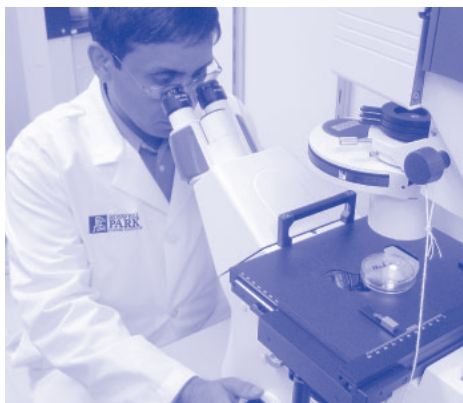


Funding Research to Create Change



2010 Young Investigator Research Grant recipient Sai Yendamuri, MD, observes cells under a microscope.

Lung cancer kills more people in the United States each year than breast, colon and prostate cancers combined, yet it receives significantly less federal research funding than any of these cancers. For example, the National Cancer Institute, the organization that funds most US government-backed cancer research, only used 5% of its 2008 budget to fund lung cancer research. Unfortunately, due to this disparity in research funding, many promising young scientists choose to pursue other research areas because funding for lung cancer projects is limited.

The National Lung Cancer Partnership is proud to provide research funds to these scientists. Our Young Investigator Research Grant program is designed to ignite researchers' interest in lung cancer, encourage researchers to enter the lung cancer field and jump start their careers.

These researchers critically need funds to develop better screening methods and more effective treatments and give hope to everyone affected by lung cancer.

The Partnership has awarded over \$1.5 million to support lung cancer research in the last five years, and we are pleased to announce the winners of our 2010 Young Investigator Research Grant competition!

(continued on page 3)

2011 Young Investigator Research Grants

The 2011 Young Investigator Research Grant competition is now open! For more information, see page 3, or visit www.NationalLungCancerPartnership.org

Advocates Inspired at 3rd Annual Advocacy Summit



Summit Presenter Liz Chadderdon helps participant Debra Walsh with her 30-second elevator speech.

The National Lung Cancer Partnership's 3rd Annual Advocacy Summit was an inspiring success! We were thrilled to welcome 80 advocates from around the country so they could learn from professionals and each other about how they can personally make a difference in the fight against lung cancer.

"I was in awe the entire time! I am humbled, motivated, inspired, thankful, and ready to kick my personal efforts to the next level!"
-Summit Participant, Bev W.

The goal of the annual Advocacy Summit is to empower advocates by giving them the tools,

knowledge and courage to become confident and effective advocates for lung cancer research and awareness. Participants found that this year's Summit did just that!

Through workshops, interactive sessions, networking and small group discussions, participants learned how to:

- understand the science of lung cancer
- engage the media
- craft messages
- reduce stigma of the disease
- organize fundraising and awareness-raising events
- advocate for legislative change
- improve lung cancer awareness in their communities

For the first time, this year's Summit included an advanced track for participants who attended a previous Summit. The advanced track included workshops and brainstorming sessions designed to help advocates expand their advocacy repertoire by using new media, building a larger community presence and improving lung cancer education in their communities.

Summit workshops included many advocate presenters sharing stories of success. These inspiring presenters showed what can be accomplished at a grassroots level.

We were honored to welcome retired US representative Clay Shaw of Florida as a featured presenter. He spoke about the federal legislative process and strategies for engaging political representatives from the perspective from a long-serving congressperson and lung cancer survivor!

We'd like to thank the H. Lee Moffitt Cancer Center for their assistance with the conference and for welcoming advocates on a tour of their research facilities.

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Joan H. Schiller, MD

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Research, Awareness and **Change**

Letter from the President



Joan H. Schiller, MD

What do you think of when you hear the term “personalized medicine”? In the cancer community, we strive for a day when each person will have their therapy matched to not only the type of cancer they have and the state of

their overall health, but also the molecular characteristics their tumor displays.

