancreatic Cancer Center has been tremendous. "When I came to Pittsburgh for my initial evaluation, I never expected that I would meet all the doctors, have additional testing, and leave with a treatment plan in place. They have been wonderful helping me when I am in Pittsburgh and coordinating my care with my oncologist in Texas."





Finding the Family Link



Major gift funds research for hereditary breast cancer

The discovery of the correlation between mutations in the genes called Breast Cancer 1 (BRCA 1) and Breast Cancer 2 (BRCA 2) and hereditary breast, ovarian, pancreatic, and prostate cancers has given this generation hope that one day their children may be able to prevent cancer.

More than a decade ago researchers identified that BRCA 1 and BRCA 2 genes, when changed or mutated, increase the risk of certain cancers. Since this discovery, much effort has been directed towards investigating fundamental questions about hereditary cancer risk and the role of BRCA mutations. And while the answers to these and other related questions may lead to better early detection methods and treatments, our understanding of the roles these mutations play is still in its infancy.

Thanks to a \$1 million commitment from the David S. and Karen A. Shapira Foundation, a new program at the University of Pittsburgh Cancer Institute (UPCI) and Magee-Womens Hospital of UPMC is addressing these key questions. The gift is structured as a matching grant to raise an additional \$1.5 million from individuals and foundations. UPMC is matching these gifts on a dollar-for-dollar basis, for an overall goal of \$5 million. The Frieda G. and Saul F. Shapira BRCA-Associated Cancer Research Program, named to honor the parents of David Shapira, chairman, president, and chief executive officer of Giant Eagle, Inc., is focused on advancing the understanding, prevention, early detection, and treatment of BRCA mutation-associated malignancies.

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“The program is one of the most focused of its kind,” said Ronald Herberman, MD, director, UPCI and UPMC Cancer Centers. “The more we learn about these mutations, the better chance we have to target high-risk people and to find innovative ways to reduce their cancer risk.”

Research projects in the program include:

- a comprehensive registry and specimen bank to facilitate BRCA 1- and BRCA 2-related research
- proteomics research into the discovery of breast cancer biomarkers
- a multi-marker approach for a blood test for early detection of breast or ovarian cancer in BRCA-mutation-positive women
- cancer-risk prediction in daughters of BRCA 1- or BRCA 2- mutation carriers to identify opportunities for prevention
- prediction of breast cancer risk among individual BRCA 1- or BRCA 2- mutation carriers
- risk analysis and risk reduction targets based on gene-environmental interactions

A powerful resource for research

At the heart of the program is the establishment of a comprehensive registry and specimen bank that will serve as a powerful resource for a wide range of studies by providing investigators with ongoing access to clinical samples, as well as demographic, pedigree, and genetics data for BRCA-mutation carriers and non-carriers.

Kristin K. Zorn, MD, an expert in gynecologic oncology at Magee, is collaborating on the development and management of the registry and specimen bank with Darcy Thull, MS, CGC, of the UPMC Cancer Genetics Program.

“Over the last decade there has been a real recognition, both nationally and internationally, of the importance of specimen banking. But the problem is doing it effectively,” says Dr. Zorn. “It is very expensive to harness all the resources to collect specimens and bank them appropriately. We are fortunate to have donors who recognize the importance of the basic work of building the registry and continuing specimen banking.”

Image of BRCA 2 gene courtesy of RCSB Protein Data Bank. Yang, H., Jeffrey, P.D., Miller, J., Kincaid, E., Sun, Y., Thoma, N.H., Zheng, N., Chen, P.L., Lee, W.H., Pavletich, N.P. (2002) BRCA2 function in DNA binding and recombination from a BRCA2-DSS1-ssDNA structure. Science 297: 1837-1848

Screening and early detection

Another goal of the program is to develop a reliable, preclinical blood test to detect cancer in high-risk women. Women who test positive for a BRCA mutation are at the highest risk for breast cancer. A blood test could help to identify cancer earlier, leading to more effective treatments and better long-term survival.

