

About Cancer Care

Cancer Care is a collaborative partnership between the SLO Oncology & Hematology Health Center, Dignity Health Infusion Center of San Luis Obispo and the Hearst Cancer Resource Center at French Hospital Medical Center, offering comprehensive cancer care services to San Luis Obispo County residents. As a cohesive oncology treatment program, Cancer Care features innovative technological advancements and compassionate health care professionals from the nation's top medical training programs. The culmination of these centers provides a personalized, multidisciplinary approach to oncology treatment, clinical trials, pediatric oncology, infusion services, support programs and resources to promote healing.



Making Plans in a World of Uncertainty

By Diane De Vos Schmidt, FNP-C, MSN, OCN

Congratulations, we have made it through a tumultuous year. Last year we were like a boat, tossed on the water. This year, adjust your sails or drop your anchor and determine where you are going and what you are doing. Making plans is a form of taking control of your future. It can be empowering to make a plan, even if you do not know how you will achieve it. There will always be things we cannot control or even change. The only thing we have control over is how we respond to the world around us.

The New Year brings with it HOPE for a different kind of year. Many people begin the year making self-improvement goals, others find a word that they will use as inspiration for the year to focus on and help direct their thoughts and actions.

If you like to make New Year resolutions, consider making three.

One physical health resolution: take a walk in the community 3 times a week, join a walking group or start one with friends, commit to stretching and yoga, focus on eating fresh foods, etc.

One mental health resolution: limit social media use to 3-4 times a week and never after 9 p.m., call and talk to a friend at least once a week, write down something you are grateful for daily, speak kindly to yourself and about yourself (as if you were encouraging a friend). Be your own friend.

One spiritual resolution: Find a way to connect with your spirit through nature, watching the birds, listening to the waves, walking at the beach, listening to the wind or wind chimes, smelling flowers, etc. Connect to a higher power through prayer, fellowship with others, meditation, breathing, relaxation, being mindful and in the moment.

If you think a focus word is more to your liking, pick a word that encourages you to focus on something positive. One year I chose the word gratitude; it helped me to see and share gratitude and helped to decrease negative feelings. A breast cancer patient chose warrior for her word during treatment and then the next year, victor.

These ideas are not reliant on the world being calm and stress free. They help us to focus on things we can change, control and affect; and that is ourselves. Happy New Year and many blessings.



Thank you for your donations

French Hospital Medical Center (FHMC) Foundation is pleased to announce that its virtual “Share Hope” fundraiser held during the month of October raised more than \$100,000 to benefit the Hearst Cancer Resource Center (HCRC) at FHMC. The Share Hope virtual campaign, a first of its kind for FHMC, was created as a response to the impact of the pandemic and cancellation of our signature spring fundraising event at Hearst Ranch. More than 260 people contributed to Share Hope, which utilized a peer-to-peer fundraising website that allowed teams and individuals to raise funds for the HCRC and for individuals to contribute to the fundraiser.

“Because cancer doesn’t stop during a pandemic, and in recognition of National Breast Cancer Awareness month, we launched our Share Hope virtual fundraiser to support local cancer patients,” says Alan Iftiniuk, FHMC President and CEO. “Right now is an especially difficult time for cancer patients and it is so heartwarming to see our community come together to support them when it is needed most.”

The Foundation expresses its sincere gratitude to all who contributed to Share Hope, including the team leaders and individual fundraisers who helped raise funds for Share Hope. Additionally, the Foundation wishes to express thanks to all Share Hope sponsors, including Event Sponsor Pacific Premier Bank and supporting sponsors Layton Construction and Cuningham Group Architecture, Films for Good and KSBY.

If you want more information or wish to make a donation, please contact the FHMC Foundation office at **805.542.6496** or visit SupportFrenchHospital.org.

An Ounce of Prevention: One Bite at a Time

We all know a healthy diet may reduce the incidence of cancer and the risk of cancer progression or recurrence. We know that improved nutrition also enhances overall quality of life. Numerous studies are underway to further understand the connection between diet and cancer prevention. For the most common U.S. cancers, nearly one third of cases are preventable through a healthy diet, being physically active and maintaining a healthy weight. Did you know, you can lower your cancer risk at your very next meal?