Currently, one of the main items in our cancer therapy arsenal is chemotherapy. But since chemotherapy has a lot of unwanted side effects, researchers have been working to develop drugs that better target cancer cells and reduce the side effects people experience. Several of these drugs have been very successful. For example, Herceptin has given women whose breast cancers were almost always quickly fatal a new chance at long-term survival. Another targeted therapy success is Gleevec, which is effective in treating particular types of leukemia and certain GI tumors with similar genetic characteristics. Understanding the biology behind these diseases allowed these therapies to be developed, which is why we need continued research to better understand the biology behind lung cancer.

In lung cancer, the first targeted therapy to be developed was Iressa. This drug targets the epidermal growth factor receptor (EGFR), which can get stuck in the “on” position with certain mutations. Interestingly, the very mutations that drive these tumors also make them especially sensitive to Iressa and a similar drug, Tarceva. Now, people whose tumors express a mutant EGFR have great hope that one of these EGFR-targeting drugs will keep their cancer in control for a significant period of time.

Recently, another mutation driving a small number of lung cancers has been identified. This mutation is an inappropriate combination of the EML4 and ALK genes. A cancer therapy currently in clinical trials (PF-2341066) appears to target this EML4-ALK gene combination. Any patients whose tumors have this mutation are strongly encouraged to enroll in this clinical trial. To search for this clinical trial, or to be matched with other clinical trials for which you qualify, please visit www.EmergingMed.com/Networks/NationalLungCancerPartnership or call 1-800-698-0931.

Much work is also being done to better predict which cancers are most likely to be aggressive, in order to help doctors better match therapies to patients’ needs. For example, recent research suggests that with sophisticated technology we may be able to identify those patients with early stage lung cancer who are most likely to experience a recurrence of their disease. If this technology is proven to work, only people who are predicted to have aggressive

cancers would have chemotherapy or targeted therapy as a follow-up to their surgery. People whose cancers are not predicted to recur would undergo surgery, but they would be spared the challenges that are brought by additional treatment.

These are just a few examples of how the power of personalized medicine can be harnessed. Because of the promise of personalized medicine in lung cancer, and the challenges of integrating it into general practice, we decided to focus on this topic at our 8th Annual Meeting, **Lung Cancer 2010: Barriers & Roads to Advancement**, held this year at the Chicago Marriott Downtown on June 4. Proceedings of this meeting will be available in the coming months, so even those of you who cannot attend will have the opportunity to learn about future lung cancer treatment planning.

With 122 drugs currently in development for the treatment of lung cancer, the future looks much brighter. Our hope is that all lung cancer patients will have access to new, less toxic therapies that will be more effective and more likely to result in cures. Because our mission is to decrease deaths due to lung cancer and help patients live longer and better, we will work tirelessly to ensure every lung cancer patient has access to the therapies that are best for their particular cancer.

Sincerely,

Joan Schiller
Chief, Division of Hematology and Oncology
Deputy Director, Simmons Comprehensive Cancer Center
Andrea L. Simmons Distinguished Chair in Cancer Research

New Board Members

The National Lung Cancer Partnership is pleased to announce that Lawrence Einhorn, M.D., of the Indiana University School of Medicine, has joined our Board of Directors!

Dr. Einhorn is world-renowned for his expertise in testicular cancer. He became known outside the medical community after treating Lance Armstrong. He pioneered successful treatments for testicular cancer and has turned his attention to lung cancer in recent years.

Dr. Einhorn will also continue to serve on the Partnership’s Scientific Executive Committee, where he has been a valued member for the past three years.

Retiring Board Members

We’d like to thank the following retiring board members for their service:
Richard Barg, JD, MBA ; Carolyn Dresler, MD, MPA; Sarita Dubey, MD; Carleen Wild; and Kelly Young, RN, MSN, ANP-C, AOCN. We look forward to working with them in other capacities, and we wish them the best of luck in their future endeavors!

