



SPECIAL CANCER
ISSUE 2021

Stay Healthy

YOUR RESOURCE
FOR HEALTHY LIVING
AND WELLNESS

◆ Stephanie Sullivan
(left) uses the UHS
Specialty Pharmacy
for mom, Sharon Rea's
(right), chemotherapy
medication.

connecting CARE

CONFIDENCE AFTER CANCER

3D tattooing helps
breast cancer
patients feel better
about their bodies

CANCER DOESN'T WAIT

Now is the time to
get screened

The UHS Specialty Pharmacy makes life easier
for patients with serious illnesses

Cancer care that makes a difference

Our cancer care team at UHS stands ready to provide the full spectrum of care, from prevention and screening to diagnosis, treatment and recovery. Our providers work



to ensure that the hundreds of patients who receive oncological services at UHS annually can travel a seamless path that's as comforting, effective and, ultimately, beneficial as possible.

Our approach to care features advanced protocols, enrollment in national clinical research and the use of cutting-edge therapies and technologies, all delivered by specialists and other members of our clinical team who are devoted to excellence. Yet, throughout our organization, the technical merits of what we offer never outweigh the human touch in personalized, compassionate care. Our people never lose sight of the significance of the total patient experience or the value of engaging each patient as part of the care team.

This commitment to quality has led national medical agencies and organizations to take notice of our cancer program and recognize us with awards and citations for stellar performance. This signifies that UHS is on the leading edge of understanding the science of cancer care and providing treatments that are specific and effective. It means we are among those medical centers that can treat cancers using the full battery of medications, procedures, chemotherapy, radiation and stereotactic radiosurgery to counteract the disease.

In addition, we are a resource for support services that can benefit the cancer patient and their loved ones. Support groups, dietary assistance and help with follow-up medical appointments can ease the burdens and challenges that are being faced.

If you and your family are ever dealing with a cancer diagnosis, you can be assured that your UHS care team will stay connected with you. We are committed to ensuring that you have the support you need to remain strong and resilient every step of the way.

John M. Carrigg
PRESIDENT & CEO OF UHS



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A Helping Hand

Sock Out Cancer provides financial support to cancer patients

A cancer diagnosis can turn a person's world upside down. Along with increased stress and anxiety, patients may also be burdened with extra expenses. Sock Out Cancer, a creative and generous community effort that began in 2017, has raised more than \$800,000 over the last five years to help cancer patients and their families pay for practical, nonmedical needs, such as transportation, utility bills, groceries, rent or mortgage payments.

Launched by the Binghamton-based Security Mutual Life Foundation, Sock Out Cancer raises money through the sale of colorful socks and the presentation of community events, including a 5K run/walk benefit that took place in September and a series of live concert benefits that took place in October. The multi-hued socks (the colors represent the fight against the many types of cancer in all of its forms) are sold online and at local stores for \$10 a pair.

Funds raised through Sock Out Cancer are distributed to participating hospital foundations, including the UHS Foundation, and social workers at UHS help the Foundation determine who needs the extra support.

"Sock Out Cancer is an amazing cause," says Andrea Mastronardi, development manager of the UHS Foundation. "It allows our patients to funnel all of their strength into fighting cancer instead of worrying about things like how they're going to pay their monthly rent or an upcoming utility bill."



MAKE A DIFFERENCE

To learn more about Sock Out Cancer, buy socks or donate to support local cancer patients, visit sockoutcancer.org.

DO YOU SMOKE?



Cigarette smoking is the No. 1 preventable cause of death in the U.S. Lung cancer accounts for about 25% of all cancer deaths and is the leading cause of death from cancer in both men and women. While lung cancer is treatable if discovered early, only 16% of lung cancer cases are found at an early stage. Early diagnosis increases the survival rate for lung cancer, and if you smoke, you should discuss lung cancer screening options with your doctor.

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Cancer Doesn't Wait

If you skipped screenings due to the pandemic, now is the time to get screened

Cancer screenings are an incredibly valuable tool. “The whole purpose of screening for any disease process is to find the disease in its earliest stage of progress when it’s easier to treat or easier to cure,” says Michael J. Farrell, MD, co-medical director of the UHS Breast Center. While this is true of most diseases, it is particularly important for cancers such as breast cancer, colorectal cancer, lung cancer and cervical cancer, among others.

Understandably, many people avoided in-person doctor’s visits for routine checkups or screenings due to the COVID-19 pandemic. “During the height of the pandemic, our mammography numbers were down considerably,” says Dr. Farrell. He explains this is concerning because it means people with cancer may not be diagnosed at an earlier stage when it is more treatable.

