



National Lung
Cancer Partnership
WOMEN. RESEARCH. CHANGE.

Lung Cancer Voice

Winter 2008

National Lung Cancer Partnership Announces New Advocacy Summit for Lung Cancer and 2008 Annual Meeting

Lung Cancer Advocacy Summit: Acquiring Tools, Effecting Change

National Lung Cancer Partnership is excited to announce that we will host the *Lung Cancer Advocacy Summit* from May 27-29, 2008, in Chicago, IL, just prior to our Annual Meeting. The advocacy summit will give individuals tools to become effective advocates and the opportunity to learn more about topics such as the basics of lung cancer science, research advocacy, community opportunities for advocacy, and advocacy on a state and federal level.

In order to fulfill National Lung Cancer Partnership's mission of decreasing deaths due to lung cancer, and helping patients live longer and better lives, we need to work to raise awareness of the deadly impact of the disease, to help increase funding for lung cancer research, and to educate and empower patients to actively participate in their treatment and care. The purpose of the *Lung Cancer Advocacy Summit* is to train and guide advocates to effect change at a grassroots level. The summit will consist of teaching workshops, interactive sessions, networking, and small-group discussions in order to give each individual a chance to learn in the ways that work best for them. Unstructured time is built in to the schedule to allow for interaction, contemplation, and planning among participants.

The workshops will be led by health and research professionals, media trainers, and advocacy trainers. The topics that will be discussed include: understanding lung cancer; how to be your own health advocate; becoming a lung cancer consumer reviewer; how to de-stigmatize the disease; raising lung cancer awareness in your community; and how to navigate the legislative process.

In order to facilitate constructive interaction among participants, we are limiting attendance to 50 grassroots lung cancer advocates. The application instructions are available on our website at www.NationalLungCancerPartnership.org. The application deadline is March 20, 2008. Applications are sought from diverse members of the lung cancer advocacy community, regardless of experience or "allegiance" to any given organization. We have assembled a core group of lung cancer survivors and advocates who will be reviewing the applications and choosing the

participants. Two nights of hotel accommodations and up to \$500 in transportation costs will be provided to participants accepted to the summit. All meals during the summit will be provided. Questions about the summit can be directed to Alice Yuroff, Ph.D., Programs Manager, at Alice@NationalLungCancerPartnership.org.

We encourage all who will participate in the summit to stay in Chicago, IL and join us at the Chicago Marriott Downtown for National Lung Cancer Partnership's 2008 Annual Meeting to hear the latest updates in lung cancer research.

Mark your calendars for:

*Lung Cancer Advocacy Summit:
Acquiring Tools, Effecting Change
on May 27-29.*

National Lung Cancer Partnership's Annual Meeting, Lung Cancer 2008: Progress and Promise on May 30.

For more information and how to register, visit our website at www.NationalLungCancerPartnership.org.

Lung Cancer 2008: Progress and Promise

National Lung Cancer Partnership's Annual Meeting, *Lung Cancer 2008: Progress and Promise*, will take place on May 30, 2008, at the Chicago Marriott Downtown in Chicago, IL.

The Annual Meeting, as always, will focus on the progress that has been made in lung cancer research in the past year. Dr. John Neiderhuber, head of National Cancer Institute (NCI), will be presenting an update on NCI's Lung Cancer Program. Internationally-acclaimed researchers will present on topics including: the risks of radon and COPD in lung cancer development; targeting cancer stem cells with therapy; the current state of personalized medicine for lung cancer treatment; and the latest on sex differences in the disease. Action plans developed during the advocacy summit will also be presented at the Annual Meeting, to allow for professional insight into the goals identified by grassroots advocates.

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Support Research, Awareness, and **Change**

Travel grants for our Annual Meeting will be available for students, residents, fellows, and other health and research professionals-in-training. Approximately 15 travel grants of \$750 are available. The application instructions are available on our website at www.NationalLungCancerPartnership.org. The application deadline for the travel grants is March 20, 2008. The registration deadline for the Annual Meeting is May 16, 2008. Questions about the meeting can be directed to Alice Yuroff, Ph.D., Programs Manager, at Alice@NationalLungCancerPartnership.org.

To have complimentary quantities of this newsletter and other patient education resources and brochures delivered to you, visit our website, www.NationalLungCancerPartnership.org, or email us at info@NationalLungCancerPartnership.org.

This issue of *Lung Cancer Voice* is made possible by unrestricted educational grants from Kyphon, Inc., Genentech, and ImClone.

Letter from the President



Joan H. Schiller, MD

Happy 2008! It has been seven years since my colleagues and I, along with several patients and advocates, began thinking about how to address the needs of lung cancer research, awareness, and advocacy. None of us envisioned what is now the National Lung Cancer Partnership;

we just had an idea that something needed to be done, and that, with some vision and organization, we could impact a change in the status quo. Thinking back to those early days, I am very proud of all we have done, and am excited to share with you our plans for the coming year.