Board of Directors:

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Joan H. Schiller, MD
University of Texas-Southwestern
Medical Center

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Indiana University School of Medicine

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Jennifer Garst, MD

Duke University Medical Center

Nancy Gatschet

Pennsylvania Lung Cancer Partnership

Pasi Jänne, MD, PhD

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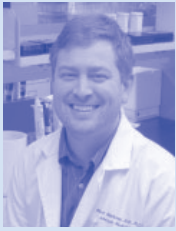
Administrative Assistant

Graphic Design & Layout:

Heather Hagerty

Advancing Lung Cancer Research

2010 Young Investigator Research Grant Recipients



Stephen Malkoski, MD, PhD, Assistant Professor, University of Colorado, Denver

Dr. Malkoski is examining whether defects in TGF β (a protein that regulates normal lung growth) in lung tissue surrounding

tumors create an environment that supports lung cancer growth. This research may eventually provide opportunities to identify new lung cancer therapies that target the tumor environment.

This grant is supported by the National Lung Cancer Partnership.



Heidi Hamann, PhD, Assistant Professor, University of Texas Southwestern Medical Center

Dr. Hamann is working to develop a way to measure lung cancer stigma, examine

differences between what men and women experience in relation to this stigma, and study how stigma affects patients' communications with their doctors. Learning more about this will allow clinicians to directly address and reduce this stigma and eventually improve treatment and care for lung cancer patients.

This grant is supported by the North Carolina Lung Cancer Partnership and the National Lung Cancer Partnership.



Mark Onaitis, MD, Assistant Professor, Duke University Medical Center

Dr. Onaitis is seeking to better understand the complexity of lung cancer tumors by investigating how the

type and location of tumor-initiating cells contribute to the aggressiveness of the cancer. A better understanding of the different types of cells within a tumor and how those cells are affected by cell signals could help develop more effective targeted therapies.

This grant is supported by the North Carolina Lung Cancer Partnership and LUNGevity Foundation.



May-Lin Wilgus, MD, Fellow, Columbia University

Dr. Wilgus is seeking to determine whether abnormalities in a specific chromosome are associated with progression of

bronchioloalveolar carcinoma (a typically non-aggressive form of lung cancer) to adenocarcinoma (a much more aggressive form). This research has the potential to help

identify which patients are likely to experience recurrence of cancer after surgery, so they can be provided with additional treatment.

This grant is supported by the National Lung Cancer Partnership and LUNGevity Foundation.



Sai Yendamuri, MD, Attending Surgeon, Roswell Park Cancer Institute, Assistant Professor, State University of New York at Buffalo

Dr. Yendamuri's research aims to understand

whether looking at a set of genetic components, micro RNAs, can predict whose early-stage lung cancer will recur after surgery, and whether these micro RNAs can be used to detect recurrence earlier than is now possible. Predicting which patients have a high risk of recurrence would allow more aggressive treatment in the beginning, potentially curing more people.

This grant is supported by the National Lung Cancer Partnership and LUNGevity Foundation.

Lung Cancer Nursing Research Grant

The National Lung Cancer Partnership is proud to partner with the Oncology Nursing Society Foundation to present an annual Lung Cancer Nursing Research Grant. This year's grant is awarded to:



Donna McCarthy Beckett, PhD, RN, Professor, Associate Dean for Research, Ohio State University College of Nursing

Lung cancer patients often experience fatigue

and depression. In this pre-clinical study, Dr. McCarthy Beckett aims to better understand the basic biology behind these symptoms. She will also examine how effectively anti-inflammatory and anti-depression medications treat these symptoms, with the hope of improving overall quality of life for lung cancer patients.

More Information

For more information about any of these research projects or past research funded by the National Lung Cancer Partnership, please visit our website at www.NationalLungCancerPartnership.org



National Lung Cancer Partnership

RESEARCH. AWARENESS. CHANGE.

Application Period Now Open for 2011 Young Investigator Research Grants

The National Lung Cancer Partnership is pleased to announce our 6th annual research grant competition! This year, multiple two-year \$100,000 awards are available to clinical and basic science fellows and junior faculty to advance their research in lung cancer development, prevention, early detection, treatment and symptom management.

