ALC CANCER CENTER

HERO'S Clinic Opens

for Survivors of Childhood Cancer

WITH AN EVER-INCREASING number of survivors of childhood cancer, researchers and clinicians at Yale are recognizing the need to provide continuing support for patients who have been cured of a childhood cancer. The overall 5-year survival rate for childhood cancers now exceeds 70%. These survivors are subsequently at risk for harmful after-effects due to their malignancy or course of treatment. The HERO'S clinic is scheduled to open at Yale in February and will be a bi-monthly clinic offered for individuals who were treated for childhood cancer over five years ago. This will include children, adolescents, and adults. "We plan for this to be a highly specialized resource for our patients to supplement the care that they receive from their primary care doctors," Nina Kadan-Lottick, MD, MSPH, Medical Director of the clinic said.

It is estimated that one in seven hundred adults is a survivor of a childhood cancer, and while they enjoy a healthy, active lifestyle they are at increased risk for both physical and psychosocial prob-



Above Clinic Organizers Rachel Goldbreg-Gell, APRN, Sheila Santacroce, PhD, APRN, Stuart Weinzimer, MD, and Nina Kadan-Lottick, MD

lems including subsequent neoplasms, congestive heart failure, osteoporosis, decreased fertility, post-traumatic stress disorder, and learning disabilities. The HERO'S Clinic will provide comprehensive care for childhood cancer survivors, as well as education for survivors and their families. Though the primary goal of the clinic is to provide high quality care, it also represents an opportunity

continued on page 4

Glazer Appointed Chair of Therapeutic Radiology



Above Peter Glazer, MD, PhD

PETER M. GLAZER, MD, PHD, was recently appointed Chair of the Department of Therapeutic Radiology. A graduate of Yale University's School of Medicine MD/PhD program, Glazer joined the faculty at Yale eleven years ago. In the past decade, Glazer has concentrated both on research interests, specifically the cellular response to DNA damage, and on clinical activities. He serves as Co-Director of Yale Cancer Center's Molecular Oncology Research Program. Until his recent appointment as Chair, Glazer served as the Medical Director of the radiation therapy facility at the William W. Backus Hospital in Norwich, which is affiliated with and staffed by Yale-New Haven Hospital. Previously he was also the Director of the radiation therapy facility at the Uncas-on-Thames Hospital, also affiliated with Yale

Therapeutic Radiology has for decades been an integral component of an oncology patient's care. Although radiation was

initially used successfully in lymphoma and cervical cancer patients, research and technology has expanded its use to treatments of virtually all types of cancer. The latest technological advances allow radiation oncologists to even more specifically target the cancerous tissues or tumor, while limiting radiation exposure to the surrounding healthy tissues. The introduction of Intensity Modulated Radiation Therapy (IMRT) to the Hunter Radiation Therapy Clinic at Yale has given oncologists an even greater ability to target malignant areas effectively.

"The department works to incorporate emerging technology into the clinic as fast as we can in order to benefit our patients. The context of our academic setting allows us to do this while focusing on clinical research, enabling us to also help refine the technology and to contribute to the field as a whole," Glazer explained.

Glazer places the patient's needs at the forefront when discussing his goals for the department. Therapeutic Radiology consistently ranks in the top two or three departments in surveys of patient satisfaction, a placement Glazer relishes and has pledged to work hard to maintain. Currently he is looking to implement whole body radiosurgery at Yale, a first for the State of Connecticut. "We are aim-

Costa Honored with Josep Trueta Medal by Catalan Government

Dr. José Costa, Deputy Director of Yale Cancer Center and Professor and Vice Chairman of Pathology, has been honored by the Catalan Government with the Josep Trueta Medal for his outstanding contributions to the healthcare and science fields. The medal, which was



given to Dr. Costa on February 1st in Barcelona by the President of the Catalan government, Mr. Jordi Pujol, recognizes scientists who have had a profound impact on the scientific community in Catalonia.

Dr. Costa is a member of the Scientific Advisory Board of the Catalan Institute of Oncology. Born and educated in Barcelona, he has kept close ties to the scientific community there. Dr. Costa's research interests at Yale include carcinogenesis and tumor progression, he is also the Principal Investigator of the Marcia Israel Laboratory for the Earlier Detection of Breast Cancer.

The Josep Trueta medal was created in 1997 in honor of the one hundredth anniversary of Trueta's birth. Trueta was Catalan orthopedic surgeon, who developed a method of treating battlefield open fractures during the Spanish Civil War. He was Chair of Orthopedic Surgery at Oxford University, where he conducted seminal work on the renal circulation and the formation of bone tissue.

continued on page

STAFF BRIEFS

Theodore Holford, PhD was named the Susan Dwight Bliss Professor of Epidemiology and Public Health. Dr. Holford's research is focused on trends in cancer epidemiology are described.