“Currently the best tool we have to screen women is mammography, which does not always identify small lesions,” says William Bigbee, PhD, co-leader of the program’s breast cancer biomarkers discovery project. “Early-stage breast cancer is often difficult to identify using mammography alone, particularly in premenopausal women with dense breast tissue.”

Dr. Bigbee and his colleague, Thomas Conrads, PhD, who are co-directors of the Clinical Proteomics Facility at UPCI, hope to identify and validate serum-based biomarkers, a characteristic indicating the presence of disease process, using state-of-the-art proteomic technologies to further improve breast cancer screening, early detection, and diagnosis.

The ultimate goal is to use this information to create a molecular blood test to complement existing clinical screening methods, such as mammography, that will assist radiologists and oncologists in determining whether or not suspect lesions are precancerous or cancerous.

Who is at risk?

Individuals with a BRCA mutation are not only at risk for breast cancer. Male and female BRCA mutation carriers also have an increased risk of ovarian, prostate, and pancreatic cancers. The High-Risk Clinic at Magee counsels and treats women and men with a strong family history of these cancers. Information gathered at the clinic will be used to build the registry and specimen bank.

Although most breast cancers occur in women who do not have a strong family history of the disease, about 10 percent are linked to a genetic predisposition. In the United States, it is estimated that somewhere between one out of 345 to 1,000 individuals carries a BRCA mutation, and for individuals of Ashkenazi Jewish descent, the number is approximately one in 40 individuals. Pittsburgh has a relatively large Ashkenazi Jewish population.

“The BRCA-Associated Cancer Research Program brings together innovative researchers with physicians who clinically treat patients with these types of cancers, giving us the opportunity to not only treat the patients and help them to manage their risk, but to learn from them so we hopefully find better answers for their children,” says Dr. Zorn.



To be or not to be (tested)...

It's been nearly ten years since Titina Ott received the news that a relative tested positive for a BRCA mutation. Her father's cousin decided to have the genetic testing done after losing her mother to breast cancer and finding a lump of her own. For Titina's cousin it was an easy decision to be tested. The cousin decided that she needed to share this information with her relatives, so that they too could make the decision to be evaluated by a genetic counselor. The decision was not as easy for Titina.

She discussed getting tested with her family and eventually decided not to be tested. "I found out about my family's risk when I was in my early 30s. At the

time I was concentrating on my career and wasn't really thinking about health issues," says Titina.

The reality of Titina's own cancer risk hit home when her best friend from college was diagnosed with Stage III colon cancer. Her friend's mother had passed away from complications of Stage IV colon cancer, prompting her friend to get tested for colon cancer and ultimately saving her life. This was a wake-up call for Titina.

She now takes her risk very seriously. As a patient at the High Risk Clinic at Magee-Womens Hospital of UPMC, she gets regular breast MRIs and sees

an oncologist once a year. She credits the clinic with giving her more awareness and education about being in a high-risk group. She also has become passionate about encouraging women to take an active role in their health.

"I am 100 percent more proactive in my life knowing I am part of a high-risk group," says Titina. "You only have one life to live. Education has helped me to make better choices that potentially may prevent cancer. I want to empower other high-risk women to take advantage of as many opportunities as possible to decrease their risk as well."

Educating the 'plain' community

On any given day, travelers driving through the quaint, rolling farmlands of western Pennsylvania may encounter Amish neighbors commuting to local towns by horse-drawn buggy where their traditional way of life intersects with the modern world.





In October 2007, ROCOG coordinators brought
the first breast and cervical cancer screening
to an Amish community in Somerset, Pa.

The Amish, who are known for their simple lifestyle, typically shun the outside world, restricting their use of modern conveniences and seeking medical attention only when needed. **Their beliefs, until recently, have limited their access to preventive health care, such as cancer screenings and education.**

Thanks in part to a grant funded by the National Cancer Institute, clusters of Amish throughout western Pennsylvania are gaining access to valuable cancer education and screenings utilizing education methods sensitive to their needs.