The purpose of these awards is to drive forward research that will increase understanding of lung cancer risk, biology, and response to treatment, in an effort to fulfill the Partnership's mission of decreasing deaths due to the disease and helping patients live longer and better lives.

At the time of application, an applicant must hold a doctoral degree, and be a post-doctoral fellow or within the first 5 years of a faculty appointment at a not-for-profit institution in the United States or Canada. Applications addressing sex differences in lung cancer are particularly encouraged. Applicants will be judged on the merits of their research proposal, career development plan, and research environment.

For complete application eligibility and instructions for the awards, please visit www.NationalLungCancerPartnership.org

The application deadline is September 10, 2010. Awards will be announced on or before January 1, 2011.



Grant recipient Stephen Malkoski, MD, PhD, works on his research project.

Stories of Strength

A Survivor's Story



Tom Cappiello

Tom Cappiello, a devoted husband and father of three girls, learned he had Stage IIIA lung cancer in October, 2007. With no evidence of disease now, he is dedicated to raising public awareness of lung cancer.

Q: When were you diagnosed with lung cancer? What were the circumstances?

A: In 2007, I had a persistent cough (which I thought was caused by allergies) and I was not able to keep food down (which I thought was due to severe heartburn). I also noticed that I had become somewhat arthritic after sitting for any length of time. At my annual physical, I mentioned these complaints to my doctor. He sent me to have a chest X-Ray, and they found a 9cm mass in my upper right posterior lobe. The diagnosis was confirmed with a needle biopsy, and I started almost immediately on a course of chemotherapy and radiation.

Q: How are you doing now?

A: My latest scan shows no evidence of disease! I decided to pursue a clinical trial to see if there was more I could do to prevent the cancer from returning, and I am continuing on that trial now.

A Physician's Perspective



Heather Wakelee, MD

Heather Wakelee, MD, a clinical investigator and practicing clinician at Stanford University, develops and implements lung cancer clinical trials. Dr. Wakelee is also a valued member of the National Lung Cancer Partnership's Scientific Executive Committee.

Q: What inspired you to enter lung cancer research and treatment?

A: I was inspired to become an oncologist by patients I helped to take care of while I was a medical student. I was amazed by their strength and hope. I was inspired by their ability to look at life as an ongoing day-to-day journey instead of giving in to doom and gloom. Lung cancer struck me as a particular challenge as it remains the leading cause of cancer death in both men and women, and I see so much promise for improved treatment in the future.

Q: What advances in lung cancer research have made you hopeful as a thoracic oncologist?

A: I have been very encouraged by our recent improvement in understanding of the molecular causes of the disease in subsets of patients. The epidermal growth factor receptor (EGFR) story is particularly exciting because we can now readily identify patients most likely to benefit from treatments targeted to this pathway and see dramatic results. We are also now learning about ALK

Q: How has having the diagnosis of lung cancer changed your life?

A: I am living the same life I did before my diagnosis, but I am busier now than ever. I have been blessed not to have suffered much from the disease so far, and I am trying my best to represent lung cancer patients who are less fortunate than I am. I realize how precious time is and I am now working to make sure I don't waste any time trying to achieve my life goals.

Q: What inspired you while receiving treatment for lung cancer?

A: I loved listening to music on my iPod – a mix of music one of my daughters made for me. I also spent a lot of time reading and writing while in treatment.

Q: What is the biggest issue associated with lung cancer diagnosis, treatment, and/or research you wish could change?

A: I wish I could change the stigma associated with lung cancer and get people to realize that LEGAL tobacco products are to blame for this national addiction that leads to this disease. I started smoking as an exchange student in Japan at age 16 – and I wasn't able to quit without medication. You can't blame the addict; you have to deal with the pusher – big tobacco – and the government that allows it to be sold.

mutations and other treatments that focus on pathways that are problems in only certain groups of patients. We are also getting closer to being able to target chemotherapy and not just blindly treat all patients the same as we have done in the past.