Theresa Karl, RN has joined the staff of the Clinical Trials Office. She is a clinical research nurse and will be working on Phase I clinical trials, primarily focused on lung cancer.

Dr. Charles Lockwood, Chair of the Department of Obstetrics and Gynecology, has been named the Anita O'Keefe Young Professor of Women's Health.

Ruth McCorkle, RN, Director of Cancer Control for Yale Cancer Center, was honored with the University of Connecticut School of Nursing Distinguished Scholar Award for her outstanding contributions to cancer nursing and education.

Gayle B. Mirto, RN has joined the Clinical Trials Office. Mirto is a clinical research nurse and will serve as the Community Coordinator for Protocols developed by Yale physicians, which are being reproduced outside of Yale in community doctor's offices and hospitals.

Nancy H. Ruddle, PhD has been appointed the John Rodman Paul Professor of Epidemiology and Public Health. Ruddle is recognized for her discovery of the protein lymphotoxin, which is produced by T cells and destroys tumor cells.

President Richard Levin appointed Peter Salovey, PhD Dean of the Graduate School of Arts and Sciences. A member of Yale Cancer Center, Dr. Salovey served as Chair of the Department of Psychology prior to accepting the position as Dean and is the Chris Argyris Professor.

Julie Ann Sosa, MD has been recruited to develop a surgical health services research program at Yale. She is an Assistant Professor of Surgical Oncology and performs pancreatic and gastrointestinal surgery.

Michael Snyder, PhD has been appointed the Lewis B. Cullman Professor of Molecular, Cellular, and Developmental Biology. Snyder is also the Director of the Yale Center of Genomics and Proteomics.

Yale CANCER CENTER

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A Comprehensive Cancer Center Designated by the National Cancer Institute

Mohs Surgery for the Treatment of Skin Cancer

ALTHOUGH DR. FREDERIC Mohs at the University of Wisconsin developed Mohs surgery in the 1930's, the procedure remains unfamiliar to the more than 1.2 million skin cancer patients diagnosed each year in the United States. Mohs surgery differs from other skin cancer treatments in that it allows immediate microscopic examination of the removed cancer tissue, ensuring that all extensions of the cancerous area can be removed. "Mohs surgery is blossoming now as more patients and referring physicians become aware of its benefits and extremely high cure rates," Dr. Sumaira Aasi, a surgeon in the Department of Dermatology explained.

While Mohs surgery is not appropriate for all types of skin cancer, the treatment is ideal for skin cancers that are most likely to extend further than what can be appreciated clinically: those that are in a cosmetically sensitive area such as the crevices of the face and around the eyes and ears, cancers that are



Above Sumaira Aasi, MD and David J. Leffell, MD

rapidly growing, or recurrent skin cancers. Cancer, which has become deeply rooted in the skin, is hard to cure using common skin cancer treatments that rely on the surgeon's eye to determine the extent of cancer in the skin.

Due to the extensive examination of the cancerous tissues while the surgical procedure is performed, Mohs surgery allows all of the skin cancer to be removed. The surgeon carefully removes layers of tissue and examines them individually until the cancer is no longer present in the tissue layer; this ensures that all cancer has been removed from the area. Each tissue specimen is mapped and slides are created allowing the surgeon to determine exactly where the cancerous cells are located. This enables the surgeon to continue removing the tissue from that specific area until there is no cancer present, while sparing normal tissue.

Patients are given local anesthesia for the office-based surgery, which takes an average of two to three hours. The majority of that time is spent waiting while slides are processed and reviewed. Plastic reconstruction is performed as soon as the cancer has been removed; the Mohs surgeon utilizes a variety of techniques such as simple closure, flaps, or grafts. Because Mohs surgery is a tissue sparing technique, occasionally, the resulting wound is so small that allowing it to heal naturally results in the best cosmetic appearance. For very large skin cancers, the Mohs surgeons will collaborate with plastic surgeons who will do the reconstruction. Mohs surgery is the most precise method of removing skin cancer; it offers the highest cure rate, up to 99% when treating basal and squamous cell carcinomas, the lowest chance of regrowth, and greatly minimizes scarring.

Mohs surgeons are required to have specialized training in a one to two year fellowship with a practicing Mohs surgeon. "Mohs surgery provides special advantages to the patient: the Mohs surgeon is trained to remove the cancer, study it under the microscope in a specialized fashion, and repair the wound if necessary. This takes place in the office setting in one session," Dr. Aasi said. Dr. Aasi completed her fellowship under David J. Leffell, MD, Professor of Dermatology and Surgery at the Yale School of Medicine, Director of the Yale Medical Group. Dr. Leffell is the author of *Total Skin: The Definitive Guide to Whole Skin Care for Life*.

