

#### **BREAST CANCER AWARENESS**

# A lasting legacy in cancer care

for 40 years since his graduation from Temple Uniin 1977. For most of those completed his fellowship training at the University of Pennsvlvania - he has led the cancer program at Dr. Berman said, "and then Chester County Hospital.

I haven't missed a day of work for sickness since I've been at the hospital."

A 35-year "run" deserving of both recognition and some down time.

Berman stepped down as Hospital. Medical Director of the Abramson Cancer Center is that practicing medicine its smaller office on Maat Chester County Hospi- is not about any individual tal and as Chairman of the Chester County Hospital Cancer Committee. the team. Everyone has to As a specialist in hematologic and solid tumor malig- the best possible care for number of chemotherapy nancies, he remains on the our patients." team, though, he is leaving behind the administrative self-proclaimed "Quaker Kennett Square. In 2010, responsibilities to focus on seeing patients three days a week. His longtime colleagues, William Luginbuhl, MD, and Maureen one is treated equally. That tal. In 2013, the hospital Hewitt, MD, are now sharing the role of medical director.

"There are many responsibilities that come with same applied to compenbeing medical director; it made sense to have two analogy, I really didn't pay people for this position," Dr. Berman said of the practice that logs 35,000 patient visits a year, "and they are doing an excellent job."

a testament to Dr. Berman's dure for doctors to consult careful stewardship since he first hung up his shingle and started a solo prac-

Dennis Berman, MD, has what is an unusually robust introduce them to my pabeen practicing medicine cancer program for a com- tient and say, 'How do you munity hospital. The center's milestones are a reflec- this person?' Sometimes versity School of Medicine tion of both the remarkable advances in cancer treatyears - since the time he ments and the dramatic know what I have already changes in the business side of practicing medicine.

"I staved solo until 1989." began recruiting a group of "That's a pretty good absolutely superb academic run," he said recently, "and clinicians who are all nice campaign for the center people, as well."

From the start, Dr. Berman has been committed to a team approach, both

"The emphasis I've had physician or their job," he said. "The emphasis is on

philosophy," which stressed the importance of maintaining a work-life balance and ensuring everymeant sharing duties like merged with Penn Medbeing on-call, no matter if someone was a senior partner or the most junior. The sation. "To make a sports differently for the person or the person who blocked," he said.

At the Abramson Cancer The practice's growth is Center, it is standard proceone another, so patients often witness the clinical patients and physicians of ally intelligent individuals, The physician group has pital and Penn Medicine,

think we should care for I would ask this question blindly so they wouldn't told the patient. So the patient got to see other members of the group, hear their input, and I think it's very reassuring to people."

One past advertising summed up his philosophy: Why get a second opinion when you can get 12?

The growing practice among his colleagues and formed a joint venture with the administrative owned by Penn Medicine On August 1, 2017, Dr. team at Chester County and Chester County Hospital in 1998, and that same year moved from ple Avenue to 440 East Marshall Street. The new site was designed to handle five clinicians, with 12 work together to provide exam rooms and an equal chairs. Satellite offices Dr. Berman adopted a were opened in Exton and the joint venture ended and the practice became a wholly owned subsidiary of Chester County Hospiicine and the physicians in the group joined Penn's academic faculty in 2015.

Now, with 11 doctors and 10 nurse practitioners, it was time to expand. Occupying two floors of the who ran for the first down East Marshall Medical Office Building, the practice is doubling its footprint to 20,000 square feet. The first floor, with 25 exam rooms, opened in August of 2017, and the second, including 25 state-of-the-art chemoteam in action. "On a regu-therapy infusion bays, is tice in 1982, along with the lar basis, I'll call in a few of scheduled to be finished sterling reputation among my partners, who are all re- in the summer of 2018.



Dr. Dennis Berman.

practice that includes a County. thoracic surgeon, a gynecology oncologist and two the move to expand the fabreast surgeons. The prac- cility was also the right tice also has a strong colspecialty physicians based at Chester County Hos-

grown from medical oncol- though almost all services cancer program that can

Dr. Berman decided that time for a change in leaderon his 35 years at the helm with extreme satisfaction.

"We have a world-class the community."

ogy to a multidisciplinary can be provided in Chester really bring state-of-theart care to people close to where they live, which has been our goal all along," he said, adding that the staff members are the heart and laboration with other sub- ship. Now, he can look back soul of the practice. "The make-up of this team is a legacy I'm proud to leave for

#### **NEW LEADERSHIP**

OCTOBER 2017

# Introducing new leadership at the Abramson Cancer Center at Chester County Hospital

#### **Meet William** Luginbuhl, MD

After 24 years at what is now the Abramson Cancer Center at Chester County Hospital, William E. Luginbuhl, MD, is excited about the next chapter of his career, the center's new medical director.

First, there are the opportunities that come with expanding the office space. "Patients who are getting chemotherapy are going to have a much nicer environment to receive treatment in," he says. And there is potential for additional ancillary support - mental-health and nutritional services, massage and patient education, community outreach and support groups. "We'll have the ability to expand the services we provide for patients, hopefully to make their experience better," Dr. Luginbuhl adds.

Next, he looks forward to deepening the close relationship with Penn Medicine. "It will allow our physicians to be more integrated at Penn Medicine, where they tend to be more disease specific, and Penn to be able to do more community-based treatment out here, including research," he explains.

As the principal investigator for cancer research trials offered through the center, Dr. Luginbuhl understands the benefits to both patients and providers, benefits that not all community hospitals can so readily access. For patients, there are often more options for treatment; for the center itself,



William Luginbuhl, MD

a staff that has a much more current understanding of the science and the cancers they are managing.

It was the strength of the staff that attracted Dr. Luginbuhl to Chester County Hospital after his fellowship in hematology and oncology at the University of Pennsylvania. The Vermont native considered community practices all along the East Coast before becoming the third physician at the center in 1993. "Chester County Hospital has a pretty significant depth of quality," he says. "Pathology is outstanding, the Radiology Department is great, and we also have very good sub specialties."

Once here, his responsibilities grew along with

#### SUBMITTED PHOTO

the practice: leading the research department, managing the nursing group, aiding in the development of programs for patients such as the Art Therapy Group. "Art gives people an outlet to express themselves and reduce the anxieties and fears they had regarding cancer," Dr. Luginbuhl conveys. "Patients find that very therapeutic."

And it is the patients who are the heart of his practice. "I enjoy seeing patients, taking care of them, developing relationships with them," he said. "It's a pretty small community so not only do you get to know your patients but you know their families as well – and you also are often taking care of the family and friends of your patients."

#### Meet Maureen Hewitt, MD

Maureen Hewitt, MD, learned of the cancer program at Chester County Hospital from a patient. She was a first-year fellow at the Hospital of the University of Pennsylvania talking to a man in the acute leukemia unit. He described his difficult diagnosis and treatment, but noted one bright spot: meeting Dr. Dennis Berman, director of the cancer program.

"I thought, 'Wow, that's a pretty powerful thing to say," Dr. Hewitt recalls. "And it stuck with me."

After her fellowship, Dr. Hewitt wanted to focus on seeing patients, and sought advice on community practices. The colleagues she respected all recommended Chester County Hospital, which she joined in 2007. In August of 2017, she was named assistant medical director of the Abramson Cancer Center at Chester County Hospital.

"It's been a really fulfilling 10 years," Dr. Hewitt adds. "The people I work with here are a great group, and really dedicated to bringing the best care to patients. I learn something from them every day."

At a time when new treatments are producing significant advances in includes personally volcare, the West Chester center is making significant advances as well. In addition to doubling the size of its office space, the practice also plans to increase the availability of clinical trials. "We are trying to sub-specialize, to have tu-



#### Maureen Hewitt, MD

mor-specific groups within our center, so we can open more clinical trials to patients in the community," Dr. Hewitt says.