“Every lung cancer patient should be inspired by how far we have come in the past five years with lung cancer research and how far we can go in the next five years and beyond.”

Q: What would you like young professionals entering into lung cancer research/treatment to know about this field?

A: That this is a dynamic field with a lot of exciting research stories just waiting to be told. We will be better able to help patients based on the results of ongoing clinical trials, with more in development. There is also an extra challenge overcoming the historical lack of research funding for this disease based on the stigma from smoking. That is fortunately beginning to change with the efforts of the National Lung Cancer Partnership and other advocacy groups.

Q: As a member of the Partnership's Scientific Executive Committee, what do you see as the greatest strength(s) of the organization?

A: The Partnership has done an excellent job of bringing together physicians, researchers, advocates and patients. We all share the common goal of eradicating lung cancer, but don't always know how to work together to obtain the resources necessary to achieve

Q: What advice would you give to others recently diagnosed with lung cancer?

A: The initial shock of the diagnosis will eventually wear off. A good attitude will help you be a survivor. I have known people who gave up and have since died with the same diagnosis I had and who were the same age as I am – 54. Miracles happen every day and you need to believe you will be a survivor. Get a lot of people to pray for your full recovery.

Q: What advice would you give to physicians and health care providers in dealing with patients with lung cancer?

A: Never ever provide a prognosis...a positive attitude starts with a caring oncologist who should try and instill hope and a fighting will.

Want to know more about Tom's experience with lung cancer? Visit our blogs at www.NationalLungCancerPartnership.org/Lung_Cancer_Blogs to follow Tom, as well as Melissa, who is living with Stage IV lung cancer, as they share their stories.

Share your own story of strength and read others on the Patients and Friends section of www.NationalLungCancerPartnership.org

that goal. The Partnership is helping us learn how to truly be partners in this effort.

Q: What is your greatest challenge as a physician and researcher?

A: There are a lot of great research ideas out there, and as an individual, it is always challenging to figure out what I should focus on to have the greatest impact for my patients and others living with lung cancer.

Q: What would you like patients to know about lung cancer treatment - now and for the future?

A: I think the most important thing for every patient with lung cancer to know, regardless of any risk factors they may have, is that this is not something they “did to themselves.” Every lung cancer patient needs to know that there are treatment options and that there is hope. Every lung cancer patient should be inspired by how far we have come in the past five years with lung cancer research and how far we can go in the next five years and beyond.

Q: What is the most important thing(s) you have learned from your patients?

A: To live each day to the fullest, not because it may be the last, but because that is why we are here.



National Lung Cancer Partnership
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Patient Point of Interest

Retrospective on Dealing with Loved Ones Coping with Cancer



Ronald and Vera Simpson celebrate their wedding day.

Hope is what drives everything we do at the National Lung Cancer Partnership. There are so many promising new lines of research and dedicated advocates working to improve lung cancer awareness and to increase research funding, we know that there are many reasons to hope! However, for many people, the reality of this disease sometimes means they have to come to terms with a terminal diagnosis or deal with loss and grief.

We'd like to share a story from Professor Ronald Simpson, a man who has shown inspiring strength in the face of loss. Ron lost his wife to lung cancer. Out of this loss came love (a new wife who also lost her former husband to lung cancer), and a desire to help others dealing with the loss of a loved one. He and his wife teamed up with another couple to give suggestions to families helping a loved one deal with a cancer diagnosis.

Here is his story:

While sitting on the porch of a lovely bed and breakfast inn last summer, viewing the beautiful mountains of North Georgia, my wife and I encountered a friendly couple and conversed on a topic that has stuck with me since then. This couple was celebrating their 25th wedding anniversary. My wife and I, though somewhere around fifteen years older, were celebrating our first. (We both lost our long-time spouses to lung cancer a few years ago and met through mutual friends two years ago.)