Kimbery Manhard, a patient of Dr. Leffell's who traveled from California to have him perform Mohs surgery twice, came for the experience Drs. Leffell and Aasi offer. "It was difficult to find a surgeon in California who performed the Mohs procedure on a regular basis; I was comfortable with Dr. Leffell's experience." Manhard also commented on the friendly environment in the dermatology practice, "Patients feel at ease and supported while they are waiting for their results."

The Yale Mohs Surgery Unit is a division of the Department of Dermatology within the Yale Medical Group. Due to the increased incidence of skin cancer and the efficiency of the process in the office setting, Drs. Leffell and Aasi, who see patients by physician referral, are able to treat approximately 40 patients a week in the Mohs Surgery Unit. For more information on their practice or on Mohs surgery, please contact the Yale Dermatologic Surgery office at (203) 785-3466.

Yale Cancer Center welcomes Dr. Charles J. Lockwood, who joined Yale School of Medicine this past year as Chair of the Department of Obstetrics and Gynecology and the Anita O'Keefe Young Professor of Women's Health. Dr. Lockwood is also a member of Yale Cancer Center. He is the former Interim Director of the New York University's Kaplan Comprehensive Cancer Center. Dr. Lockwood's practice concentrates on high-risk obstetrics such as pregnancy loss and preterm delivery, his NIH-funded research focuses on the regulation of endometrial homeostasis and angiogenesis in obstetrical and gynecological disorders as well as endometrial carcinoma. To contact his office, please call (203) 737-2970.



Above Charles J. Lockwood, MD

Yale Cancer Center held the annual Patient and Family Holiday Party for those touched by cancer on Tuesday, December 3rd. The party was attended by over 200 guests and allowed many current and former patients to visit with one another and their doctors. Dr. Vincent T. DeVita, Jr., Director of Yale Cancer Center, greeted the guests and introduced other physicians attending the party. The Villore Fund donated the party in honor of the Yates family.



Above Dr. Vincent T. DeVita, Jr. addresses the guests. **Above, right** Dr. Stuart Seropian speaks with a guest at the holiday party. **Left** A mother and daughter enjoy themselves at the party.



community

A Touch of Comfort

Patients on the transplant unit can now feel more at home during their long days in isolation thanks to A Touch of Comfort. James Pite, who battled Hodgkin's Disease, and then leukemia, for over six years before passing away, founded A Touch of Comfort. Pite wanted to help make patients more comfortable while they were in the hospital; Comfort Bags by A Touch of Comfort were quickly developed. The organization is a non-profit charitable corporation formed to help improve the quality of life for cancer patients, and to provide them and their loved ones with amenities they otherwise may not have during treatment.

Sheila Pite, James's mother, and his sister, Carol Doheny, continue his tradition by deliver Comfort Bags to patients on the Transplant Unit, which include everything from soft toilet paper and tissues to personal radios, phone cards, and gift certificates. The patients also select two gifts from a wish list before admission. The charity has also outfitted the four transplant rooms with answering machines and stereo systems and is looking ahead to adding laptops. "We are working hard to carry on what James began," Sheila said.



A Touch of Comfort maintains three branches, one at Beth Israel Deaconess Medical Center in Boston where James was treated, one at Yale Cancer Center, and another fundraising arm in New York City established by family friends. For more information on the organization or to make a monetary donation or a contribution to their Comfort Bags, please call (203) 795-6148 or go to www.atouchofcomfort.org

LEFT Carol Doheny and Sheila Pite delivering Comfort Bags to patients in the transplant unit.

Raffle Gave Winners a Complete Thanksgiving Dinner



The staff of the Medical Oncology Clinic once again brightened the Thanksgiving holiday for some of their patients. Ten food baskets were given away the week of Thanksgiving in a free raffle offered to the patients in the clinic. The staff of the clinic donated all of the food and preparation time. One of the recipients is pictured at left with some of the contents of his basket.

continued from page 1, Glazer

ing to continue to offer cutting edge technology and service to our patients in an effort to constantly upgrade their care; I am very happy to be taking on this challenge," Glazer said.

The Therapeutic Radiology Clinic will also be expanding in the next year with the development of a new satellite clinic offering state-of-the-art equipment in Guilford. "We are delighted to have the opportunity to be able to bring the high quality cancer care we offer in the Hunter Clinic to the shoreline," Glazer said.

For more information on the technology available at Hunter Radiation Therapy Clinic or the upcoming satellite office in Guilford please contact Dr. Glazer's office at (203) 737-2788.

Frisbee Foundation Supports Art

Therapy Program for Pediatric Patients

PEDIATRIC CANCER PATIENTS will continue to benefit from the successful Art Therapy program offered in the clinic thanks to the ongoing support of the Richard D. Frisbee, III Foundation. The program, which is available to patients and their siblings, is offered four times a year and enrolls up to 60 children per session. The children are encouraged to tap into their creativity to construct a ceramic art project with the help of Frisbee Foundation volunteers, clinic staff, and their parents.