The center's staff and its commitment to personalized care impressed Dr. Hewitt from the start, and that continues. Everyone, she says, goes "above and beyond to ensure that our patients' cancer journey is the most positive experience possible."

And that commitment unteering with local community organizations. Dr. Hewitt trains volunteers and is an adviser for Cuddles My Kids, an in-home, no-cost support program that offers play, enrichment and educational resources for the children of SUBMITTED PHOTO

families coping with cancer treatments. Founder Cathy Gabrielsen waged her own successful battle against breast cancer. "Cathy is just this incredible person who said, 'Okay, what can I do to make other people's lives easier knowing what I've been through," explains Dr. Hewitt.

That same compassion drives the efforts of the Abramson Cancer Center at Chester County Hospital staff.

"We get very close to our patients and their families," Dr. Hewitt says. "We have the opportunity to take care of them and get to know them, and we often feel that the patients and our relationships with them are a gift to us."

## Chester County Hospital gets savvy with a new approach to scouting breast tumors

Surgeons and radiolo- cal biopsy procedure. gists improve the surgical experience for patients with breast tumors by adopting SCOUT<sup>®</sup> radar localization system.

continues to offer the most advanced treatment options to patients with breast tumors and lesions, including the new SAVI SCOUT® radar localization system. proved device used by surgeons and radiologists to precisely locate and direct the removal of a tumor during a lumpectomy or surgi-

With SAVI SCOUT, a radiologist places a tiny reflector (the size of a grain new technology: the SAVI of rice) at the tumor site up to 30 days prior to breast surgery. During surgery, the Chester County Hospital device uses advanced radar technology to provide realtime surgical guidance to detect the location of the reflector and the tumor with rine Porter, DO, Breast Surextreme accuracy.

Previously, wire localiza-SAVI SCOUT is an FDA-ap- tion was the predominate approach to breast tumor localization. However, this displacement and migra-

tion of the wire, reduced accuracy in finding the tumor enables surgeons to preand increased delays in the operating room.

physically and emotionally distressing for women, and we strive to find ways to create a better experienceand better outcomes-for our patients," says Cathegeon at Penn Women's Specialty Center. "SAVI SCOUT resolves one of the challenges of breast conservation surgery by eliminating wire-based procedure came the need to place a wire inwith drawbacks, including side breast tissue to locate a tumor."

The localization system cisely locate and plan the removal of a tumor dur-"Breast surgery can be ing a lumpectomy or surgical biopsy. "The ability to strategically plan the incision can result in less healthy breast tissue being removed during the procedure, which pable abnormality (those conservation surgeries. As can lead to a better cosmetic outcome," explains requires an excision." Susan Chang, MD, Breast Surgeon at Penn Women's rector of Breast Imaging Specialty Center. "SAVI at Chester County Hospital SCOUT can provide ben- adds, "We're proud to bring efits for not only early breast cancer patients, but localization system to our

#### SURGICAL PLANNING & GUIDANCE



SUBMITTED ILLUSTRATION

that cannot be felt) that

Eugene Glavin, MD, Dithe new SAVI SCOUT radar for anyone with a non-pal- patients who need breast

research and technology advances, we're committed to adopting the safest and most progressive treatment options for women and men with breast tumors."

To learn more, visit ChesterCountyHospital.org/ Savi-Scout

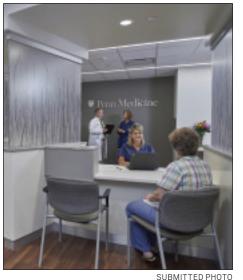
### HEALTH A bigger and better Abramson Cancer Center at Chester County Hospital

Rooted in its mission to offer cancer patients the most advanced treatments close to home, Penn Medicine's Abramson Cancer Center at Chester County Hospital is expanding its footprint by undergoing a transformational renovation at its 440 East Marshall Street location in West Chester. Its goal: provide more treatment areas, more doctors, more surgeons, and more access to Penn's world-renowned cancer specialists right here in Chester County.

The expansion has been scheduled in three phases. Phase one, completed in August of 2017, included renovating the first floor to include 25 new exam rooms, three phlebotomy stations (to take blood), a laboratory and an elevator that takes patients to the second floor for infusion services once they have signed in.

Previously, the facility was accessed through the second floor, facing Maple Avenue. Now, patients park and sign-in on the first floor, facing East Marshall Street.

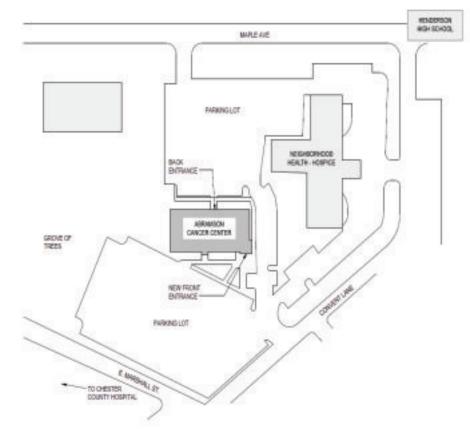
Phase two is underway and includes renovating the second floor to provide a partial installment of 25 state-of-the-art chemotherapy infusion bays along with new physician offices. Phase two is expected to be completed in early 2018. Once completed, phase three will begin and will include updating the balance of the chemotherapy infusion bays and adding a new pharmacy, of-



The 440 East Marshall Street facility was designed with patient comfort in mind. It includes a spacious and modern waiting area and expanded exam rooms.

fering patients quicker access to the medications they need.

For more information about the Abramson Cancer Center at Chester County Hospital, visit ChesterCountyHospital.org/ AbramsonCancer or call 610.738.2300.



# **Dressed down to raise up** breast cancer awareness

#### by Beth Eburn

If you are like most folks, you probably have a favorite pair of jeans you would love to wear all day every day. Those beloved denims are perfect for weekends, date nights, and the occasional casual Friday at work. For Chester County Hospital employees, the jeans present an opportunity to raise awareness and donations for breast cancer.

In recognition of Breast awareness Cancer Awareness Month, Chester County Hospital invites its employees to wear jeans on Fridays throughout an annual campaign called "Jeans for Cancer Awareness." Proceeds benefit patients at the Abramson Cancer Center. For a donation of difference in other people's Last year, the lives. They also receive a designed button to wear

along with their jeans to signify their participation in the fundraiser.

"Our employees know how important our cancer program is to our community and how important our com-

munity is to our cancer program," said Jenna Harrison. Talent Acquisition Specialist and leader of the 2017 Jeans for Cancer Awareness campaign. "Many have faced cancer or had family and friends who have faced cancer and were able to receive treatment close to home because the center is right here sential oils to help boost ment and service area, in our own neighborhood. They want to be personally involved in making the patient and family experience at the cancer center the very



These male employees collaborated to wear pink shirts with their jeans to show their support of breast cancer

who needs its services."

Jeans for Cancer Awareness supports local sercer Center that add an extra personal touch to the top-level medical care provided at the center. The proceeds fund some of the "de-

program provided

cancer patients with a va-

riety of comfort items, in-

cluding warming blankets.

This year, the donations will

center.

symptoms such as stress. anxiety, insomnia, nausea, and even pain. Fragrances October by taking part in vices at the Abramson Can- may be inhaled or applied as lotions.

"One of the best things about the fundraiser is that it gives our employees an opportunity to help educate \$10, staff can dress in jeans tails" that matter so much and inform the public," said on Fridays and make a real during the cancer journey. Harrison. "When a hospital patient or visitor notices an

> employee wearing jeans along with their button, it can start a conversation that leads to sharing information about cancer awareness, prevention, and treatment."