The Amish education program was developed as part of the Radiation Oncology Community Outreach Grant (ROCOG) project, which promotes the use of non-traditional outreach to make state-of-the-art cancer care available to disadvantaged communities.

Dwight E. Heron, MD, principal investigator of the grant and director, Radiation Oncology Services, UPMC Cancer Centers, underscores the importance of building trusting relationships and making cancer education understandable and relevant to people in communities like the Amish.

“Trust was an essential component,” explains Dr. Heron. “By understanding their needs and respecting their values, we have been able to make great strides in bringing cancer education to the Amish communities throughout western Pennsylvania.”

Through an existing relationship with professionals from the Pennsylvania Department of Health, nurse educators from the ROCOG project were introduced to Amish communities in western Pennsylvania. The nurses held discussion groups with Amish women from two different sects to assess the communities’ needs and to identify ways to provide cancer education.

The idea to print articles in a local newspaper with a section dedicated to the Amish came from the discussion groups. The articles are written by the cancer education staff and edited by an Amish volunteer to accommodate language barriers. The articles are printed every few months and cover a variety of topics, ranging from basic information about specific cancer types to dealing with death.

In October 2007, ROCOG coordinators brought the first breast and cervical cancer screening to an Amish community in Somerset, Pa., located southeast of Pittsburgh. Seventeen women came to the screening, with three of the women showing abnormal test results. These three women, who were not insured, were then assimilated into the Healthy Woman Project, a state program dedicated to helping economically disadvantaged women gain better access to care.

“Community outreach and patient navigation go hand-in-hand,” says Karen Schwaderer, RN, BSN, OCN, director, Patient Navigation and Clinical Services. “You can’t go into an underserved, uninsured community like the Amish, and not help them to gain access to treatment.”

To date, more than 125 Amish have been helped directly through screenings and education provided by the program.

the Power of Partnership

Thanks to the continuing support of our donors, the University of Pittsburgh Cancer Institute and UPMC Cancer Centers are translating new discoveries in the laboratory into effective methods for preventing, detecting, and treating cancer. Gifts received during fiscal year 2008 are bringing renewed hope to cancer patients and their families in our region and beyond. It is with deepest gratitude that we recognize our partners — individuals, families, businesses, corporations, foundations, and organizations — for their ongoing support of our mission to build a future without cancer.

ENDOWED CHAIRS

An important number of endowed chairs support the mission of UPMC Cancer Centers and the University of Pittsburgh Cancer Institute. The income generated from endowed chairs enables our scientists and clinicians and their teams to strengthen established areas of expertise, expand new initiatives, and forge new frontiers in science that benefit our patients and their families now and into the future.

- The Claude Worthington Benedum Endowed Chair in Radiation Oncology
- The Jane and Carl Citron Endowed Chair in Colon Cancer
- The Richard M. Cyert Endowed Chair in Molecular Oncology
- The Gregory T.H. Davies Endowed Chair in Brain Tumor Research and Physician Education
- The Lawrence Ellis Endowed Chair in Hematology and Oncology
- The Bernard Fisher Endowed Chair in Surgical Oncology
- The Giant Eagle Foundation Endowed Chair in Cancer Genetics
- The Hillman Endowed Chair in Oncology
- The Arnold Palmer Endowed Chair in Cancer Prevention
- The Sampson Family Endowed Chair in Thoracic Surgical Oncology
- The Sandra and Thomas Usher Endowed Chair in Melanoma
- UPMC Endowed Chair in Head and Neck Cancer Surgical Research
- UPMC Endowed Chair in Lung Cancer Research

VISIONARY SOCIETY

These dedicated partners have given or helped to raise a cumulative total of \$1 million or more in support of cancer research and care.