Experts recommend that our diets revolve around a variety of plant-based foods, such as vegetables, fruits, whole grains and beans. The added bonus is that these foods tend to be low in calorie density. That means they provide fewer calories but, because they’re full of fiber and water, they help keep us feeling fuller for longer.

Eating from a predominately plant-based approach also helps incorporate a wide range of nutrients, vitamins and minerals that our bodies need, as well as several phytochemicals—naturally occurring compounds in plants that have potentially health-promoting effects and help orchestrate a symphony of health.

When it’s time to plan your next meal, favor brightly colored (broccoli, tomatoes, butternut squash) or strongly flavored vegetables (kale, arugula) and fruits, which are often the best sources of phytochemicals. Try to stick to real food sources, as the phytochemicals found in supplement form may not be as easily absorbed and effective as the ones from natural foods.

If you need support in your eating journey, contact the HCRC to schedule a nutrition consultation with our Registered Dietitian. Happy eating!

Citrus Quinoa Avocado Salad

Adopted from AICR recipes

INGREDIENTS

- 1/2 cup cucumber, diced
- 1 cup cherry tomatoes, cut in half
- 2 small cloves garlic, minced
- 1/4 cup red onion, chopped
- 1 bunch cilantro
- 2 cups spinach, thinly sliced
- 1 15.5 oz can no salt added garbanzo beans (drained and rinsed)

FOR THE DRESSING

- 1 cup cooked and cooled quinoa
- 2 medium avocados, diced
- For the dressing:
 - Juice of 2 lemons
 - Zest of 1 lemon
 - 2 tsp. Dijon mustard
 - 1 Tbsp. olive oil
 - 1 tsp. honey
 - 1/2 tsp. ground cumin
 - Dash of cayenne pepper (optional)
 - Salt and pepper, to taste

DIRECTIONS

Place all salad ingredients in a bowl.

Whisk all dressing ingredients together in a separate bowl.

Drizzle dressing over salad mixture and gently toss ingredients together until dressing is incorporated throughout.

Makes 4 servings. Per serving: 390 calories, 20 g total fat (3 g saturated fat, 0 g trans fat), 0 mg cholesterol, 43 g carbohydrates, 11 g protein, 13 g dietary fiber, 110 mg sodium, 6 g sugar, 1 g added sugar.



Cervical Cancer and HPV: Facts that All Women Need to Know

By Dr. Tom Spillane, MD, San Luis Obispo Hematology and Oncology Health Center

As we move into the new year, this is a good opportunity to remind everyone that January is designated Cervical Health Awareness Month. Cervical cancer remains a very morbid and, unfortunately, too often deadly cancer. The American Cancer Society estimates 13,800 women in the United States will be diagnosed with invasive cervical cancer this year. About 4,290 women are expected to die from

cervical cancer in the United States in 2020. Advanced cervical cancer often requires very tough treatments, including surgery, radiation and chemotherapy.

Fortunately, prevention and early detection are changing these deadly statistics. This cancer can be prevented by vaccinating children (recommended at ages 9-12) and young adults to prevent infection with the human papilloma virus (HPV). HPV is the virus responsible for causing over 35,000 cancers per year in the United States. Gardasil is a vaccine that was approved by the FDA in 2006. This is proven to both safe and effective. The vaccine is now FDA approved for both males and females up to age 45.

Cervical cancer is best treated when detected early. A Pap smear (or cytology) was the original effective screening test that can find cell damage or changes caused by HPV. Over the years direct testing for HPV has proven to be more accurate than the Pap test and can tell if an individual has been infected with the virus. Studies have shown that vaccinating against HPV has reduced the number of cervical precancers and cancers. The updated screening recommendations are to test for HPV every 5 years beginning at age 25 (increased from age 21). **The take home message is that providers in the U.S. are 1: transitioning away from the Pap test towards screening for HPV screening and 2: emphasizing the importance of early HPV vaccination to prevent several types of deadly cancers, including cervical.**

Follow up for individuals who screen positive for HPV and/or cytology should be in accordance with the 2019 American Society for Colposcopy and Cervical Pathology and is a little more complicated. Discussion with your gynecologist or primary care provider will decide the options available if you test positive for HPV. The bottom line is that because of this improvement in early detection and vaccination/prevention, newer treatments are available for cervical precancers and cancers. With education and prevention, the outlook is bright!