In 2008, we are funding more research. In this issue of the *Lung Cancer Voice*, you'll find descriptions of the research that your support has allowed us to fund. We are also offering new research avenues in partnership with several other organizations: a Young Investigator/Fellowship award with the International Association for the Study of Lung Cancer (IASLC); a lung cancer survivorship research grant with the Lance Armstrong Foundation; and a lung cancer nursing research grant with the Oncology Nursing Society (ONS). These new partnerships will allow us to broaden the impact of our research dollars – dollars you have so generously entrusted us with. We hope that our increased research grant program will fund research that will bring a new treatment to the clinic, prevent someone's disease, or discover a new mechanism for ensuring that lung cancer patients live the most comfortable and longest life possible with their disease.

In 2008, we are also offering new opportunities for outreach and advocacy. Our *Free to Breathe™* races will be expanding to new sites (see page 6 for the announcement of the event in Athens, GA), and we are offering a *Lung Cancer Advocacy Summit* just prior to our Annual Meeting in Chicago (see front page). Our Annual Meeting will highlight some of the most engaging advances in lung cancer research and will again be held prior to the American Society of Clinical Oncology (ASCO) Annual Meeting.

We also are very happy to have our Lung Cancer Ambassador, Lori Monroe, RN, now writing a blog on our website at www.NationalLungCancerPartnership.org/blog about her experiences with lung cancer. Lori was diagnosed with stage IV bronchioloalveolar carcinoma (BAC) six years ago. She has fought fierce battles against the disease, not only on the personal front, but also on the advocacy front. In her blog, she shares her personal story with the world. The following is an excerpt from one of Lori's blogs that was particularly touching to me, as it illustrates exactly what we at the Partnership are working for:

"I hope [2008] means a year for new and promising advances in lung cancer research. I hope that somehow, somewhere, somebody holds the key to change the horrible statistics of this disease. I hope that the work they

have committed their life to will come to life and will unravel the mysteries of this disease. That instead of slow progress, lung cancer will see dramatic results and new treatments we haven't even heard of, that will cure us without almost killing us in the process.

I hope that [2008] is the year that lung cancer becomes the field all the cancer researchers are biting at the bit to work on. That the funding for lung cancer will be so plentiful that we can fund all the promising grants and lung cancer research, and that lung cancer will no longer be forgotten and known as the invisible cancer. I hope that 2008 is the year we see so much private funding and foundations for lung cancer that research for lung cancer will go on even if the National Cancer Institute continues to cut funds as they have in the past.

I hope that this year, I won't say goodbye to any of my lung cancer friends and advocates. That I won't hear any more sad and discouraging stories about how lung cancer took somebody too soon. I hope that by the time my [young adult] daughters are in their 30's they will only remember how when they were younger we didn't have good treatments for lung cancer.

I hope that in 2008, everybody who has been touched by this disease, either as a patient or somebody who loves someone with lung cancer, will stand up and say they are willing to do something to join in the fight against lung cancer. That every community will have lung cancer advocates to help the researchers get more money to find new cures. I truly believe that, joined together, advocates with researchers, we can change the course of this disease. We can make a difference- we can change things."

Please join us as we work to fulfill Lori's hopes for 2008 and beyond.

Sincerely,

Joan H. Schiller, M.D.
Chief, Division of Hematology and Oncology
Deputy Director, Simmons Comprehensive Cancer Center

Andrea L. Simmons Distinguished Chair in Cancer Research
University of Texas Southwestern Medical Center

Congratulations!

Joan Schiller, along with co-authors Adi Gazdar and Sophie Sun, won the Global Lung Cancer Coalition (GLCC)'s 2007 Lung Cancer Journalism Award - Best Medical Award for their article, "Lung Cancer in Never Smokers - a Different Disease", published in *Nature Reviews*. The mission of the GLCC's Lung Cancer Journalism Awards is to raise global awareness of the leading cause of cancer-related deaths worldwide.



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Advancing Lung Cancer Research

National Lung Cancer Partnership's 2008 Research Grant Winners

National Lung Cancer Partnership is pleased to announce the winners of our third annual research grant competitions. We are awarding three grants: a Career Development Award, and two Research Grants co-sponsored with the LUNgevity Foundation.

Lung cancer research is severely under-funded at the federal level in proportion to the death toll from the disease. The purpose of National Lung Cancer Partnership's research grant program is to drive forward research that will increase the understanding of lung cancer, including basic biology, risk factors, and how to prevent, detect and treat the disease. Our grant programs support scientists who choose to pursue lung cancer research, even in the face of a poor funding climate.

National Lung Cancer Partnership Career Development Award

The Career Development Award is intended to provide two years of protected time for newly independent investigators to develop their careers in lung cancer research. This award was made possible with the assistance of the Lilly Foundation and contributions from our donors.