Hundreds of Chester County Hospital employees participate in the Jeans for Cancer Awareness campaign and the number continues rising every year. Since its inception eight years ago, fund the start of a new aro- the fundraiser has consismatherapy program at the tently raised more than \$2,000 each year. The Aromatherapy uses fra- campaign is open to emgrances from natural es- ployees in every departphysical and emotional including the hospital wellbeing. Although not a campus and all satellite lotreatment for cancer, the cations. Weekend employ-National Cancer Institute ees are eligible to wear suggests it can be beneficial jeans on Saturdays if they best it can be for everyone in reducing cancer-related do not work on Fridays.



During the month of October 10% of the proceeds of all pink items & 100% of the net proceeds of our Kelly's limited edition pink tee will be donated to uniteEHER unitezHER

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## Treating Lymphedema... one of the unexpected challenges of breast cancer

#### **By Beth Eburn**

A diagnosis of breast cancer and the rigors of treating the disease can bring some expected and unexpected challenges into a person's life. For some people, a medical condition called lymphedema may be one of those challenges.

Lymphedema is an abnormal build-up of fluid in the body that can cause swelling, usually in a limb. The condition is often a direct result of surgery involving the removal of lymph nodes and/or radiation affecting lymph nodes. Both are common in treating breast cancer.

While not life-threatening, lymphedema can be uncomfortable, taxing and painful. It can reduce overall quality of life by affecting mobility, limiting normal functioning and impeding the immune system. It can also cause temporary disfigurement that impacts body image and self-esteem.

There is no cure for this ailment, but the good news is that it can be managed. With early detection and proper treatwith the condition to live normally and enjoy a high quality of life.

Program at Chester County Hospital, provided by the department of Physical Therapy, Rehabilitation and Sports level of expertise of our staff. Medicine, offers a comprehensive approach to treatment ferent office locations who have and management. The program's specially trained ther- vanced training in the treatapists are skilled in effective ment of lymphedema, includtechniques available to reduce ing 135 hours of instruction in the build-up of lymphatic fluid cutting-edge, hands-on techand address the most difficult niques," said Marion Cellaeffects of the condition. The Ries, PT, CLT, the lead therateam has extensive experience pist of Chester County Hospiedema care and closely collab- meet is unique. Our theranavigators, genetic counselors on treatment and prevention."



Lymphedema therapist, Gina Wells, DPT, CLT, demonstrates a technique called Manual Lymphatic Drainage.

ment, lymphedema can be con- and social workers. Since the trolled allowing people dealing needs of a breast cancer patient can be complex, these specialists can also assist patients with issues regarding The Lymphedema Treatment range of motion, strength and fatigue through physical therapy.

"We are proud of the high We have therapists at three difall gone through the most adtreating breast cancer patients tal's Lymphedema Treatment From left to right: Lead lymphedema therapist Marion Cella-Ries, PT, through every phase of lymph- Program. "Every patient we CLT; Carrie Leese, DPT, CLT; and Gina Wells, DPT, CLT. orate with all members of a pists develop customized care patient's health care team in- plans specific to the needs of alized, the course and length based upon an initial evalucluding their physicians, nurse each patient that are focused



of treatment is different for ation and various factors inevery person. A patient's care cluding the amount of swell-

Since each plan is individu- plan is determined by staff

ing present. Treatment may last from four to eight weeks and maintenance of the condition continues into the future.

According to Cella-Ries, most care plans include Complete Decongestive Therapy (CDT), a non-invasive approach that is considered the "gold standard" of lymphedema treatment. CDT includes an initial phase of hands-on therapy during which therapists use a gentle form of massage called Manual Lymphatic Drainage to eliminate excess lymph fluid, reduce swelling and ease discomfort. CDT also includes the use of compression bandaging to decrease swelling; exercises to improve circulation, flexibility, and strength; and a self-management program that provides information and teaches skills for ongoing lymphedema management.

"People are not that familiar with how the lymphatic system actually works to keep bodily fluid levels in balance or what happens when it does not work properly. Most have never heard of lymphedema until it affects them personally," Cella-Ries explained. "Unfortunately, the build-up of lymph fluid can be slow and insidious. A breast cancer patient may develop the condition within a few days following the end of treatment or it may show up years after treatment has finished."

Early diagnosis and management are vital when it comes to effectively dealing with the challenges of lymphedema. Fortunately, people who live in Chester County can find all the care they need to treat the condition close to home. The Lymphedema Treatment Program is offered at three of Chester County Hospital's satellite locations: Fern Hill Medical Campus in West Chester, Penn Medicine Exton and Penn Medicine Southern Chester County. Services do require a prescription and referral from a physician.

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# Maintaining bone health in cancer survivors

#### **By Barbara Curtis**

When a woman is diagnosed with breast cancer, bone health likely isn't the first thing that comes to mind as she begins her journey through treatment. However, there is a link between breast cancer survivors and an increased risk of bone loss.

Osteoporosis, meaning "porous bones," is a condition that causes bones to lose density and become thinner over time, making them weaker and susceptible to fractures and breaks. Osteoporosis can affect anyone, but it

is most common in older women. During menopause, women will experience a decrease in estrogen - a hormone that helps protect bone density.

Breast cancer patients may have hormone therapy, chemotherapy or surgery as part of their care plan. Certain treatments, such as anti-estrogen therapies, may cause reduced ovarian function, resulting in a drop in estrogen levels. While there is no specific cause for cancer, a woman's chance of developing breast cancer increases as she gets older - at a similar time when women are already

at a higher risk for osteoporosis. Fortunately, bone loss can be detected early through a simple scan.

To detect osteoporosis accurately, physicians use an enhanced form of x-ray technology called Dual Energy X-ray Absorptiometry (DEXA). This procedure is a quick and painless way to determine bone loss and establish a standard for measuring bone mineral density.

"A DEXA scan is a bone density test that measures a woman's risk of fracture. The scan uses data from healthy, young women and of women of similar age to ascertain that risk," says



Eugene Glavin, MD

Eugene Glavin, MD, Director of Women's Imaging Services at Chester County Hospital. "If we see that the patient is at

an increased risk of fracture, then treatment can be instituted to help decrease bone loss."

If anti-estrogen therapies are part of a patient's treatment plan, their oncologist may recommend a baseline DEXA scan before treatment as a comparison. Regular scans may also be scheduled to measure bone strength during and after treatment. well into survivorship.

"Maintaining a healthy lifestyle also has a positive impact on bone health," added Dr. Glavin. He recommends staying fit by incorporating weight-bearing exercises like brisk walking, which

causes the body to work against gravity, increasing bone strength; reducing alcohol consumption; eating a healthful diet that is rich in calcium and vitamin D; and maintaining a healthy weight.

Chester County Hospital offers convenient appointments for DEXA scans at its four satellite locations in West Chester, Exton, Kennett Square and West Grove. A prescription from your health care provider is required. For more information, call 610.431.5131 or visit ChesterCountyHospital.org.

#### HEALTH

# Providing support for cancer patients and their loved ones

The Abramson Cancer Center at Chester County Hospital realizes is for women and men dithat its patients may require more than medical treatment when facing health care issues. It has developed a wide variety of support groups to provide personal counseling and emotional support to patients and their families in dealing with illness and its physical and emotional effects.

#### ART THERAPY

The art therapy group agnosed with cancer. The group meets at the Chester County Art Association. Through art, the group explores ways to use the challenges presented by their cancer diagnosis as a stepping stone for personal growth. This ongoing program uses expressive art as an outlet for coping. No artistic ability is necessary just an adventurous spirit.

#### **COPING WITH CANCER**

This six-week session provides a safe space where cancer patients can connect, share, and learn from one another as they cope with cancer treatment, stress, relationships and emotions. Together, they discuss a wide range of topics and offer a consistent, safe and hopeful support system as the group explores what the cancer journey means to each person. A facilitator suggests some basic topics, but there

will also be plenty of time to delve into anything that is on the minds of the group members in a given week. A support group for patients with gynecologic cancers is also available.