If you think you might be due for a screening, now is the time to talk to your doctor. Refer to the chart at left for recommendations on who should be screened for cancer and how often.

| CANCER TYPE | POPULATION | RECOMMENDATION |
|-------------------|---|---|
| Lung Cancer | Adults age 50 or older who have been heavy smokers for 20 years or more | Make a shared decision about screening with your provider. |
| Breast Cancer | Women age 40 years and older with average risk for breast cancer | Yearly screenings, with additional screenings and surveillance for high-risk patients. |
| Colorectal Cancer | Adults age 45 years and older with average risk for colorectal cancer | Many options for colorectal cancer screening exist, including colonoscopy, imaging tests and stool-based tests. Discuss the best option for you with your doctor. |
| Cervical Cancer | Women ages 25 to 65 years | Pap smear every 3 years or pap with HPV testing every 5 years. For abnormal pap results, screening frequency increases. |



GET SCREENED TODAY

For more information about cancer screening services at UHS, visit nyuhs.org/care-treatment/cancer.

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Sources: National Comprehensive Cancer Network and the American Cancer Society

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Deborah Giannone, FNPC, director of the Lung Screening Program for UHS Medical Group, explains that yearly lung cancer screenings help find cancer early in smokers. If you are screened regularly and you develop lung cancer, it will be caught before it has the time to grow into a larger problem. Screenings are done through low-dose computed tomography (LDCT), which limits the amount of radiation the patient is exposed to. “It is also painless

and noninvasive,” adds Ms. Giannone.

If you smoke and are apprehensive about getting screened, Ms. Giannone recommends taking that first step. “We don’t want to make smokers feel bad about smoking,” she explains. “We’re here to help, not judge. We want to do what we can to help you, including screening, but also having conversations about quitting smoking and the options that are out there for people.”



IT'S NOT TOO LATE!

If you smoke and haven’t been screened for lung cancer, consider starting the conversation with your provider. Find a UHS provider who can help at nyuhs.org.



◆ Pharmacists welcome patients at the UHS Specialty Pharmacy.

◆ Stephanie Sullivan (left) uses the UHS Specialty Pharmacy to pick up chemotherapy medication for her mother, Sharon Rea (right), at a convenient community location.

connecting CARE

The UHS Specialty Pharmacy makes life easier for patients with serious illnesses

When a patient is dealing with a serious illness like cancer, the last thing they want to worry about is where their medications are going to come from or how much the prescriptions will cost. Making the treatment process easier for patients dealing with these types of illnesses is a priority for UHS, which is why the organization opened the UHS Specialty Pharmacy at UHS Binghamton General Hospital.

The UHS Specialty Pharmacy Program provides patients with peace of mind by connecting their clinical care with pharmacy care. With the help of pharmacists and pharmacy liaisons, patients can get their prescriptions filled easily and efficiently—sometimes at a lower cost to them out of pocket—and their questions answered in a timely manner.

CONVENIENT AND RELIABLE

The UHS Specialty Pharmacy is for patients with complex diseases, such as cancer, diabetes, rheumatoid arthritis, hepatitis C, skin conditions or gastrointestinal illnesses, says Pamela Krolczyk, RPh, pharmacist at UHS Specialty Pharmacy. “In the future, we’re also going to provide medications for addiction treatment.”

UHS started the Specialty Pharmacy so that the hospital could treat the whole patient, from diagnosis to clinical care to treatment. Patients don’t have to order their prescriptions outside of the hospital, which helps with cost savings and medication adherence. In many cases, patients can get their prescriptions filled more quickly than they could through retail pharmacies or specialty pharmacies outside of their community. Having this service close by also reduces stress for patients, as Stephanie Sullivan can attest.

Ms. Sullivan utilizes the Specialty Pharmacy for her mother, Sharon Rea, who takes chemotherapy medication for her triple-negative breast cancer. Ms. Rea was using an offsite mail-order service prior to the Specialty Pharmacy but “started having a lot of issues with that company,” Ms. Sullivan says.

“We never knew when the medication was coming or if it was approved [by insurance], which is a huge burden on someone who is going through cancer,” she recalls. “My mother would get extremely stressed out if her medication wasn’t there on the day she was



supposed to start chemotherapy. She would worry, ‘Is this going to affect my treatment? Will my cancer come back?’”

Now, Ms. Sullivan can stop into the Specialty Pharmacy each month, pick up her mother’s prescription and bring it to her before she needs to take her next dose. “It’s routine,” she says. “My mother likes things to be a certain way, so I bring her the medication on Tuesdays, and she’s ready to take it on Fridays.”