Dr. Adam Marcus

Dr. Adam Marcus of the Winship Cancer Institute at Emory University was awarded National Lung Cancer Partnership's Career Development Award for his proposal, "Consequences of the LKB1-STRAD interaction in lung cancer invasion and therapy". This 2-year \$80,000 award will support Dr. Marcus as he pursues research seeking to understand

how lung cancer cells are able to invade surrounding tissues.

Dr. Marcus' research will focus on the role of a cellular protein named LKB1 in lung cancer cell invasion. This grant will fund his research exploring the hypothesis that LKB1 and its cellular partner, STRAD, regulate normal cell movement. He will also investigate whether mutations in LKB1 ultimately cause lung cancer cells to move into other tissues. In addition, Dr. Marcus will study how LKB1 mutations affect the sensitivity of lung cancer cells to chemotherapy drugs.

"By understanding how LKB1 contributes to lung cancer invasion, our research could potentially impact the development of novel diagnostic and prognostic approaches to control lung cancer malignancy," Dr. Marcus said.

LKB1 is mutated in about 30% of non-small cell lung cancer (NSCLC) tumors – representing approximately 50,000 patients annually.

National Lung Cancer Partnership / LUNgevity Foundation Research Grants

The purpose of these grants is to advance research in basic lung cancer biology, risk assessment, prevention, detection, and response to treatment. In 2008, two

Research Grants, co-funded with the LUNgevity Foundation, are being awarded. These awards were made possible with the assistance of Genentech and contributions from our donors.



Dr. Hildegard Schuller

Dr. Hildegard Schuller of the University of Tennessee was awarded a Research Grant for advancing the understanding of sex differences in lung cancer. This 2-year \$100,000 award will support Dr. Schuller's research for her proposal, "Estrogen enhances the carcinogenic effects of the nicotine derivative NNK".

Dr. Schuller's research will evaluate the relationship between estrogen and the nicotine-derived carcinogen, NNK, in lung tumor formation. She hypothesizes that estrogen and NNK cause more DNA damage in lung cells than NNK alone. The damage, in the form of mutations, may adversely affect how cell growth is regulated, potentially leading to tumor formation. In addition, Dr. Schuller will mutate several of the molecules that normally interact with estrogen in the cell in order to understand their relationship to lung tumor development in the presence of NNK.

"Understanding the basic mechanisms of estrogen's influence in lung carcinogenesis should provide new targets for early diagnosis, prevention, and therapy," Dr. Schuller said.

Dr. Albert Baldwin of the Lineberger Cancer Center at the University of North Carolina at Chapel Hill was awarded a Research Grant for his proposal, "Targeting NF-KappaB as a new treatment option for lung cancer". This 2-year \$100,000 award will support Dr. Baldwin's research as he investigates genetic and molecular changes that can transform normal cells into cancer cells.



Dr. Albert Baldwin

"Our goal is to increase the understanding of the development of lung cancer and to improve lung cancer treatment," Dr. Baldwin said. "We are hopeful that the studies will lead to new therapeutic options for a large number of lung cancer patients."

Dr. Baldwin will study molecules involved in the regulation of normal cell growth. When mutated, some of these molecules can cause normal cells to begin growing out of control, and can lead to cancer. He is particularly interested in the cellular protein NF-KappaB, which plays a key role in normal cell growth. In the research supported by this grant, Dr. Baldwin will study how NF-KappaB sends signals to other molecules that are also important to cell growth and the roles of changes to these signals in forming lung cancer. In addition, he will investigate drugs that can block steps governing uncontrolled cell growth, with the goal of blocking lung tumor initiation and/or growth.

New Research Grant Partnerships Formed

National Lung Cancer Partnership is pleased to announce new grant partnerships in our quest to fund lung cancer research that will ultimately fulfill our mission of decreasing deaths due to lung cancer, and helping patients live longer and better lives.

IASLC/National Lung Cancer Partnership Fellowship Award/Young Investigators Award

The International Association for the Study of Lung Cancer (IASLC) and the National Lung Cancer Partnership are sponsoring a Fellowship and Young Investigator award in 2008. The goal is to reward scientific excellence and to encourage innovative investigations in the field of lung cancer prevention research and translational research with a potential impact on the management of lung cancer.

The deadline for submission of the application was January 15, 2008. For more information about this program, visit www.iaslc.org.

Lance Armstrong Foundation/ National Lung Cancer Partnership Lung Cancer Survivorship Research Grant

The Lance Armstrong Foundation and the National Lung Cancer Partnership are co-sponsoring a Young Investigator Survivorship Research Grant. The intent of this research grant program is to fund potentially groundbreaking, high-impact projects that may lead to significant improvements in quality of life for cancer survivors. The Young Investigator Grant is intended to support career development in the field of lung cancer survivorship research. These projects may address any aspect of lung cancer survivorship.