#### **NEW! CARING FOR THE** CAREGIVER

This four-week support group is for people with a loved one who have been diagnosed with cancer. In this group, caregivers will listen to one another while they

learn about new resources and gain new information. The group is facilitated by an oncology social worker. SURVIVORSHIP NEXT STEPS SERIES

This free six-week workshop will help cancer survivors make the transition from active treatment to post-treatment care. Expert panelists include clinicians, nutritionists, and fitness experts. Survivorship "Next Steps" answers many of your questions about cancer survivorship and post-cancer treatment. The course covers topics on getting back to wellness, exercise, emotional health, nutrition, medical management, and creating your new normal. Participants need to have completed active treatment within the last two years.

For more information or to sign-up for these programs, visit ChesterCounty-Hospital.org/Wellness or call 610.738.2300.

#### **Early Diagnosis**

Breast cancer can affect both men and women and is one of the most common forms of cancer. Thanks to increased awareness and screenings, many cases of breast cancer are diagnosed early and treated successfully. Breast-Cancer.org says that invasive ductal carcinoma, or IDC, is the most common form of breast cancer, accounting for about 80 percent of all breast cancers. The American Cancer Society says that, although IDC can affect women of any age, it is most common among women age 55 or older. The good news is that this type of cancer is highly curable, provided it has not spread outside of the ducts to other breast tissue. Survival rates for any breast cancers diagnosed in the early stages are excellent.

#### **Testing After Diagnosis**

When a person is diagnosed with breast cancer, tests are then conducted to study the cancer cells. According to the National Cancer Institute, such tests are used to determine how quickly the cancer may grow and the likelihood that the cancer will spread throughout the body. These tests also may help doctors determine a course of treatment and if a patient is likely to experience a recurrence of the cancer down the road. One such test is the estrogen and progesterone receptor test, which measures the amount of estrogen and progesterone receptors in cancer tissue. The cancer may grow more quickly in patients who have more of these receptors than normal. In addition to measuring the amount of these hormones in the cancer tissue, an estrogen and progesterone test can determine if a treatment aimed at blocking estrogen and progesterone may prevent the cancer from growing.

#### **CARING TREATMENT**

# Nurse Practitioner: Defining a Vital Role

#### By Joanne Boyk

CRNP, AOCNP at the Abramson Cancer Center at Chester County Hospital

When it comes to patient care, most people are familiar with the role of a physician, nurse or social worker, but fewer understand the profession of this increasingly in-demand clinician: the Nurse Practitioner (NP).

As an NP specializing in oncology, I focus on the overall care of a patient fighting cancer. We are there from the moment someone is diagnosed to life-long surveillance and follow-up once treatment is completed. At the Abramson Cancer Center at Chester County Hospital, we are fortunate to have a multidisciplinary group of nurse practitioners.

Over the past 10 years, our oncology team has grown to 11 physicians and 10 nurse practitioners who cover our inpatient consulting services at Chester County Hospital and our outpatient offices in West Chester, Exton and Kennett Square.

Nurse practitioners in an outpatient setting are important navigators of care within the office. They communicate with physicians about the patient's care plan and they work with patient service representatives and nurses to ensure the plan is implemented. Our NPs have become experts in pain and symptom management, prescribing medications needed to support patients at the beginning of chemotherapy and throughout their treatment schedule. With the size of our team, we are able to offer consistent care for initial and follow-up visits during chemotherapy treatments, surveillance and survivorship.

One of the benefits of having a multidisciplinary group is the various experiences each NP brings to her position. We have several nurse practitioners with critical care backgrounds, which is helpful if an issue occurs in our infusion room. We also have nurse practitioners with strong primary

care backgrounds, which is needed when managing co-morbidity conditions that patients often have. We now have a nurse practitioner with a strong palliative care background, which provides support in the development of end-of-life programs.

Hospital-based nurse practitioners are another important role. These clinicians function as hospitalists at Chester County Hospital and collaborate with rounding physicians to manage new patient consults, orders, and assessments for cancer patients. The transition of care from the office to hospital, hospital to office, or hospital to home or hospice is handled by this advanced provider.

The growth of our nurse practitioner staff has contributed important elements to improve our practice's operations. They provide clinical services, see patients at chemotherapy treatments, routine followup appointments and are leaders in nursing, provid-



The team of NP's at the Abramson Cancer Center at Chester County Hospital. Bottom left to right: Joanne Boyk, CRNP, AOCNP; Nicole Mukalian, CRNP; Patience Terkowski, CRNP, AOCNP. Top left to right: Amber Haymore, CRNP, OCN; Bethany Sterling, CRNP, AOCNP; Monika McDonald, CRNP, AOCNP; Cynthia Wagner, CRNP; Sandy Camarota, CRNP, OCN; Mary Zimny, CRNP, AOCNP. Not pictured: Nancy Windle, CRNP

ing direction and support to clinical staff while serving as role models in the practice.

I am proud to work with such a diverse, intelligent and talented group of nurse practitioners and physicians at the Abramson Cancer Center at Chester County Hospital.

#### Wearing a bra after a mastectomy

When treating breast cancer, doctors may explore various options based on a patient's symptoms and how far the cancer has advanced. In addition to radiation, chemotherapy and removal of the tumor (lumpectomy), mastectomy may be part of the treatment plan.

Personal and medical reasons have increased the number of mastectomies being performed. According to Harvard Medical School, mastectomy has been effective in curing or at least retarding early-stage breast cancer. And today, surgeons can reconstruct breasts quite well through plastic surgery. However, whether women choose reconstructive surgery or not, they may need a little help getting used to their new bodies and feeling comfortable in bras and clothing.

• Find a good fit. A large percentage of women may not be wearing the right bra size even before mastectomy surgery. After surgery, it is essential to find the right fit. A good mastectomy bra fitter can help a person find the right size bra for her body and a shape that feels the most comfortable. Certified mastectomy fitters may be found by doing a little research and may even be covered by insurance.

 Discover your style. Depending on scarring or where tissue was removed, some women may need particular bra styles, such as a camisole or a fullercoverage bra. Once correct measurements are taken, shoppers should try a variety of different bra styles until they determine which ones feel the best in terms of support and coverage.

• Consider a breast form or prosthesis. Women who have not had reconstructive surgery can wear an artificial breast form after mastectomy. This device helps balance the body and can offer a better bra fit on the side of the body where the breast has been removed. These prostheses come in different materials and can be custom-designed to provide a similar feel to natural breast tissue. Some forms adhere directly to the body, while others will fit into the pockets of mastectomy bras. Women can be fitted for a prosthesis around four to eight weeks after surgery.

• Change bras and prostheses regularly. Many women do not know that bras have a shelf life. The average bra should be replaced every three months to a year. Prostheses should be replaced every one to two years, says the American Society of Clinical Oncology.

It can take some time for a woman to be comfortable with her new body after mastectomy surgery. Getting the proper fit for a bra can help improve confidence and help women feel better in their clothing.

## Life after breast cancer

The moment a person receives a breast cancer diagnosis, his or her life changes immeasurably. The roller coaster of emotions begins, and suddenly this person is thrust into a schedule of doctor's appointments, treatments and visits from friends and family.

The World Cancer Research Fund International says breast cancer is the second most common cancer in women and men and is the most frequently diagnosed cancer among women in 140 of 184 countries worldwide. Despite that prevalence, the five-year relative survival rate for women diagnosed with localized breast cancer (cancer that has not spread to the lymph nodes or outside the breast) is 98.5 percent, says the American Cancer Society. Survival odds increase as more is learned about breast cancer and more people take preventative measures, including routine screenings. Today, there are nearly three million breast cancer survivors living in the United States.

Breast cancer treatments may last anywhere from six months to a year. Adjusting after treatment may not come so easily at first. But adjustments are easier with time, and many cancer survivors continue to live life to the fullest in much the same way they did prior to their diagnosis.

When treatment ends, patients often still have fears about the cancer, wondering if all of the cancerous cells have been destroyed and worrying about recurrence. But focusing on the present and all of the things you now can do with health on your side is a great way to put your fears behind you.