As we shared this with the engaging couple, we learned that the husband is a practicing physician experienced working with breast cancer patients, and the wife is a former nurse involved in many medical literacy activities. My wife's background in x-ray technology and my academic background in the biological sciences

naturally led the conversation to medical topics. We began sharing examples of how spouses' family members (and sometimes even health care professionals) often avoid talking with very ill cancer patients about things that are on their minds or things they need to know.

The four of us agreed that instead of broaching the difficult topics of how the patient feels at the moment or how things will likely change as the disease progresses, we tend to tip-toe around the hard stuff and talk about things on the surface. This can leave the patient confused about what is happening and alone. This doctor offered many concrete examples of what he has experienced — like a loved one not allowing the seriously ill patient to say "If I die, here are some things that I want you to remember" or "I'm afraid, and it helps me to share these fears with you."

As we concluded the conversation in this wonderful setting, my wife and I both confessed that if we could do things over again, we would be more forthcoming and realistic with our dying spouses. Our new-found doctor friend suggested that we write about this to help others who are experiencing similar situations. Below are some suggestions we have for others who may be dealing with loved ones with cancer:

- Take lots of notes during each visit with the physician, nurses and technical staff. Don't be afraid to ask questions. Keep a diary. Clear communication among the patient, their family members and health care providers is essential to understanding the disease, the treatment, and the stages through which the illness will likely progress.
- Concentrate on minimizing stress for the patient by working hard to decipher and communicate the medical terminology relating to the disease process and treatment. Read all handouts, pamphlets and other information offered by the treating physician and healthcare team or other reputable sources, such as the Partnership.
- Listen carefully and deeply to the feelings of loved ones, allowing them to share in detail what is currently on their minds.
- Allow your family member or friend who is fighting cancer to cry — and cry along with them.
- Help the patient live each day with maximum value, focusing on the fact that no one, or no set of "statistics," can predict accurately when any of us are going to die.
- Do not avoid talking about important things that need to be addressed in the near or distant future. (For example, I wish I had listened more carefully to my late wife when she talked about who she wanted to receive some of her personal belongings. A close friend of mine recalls that he did not have all the information he needed for his wife's obituary once she was gone.)
- Set up an e-mail list or a telephone tree to

deal with inquiries from and updates to friends and relatives. Don't hesitate to let others help with tasks like this.

- Perhaps the most important of all: Don't be afraid to say "I LOVE YOU."

It is hoped that these humble insights, fostered by an initial conversation that began on the porch of a country inn between two newly acquainted couples, will be of some value to patients, family members and others who provide assistance to critically ill patients. Medical professionals, along with anyone who has lost a loved one to cancer or other diseases for which cures are not yet known, understand how valuable and therapeutic it is to share accurate information, exchange experiences, and share feelings in an open and honest manner.

Note about the author: Ronald Simpson is professor and director emeritus of the Office of Instructional Development at the University of Georgia and a member of the National Lung Cancer Partnership. He and his wife, Vera, wish to acknowledge the contributions of Dr. and Mrs. Gil McEver of Warner Robins, Georgia.

Online Resource: Understanding Early-Stage Treatment Options

Presented by the National Lung Cancer Partnership and Research to Practice

This web resource features interviews with lung cancer experts and patients to help you understand treatment options for early-stage lung cancer.

www.NationalLungCancerPartnership.org/Early_Stage_Treatment_Info

Revised Patient Education Book

The National Lung Cancer Partnership has updated our patient education handbook, *Living with a Diagnosis of Lung Cancer*. This 2nd edition booklet has updated staging guidelines and new information about diagnosis and treatment, and provides an overview of what to expect after you are diagnosed with lung cancer.

To order free copies of the booklet to distribute at your local clinic, visit www.NationalLungCancerPartnership.org

Find us on Twitter and Facebook!

Follow us on Twitter or become a fan on Facebook to receive breaking lung cancer research updates, information about Partnership events, and more!



Tell us what you think!