The deadline for the letter of intent is March 14, 2008. For complete application descriptions visit www.livestrong.org.

Oncology Nursing Society Foundation/ National Lung Cancer Partnership Lung Cancer Nursing Research Grant

The Oncology Nursing Society Foundation and the National Lung Cancer Partnership are sponsoring a Lung Cancer Nursing Research Grant. Applications are invited for grant proposals that address innovative areas of lung cancer research that may include chemoprevention, blood/sputum screening, symptom management, and disease progression. To be considered for funding, the research team must include an advanced practice nurse and experienced researcher. Interdisciplinary research teams are encouraged.

The deadline for the letter of intent is April 1, 2008. The deadline for submission of the application is May 1, 2008. For complete application descriptions visit www.ons.org.



National Lung Cancer Partnership
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Stories of Strength



Nancy Gatschet

A Survivor's Story

Nancy Gatschet joined the National Lung Cancer Partnership and the fight against lung cancer as a lead volunteer for the Free to Breathe™ 5K in Philadelphia, PA in 2007. A small cell lung cancer survivor for more than one year, we asked Nancy to share her story and her

hope for the future of lung cancer awareness and research.

In July of 2006, I started to feel a lump in my throat, which caused me to feel like I was gagging. I made an appointment with my doctor thinking that the thyroid goiter I've had for years was finally getting in the way. While the doctor was interviewing me, I also mentioned that my upper back was aching way more than usual when I worked in the garden. I had a vague recollection that upper back pain could be a symptom of lung cancer, so my doctor recommended a throat scan and a chest x-ray.

The next day, I left for a vacation. I received a voicemail from my doctor when we landed in Los Angeles, telling me that they saw a large mass in the center of my chest. I choked back tears. I called and talked to my doctor; she indicated that the doctors she consulted said it had probably been there a long time, so not to rush home. I tried to enjoy the vacation.

On the plane home, less than an hour from the airport, I felt like I couldn't breathe. We were at the gate within moments of landing and were met by an EMT crew and within the next hour, I was sitting at the hospital, awaiting admission.

The following morning a thoracic surgeon visited me. He noted that a lymph node in my neck was quite swollen, and said it would provide a good biopsy point. When the thoracic surgeon returned, he showed me where the large (5 cm x 10 cm) mass was in the thoracic cavity between my lungs, and where the cancer had spread to the lymph node on my left clavicle. He explained that I had small cell lung cancer (SCLC), a less common and very aggressive lung cancer. SCLC is only staged as limited or extensive. If designated as limited, the treatment is aggressive, and the cancer is generally responsive to treatment. He told me that 30% of SCLC patients are cured and live a normal life. At that moment, I decided to be part of that 30%.

The difficulty was that not all of the doctors believed I was "limited stage". My oncologist and my radiologist fought very hard on my behalf to have my staging declared limited so they could treat my tumor with radiation therapy in addition to chemotherapy. (Editor's note: Extensive stage SCLC is generally only treated with chemotherapy.) I had 5 rounds of chemotherapy, and 15 days of twice-daily radiation following the first 2 rounds of chemo. In December, I had a PET scan, which showed no sign of cancer!! Treatment concluded with 10 days of prophylactic brain radiation to reduce the chance of my cancer appearing in my brain.

In December 2007, I celebrated 12 months of being cancer free. I feel good. My only residual side effect is frequent upper-back discomfort – a likely result of radiation scarring of the tissue surrounding the thoracic cavity. And if that's the worst of it, I consider myself very fortunate!

My cancer diagnosis was, in some ways, a gift. It amazed me how many people reached out to support me. Many told me things that normally would be saved for a eulogy. I am grateful for

every single day now. I live more fully in the moment, and make choices differently. I choose to do those things that are more meaningful to me and others – my house isn't as clean, but I will eventually die more fulfilled!

I find it appalling that lung cancer research is so woefully under-funded compared to other cancers – and yet is the number one cancer killer. We need more research dollars to help us find better detection mechanisms, treatments, and a cure. That's why I asked my oncologist what I could do to help. She connected me to the National Lung Cancer Partnership and I worked with the staff to help plan and organize the Free to Breathe™ 5K Run in Philadelphia last November.

I still have people ask if my cancer was related to my smoking. My reaction is "If you are in a car accident, are your injuries related to your being in the car?" We all make choices, some of which carry risks, known and unknown. Perhaps if I had known that 1 in 16 women will get lung cancer or that 1 in 5 smokers will receive this diagnosis, I might have stopped smoking sooner. But lung cancer doesn't have enough survivors to give the disease a loud voice. Everyone who has been touched by this disease needs to raise the consciousness of the rest of the world so that we can prevent, diagnose, treat and cure the number one cancer killer.

Do you have a Story of Strength you would like to share? Do you want to read more Stories of Strength? To read more stories about lung cancer survivors and submit your own, visit the Patients & Friends section of our website, www.NationalLungCancerPartnership.org.