Cancer Prevention: Which Type of Exercise Lowers Your Risk?

By Jan Secord, Cancer Exercise Specialist and Director of Cancer Well-fit Program

In recent years, exercise has become part of the standard of care during the treatment, recovery, and survivorship of cancer patients. Formalized exercise guidelines have been established by several national and international health agencies, and panels of experts are stating that regular exercise can help prevent cancer as well.

So, while exercise has been proven to reduce one's risk of many types of cancer, including breast cancer and colon cancer, the form of exercise, however, is rarely specified. The University of Sydney assembled a research team to find out which form of exercise is the most effective at preventing cancer. After studying 80,000 adults, the team concluded that strength training is more effective at prolonging life than cardio workouts and that strength training twice a week reduced the likelihood of dying from cancer by 31%. Combining both strength training and cardio workouts had the best outcomes.

Cardio exercise can easily be introduced to one's daily life by cycling or brisk walks or even starting the day with jumping jacks. Luckily, strength training can be just as convenient as cardio workouts. While free weights and workout machines are great tools, strength training can be completed without any equipment. For example, planks, push-ups, squats, and crunches can be done from the comfort of one's living room. There are many guided exercise videos available on YouTube for free.

Why Exercise Works

Exercise has many biological effects on the body, some of which have been proposed to explain associations with specific cancers. These include:

- Lowering the levels of sex hormones such as estrogen and growth factors that have been associated with cancer development and progression [breast, colon]
- Preventing high blood levels of insulin, which has been linked to cancer development and progression [breast, colon]
- Reducing inflammation
- Improving immune system function
- Altering the metabolism of bile acids, decreasing exposure of the gastrointestinal tract to these suspected carcinogens [colon]
- Helping to prevent obesity, which is a risk factor for many cancers

How Much Exercise?

The U.S. Department of Health and Human Services Physical Activity Guidelines for Americans recommends that for substantial health benefits and to reduce the risk of chronic diseases, including cancer, adults engage in:

- 150 minutes or more per week of moderate-intensity aerobic activity or 75 minutes or more of vigorous aerobic activity, or an equivalent combination of each per week.
- Muscle-strengthening activities at least 2 days a week.



Clinical Trials in SLO Oncology & Hematology - Pacific Health Central Coast

By Gorgun Akpek, MD, MHS
Medical Oncologist and Hematologist

Life expectancy in cancer patients has significantly improved over the last three decades with better understanding of the biologic character of each cancer type, early detection that allows surgery and/or radiation therapy that can be curative, and discovery of better treatment options in advanced-stage cancers. The number of cancer types we aim to cure has been continuously growing. Nearly all cancer drugs or treatments in use today were tested and made available to patients through clinical trials.

Cancer clinical trials are part of the care and services provided by SLO Oncology & Hematology. Clinical trials offer new options for patients from our community and beyond who are seeking access to experimental drugs in late phases of development.

Cancer patients seeking active treatment can choose:

1. **Standard treatment option:** commonly employed treatment accepted by medical experts as proper treatment for a certain type of cancer. Standard treatments change over time as doctors learn from experience and research. In some cases, the standard treatment may be “watch and wait the cancer to see if it grows.”
2. **Clinical trials:** scientific studies in which new treatments are tested in patients to determine if they are safe and effective. Many clinical trials are for new medicines or treatments that the FDA has not yet approved. However, some trials test different ways of administering the treatments that were already approved by FDA. In these trials, doctors may look at new ways to give the approved treatments. Participating in a clinical trial is completely voluntary.

Clinical trials are conducted mainly in three phases.

- **Phase I:** Early drug development to determine the safe dose of a new drug.
- **Phase II Trials:** Test if a new treatment at a safe dose, predetermined in Phase I trial works in one type of cancer. Fewer than 100 patients usually join a Phase II trial. Even though the main goal is to see if the treatment works, we still closely watch patients’ side effects. If the new treatment works, next step will be comparative Phase III trial.
- **Phase III Trials:** Test if a new treatment is better than standard treatment. Phase III trials may include hundreds to thousands of patients around the country or world. Patients are randomly allocated in either control group – the group that gets the standard treatment and study group – the group that gets the new treatment being tested. The results of Phase III trial will prove whether the new treatment is better or not than the standard treatment.