Ms. Sullivan manages her husband’s chiropractic office in Endicott, New York, so it’s convenient for her to go to the Specialty Pharmacy in Binghamton after work. “It’s always a smooth process,” she says. “They deal with insurance, they tell me exactly what my mother’s copays are, and I don’t even have to call it in—they call me when the prescription is ready. At this point, they know who I am right when I walk through the door.”

QUALITY SERVICE—EVEN AT HOME

For patients who can’t physically go to the Specialty Pharmacy to pick up their prescriptions, there is the option to have them safely mailed to their homes.

✦ For Stephanie Sullivan (right), picking up specialty medications for her mother, Sharon Rea (left), at the UHS Specialty Pharmacy is a “smooth process.”

INDIVIDUAL ATTENTION

The Specialty Pharmacy at UHS provides great service in part because of its pharmacy liaisons. These staff members are the go-between for doctors, patients and other pharmacy staff, says Pamela Krolczyk, RPh, pharmacist at the UHS Specialty Pharmacy. As soon as UHS doctors order medications for their patients, the pharmacy liaisons get to work.

“They make sure we can get the medications for patients, as well as look for means to defray the cost of copays to lower the out-of-pocket cost for patients,” Ms. Krolczyk says. This is important, because medications for patients with complicated disease states can be expensive, she adds.

Once patients are onboarded and under the UHS Specialty Pharmacy’s services, the liaisons call them to go over everything patients need to know about their treatments, including dosage information and delivery dates, as well as to make sure they adhere to their medications by asking if they have any problems or questions. The liaisons then relay need-to-know information from patients to the pharmacists or clinical staff.



✦ The UHS Specialty Pharmacy located at UHS Binghamton General Hospital helps patients get the unique medications they need.



✦ Sharon Rea (left) switched to the UHS Specialty Pharmacy for her chemotherapy medication after having issues receiving it by mail from another source.

HERE TO HELP

The UHS Specialty Pharmacy is located on the first floor of the Krembs building at UHS Binghamton General Hospital. It is open Monday through Friday from 9 a.m. to 5:30 p.m. Contact the pharmacy at **607-352-5948**, or visit nyuhs.org/care-treatment/pharmacy/specialty-pharmacy for more information.

“We ship medications to homes, either by courier or UPS,” Ms. Krolczyk says. “We have medications that require strict adherence to temperature guidelines, so we use special packaging materials and ship overnight for a lot of them.”

The Specialty Pharmacy has dual accreditation from both the Utilization Review Accreditation Commission and Accreditation Commission for Health Care, which are organizations that specifically audit specialty pharmacy programs to ensure best practices are being met.


“To have accreditation from both of these organizations is a big stamp of approval,” Ms. Krolczyk says. “It means we meet high standards” when it comes to processes, including cold-packing and shipping, as well as patient outcomes.

Mary Ann Marinelli has been using the home-delivery service for about three months. The 74-year-old Norwich, N.Y., resident used to get infusions at UHS to treat her cancer but switched to a chemotherapy medication when the infusions were no longer viable. Ms. Marinelli says not only is the home-delivery service convenient, but the availability of the pharmacists and pharmacy liaisons to answer her questions is comforting.

“I like that they’re available—when you call or leave a message, they’re quick to get back to you,” she says. “I was having a few problems with my prescription, so I called, and the person I spoke to gave me some advice on what to do ... it solved my problem, and I was very grateful.”

Even though Ms. Marinelli doesn’t visit the UHS Specialty Pharmacy in person, she considers the service a big part of her support system.

“When you’re facing something like this, it’s always good to know that there are people you can reach out to who will help you,” she says. “I have family, but nobody really understands [what I go through]. This has been going on for about two years now, and I’m not the same person I was before. These people seem to know how to help and answer my questions.

“Support is everything,” she adds. “You can take pills forever, but it’s the voice on the other end of the phone that really makes a difference.” 



3D tattooing helps breast cancer patients feel better about their bodies

✦ 3D areolar tattoos are performed on breast cancer patients by Heather Foley, nurse practitioner at UHS Plastic & Reconstructive Surgery/Hand Surgery, at UHS Binghamton General Hospital.

After doing some research, Ms. Foley attended an accredited micropigmentation school to learn how to perform the complex 3D tattooing technique. “The 3D technique makes the tattoo more realistic,” she explains. “Women generally do not have the same shape or size breasts they had prior to breast cancer. Creating an areolar complex using different color inks and shading brings them closer to a more realistic result.”

Ms. Foley performs the tattooing at her office, located in UHS Binghamton General Hospital. This provides a medical environment for the procedure that may be more comfortable than a tattoo studio or a spa and allows the procedure to be billed through the insurance, creating a continuity of care for patients. Many are patients of the plastic surgeons in her office, with whom she has an established working relationship.