Pasi Jänne, MD, PhD

A Physician's Perspective

Dr. Pasi Jänne is a lung cancer researcher and clinician at Dana Farber Cancer Institute in Boston, MA. Dr. Jänne is a valued member of the Partnership's Scientific Executive Committee.

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

A: Lung cancer is the leading cause of cancer deaths for both men and women in the United States. Currently, our best therapies can prolong life but there still is no cure. As a researcher, I feel that there is great opportunity in lung cancer research – especially because it has lagged behind many other cancers in terms of research efforts and funding. I enjoy the multidisciplinary approach of taking care of patients and performing studies to understand the disease and develop treatments. Moreover, given the frequency of this devastating disease, advances that improve treatment of even a small percentage of patients will impact thousands of individuals.

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

A: Research into the biology of lung cancer has helped identify subgroups of patients likely to benefit from particular treatments. It is incredibly gratifying to see patients whose tumors harbor mutations in the Epidermal Growth Factor Receptor (EGFR) being treated with drugs that inhibit the action of EGFR. These individuals often have dramatic responses from daily oral therapy and avoid the side effects of chemotherapy. We can now test for EGFR mutations prior to therapy and use it as a way to select which patients should receive EGFR inhibitors. This is very different than when I started my training.

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

A: Lung cancer is not one disease. Just like there are different subtypes of leukemia, we will continue to identify different subtypes of lung cancer, each which may be associated with different therapies and/or outcomes. This will help the treatment of all patients with the disease.

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

A: One of the greatest strengths of the National Lung Cancer Partnership is their commitment to improving the lives of patients with lung cancer. I think that is true at every level of the organization.

Q: What role do you see the Partnership playing in the future of oncology?

A: I see the Partnership continuing to provide seed funding to young investigators just starting out in the field. That is so important – especially now when federal funding is particularly difficult to obtain. This will encourage more young oncologists to pursue lung cancer research.

Q: What is your greatest challenge as a physician, researcher, and Partnership Scientific Executive Committee Member?

A: My greatest challenge is finding time to balance everything. Given the current funding climate, my research colleagues and I have to write many grants annually to receive only one or a few to fund our research. This takes time away from everything else we need to do.

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

A: This is an exciting time for lung cancer therapy – we have many new therapies currently being evaluated and many more on the horizon. In addition, we are learning more and more how to match these treatments to the patients most likely to benefit from them.

Patient Points of Interest

Lung Cancer Research: Working towards preventing, screening, treating, and a cure

National Lung Cancer Partnership's Perspective

Today's lung cancer research arena, while under-funded by the federal government, is nonetheless yielding many promising diagnostic and therapeutic approaches that need more time and funding to ensure their success. Research in the fields of lung cancer prevention, screening, diagnosis, therapy, and symptom management seeks to determine how to best bring about successful interventions and treatments for lung cancer patients.

We at the National Lung Cancer Partnership are dedicated to doing all we can to prevent anyone from having to hear the words "you have lung cancer", and to ensure that if they do, the next words will be: "and we can treat it". We are funding many avenues of lung cancer research (see page 3 for our most recent research grant recipients), and championing the cause for added investment in lung cancer research at every opportunity, to fulfill our mission of decreasing deaths due to lung cancer and helping patients live longer and better lives.

We know that many individuals advocating for lung cancer research and progress are interested in studies that have suggested computed tomography (CT) scans can be used to screen for cancers when they are potentially curable by surgery. While there is great optimism surrounding the possible use of CT screening as a tool for early detection of lung cancer, our perspective is that this is only one facet of lung cancer research that deserves additional study.

Lung cancer prevention

Lung cancer has several causes. Although the vast majority (85%) of lung cancers are due to smoking, genetics and exposure to other toxins, such as radon, are also involved in disease development. While smoking prevention and cessation must remain a major medical and public health goal, understanding the other contributing causes of lung cancer can lead to additional gains in preventing the disease. Today's research is forming the base from which prevention agents may be developed.

Lung cancer screening tools

Until researchers find ways to prevent more lung cancers from occurring, we must learn to detect and treat the disease in the best, most efficient ways possible. Screening for lung cancer is a hot topic in lung cancer research, especially regarding the use of CT scans for lung cancer screening. Currently in controlled clinical trials, low-dose CT scans are being tested for people with a high risk for developing lung cancer to see if the scans will prove to save lives from lung cancer. The National Lung Cancer Partnership eagerly awaits the results from these trials (preliminary results expected in 2009), which will help determine if CT screening does save lives from the disease. Until CT screening is scientifically proven to be effective at saving lives from lung cancer, we continue to promote and invest in other

promising avenues of lung cancer research that have the potential to revolutionize the way lung cancer is prevented, detected, and treated.

We at the National Lung Cancer Partnership are dedicated to doing all we can to prevent anyone from having to hear the words "you have lung cancer", and to ensure that if they do, the next words will be: "and we can treat it".

