2017 French Hospital Medical Center Cancer Committee
Public Report

Gynecologic Cancer

As a fully accredited Community Cancer Center recognized by the American College of Surgeon's Commission on Cancer, the cancer committee at French Hospital Medical Center presents an annual report on a specific cancer type to build awareness of our Central Coast comprehensive cancer services. This report will describe the common gynecologic cancers affecting women and discuss the risks, screenings, and compliance with evidence based guidelines specifically with regard to endometrial cancer.
The cancer program at French Hospital Medical Center has demonstrated results in successful prevention, screening, diagnosis, treatment, survivorship, community education and outreach.

PROGRAM

French Hospital Medical Center (FHMC) is a fully accredited Community Cancer Center as recognized by the American College of Surgeon’s Commission on Cancer (CoC). Our program is managed by a cancer committee consisting of physicians, nurses and health care staff who provide high quality and comprehensive care to cancer patients as defined by a specific set of goals and standards.

We are proud of the continuous efforts being made to provide comprehensive care to our cancer patients and their loved ones. The cancer program at FHMC, a member of Dignity Health of the Central Coast, has demonstrated results in successful prevention, screening, diagnosis, treatment, survivorship, community education and outreach.

The cancer committee is involved in evaluating new technologies, establishing new programs and improving all cancer-related activities in San Luis Obispo County. We are committed to working with our local cancer physicians and primary care partners to continue to improve the lives of the patients we serve.

Each year FHMC’s cancer committee presents an annual report based on a specific cancer type. This year the committee selected the topic of gynecologic cancers and is pleased to announce that Dr. Christopher Lutman, gynecological oncologist, is now providing specialized cancer care at both Marian Regional Medical Center and French Hospital Medical Center. With this additional medical service it is now possible for women who are diagnosed with a gynecologic cancer to be treated locally instead of enduring frequent long distance trips out of the area for treatment.
Gynecologic Oncology Program on the Central Coast

Gynecologic oncology is a distinct medical specialization. One arrives at gynecologic oncology (professionally speaking) by finishing a four year residency training program in obstetrics and gynecology and then completing an additional three to four years of research training and clinical training (medical and surgical) in women's cancers.

Gynecologic oncologists are trained to provide comprehensive care to women affected by gynecologic cancers. Gynecologic oncologists perform highly complicated surgical procedures as well as administer chemotherapy to their patients. They are also often involved in radiation planning and treatments when that modality is needed to treat a gynecologic cancer.

In recent years, gynecologic oncology researchers and clinicians have been instrumental in improving the understanding of the genetics and molecular underpinnings of different types of gynecologic cancers. This improved understanding has led to novel techniques and drugs now regularly employed to help women battling these cancers.

Over the past decade, several research reports in the United States and worldwide have been published that reveal that women with gynecologic cancers have a much better prognosis, improved quality of life and receive expert based care according to national guidelines when a gynecologic oncologist is involved in managing their case.

The Central Coast region of California (northern Santa Barbara county, San Luis Obispo county, and southern Monterey county) now have a full time dedicated gynecologic oncology program. The aim of this program is chiefly to deliver high quality, expert gynecologic care to women and families in our region. When expert specialty care is delivered close to home for patients and families, the entire health care system is positively impacted. Treating cancer patients with difficult cancer problems locally lowers costs to individuals and society. It also improves the morale, well-being and quality of life for women and families facing a gynecologic cancer diagnosis.

As a gynecologic oncologist, Christopher Lutman, MD, FACOG, specializes in the diagnosis and treatment of cancer of the reproductive organs in women. We are please to provide access to this expert specialty care.

Christopher Lutman, MD, FACOG
Gynecologic Oncologist
Gynecologic Cancer Basic Facts

What is Gynecologic Cancer?

It is the uncontrolled growth and spread of abnormal cells that originate from the reproductive organs. There are several types of gynecologic cancers: the most common are cervical, ovarian, endometrial (uterine), and vaginal cancers.