We want to know what you want to see in our newsletter. Please visit www.NationalLungCancerPartnership.org/NewsletterSurvey to take our survey. All respondents will be entered to win a \$50 Barnes & Noble gift card!

Partnership Events

2010 Free to Breathe® Event Locations



Many returning events! New cities!
Visit www.FreetoBreathe.org to find an event near you!

The **Free to Breathe®** program is a nationwide community voice supporting the fight against lung cancer and bringing together everyone affected by the disease. With the support of organizers, volunteers, donors, fundraisers, participants and sponsors, **Free to Breathe®** has grown to be the largest branded national lung cancer event series in the US, with over 30 events planned for 2010!

There are so many events across the country this year, and we want to be able to share them all with you! Please visit www.FreetoBreathe.org for more information about the program or any of our events, or to register, donate, volunteer or sponsor!

“Giving hope and encouragement on this lung cancer journey is so very important.”

-Jean K., Free to Breathe® Event Organizer

Event Updates

The **2nd Annual Lake Charles Free to Breathe® 5K** welcomed nearly 1400 participants and raised over \$136,000.

Erin Fenske headed up a team of volunteers in Dallas, TX to organize the inaugural **Look Deeper Concert**.

Terry Gillespie organized the **Lung Cancer Heroes Walk** in Elgin, IL.

Jean Korsnack ran a marathon in Columbus, OH in memory of her friend and neighbor, Paul Windisch, and raised more than \$9,400.

Kari Newport organized the **Breathe OK** walk in Yukon, OK and raised more than \$3,700.

Mary Marino ran the **Annapolis Zooma ½ Marathon** in memory of her father, Jack Marino, and raised vital funds for lung cancer research and education.

The authors of **three children's books** are donating a percentage of the proceeds from their book sales to support the National Lung Cancer Partnership. The books, **Pink Sky at Night, I Know He Plays in Heaven**, and **The Life and Times of Lilly the Lash®** are available at www.LungCancerMarketplace.org

Other volunteers organized events such as a roast & toast, a workplace jeans day, and a garage sale.

The National Lung Cancer Partnership's 8th Annual Meeting, **Barriers and Roads to Advancement**, was held in Chicago, IL on June 4. The meeting brought together doctors, patients and advocates from around the world to discuss new developments in lung cancer research and treatment.

Advocates from around the country came together at the 3rd Annual **Lung Cancer Advocacy Summit** and 2nd Annual **Free to Breathe®** Leadership Forum to exchange ideas and work together to bring awareness events to their communities. We look forward to sharing their future successes!

If you would like to join these passionate advocates in creating change for lung cancer, please visit www.NationalLungCancerPartnership.org for ideas on how you can get involved!



Volunteers staff the check-in table at the 2009 Look Deeper Concert in Dallas, TX



Participants unite to fight lung cancer during the 2009 Free to Breathe® event in Tacoma, WA.

THANK YOU!

We'd like to say a very special thank you to our event organizers for all their time, energy and unmatched dedication. We are so grateful to be working with you!

We'd also like to thank all the dedicated volunteers, donors, fundraisers, participants and sponsors who make our events possible. Each and every one of you is integral to our goal of generating awareness and raising vital research funds!



Research, Awareness and Change

Congratulations to Dr. Pasi Jänne!

Dr. Pasi Jänne, Partnership Scientific Executive Committee Chair and Board Member, was honored with two awards by the American Association of Cancer Research.

Dr. Jänne received the Richard and Hinda Rosenthal Memorial Award for his work to understand the biology of the epidermal growth factor receptor (EGFR) in lung cancer and to use these findings to improve patient care. He is also a member of the Dana-Farber/Harvard Cancer Center Thoracic Oncology Research Team that received the AACR Team Science Award.