No matter what the outcome of the CT screening trials, CT screening is aimed at "high risk" populations (those with a heavy smoking history or other major risk exposure, such as to second-hand smoke, and those with a significant family history of the disease). Other methods are being investigated as options to screen people at high risk for the disease, and perhaps, eventually, the general population. *There is new research in the field of biomarkers that looks particularly promising.* Biomarkers are molecules that indicate the genetic, molecular, or cellular changes that exist in tumor cells, or changes in the immune system that result from cancer being present in the body.

Research is being done to determine how to best access these biomarkers through the blood, breath, or sputum of an individual. Looking at an individual's breath, blood, or sputum for certain biomarkers could be used to indicate the likelihood of that person having lung cancer. If the blood, breath, or sputum tests showed an elevated risk that lung cancer might be present, a diagnostic procedure, such as a CT scan followed by a biopsy, would then be used to determine if there was lung cancer present.

More research needs to happen in the field of biomarkers before these blood, breath, or sputum tests can be used as lung cancer screening devices. If the tests show very high reliability in finding cancer, they could potentially be done on the entire population. If these tests were done on the entire population, biomarkers could help determine the risk of lung cancer even in people who have quit smoking (50% of all people diagnosed with lung cancer in the US) and in those who have never smoked (10-15% of all people diagnosed with lung cancer in the US). The potential of biomarkers research is immense; it is crucial that this research be promoted and supported.

Lung cancer treatment

Prevention and screening are only pieces of the lung cancer research puzzle. If we are eventually able to screen for lung cancer in every adult in the United States, we will find people who will have lung cancer and who will need to be treated. Simply *finding* the cancer doesn't save lives – *finding and treating* the cancer can yield cures from the

Continued on page 7

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Lung Cancer Voice is available on the web! You can now access current and back issues of this newsletter and our electronic newsletter by visiting www.NationalLungCancerPartnership.org and clicking on "Newsletter" at the bottom of the homepage.

Upcoming Events



The *Free to Breathe™* Run/Walk series is expanding! The National Lung Cancer Partnership and our dedicated volunteers are organizing more *Free to Breathe™* run/walks across the country! The *Free to Breathe™* Run/Walk series was started in 2006 to help raise awareness of the deadly impact of lung cancer and to increase funding for National Lung Cancer Partnership's research, education, and awareness programs. Please visit www.FreeToBreathe.org for more information and to learn how you can have a run/walk in your community.

Mark your calendar for these *Free to Breathe™* events:

Athens, GA – April 13, 2008

The 5K Run/Walk will be a great first annual lung cancer community event! Registration is \$15 until April 5 and \$20 after that date. The race will begin at 8:00 AM at Sandy Creek Park (400 Bob Holman Road).

Los Angeles, CA – August 3, 2008 –

Dockweiler State Beach, Playa del Rey
Glastonbury, CT – September 21, 2008 –
Glastonbury High School

Philadelphia, PA – November 2, 2008 –
Lloyd Hall at Fairmount Park

Raleigh, NC – November 8, 2008 – North Carolina State University Centennial Campus

Please check www.FreeToBreathe.org for updates and new locations.

Past Events

The 2007 *Free to Breathe™* 5K Run/Walk Events

The *Free to Breathe™* 5K and 1 mile run/walk in **Raleigh, NC** took place on Saturday, November 3, 2007. The event was a huge success, drawing 850 total participants. Our sincerest thanks to the **North Carolinians Against Lung Cancer** for organizing this event and to our title sponsor, **Duke Raleigh Cancer Center**.



Raleigh *Free to Breathe™* starting line

Second Annual Sarah Farmer Courts for a Cure Tennis Tournament – April 25 & 26, 2008

Come to Prestonwood Country Club (1509 Preston Road) in **Dallas, TX** on April 25, 2008, and Collin County Community College (Spring Creek Campus) in **Plano, TX** on April 26, 2008, for tennis, prizes, and lunch to honor Sarah Farmer and all who battle lung cancer.

First Annual United for Lung Health Federal Advocacy Day – May 13-14, 2008

Hundreds of lung health advocates are expected to descend on **Washington DC** on May 13-14, 2008, as part of the first annual United for Lung Health Federal Advocacy Day. Designed to forge a federal action agenda, the advocates will meet with legislators to encourage support of lung disease research, prevention and education programs and press the case for a national agenda and local initiatives. National Lung Cancer Partnership is proud to be a partner in this initiative.

Advocacy Day registration is \$125 per person to offset some meals, reception and conference room rental. Scholarships are available. Participants are responsible for their own hotel and transportation.

For hotel reservations and a schedule of events, visit www.unitedforlunghealth.org or contact Matt Maloney at the Respiratory Health Association of Metropolitan Chicago at (312) 628-0233.