A risk factor is anything that increases a person’s chance of developing cancer. Knowing your risk factors and discussing them with your doctor may help you make more informed lifestyle and health care choices.

Cervical Cancer: The following factors may increase a woman's risk of developing cervical cancer:

* Human papillomavirus (HPV) infection. Research shows that infection with HPV is a risk factor for cervical cancer.
* Immune system deficiency. Women with lowered immune systems have a higher risk of developing cervical cancer.
* Herpes. Women who have genital herpes have a higher risk of developing cervical cancer.
* Smoking. Women who smoke are about twice as likely to develop cervical cancer as women who do not smoke.
* Age. The risk goes up between the late teens and mid-30s. Women over 40 years of age remain at risk and need to continue having regular cervical cancer screenings, including a Pap test.

Ovarian Cancer: Researchers have identified several risk factors that change a woman’s likelihood of developing ovarian cancer.

* Family history. Ovarian cancer can run in families. Your ovarian cancer risk is increased if your mother, sister, or daughter has (or has had) ovarian cancer. The risk also gets higher the more relatives you have with ovarian cancer—including women on your father’s side of the family.
* Age. Ovarian cancer risk increases with age and often develops after menopause.
* Genetic mutations. Some women who develop ovarian cancer have an inherited mutation on one of two genes called breast cancer gene 1 (BRCA1) and breast cancer gene 2 (BRCA2). If there is a concern that you may be at an increased risk for ovarian cancer, discuss getting tested for both BRCA mutations with your OB-GYN, a gynecologic oncologist or a genetic counselor.
* Previous Conditions. Women who have been diagnosed with breast, colorectal or endometrial cancer have a higher risk of developing ovarian cancer.

Did you know:

Ovarian cancer can run in families; it is now believed that 20% of all ovarian cancers are hereditary. Ask your physician if a genetic testing consultation is appropriate for you.

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Ovarian cancer can run in families; it is now believed that 20% of all ovarian cancers are hereditary. Ask your physician if a genetic testing consultation is appropriate for you.
It is important to know what is normal for your body and be on the lookout for subtle changes. Symptoms of ovarian cancer may include pain or pressure in the pelvic or abdominal area.

Cervical Cancer is generally thought to be a preventable disease. The best screening test for cervical changes that occur before cancer develops is the Pap test. Since the development of this simple test, there has been a dramatic decrease in death rates from cervical cancer.

In addition, the HPV vaccination for preteens, boys and girls ages 11-12, (may be offered up to 26 years of age) is recommended for the prevention of cervical cancer.

Ovarian Cancer is often called “the silent killer”, because there is no simple and reliable way to test for ovarian cancer and symptoms of the disease are vague. The Pap test does not screen for ovarian cancer.

However, ovarian cancer may cause one or more of these signs and symptoms:

• Vaginal bleeding (particularly if you are past menopause) or discharge from your vagina that is not normal for you.
• Pain or pressure in the pelvic or abdominal area.
• Bloating—which is when the area below your stomach swells or feels full.
• Feeling full too quickly or difficulty eating.
• A change in your bathroom habits, such as more frequent or urgent need to urinate and/or constipation.

It is important to pay attention to your body, and know what is normal for you. Any changes that are not normal for you could be a sign of ovarian cancer; please discuss these changes with your doctor. Ask your physician if you should have a test, such as a pelvic exam, a transvaginal ultrasound, or a CA-125 blood test. These tests sometimes help find or rule out ovarian cancer.

There is exciting and hopeful research being done in the field of medical genetics. It is now believed that 20% of all ovarian cancers are hereditary. Genetic testing can identify other family members who may also carry a genetic mutation, which predisposes them to ovarian cancer.
Human Papilloma Virus (HPV) infections are the most common sexually transmitted infections in the United States. Persistent infections with high-risk HPV types can lead to cell changes that, if untreated, may progress to cancers of the mouth and throat as well as the cervix, penis and anus.