FREE Materials

To have quantities of this newsletter or our other educational materials delivered to your office or clinic for FREE, please visit www.NationalLungCancerPartnership.org

North Carolina Chapter Update

The North Carolina Lung Cancer Partnership held our **Annual Meeting and Volunteer Recognition Dinner** on February 19 in Research Triangle Park. Dr. Mark Onaitis, one of the recipients of a chapter-funded research grant, spoke about his research. Three volunteers were also recognized for their outstanding contributions this past year: Liz Hynson, Beth Hicks and Emily Parks.

The **2010 Evening of Hope Spring Gala** was held in Durham on April 17. We added a live and silent auction this year. Dr. Betty Tong of Duke Medicine was the evening's keynote speaker, and Angela Hampton of WTVD was also a special guest, making the event an even bigger success than last year!

Join us at a **Free to Breathe®** event in Buies Creek, Raleigh, Greensboro, Boone or Durham!

We are also planning a **North Carolina Lung Cancer Advocacy Summit** on

August 28, 2010, at UNC Lineberger Comprehensive Cancer Center. More details on this event will be available soon.



Survivors and NC Lung Cancer Partnership Board Members Sandy Oehler, Taylor Bell and Tomma Hargraves enjoy their evening at the 2010 Evening of Hope Spring Gala.

More Information

For more information about the North Carolina Lung Cancer Partnership's events or programs, including the upcoming North Carolina Lung Cancer Advocacy Summit please visit www.NationalLungCancerPartnership.org/NC

Memorial Giving

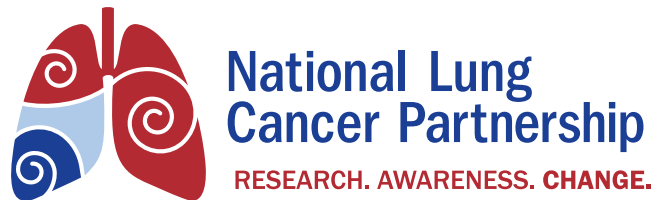
Donations have been made to the National Lung Cancer Partnership in memory of the following people (September 18, 2009, through April 27, 2010):

Marilyn Adler	Peter Chao	Arlene Getchell	Delio Londono	Ingrid Saporito
Elyse Aussenberg	Jean Chipman	Geri Gilbreth	James Lowstuter	Noelle Schnick
Dianne Ball	Mariann Clark	Katherine Swan Ginsburg	Douglas Loy	Evelyn Schramm
Linda Barndt	William A. Clark	Barbara Glassman	Mr. Lukovic	Larry Schue
George L. Barr	Bob Cohan	Batya Goodman	Douglas Madison	Ann Schuler
John E. Bartley	E.J. Cole	Paula Grasseschi	Maryann Maio	Mona Sherrill
Luigi Basile	Joan Constans	Donna Greene	Joli Mallick	Phyllis Shillingstad
Joan Becker	Theresa Rose Convertino	William Griffin, MD	Yoji Matsumoto	Gayle Silverman
Elias "Ed" Beeghly	Milton S. Cooper	Sara Victoria Grootaert	Linda McAndrew	Charlotte Simpson
Rebecca Behncke	Joanne Corn	Iris Grossman	Thomas Michael McLaughlin	Marilyn Anne Smith
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Ella Jane Berven	Patricia Creegan	Janet Harris	Helen Murawsky	James Spellicy
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Natasha Binsse	Earl Dahl	Freddie Hayes	Winnie Nelson	Janice Squeglia
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Salaine Bonanne	Betty DiAngelo	Nanette Hoppman	Barbara "Bobbie" Palmer	Ellen Taylor
Edith Borries	Ronnie Dick	Brian Howel	Hubert Parks	Lucy Lin Terrell
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Susan Buchanan	Margaret Fahrland	Liz Katz	Patricia Price	Jim Wagner
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The National Lung Cancer Partnership Announces the 2010 Young Investigator Grant Recipients!

See inside for more information about upcoming *Free to Breathe*[®] events and other ways you can get involved in the fight against lung cancer.

The National Lung Cancer Partnership is dedicated to decreasing deaths due to lung cancer, and helping patients live longer and better, through research, awareness and advocacy.



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