Lung Cancer Advocacy Summit: Acquiring Tools, Effecting Change, presented by National Lung Cancer Partnership, will gather **May 27-29, 2008**, in **Chicago, IL**.

Lung Cancer 2008: Progress and Promise, National Lung Cancer Partnership's Annual Meeting, will take place at the Chicago Marriott Downtown in **Chicago, IL** on **Friday, May 30, 2008**, from 8:00 AM to 12:30 PM.

For more information about the Advocacy Summit and the Annual Meeting, please see page one of this newsletter or log on to our website, www.NationalLungCancerPartnership.org.

In the Press:

National Lung Cancer Partnership received over 80 media placements regarding the 2007 *Free to Breathe™* Run/Walk series. Some of the media placements include:

Philadelphia, PA – The Philadelphia Inquirer and the First Edition with JT on WCOJ-AM

Los Angeles, CA – The Los Angeles Daily News, the Sherman Oaks Sun, and the 5 AM, 7 AM and 11 PM news on KABC-TV

Raleigh, NC – The Raleigh News and Observer and the 11 PM news on NBC-17

A considerable excerpt from National Lung Cancer Partnership's patient education handbook, *Living with a Diagnosis of Lung Cancer*, was featured in **Coping** magazine's November/December 2007 issue (pages 29-30).

In a conscious effort to save resources, we try to send only one newsletter to each household. If you receive more than one copy, if your address has changed, if you wish to stop receiving *Lung Cancer Voice*, or if you prefer reading *Lung Cancer Voice* online, please email us at Info@NationalLungCancerPartnership.org or call us at 608-233-7905.



Top Philadelphia *Free to Breathe™* fundraising team, Team Debbie



Emmy Award-winning actress, Kathryn Joosten; Partnership Research Grant winner, Dr. Richard Pietras; and race volunteer, Janice McQueen Ward in Los Angeles

The second annual *Free to Breathe™* 5K run/walk and 1 mile walk in **Philadelphia, PA** took place on Sunday, November 4, 2007. Nearly 600 people participated this year. A special thanks to our fundraisers, sponsors and volunteers for making this event a success!

The *Free to Breathe™* 8K run, 5K run/walk and 1.4 mile walk in **Los Angeles, CA** took place on Sunday, November 11, 2007. Over 570 people participated in this inaugural event! A special thanks to our fundraisers, sponsors and volunteers for making this event possible!

The third annual **Great 108 Yogathon in Durham, NC** on December 21, 2007, was another successful event. This year, along with adult yogis of all ages, we had participation from lots of kids – a new and exciting addition! Thanks to the organizers and all the participants for gathering pledges to benefit National Lung Cancer Partnership's lung cancer research, public awareness, and education programs.

Support Research, Awareness, and Change

Continued from page 5

disease, and longer and better lives for those we can't cure. Research into lung cancer treatments is critical, not just for today's patients but also for the patients who will be diagnosed tomorrow, next month, or next year.

Through carefully constructed clinical trials, we now know that chemotherapy benefits even early-stage non-small cell lung cancer patients (stage IIA, IIB, IIIA), that the drugs bevacizumab (Avastin) and erlotinib (Tarceva) extend survival with advanced disease, and that prophylactic cranial irradiation (PCI) increases the length of life of people with every stage of small cell lung cancer. Many more therapeutic agents are in the research pipeline now; we hope to see several of them approved in the coming years.

Curing lung cancer

Of course, the ultimate goal for any researcher in the medical field is to find a cure for a specific disease – a cure that will save people who currently have lung cancer, or something to prevent anyone from dying of the disease. Prevention is a crucial piece to this puzzle, but prevention efforts will never keep all lung cancers from occurring. Therefore, a cure for lung cancer is what we all – researchers, patients, advocates – must strive for.

The more we know about preventing, screening for, and treating lung cancer, the closer we come to unlocking the mysteries of the disease and finding cures. It is our position that lung cancer research can't be narrowly focused. Until a particular prevention (other than eliminating tobacco use), screening, or treatment mechanism is proven, scientifically, to work and save or extend lives, we must continue to support other avenues of research designed to help lung cancer patients prevail over their disease. And all of the research that is done, whether it is ultimately used in the clinic or not, takes us one step closer to understanding the disease and one step closer to finding the cure.

Marketplace Continues to Expand: New Earrings for Sale

National Lung Cancer Partnership's Marketplace has grown again to offer a pair of beautiful Swarovski crystal earrings (\$20) to match the Swarovski crystal lung cancer awareness bracelet (\$50). When purchased together, the set of Swarovski crystal bracelet and earrings is only \$65. Other lung cancer awareness items on sale include clear wristbands (\$1), pewter lapel pins (\$4), and crystal lapel pins (\$5). Please visit www.NationalLungCancerPartnership.org to view all of our available merchandise and place an order.