Gynecologic Cancers Education Presentations
Recognizing the need for awareness and education Hearst Cancer Resource Center (HCRC) at FHMC offered two GYN cancer lectures to the general public in 2017. Cancers discussed were cervical and ovarian. Christopher Lutman, MD, Gynecologic Oncologist, was the featured speaker at both lectures:

• **Ovarian Cancer: Evolving Advances in Research and Care**
  Lecture included discussion of incidence, risk factors, symptoms, diagnosis and treatment. Dr. Lutman also shared exciting developments and new frontiers for screening, genetics, prevention, and treatment.

• **What Men and Women Should Know about HPV and Cervical Cancer**
  Lecture included discussion on prevention, screening, facts and myths about the HPV vaccine and treatment approaches.

Attendees of both lectures completed an evaluation form to assess the effectiveness of the presentations. Both programs were highly effective as shown in the following tables.

### Post cervical cancer lecture survey outcomes
N=10 respondents • 91% of attendees

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<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not Answered</th>
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<tbody>
<tr>
<td>I would vaccinate a young child knowing that the HPV vaccine can prevent cervical cancer</td>
<td>100%</td>
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<td>I better understand the importance of getting a pap smear</td>
<td>100%</td>
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### Post ovarian cancer lecture survey outcomes
N=32 respondents • 63% of attendees

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<tr>
<td>I better understand the importance of being aware of the signs and symptoms</td>
<td>91%</td>
<td>3%</td>
<td>6%</td>
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<td>I learned the need to be proactive with my health</td>
<td>94%</td>
<td>6%</td>
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<td>With what I have learned, I plan to discuss with my physician a CA-125 blood test, pelvic exam or ultrasound</td>
<td>50%</td>
<td>31%</td>
<td>19%</td>
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National Guidelines

Monitoring Compliance with Evidence-Based Guidelines

Each calendar year, a physician member of the FHMC cancer committee completes an in-depth analysis to assess and verify that cancer patients are evaluated and treated according to evidence-based national treatment guidelines. Endometrial cancers treated by French Hospital’s Cancer Program during 2016 and 2017 were chosen for review. The nationally recognized guidelines for care for surgically treated localized endometrial cancer (stage 1) requires consideration of the stage of the cancer (how far it has spread), if there were any adverse risk factors, and the grade of the cancer (how much or how little a tumor resembles the normal tissue from which it arose). Treatment options involve appropriate surgical procedures; in some instances, radiation or chemotherapy may be necessary.

Five patients were identified with stage 1 endometrial cancer and all the cases (100%) were found to be in full compliance with guidelines.

Treatment of Stage 1 Endometrial Cancer*, 2016-17

*National Comprehensive Cancer Network (NCCN) guidelines for surgical stage: Stage 1 Endometrial Carcinoma

What are the National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines?

They are the most detailed and most frequently updated clinical practice guidelines available in any area of medicine.

They are decision tools that are created by doctors to explain a disease and determine the best way to treat a patient depending on their diagnosis, disease stage, and other factors, such as age.

They help doctors make decisions by explaining the pros and cons of each treatment option.

They are updated on a continual basis, and are developed through explicit review of evidence (clinical trials, existing treatment protocols) integrated with expert medical judgment.
Working Together to Provide Quality Care

French Hospital Medical Center’s Cancer Committee strives to provide top-notch programs and services to the cancer patients in San Luis Obispo County.

We could not accomplish our goal of increasing our outreach, education, prevention and screening programs without the assistance of our caring community, medical staff, employees, administration and volunteers. Together we continue to deliver the highest quality care for this vulnerable population.

If you would like more information or have questions or concerns, please call Hearst Cancer Resource Center (HCRC) at 805.542.6234.

Questions or concerns?
Contact us.

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Over the past 10 years, there has been the development of vaccines to be given to both boys and girls (under the age of 25) to help prevent HPV associated cancers. Ask your doctor for specific information.

Knowing your risk factors for cancer and discussing them with your physician may help you make informed lifestyle and health care choices.