- American Cancer Society, Inc.
- DSF Charitable Foundation
- The Giant Eagle Foundation
- Harriett and Ronald B. Herberman, MD
- Highmark Foundation
- Elsie H. and Henry L. Hillman
- Henry L. Hillman Foundation
- Hillman Foundation
- Family and Friends of Albert P. Knowles
- New Era Cap Charitable Foundation and Family and Friends of David C. Koch

- Mario Lemieux Foundation
- The Leukemia and Lymphoma Society
- Richard King Mellon Foundation
- Susan G. Komen Breast Cancer Foundation
- Arnold D. Palmer 2003 Charitable Trust
- Mark E. Pasquerilla
- PNC Financial Services Group and PNC Foundation
- The Pittsburgh Foundation
- Myles D. Sampson* and Family
- The David S. and Karen A. Shapira Foundation
- Theresa Heinz and The Heinz Endowments
- Sandra and Thomas Usher
- Debi and Harold W. Wheeler III
- Wheeler Family Charitable Trust
- *deceased

FAMILY LEGACY SOCIETY

Often, a personal experience with cancer or the loss of a loved one to the disease spurs a family to establish funds that honor a patient or caregiver through support of continuing efforts to better detect, prevent, and treat cancer.

- Suzanne Hill Alfano Endowment for Lung Cancer Research
- Nathan S. Arenson Fund for Pancreatic Cancer Research
- Adriane R. Aul Memorial Fund
- Beckwith Family Foundation Endowed Research Scholars Program
- The Heidi Browning Endowed Ovarian Cancer Research Scholars Fund
- Ruth C. Brufsky Fund for Clinical Research on Pancreatic Cancer
- Patti Burns Fund
- Dr. Joan G. Gaines Breast Cancer Research Fund
- Stuart Goodman Brain Cancer Memorial Fund
- Peter E. Hackney Fund for Pancreatic Cancer Research
- Harvey G. Herberman, MD Memorial Cancer Research Fund
- Dr. Herbert E. Jacob Memorial Fund
- Hyman I. Katz Cancer Research Fund
- Barbara Klump Memorial Scholarship Fund
- Albert P. Knowles Research Fund
- David C. Koch Memorial Fund
- Mario Lemieux Patient Care and Cancer Research Fund
- Scott Limbach Entrepreneurial Center
- Stanley M. Marks, MD Endowed Research Fund
- Drew Mathieson Entrepreneurship Fund
- James A. Mollica Jr. Research Endowment Fund
- PNC Innovation Fund

- Michael J. Parada Research Fund
- Mark E. and Leah M. Pasquerilla
- Women's Cancer Research Fund
- Pasquerilla Cancer Genomics and Proteomics Research Fund
- Linda Saulle Endowed Memorial Fund
- Frieda G. and Saul F. Shapira
- BRCA Cancer Research Fund
- Frieda G. and Saul F. Shapira
- BRCA Endowed Cancer Research Fund
- Theresa Heinz and The Heinz Endowments
- Joseph and Giovanna Tarquinio Memorial Fund
- Wayne Fusaro Pancreatic Cancer Research Fund
- Dr. Leonard S. Zombek Memorial Fund

ANNUAL GIVING

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UPMC CANCER CENTERS AND UPCI CAPITAL CAMPAIGN COMMITTEE (2008)

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Every gift to UPMC Cancer Centers and the University of Pittsburgh Cancer Institute plays a vital role in advancing research and enhancing patient care. Unfortunately, space is too limited to list the individual names of donors that gave gifts at levels of \$1 to \$249. Please know your support is truly appreciated.

If we have made an error in any name or omitted anyone from this list, please accept our apologies and notify us at 412-623-4700.

NEWS BRIEFS

University of Pittsburgh Cancer Institute and Centre of Integrated Oncology Cologne enter into partnership

In June 2008, the University of Pittsburgh Cancer Institute (UPCI) and the Centre of Integrated Oncology (CIO) at the University Hospital of Cologne and the University Hospital of Bonn in Germany formed a strategic partnership to combine the strengths of both institutions to accelerate progress in cancer research, education, and patient care.

The partnership will include the creation of a student exchange program, the development of collaborative research and joint clinical trials in selected areas, the transfer of administrative and management advice, and the development of a common international fundraising strategy for both clinical and translational research.