Many cancer survivors must still visit their doctors after treatments end. Doctors still want to monitor patients closely, so be sure to go to all follow-up appointments and discuss any symptoms or feelings you may be having. Side effects may continue long after radiation or chemotherapy has ended. Your doctor may have suggestions for coping with certain side effects or will be able to prescribe medications to offset these effects. Follow-up appointments should gradually decrease the longer you have been cancer-free.

It's not uncommon to feel differently after cancer treatment, as your body has been through quite a lot. Many women still experience fatigue, and sleep or normal rest doesn't seem to make it abate. Realize this is normal, and how long it will last differs from person to person. It can take months or years for you to experience your "new normal." Things do not happen overnight. While your hair may grow back quickly, it may take some time for you to feel like yourself again. Exercise routines or other lifestyle changes may help you overcome fatigue or make it more manageable.

Speaking with others who have survived breast cancer can help. Join a support group or reach out to others through social media. Getting a first-hand account of what can be expected the first year after treatment can assuage anxiety.

#### HEALTH

# Celebrating the end of radiation treatment with the sound of a ring

#### By Barbara Curtis

Enduring a cancer diagnosis, attending weeks of daily radiation treatment and coping with side effects are no easy feats. When patients complete their final treatment, the Radiation Oncology department at Chester County Hospital helps them celebrate this great achievement with the ringing of a bell.

Originally a gift from a grateful patient, the bell is now a tradition in the department and sits on a

mantle with a poem written above, "Ring this bell, three times well. Its toll will clearly say, my treatments done, this course is run, and I am on my way!"

Surrounded by loved ones and medical staff, patients proudly and emotionally ring the bell signaling the end of their treatment and the beginning of a new chapter in their journey.

During a patient's time in the department, close relationships are built with the Radiation Oncology staff and other patients who they meet along the way. When a person finishes their treatment and are ready to ring the bell, oftentimes current and past patients come to visit and watch this celebratory moment.

Each individual's experience with the bell is unique and personal. Some bring their whole family, grandkids and all, and celebrate with balloons and music. Others might only bring a dear loved one who has helped them through difficult times. Though each experience may be different, one as-

pect is always the same – how touching the experience is for everyone in the room, and how thankful each patient is for the care they received and the chance to move forward.

This story is just one of the 125 stories featured in a new anthology about Chester County Hospital in celebration of its 125th anniversary. Chester County Hospital was founded in 1892, making it the first hospital in the county. The hospital's commemorative book, "125 stories," will be published in November.



Patients anticipate the day they can ring the bell.

# THE REGION'S #1 CANCER CENTER **IS RIGHT HERE**

### Penn Medicine's Abramson Cancer Center at Chester County Hospital

Chester County Hospital for our excellence and expertise, and turned to us for our compassion and convenience. As part of Penn Medicine's Abramson Cancer Center, a world leader in cancer treatment and research, we can offer even more advanced therapies and innovative cancer care, right here at home. From early detection, diagnosis, treatment, education and outreach — to research, clinical trials and support groups - we're bringing greater access to world-class cancer care

f 💙 🞯 🦗 😵 🛅 🛗

701 East Marshall Street, West Chester

Since 1982, cancer patients and their families have trusted than ever before. At Chester County Hospital, we treat you like a member of our own family, providing accessible care in a patient-friendly environment. Our cancer specialists are experienced in the most up-to-date procedures and have streamlined access to the latest technologies and clinical trials at Penn Medicine. With a team-based, collaborative approach, we'll create the most convenient, personalized, treatment plan to meet your specific needs.

CHESTER COUNTY HOSPITAL IS ONE OF THE EIGHT ABRAMSON CANCER CENTER LOCATIONS THOUGHOUT PHILADELPHIA AND SOUTH JERSEY

#### Our scope of services includes:

- Gynecologic Oncology • Hematology-Oncology Radiation Oncology • Thoracic Surgery
- Breast Health
- Continuum of Care
- Cancer Registry

#### Our cancer care teams include:

- Hematology and Medical Oncologists
- Radiation Oncologists
- Surgeons
- Radiologists
- Pathologists
- Dosimetrists
- Medical Physicists

- Oncology Nurses
- Radiation Therapists
- Research Nurses
- Cancer Data Center
- Care Coordinators
- Social Workers
- Nutritionists
- Nurse Practitioners

Navigating the cancer treatment process can be a complex and confusing journey. Here at Chester County Hospital, we have patient support services in place to help guide you and your family through your experience with the disease. Serving as a link between patients, physicians and services, our cancer

care coordinators provide the education, support and resources you need. Penn Medicine's Abramson Cancer Center at Chester County Hospital. We're bringing innovative, compassionate cancer care within reach. Why? Because your life is worth Penn Medicine.

To make an appointment, call 800.789.PENN (7366), or visit ChesterCountyHospital.org/abramsoncancer.



# FDA Approves Personalized Cellular Therapy for Advanced Leukemia Developed by the University of Pennsylvania and Children's Hospital of Philadelphia

Cancer Immunotherapy Frontier Program

of Cell Therapy and Transplant at CHOP.

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"This transforma-

tional therapy for pa-

tients is the result of

true collaboration be-

demia, healthcare pro-

caregivers" said Bruno

Strigini, CEO, Novartis

Oncology. "We thank

all those involved in

this historic FDA ap-

proval, which provides

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treatment options thus

who have had limited

CTL019 was first

tested at Penn in 2010,

in adult patients with

advanced chronic lym-

(CLL). In 2012, CHOP

tution to investigate

Kymriah in pediatric

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The new treatment

### Pioneering CAR T-cell Studies Led to First-ever Cancer Cell and Gene Therapy Approval

**PHILADELPHIA** » In a landmark decision for the field of cancer immunotherapy, the U.S. Food and Drug Administration (FDA) today approved a personalized cellular therapy developed by the University of Pennsylvania and Children's Hospital of Philadelphia (CHOP) for the treatment of patients up to 25 years of age with B-cell precursor acute lymphoblastic leukemia (ALL) that is refractory or in second or later relapse. The approval was granted to Novartis for the chimeric antigen receptor (CAR) Tcell therapy, Kymriah™ (tisagenlecleucel, formerly CTL019). In 2012, Penn and Novartis entered into a global collaboration to further research, develop and commercialize Kymriah and other CAR-T cell therapies for the treatment of cancers. Kymriah is the first therapy based on gene transfer approved by the FDA.

Investigators at Penn's Perelman School of Medicine and CHOP, who together led research, development. and clinical trials of

the new therapy in collaboration with Novartis, hailed the FDA's approval as a game changer for the treatment of younger patients battling the aggressive blood cancer and a pivotal milestone in this new era of cellular therapies that treat cancer with a patient's own immune system.

"This is a turning point in the fight against B-cell ALL that opens up opportunities for patients across the world who desperately need new options," said Carl June, MD, the Richard W. Vague Professor in Immunotherapy in the department of Pathology and Laboratory Medicine in Penn's Perelman School of Medicine and director of the Center for Cellular Immunotherapies in the Abramson Cancer Center.

'We're excited and proud to have moved this CAR therapy, in collaboration with Novartis and CHOP, through all phases of development and clinical trials, established its efficacy, and now extended its reach to children across the country under this FDA and director of the

approval," he added. "We hope the momentum behind the technology builds as we continue to investigate the abilities of personalized cellular therapeutics in blood cancers and solid tumors to help patients with many other types of cancer."

Kymriah is expected to be available through a network of certified treatment centers throughout the United States.

"We delivered engineered T-cell therapy at CHOP for the first pediatric patient in the world, Emily Whitehead, who was only six years old when her leukemia stopped responding to conventional treatments. Emily's cancer remains in remission, and in larger trials, we're seeing overall remission rates over 80 percent, which is a remarkable improvement upon previous treatment success rates," said lead investigator of the CHOP and global trials of the therapy, Stephan Grupp, MD, PhD, the Yetta Deitch Novotny Professor of Pediatrics at Penn

"We're excited and proud to have moved this CAR therapy, in collaboration with Novartis and CHOP, through all phases of development and clinical trials, established its efficacy, and now extended its reach to children across the country under this FDA approval."