“Once cleared by the plastic surgeon, we schedule an initial consult, review their history, identify their needs and explain the process,” she says. “On tattoo day, they come into a very relaxed environment. For patients who are

apprehensive about getting a tattoo or experience hypersensitivity, I have a variety of distractions, including topical numbing cream. It’s the final stage of a long, reconstructive process, and together with our team of plastic surgeons, this makes our office unique.”

For Ms. Foley, the best part of her job is seeing her patients’ reactions after the tattoo is done. “Seeing their faces when they look in the mirror is priceless,” she says. “It’s either tears of joy or a big ‘Wow!’ When a woman loses that part of their womanhood, they may be cancer-free, but they don’t feel whole. My goal for patients is not to avoid the mirror, but to see the new version of themselves. It is amazing how a small amount of ink can have such a huge impact in a woman’s life: regaining self-esteem and confidence, and feeling whole again.”

confidence AFTER CANCER

Breast cancer is life changing. Even after successful treatment, some women are not happy with what they see, often avoiding the mirror. Terms like “Barbie doll,” “science project” or “disfigured” have been used describing their reflection. Seeing and hearing these comments after breast reconstruction surgery, Heather Foley, FNP-BC, RNFA, the nurse practitioner at UHS Plastic & Reconstructive Surgery, decided to take things into her own hands—literally—by learning how to tattoo.

“Often, I assist the breast/general surgeon with the mastectomy, and I assist our plastic surgeons with the subsequent reconstruction,” she says. “A few years ago, I saw a patient who had 3D areolar tattoos done out of the area. I thought, ‘I can do that.’” The tattoos are done on patients’ reconstructed breasts, creating the illusion of a three-dimensional areola using ink.



GET CHECKED

Breast cancer affects about 1 in 8 women in the U.S. over the course of their lifetime. Learn more about recommendations for mammography on page 3 of this issue, or visit nyuhs.org.

prevention plan

4 tips for reducing your cancer risk

Cancer has many causes, from lifestyle choices to inherited genes. However, most cancers are not clearly linked to a genetic cause, according to the American Cancer Society (ACS). This means that the majority of cancers can be attributed, to some degree, to our lifestyle choices and behaviors. Although you can never completely eliminate the threat of cancer, there are many ways to reduce your risk. Here are a few suggestions to implement in your daily life to stay healthy and prevent cancer.

DON'T SMOKE

Smoking is the No. 1 preventable cause of death in the U.S. It causes about 20% of cancers and is responsible for about 30% of cancer deaths. While it is most often associated with lung cancer, smoking can also cause many other types of cancer, including mouth, esophagus, kidney, and colon cancer, among others. Quitting smoking reduces your risk of many diseases and can add as much as 10 years to your life. Even heavy smokers will benefit from quitting, no matter their age.

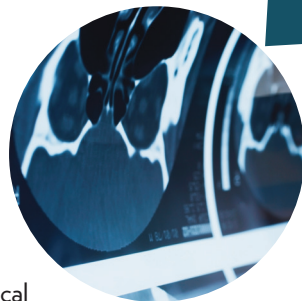


EAT HEALTHY

Eating a diet full of whole foods and high in fruits, vegetables, and other plant-based foods has many health benefits, including reducing your risk of cancer. The Mediterranean diet—based on fruits, veggies, whole grains, legumes, and nuts—has even been shown to reduce breast cancer risk in women.

GET SCREENED

It's impossible to fully prevent cancer. However, if you receive regular medical care and talk to your doctor about appropriate screenings, you can catch cancer early, greatly increasing your likelihood of successful treatment. There are screening tools for many types of cancer, including colorectal, lung, and breast cancer. Start a conversation with your doctor about screenings to determine what is best for you. For cancer screening recommendations, check out page 3 of this issue.



PROTECT YOURSELF FROM THE SUN (EVEN IN WINTER)

According to the ACS, most skin cancers can be linked to exposure to ultraviolet (UV) radiation. UV radiation is most commonly found in sunlight, but it also can come from other sources such as sunlamps or tanning beds. While UV rays are stronger during the spring and summer, they can also bounce off of snow (or other surfaces like water, sand, pavement, or grass) during the winter, increasing your exposure. Wearing sunscreen and avoiding the sun during its peak hours of 10 a.m. to 4 p.m. can protect you.

CHECK IT OUT

Learn more about cancer screenings on page 3 of this issue, or at nyuhs.org/care-treatment/cancer.

THE LATEST FROM UHS ONLINE

Sign up for our e-newsletter, and receive the latest UHS updates and stories from our community direct to your inbox. Visit stayhealthyuhs.org.