UPCI and the CIO will work to establish joint clinical trials focused initially on lung cancer, melanoma, and lymphatic malignancies. Collaborations in basic and pre-clinical research will include cellular immunotherapy, allogeneic stem cell transplantation, and targeted therapies and biomarkers for patient selection and treatment response.

UPMC Cancer Centers and UPCI receive awards

UPMC Cancer Centers and University of Pittsburgh Cancer Institute (UPCI) were recognized by two prestigious organizations — the American Cancer Society (ACS) and the Leukemia & Lymphoma Society.

In 2006-2007, UPMC Cancer Centers and UPCI were awarded the American Cancer Society's Cancer Control Impact Award for Systems Initiatives, Pennsylvania Division, for their African American Cancer Care Partnership (AACCP) program that works to reduce barriers to cancer care for African American patients.

UPMC Cancer Centers and UPCI were also awarded the National Chairman's Citation for Excellence in Community Service from the Leukemia & Lymphoma Society. UPMC Cancer Centers and UPCI were nominated by the Pittsburgh Chapter of the society — the only center to receive the yearly award out of more than 50 nominations.

Panera Bread donates \$57,000 to UPCI

On Jan. 30, Panera Bread presented University of Pittsburgh Cancer Institute and UPMC Cancer Centers with a check for \$57,000 raised by their 2007 Operation Dough-Nation campaign.

Funding from this donation supports programs for Cancer Prevention and Population Sciences, including efforts to develop a registry of individuals who will be surveyed about health history and behavioral choices to develop a model of cancer prevention that will shed light on the factors that cause cancer.

UPMC Cancer Centers' staff member awarded American Cancer Society's Volunteer of the Year Award and Fighting Spirit Award

Marina Posvar, patient navigation services coordinator, Hillman Cancer Center, was awarded the American Cancer Society's (ACS) 2007 Volunteer of the Year Award for both the Greater Pittsburgh Unit and Pennsylvania Division, and in May 2008 also received the Fighting Spirit Award.

The Volunteer of the Year Award recognizes outstanding achievements in volunteerism. The Fighting Spirit Award recognizes a cancer survivor who has been helped by the programs and services offered by the ACS and who has become involved as a dedicated volunteer with the ACS across both the Cancer Control programs and Income Development events.

Ms. Posvar first became involved with ACS when she was diagnosed with cancer and attended their Look Good...Feel Better program. The program helped her through a difficult time, and she has given back to the ACS through her dedication to serving and supporting other cancer patients, and through her involvement in advocacy, fundraisers, committees, and community education events.

Ms. Posvar has been a volunteer with ACS for four years.

Hillman Cancer Center also received the bronze Mission of Impact Award for Partners in Promotion: Hillman Cancer Center and the American Cancer Society, honoring the relationship between the two organizations that was cultivated by the work of Ms. Posvar.

Pittsburgh Steelers team members visit Hillman Cancer Center

Pittsburgh Steelers Max Starks and Ryan McBean visited patients and families at Hillman Cancer Center in Shadyside, signing autographed team photos, posing for pictures, and sharing football anecdotes with patients. Staff from Hillman participated by giving patients cookies and holding a prize raffle. Patients were surprised and excited to spend the afternoon with the players.



Photo courtesy of Pittsburgh Steelers/Danielle Hladik

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UPMC Cancer Centers offers cancer patients exceptional care and innovative treatments close to home. Working in tandem with the University of Pittsburgh Cancer Institute, western Pennsylvania's only National Cancer Institute-designated Comprehensive Cancer Center, UPMC Cancer Centers provides the latest advances in cancer prevention, detection, diagnosis, and treatment at community-based locations throughout the region. The University of Pittsburgh Cancer Institute comprises the academic and research activities for cancer at the University of Pittsburgh and UPMC.

For information about supporting cancer research efforts and patient care at the University of Pittsburgh Cancer Institute and UPMC Cancer Centers, contact us at 412-623-4700.

UPMC Cancer Centers *and*
University of Pittsburgh Cancer Institute