- Dr. Carl June

and chief of the section modifies patients' own immune T cells, which programmed at the Notially seek and destroy cells both multiply and gle engineered cell parates in completely reand can survive in the

Carl June, MD

patients with ALL, the most common childhood cancer. About 20 percent of the 3,500 pediatric and young adult patients diagnosed every year with ALL in the United States relapse or do not respond to conventional treatment

Those early-stage clinical trials, in which more than 90 percent of patients achieved a complete remission one month after receiving the therapy, led to a global registration trial in 2015, involving 68 children and young adults with advanced ALL treated at 25 cenSUBMITTED PHOTO

ters across the world. Eighty-three percent of the patients who received a single dose of their own engineered cells achieved a complete remission.

In July 2017, an FDA advisory panel unanimously recommended approval of the therapy, paving the way for today's FDA approval. After presentation of trial data and testimony from families whose children have received the therapy, one expert on the panel said this was "the most exciting thing I've seen in my lifetime."

#### OCTOBER 2017

### FDA FROM PAGE 12

Many patients in the ALL trials experienced a side effect called cytokine release syndrome (CRS) including grade 3 or grade 4, which includes varying degrees of flulike symptoms, with high fevers, nausea, and muscle pain, and temporary neurologic symptoms, including delirium, but also low blood pressure and breathing difficulties requiring ICU-

level care in the most severe cases. Eighteen percent of patients experienced grade 3 or grade 4 neurologic events. Patients were treated with the immunosuppressant drug tocilizumab or short courses of steroids to combat the symptoms. Novartis will create

a registry to follow patients for 15 years after being treated to monitor their progress and any potential, future side effects.

Other trials with CTL019 therapy are also underway in the Abramson Cancer Center for adult ALL pa-

tients and those with CLL and non-Hodgkin lymphoma. Penn and Novartis are also investigating the next generation of CAR therapies for multiple myeloma, and for solid tumors, through trials in glioblastoma, mesothelioma, and ovarian and pancreatic cancer. Other CAR trials at Penn are exploring the technique for prostate cancer, melanoma, and triple-negative breast cancer.

The Novartis-Penn Center for Advanced Cellular Therapeutics (CACT) opened in 2016 and hosted Vice Pres-

ident Joe Biden at the launch of his Cancer Moonshot initiative, cementing Penn's role as an international innovator in the development and manufacturing of personalized cellular therapies.

Additional leaders of the research include Penn's David Porter, MD, the Jodi Fisher Horowitz Professor in Leukemia Care Excellence and director of Blood and Marrow Transplantation in the ACC; Noelle Frey, MD, MSCE, an assistant professor of Hematology-Oncology; Bruce Levine, PhD, the Barbara and Edward Netter Professor in Cancer Gene Therapy in the department of Pathology and Laboratory Medicine; Michael Milone, MD, PhD, an associate professor of Pathology and Laboratory Medicine; and CHOP pediatric oncologist Shannon Maude, MD, PhD, an assistant professor of Pediatrics.

Adult patients who are interested in T cell therapies at Penn Medicine can call 215-316-5127 for more information. For information about the Cancer Immunotherapy Program ture.

at CHOP, please call 267-426-0762.

Editor's Note: The University of Pennsylvania has licensed some technologies involved in these studies to Novartis. Some of the scientists involved in these trials are inventors of these technologies. As a result of the licensing relationship with Novartis, the University of Pennsylvania receives significant financial benefit, and some of these inventors have benefitted financially and/or may benefit financially in the fu-



The Radiation Oncology team from the Abramson Cancer Center at Chester County Hospital celebrates this historic milestone.

SUBMITTED PHOTO

# Looking and Feeling Your Best During Treatment

#### By Mary Pat Rush

Certified Breast Navigator at Chester County Hospital

While going through chemotherapy, radiation or surgery, you may experience some appearancerelated side effects as a result. During this experience, the last thing you may feel like doing is putting on your makeup, but starting your day with a new beauty routine may be one of the best things you can do to feel good.

My husband used to tease me and say, "Are you finished putting on the war paint?" In a way, this is essentially what you are doing while battling cancer and striving to look and feel your best at the same time. If you think of it that way, it can be a great way to start your day – by taking care of you!

Here are some tips on taking care of your skin and applying makeup while going through treatment. For an in-depth tutorial and personalized attention, come join our Look Good... Feel Better event on November 16 at Chester County Hospital. Attendees receive professional advice on how to manage hair loss using wigs, scarves and hats, a 12-step skin care lesson, and a free make-up kit to take home with them.

#### **Skin Care Tips:**

Like a painter, you want to start with a good canvas – your skin. Be sure to use good quality skin products. You may experience more dryness while going through treatment so spend some time finding products that help with hydration. Choose a moisturizer that contains an SPF of at least 15. Using an SPF is always important for skin health and especially while you are in treatment.

A facial can also help improve your skin's appearance. One of the services Chester County Hospital offers cancer patients are complimentary facials, which are performed at authorized cosmetic medical offices. If you are a patient at our hospital, I would highly recommend taking advantage of this service. Not only is it beneficial for your skin, it is a nice stress reliever as well.

#### Makeup Tips:

Always wash your hands before applying cosmetics. Use disposable applicators such as cotton balls, sponges, spongetipped applicators for eye shadow and disposable mascara wipes to prevent bacteria from building up. Make sure to throw away any expired products and follow the manufacturer's recommended use date. If you are trying new cosmetics, begin by testing

During this experience, the last thing you may feel like doing is putting on your makeup, but starting your day with a new beauty routine may be one of the best things you can do to feel good. them on your hands and wrist first rather than putting them directly on your face.

You may find your skin tone changes during treatment. When applying makeup, it is best to start off with a concealer to hide any dark circles, blemishes or discoloration. Follow with a foundation that closely matches your normal skin tone and evens out your complexion. Applying a small amount of translucent powder will help set the foundation.

Using blush can help create a natural glow. If you experience some puffiness, use a brown-toned powder. For thinning faces, use a light-colored concealer cream to enlarge the facial area.

For eyebrows, whether you are filling in thinning brows or re-creating the entire brow, use short feathery strokes for a natural look. There are cream-based fillers as well as powder filler options which to choose.

For eyes, use a shade that highlights your eye color the most and blend to soften the effect. Eyeliner can be used to recreate the look of full lashes along the lower and upper eyelids. Mascara should first be applied to the topside of the lashes, then to the underside.

For lips, outline with a soft lip pencil that complements your favorite lipstick color. Fill in with a hydrating lipstick.

We hope that these tips will help you feel more confident and ready to start your day. For more tips, visit

For more tips, visit LookGoodFeelBetter.org

# LOOK GOOD FEELBETTER

The Look Good... Feel Better Program IS A FREE, NATIONWIDE PROGRAM provided by the American Cancer Society and the National Cosmetology Association to help women cope with appearance changes related to cancer and cancer treatment.

This two-hour workshop offers advice on hair loss, wigs, hats, nail and skin care, make-up application, scarves and other topics.

Patients at any stage of their treatment can participate and each participant will receive personal attention from professionals trained to meet their needs. Registrants will receive a complimentary cosmetic kit to use and take up.

FOR MORE INFORMATION OR TO REGISTER: 1-800-227-2345

### Thursday, November 16 5:00 PM to 7:00 PM

Chester County Hospital 701 East Marshall Street Lasko Tower 4th Floor Conference Room West Chester, PA 19380 About 1 in 8 U.S. women -12% — will develop invasive breast cancer over the course of her life-time.