In SLO Oncology & Hematology, we offer Phase II or III clinical trials to our patients to investigate promising new therapies such as targeted oral agents and various immunotherapy options with or without chemotherapy for a variety of cancer types, including lung, breast, bladder, colorectal, head and neck cancer and hematologic malignancies such as leukemia, MDS, lymphoma and multiple myeloma.

SLO Oncology & Hematology, part of Dignity Health Research Department and research affiliate of Stanford University, participates in ECOG-ACRIN National cancer clinical trials network that aims to improve cancer outcomes for the Central Coast community through greater access to these cancer clinical trials for prevention and treatment. A number of clinical trials are available at SLO Oncology & Hematology in San Luis Obispo.

If you want to know more about clinical trials, please email Amy Hidalgo, Clinical Trial Coordinator: Amy.Hidalgo@dignityhealth.org



The Importance of Vaccines

By Dustin Stevenson, DO

Vaccines are safe and effective in preventing or minimizing serious, life threatening infections. In general, they “trick” our immune systems into thinking we are infected with the virus or bacteria that the vaccine is targeting. Our immune system then generates antibodies that provide us protection should we get exposed in the future. It is important to know that vaccines are not the actual serious virus or bacteria. They are usually a weakened version of the virus (“live virus vaccine”) or pieces of the dead virus. After receiving a vaccine, it is common to have mild symptoms such as body aches or low grade fevers. This is not because you are sick with the infection, rather your immune systems is working as though it has an infection.

Cancer patients are at an increased risk of serious and life threatening complications from infections. As such, vaccines are an important preventative strategy. The influenza vaccine (“the flu shot”) is given on a yearly basis due to the fact the influenza virus changes each flu season (generally fall through winter). Everyone above the age of 6 months should receive the vaccine. As the vaccine requires the immune systems to work, there exist concerns that they will not work for cancer patients receiving chemotherapy. Although they may be slightly less effective, they have been shown to be effective even in patients undergoing therapy. Ideally, the vaccine should be given prior to the start of therapy. If this is not possible, the vaccine should be given just prior to the next cycles of therapy when the immune system has had the opportunity to recover. It is not recommended that cancer patients receive the Flu mist nasal spray as this has weakened live virus that may cause illness in individuals with weakened immune systems. It is important to discuss what vaccines and when to receive them with your care team.

Vaccines are expected to help end the current COVID-19 pandemic. There are a number of companies that have developed and are testing COVID vaccines. As of this writing, 2 companies have completed the final phase 3 clinical trials and initial reports indicate they are highly effective and safe. It is hopeful these vaccines will be approved soon and available shortly thereafter. There is no reason to believe these vaccines will not work in cancer patients and will be recommended once available.

Turn to us for answers:

HEARST CANCER RESOURCE CENTER

1941 JOHNSON AVENUE, SUITE 201,
SAN LUIS OBISPO, CA 93401

805.542.6234

HCRC is temporarily closed to walk-ins.

Please call for assistance.

MONDAY–FRIDAY

9AM–4:30PM

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COMMUNITY PARTNERS

The Hearst Cancer Resource Center has partnered with these organizations to bring programs and activities to the community:

American Cancer Society

Cancer Connections

Cancer Support Community

Cancer Well-Fit Program

Jack's Helping Hand

Central Coast Dragon Boat Association—Central Coast SurviveOars

SLO ONCOLOGY & HEMATOLOGY HEALTH CENTER

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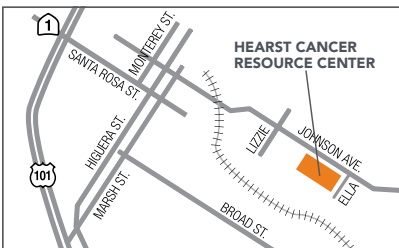
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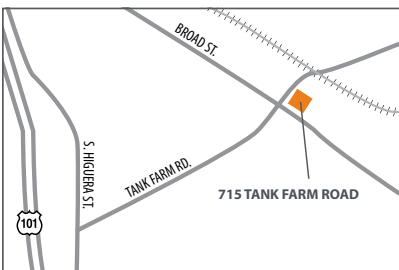
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