Partnership's 2007 Annual Meeting reviewed in Journal of Thoracic Oncology

In our Fall 2007 issue of *Lung Cancer Voice*, we summarized National Lung Cancer Partnership's 2007 Annual Meeting. To read a detailed review of the scientific breakout session (not summarized in our newsletter), please see the *Journal of Thoracic Oncology's* February 2008 issue.

Informational Materials Available for Local Events

Many people from around the country are requesting our informational materials on lung cancer to distribute at awareness events, health fairs, and medical clinics. We would be happy to send you copies of our educational handbook, brochures, newsletters, and/or fact sheets for you to distribute at events. Please visit www.NationalLungCancerPartnership.org or call our office at 608-233-7905 with your requests. Be sure to let us know the date by which you need your materials!

New Blog by 6-year Lung Cancer Survivor, Lori Monroe

Lori Monroe, mother, nurse, National Lung Cancer Partnership's Lung Cancer Ambassador, and lung cancer survivor is writing a blog on her life with lung cancer called "Living With Lung Cancer...Through My Eyes". Lori was diagnosed with stage IV lung cancer in September 2001 and given 6-10 months to live. Now, 6 years after her diagnosis, she is writing a blog with the wish that she can somehow give others hope to live with lung cancer. (See page 2 for an excerpt from one of Lori's entries.) Visit www.NationalLungCancerPartnership.org/blog to read all about Lori's battle – both physical and emotional – living with lung cancer.

Partnership's Website Offers Wealth of Information

There are many references to the National Lung Cancer Partnership's website (www.NationalLungCancerPartnership.org) throughout this newsletter. Our website is full of helpful information for lung cancer patients, their families, friends and health professionals. You can find our patient education handbook, *Living with a Diagnosis of Lung Cancer*, and video, *Stories of Strength: Making the Decision to Enter a Lung Cancer Clinical Trial*, on our website. You can also find information like: fact sheets; internet resources; an "Ask the Expert" area; stories written by survivors and other lung cancer patients' families; and lung cancer awareness-raising events around the country! If you haven't visited our website recently, we encourage you to do so!

Donations can be made to National Lung Cancer Partnership by:

Mail: 222 N. Midvale Blvd., Suite 8
Madison, WI 53705
Phone: 608.233.7905
Fax: 608.233.7893
Email: info@NationalLungCancerPartnership.org
Online: www.NationalLungCancerPartnership.org

Memorial Giving:

Editors' Note: Donations to the National Lung Cancer Partnership were made in memory of the following people from May 2007 to September 2007. Their names were inadvertently left off the list in our last issue and we sincerely apologize.

Lauren Terrazano
Meng-Chin (Jean) Chen Tsai
Tammy Willett
Anne Woolner
Rebecca Work

Donations have been made to National Lung Cancer Partnership in memory of the following people (October 2007 to January 2008):

Betty	Gladys Virginia	Beth Kenny Foretic	Julie McMurray	Toni Sherwood
Caroline Sue Ann	Compton	Ruth Frerichs	Kennedy	Dorothy Silverman
Lauren	Fran Cornell	Teresa Fretard	Mary Ann Lermsider	Sandra Collins Simoes
Dennis John Babin	Jill Cotoia	Herbert Furstenburg	Martha McCann	Charlotte L. Simpson
Maureen Collins Babin	Les Cox	Michael Gaudreau	Lesnick	Sheree Swetin
Katherine L. Baker	Maxine Davis	Diana Goldstein	Carol Marks	Robin Tarantur
Rebecca Behncke	Lorraine Dean	Mac Hicks	Gail McBurney	Jan Tsois
Lorraine Blackwell	Estelle Flanagan	Dianna Marie Holcomb	Jan Palazzolo	Benjamin Tumolo
Natalie Angelo Bortolin	James Edgar	Evelyn Jahrmarkt	Roger Ruppel	Phoebe Valeo
Anne Caprinolo	Michael Ehmman	Karen A. Jessup	Marie Saito	JoAnn Walker
Hallie Carmen	Sarah Farmer	Valerie Kaufman	Sara Saunders	Anne Woolner
Bruno Ceschini	Estelle Flanagan	Betsy Meirick Kemeny	Phyllis Schwarzc	

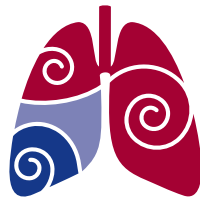
Please join us for these events:

Lung Cancer Advocacy Summit: Acquiring Tools, Effecting Change
May 27-29, 2008
Chicago, IL

National Lung Cancer Partnership's Annual Meeting
Lung Cancer 2008: Progress and Promise
May 30, 2008
The Chicago Marriott Downtown, Chicago, IL

See inside for more information about these and other upcoming events.

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.



**National Lung
Cancer Partnership**
WOMEN. RESEARCH. CHANGE.

222 N. Midvale Blvd, Suite 6 Madison, WI 53705