In 2016, an estimated 246,660 new cases of invasive breast cancer are expected to be diagnosed, along with 61,000 new cases of non-invasive breast cancer (also known as carcinoma in situ). About 40,450 women are expected to die in 2016 from breast cancer, though there has been a decrease in death rates since 1989, with larger decreases in women under 50. These decreases are thought to be the result of treatment advancements, earlier detection through screening, and increased awareness.

For women in the United States, breast cancer death rates are higher than death rates for any other type of cancer, besides lung cancer.

Except for skin cancer, breast cancer is the most commonly diagnosed cancer among American women. In 2016, it's estimated that just under 30% of cancers diagnosed in women will be breast cancers.

In women under 45, breast cancer is more common in African-American women than white women. Overall, African-American women are more likely to die of breast cancer. For Asian, Hispanic, and Native-American women, the risk of developing and dying from breast cancer is lower.

As of June 2016, there were more than 2.8 million women with a history of breast cancer in the U.S. This figure includes women currently being treated and women who have finished treatment.

A woman's risk of breast cancer nearly doubles if she has a first-degree relative (mother, sister, daughter) who has been diagnosed with breast cancer.

Less than 15% of women who get breast cancer have a family member who has been diagnosed with it.

About 5-10% of breast cancers are thought to be caused by inherited gene mutations (abnormal changes passed through families).

Mutations of the BRCA1 and BRCA2 genes are the most common. Women with a BRCA1 mutation have, on average, a 55-65% risk of developing breast cancer in their lifetimes. For women with a BRCA2 mutation, the lifetime risk is 45%. An increased ovarian cancer risk is also associated with these genetic mutations.

The most significant risk factors for breast cancer are gender (being a woman) and age (growing older).

From the American Cancer Society

he five-year relative survival rate for women diagnosed with localized breast cancer (cancer that has not spread to the lymph nodes or outside the breast) is 98.5 percent, says the American Cancer Society. Survival odds increase as more is learned about breast cancer and more people take preventative measures, including routine screenings. Today, there are nearly 3 million breast cancer survivors living in the United States.

#### **WELLNESS**

# Wellness events for total health

Chester County Hospital SHINE IN THE VINES is committed to providing A New Way to SHINE a broad scope of high quality health education programs to our community.

#### Reversing Pre-Diabetes [\$25]

More than 80 million the Vines at Galer Estate Americans have pre-diabetes. This 1.5 hour program teaches you how to change your lifestyle to reduce your risk for developing type 2 diabetes. Dates + Time: December 5,

6:00 PM - 7:30 PM Date + Time: November 8,

6:00 PM - 7:30 PM Location: 600 East Marshall Street. West Chester, Suite 302, Wellness Classroom

#### **Stop Smoking** Now! [Free]

Education, behavior modification and relaxation techniques help participants become nonsmokers during the sevenweek smoking cessation program. Discounted nicotine patches and a monthly support group are available.

Series Start Dates: November 2

Time: 7:00 PM - 8:30 PM Location: 600 East Marshall Street, West Chester, Suite 302, Wellness Classroom

#### Hands-Only CPR [Free]

When a person suddenly

Trade in your little black dress for boots and a bonfire!

Join us on Saturday, November 11, 2017 for SHINE in Vinevard & Winerv. This event is an open house style gathering featuring delicious wines, local food, live music, cozy bonfires, s'mores, and more!

Proceeds benefit patients at the Abramson Cancer Center at Chester County Hospital.

 Saturday, November 11, 2017

Galer Estate Vineyard &

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Winery
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■ 3 PM - 7 PM Purchase your tickets or donate at PatientShine.org.

collapses, bystanders need to remain calm and take action quickly. By learning Hands-Only CPR (CPR without mouth breathing), vou can increase confidence and reduce hesitation in life-saving situations. This one-hour training also includes education on early heart attack signs and symptoms.

WELLNESS » PAGE 17



## Wellness

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Dates + Time: November 16. December 21. 12 Noon – 1:00 PM Location: Hospital, Conference Room E-134

Date + Times: October 25, 4:30 PM - 5:30 PM and 5:45 PM 6:45 PM Hospital. Tower 4 Conference Room

#### Living with Type 2 Diabetes [Free]

Whether you are newly diagnosed or have had diabetes for a while, this one-hour program will help you learn what tools you need to get started and will also introduce you to our many diabetes services. Family and friends are welcome to accom-

Dates + Time: October 24 or December 13, 6:00 PM - 7:00 PM Location: 600 East Marshall Street, West Chester, Suite 302, Wellness Classroom

#### Weight Loss Surgery

pany you.

Information Sessions [FREE]: Surgeons from Penn Metabolic & Bariatric Surgery discuss surgical options available for the severely obese to help them achieve a healthy lifestyle. Dates + Time: October 25, November 15, or December 20 Location: 600 East Marshall

Street, West Chester, Suite 302, Wellness Classroom Register: PennMedicine.

org/WeightLossSurgery or 215.615.7500

#### Stroke Screening [Free]

Stroke is a leading cause of death and disability. Our health care providers and team of educators will check your blood pressure, pulse, total and HDL cholesterol, listen to your carotid arteries, review your risk factors, and complete a personalized care plan to help you stay stroke free. Must call for an appointment: 610.738.2300. Date + Time: November 1, 5:00

PM - 8:00 PM

Location: 600 East Marshall Street, West Chester, Suite 302, Wellness Classroom

#### Bones and Joints [Free]

Join our board-certified orthopaedic surgeon to learn about surgical and non-surgical treatments for joint pain. These include medications, injections, small incision joint replacement, female-friendly knee replace-

ment, partial joint replacement, joint resurfacing, and other state-of-the-art advancements. A physical rehabilitation specialist will also be on hand to offer suggestions for how to stay strong to alleviate joint pain. Date + Time: November 16, 6:00

PM - 7:15 PM Location: Hospital, Mira Conference Room

Presenter: Adrienne Towsen, MD

#### Preventing and Treating **Sports Injuries [Free]**

Learn common problems that can occur as a result of participating in exercise and sports, and how they can be prevented and treated to keep you in the game.

Date + Time: November 7, 5:30 PM - 6:30 PM

Location: ACAC Fitness and

Wellness Center, 1130 McDermott Drive. West Chester

Presenter: John Manta, MD

#### Struggles and Solutions [Free]

Each month, a Registered Dietitian Nutritionist will lead a discussion on an interesting, timely, and immediately useful topic about food, eating, activity and wellness. Program provides ideas and encouragement for anyone on a journey to lose weight or to live a healthier lifestyle. Date + Time: Meets every second Monday, 5:00 PM - 6:00 PM

Location: 600 East Marshall Street, West Chester, Suite 302, Wellness Classroom

To register for these events, call 610.738.2300 or visit Chester County Hospital.org/Wellness

# The stages of breast cancer

When doctors diagnose breast the breast, cancer, they typically tell their patients which stage the cancer is in. affected, and Men and women with no previous experience with cancer may not know what these stages signify or may not understand the differences between the stages. The following is a rundown of breast cancer stages to help men and women diagnosed with breast cancer better understand their disease.

#### Why are stages important?

Staging helps doctors determine how far the breast cancer helps doctors determine the best course of treatment to contain or eliminate the cancer. For exundergo a different course of treatment than someone diagnosed with stage 4.

#### How are stages determined?

A number of factors determine staging. These factors include:

• the number of lymph nodes

• signs indicating if the breast cancer has invaded other organs within the body. Signs that the cancer has

spread may be found in the bones, liver, lungs, or brain.

#### Stage 0 & 1

When breast cancer is detected early, it is often characterized as stage 0 or 1, which means the cancer cells have not spread beyond a very limited area.

Stage 0 breast cancer is a nonhas progressed, but staging also invasive cancer where abnormal cells have been found in the lining of the breast milk duct but have not spread outside the duct into stage 1 breast cancer will likely 0 breast cancer is very treatable, but if treatment is not sought, it can spread into surrounding breast tissue.

Stage 1 breast cancer is diagnosed when the tumor is very small and has not spread to the lymph nodes. In certain instances when a person is diagnosed with stage 1 breast cancer, no tumor is • the size of the tumor within found in the breast. When a tu-

Foundation, breast cancer that is or it is larger than five centimediscovered and treated at stage ters but has not spread to any 1 has a five-year survival rate of roughly 98 percent.

#### Stage 2

A stage 2 breast cancer diagnosis means the cancer has begun to grow or spread, but it is still in the early stages and typically very treatable. Stage 2 breast cancer is divided into two groups, stage 2A and stage 2B, a distinction that is made because of the size of the tumor and if the breast cancer has spread to the lymph nodes.

There may or may not be a ample, a person diagnosed with surrounding breast tissue. Stage tumor present when a person is diagnosed with stage 2A breast cancer. If a tumor is present, it is either less than two centimeters and cancer cells are present in less than four axillary lymph nodes or the tumor is between two and five centimeters but has not spread to the lymph nodes.

A tumor is present when a

centimeters or smaller. Accord- centimeters and spread to less that include a combination of ing to the National Breast Cancer than four axillary lymph nodes treatment options. lymph nodes.

> Stage 2 breast cancers typically respond well to treatment, but those treatments may be more aggressive than treatments for stage 0 or 1 breast cancers.

#### Stage 3

Stage 3 breast cancer is an advanced cancer that has invaded tissues surrounding the breast but has not spread to distant organs. Advancements to treat stage 3 breast cancer have made treatment more effective, even if a doctor describes the cancer as "inoperable," which may mean that are still in the experimental that surgery will not be enough to rid the breast of the cancer in its entirety. Stage 3 breast cancer is divided into a three subgroups, which are determined by the size of the tumor and if the cancer has spread to the lymph nodes or surrounding tissue.

When a person is diagnosed tionalbreastcancer.org. person is diagnosed with stage with stage 3A, 3B or 3C breast 2B breast cancer, and that tumor cancer, his or her physician will Metro Creative

mor is found, it is typically two is either between two and five likely discuss treatment plans

#### Stage 4

A stage 4 breast cancer diagnosis means the cancer has spread to other areas of the body, which may include the brains, bones, lungs, or liver. Stage 4 breast cancer is considered incurable, though the NBCF notes that a growing number of women are living longer because their disease is being treated as a chronic condition. Treatment of stage 4 breast cancer may be determined by a patient's access to specialists and sub-specialists, and some patients may be given the opportunity to participate in therapies phase. Unlike in years past, many stage 4 breast cancer patients can extend their lives for several years thanks in large part to advancements in research and medical technology.

More information about breast cancer is available at www.na-

# FUNdraisers, FUNraisers, FRIENDraisers Community Comes Together to Support Cancer Patients



**Shave Off For Shine:** In April, West Chester's Side Bar & Restaurant staff members stopped shaving their beards to raise awareness and funds in support of patients living with cancer in Chester County. Each participant teamed up with a local salon to raise money for SHiNE.

Submitted photos

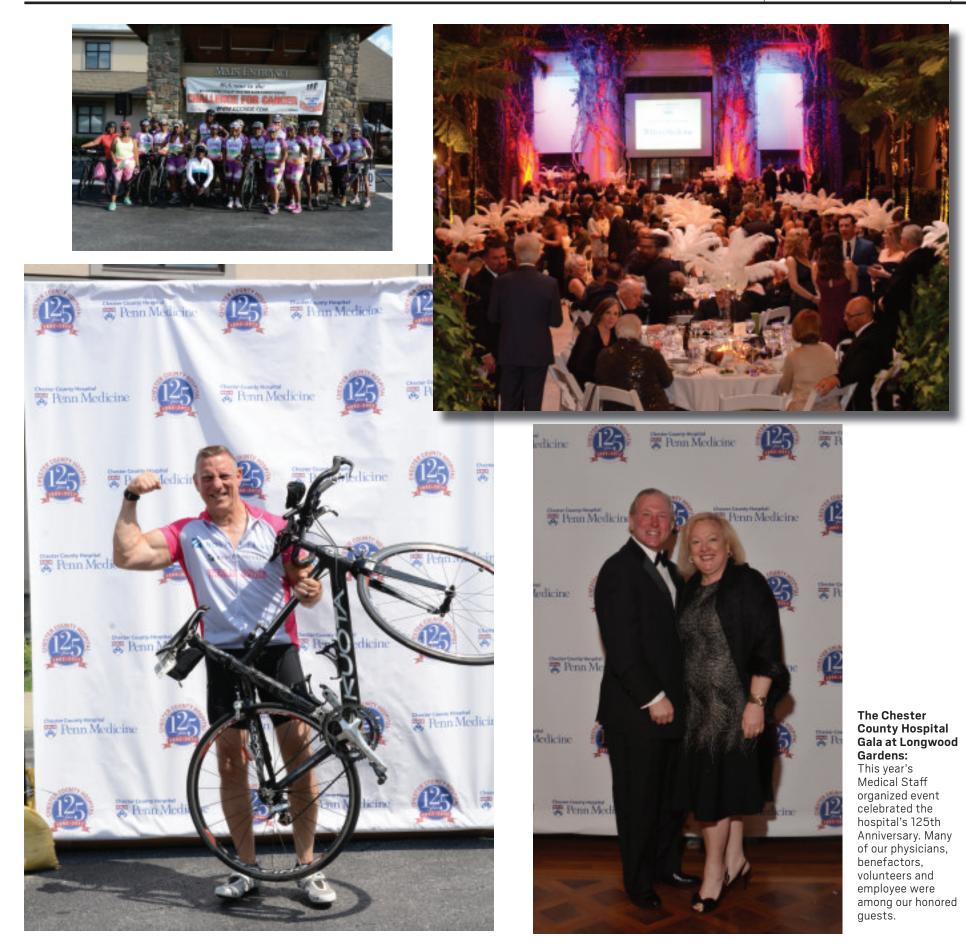


Brandywine Valley Heating & Air Conditioning Challenge for Cancer Bike Tour: Dr. Dennis Berman rallies the riders during the Challenge for Cancer Bike Tour held in June.





We are grateful to our loyal volunteers, employees, physicians and community who support our efforts throughout the year!





**Gateway Medical Associates**, in Chester and Delaware County, has been serving our community since 1996. Gateway strives to provide the highest quality primary and specialty care with a focus on our patients' wellbeing and health.

Our 43 physicians and nurse practitioners provide quality care from any of our 9 convenient locations throughout Chester and Delaware counties. Evening and weekend hours, as well as walk-in appointments are available at certain locations. You can call weekdays between 7am and 6pm to schedule your appointment.

New Patients Always Welcomell

#### **OUR LOCATIONS**

**Colonial Family Practice** 217 Reeceville Road, Suite A Coatesville, PA 19320 610-269-9448

Gateway Internal Medicine of Brandywine 217 Reeceville Road, Suite C Coatesville, PA 19320 610-384-5110

Gateway Brandywine Village Family Medicine\*\* 1229 Horseshoe Pike Downingtown, PA 19335 610-873-2700

Gateway Family Practice Downingtown\*\* 101 Manor Avenue Downingtown, PA 19335 610-269-7656

Village Family Medicine 93 West Devon Drive Exton, PA 19341 610-321-0200

**Gateway Internal Medicine of West Chester** 520 Maple Avenue, Suite 4 West Chester, PA 19380 610-430-8200

**Gateway Endocrinology** 795 East Marshall Street, Suite G2 West Chester, PA 19380 610-431-7929

Myers, Squire, & Limpert 1240 Wrights Lane West Chester, PA 19380 610-431-1210

Gateway Family Newtown Square 4667 West Chester Pike Newtown Square, PA 19073 610-356-7870

\*\*New Address in Fall of 2017