"It gives the children a sense of pride and control in a world where they have little control. For a brief time, it gives them respite from the difficult treatments that they must endure and allows them the freedom to simply 'be a kid' again," Christine Frisbee, Chairman of the Frisbee Foundation, remarked.

The Frisbee Foundation was founded in 1990 in memory of Richard D. Frisbee, III. Richard developed acute leukemia in 1988 at the age of 14; he was the first child in Connecticut to receive a bone marrow transplant at Yale-New Haven Hospital.



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The Frisbee Foundation supports research, patient needs, and professional education in an effort to further developments in childhood cancer treatment, help patients and their families during treatment, and continually provide education opportunities for healthcare professionals.

For more information on the Frisbee Foundation please contact their office at (203) 966-1960, www.frisbeefoundation.com

continued from page 1. HERO's Clinic

for health care professionals to learn more about the full-range of issues that face childhood cancer survivors through potential research

The focus of the clinic will be on preventive guidance and education to empower survivors to take steps to maximize their health, quality of life and longevity. This is a very different model from the acute care Pediatric Oncology clinic where curative treatment and palliative care is rightly the primary focus. Up until now, survivorship care has been given in the acute care clinic, and those involved hope that the HERO'S clinic will fulfill a gap in patient care. "I believe we have an ethical responsibility to inform survivors, their families and the community of new knowledge about the late effects of childhood cancer and its treatment, and to take a leadership role in developing and using that knowledge. Up until now there was no mechanism to do so here at Yale," Sheila Santacroce, PhD, APRN explained. Santacroce is currently Assistant Professor at Yale School of Nursing and will serve as Nursing Research and Education Director for HERO'S.

Rachel Goldberg-Gell, APRN, who completed her Master's at the Yale School of Nursing, has always had a special interest in survivors of childhood cancer. Goldberg-Gell is an Advanced Practice Nurse in the acute Pediatric Oncology Clinic and will serve as the Clinical Nurse Coordinator for the HERO'S Clinic. "My main goal is to have a program at Yale where survivors can feel their care is important, they truly deserve the time we can put forth," Goldberg-Gell said.

Organizers of the clinic are hoping primary care providers will recognize the special services offered through the HERO'S clinic and refer patients for comprehensive consultations. Summary reports, compiled by the clinic team, which will identify direction for risk-based monitoring as well as education about specific treatment-related health risks would then be created for the survivor and their primary care physician. "Patients will come away from the clinic with a written summary and advice for the future in an effort to minimize complications from their previous cancer care," Kadan-Lottick explained.

The HERO'S Clinic joins a group of only twenty-four follow-up clinics for childhood cancer survivors nationwide. For more information or to make an appointment please call (203) 785-3544 and specifically ask for an appointment in the HERO'S Clinic.

Local Artist Celebrates Dr. Mel in Painting



Jennifer Newton, owner of the Shoreline Art Gallery in Westbrook, has donated a Linocut of Dr. Mel Goldstein to Yale Cancer Center in celebration of his continuing efforts to raise money dedicated to finding a cure for multiple myeloma. Dr. Mel was diagnosed with multiple myeloma in 1997 and continues treatment today. He created the Dr. Mel Goldstein Multiple Myeloma Fund at Yale Cancer Center in an effort to recruit a myeloma specialist to Yale. Newton has donated a portion of her artwork

sales to the fund. "It is nice to do something good with the proceeds I made from my work," Newton explained.

The Linocut will hang in Yale Medical Group's Artplace beginning in March. For more information on making a contribution to Dr. Mel's Fund, please call Kelly Bozzuto at (203) 737-2439.

Volunteer Helps Add Smiles to the Clinic

Joyce Gherlone is using her creative energies to put smiles on the faces of children in the clinic by donating handmade stuffed animals. The animals, each individually designed and crafted, are given to pediatric patients and children of adult patients in the clinic, to help entertain them while they wait. The children and the staff who are able to give them out appreciate her generous gifts. Bonnie Indeck,

MSW, Social Worker and Patient Services Director in the clinic, explained, "These stuffed animals add so much comfort while waiting. They are greatly appreciated by the children and their parents."

Joyce's husband is a patient in the clinic; "the clinic has given to both my husband and myself, this is a small way for me to give back," Joyce said.



New Technology Takes the First Step Toward Digital Pathology

ACKNOWLEDGING THE INCREASING number of targeted cancer therapies, researchers at Yale Cancer Center have developed a set of algorithms, which allow automated analysis of tissue microarrays. David L. Rimm, MD, PhD, a lead investigator in the study and Director of the Tissue Microarray Shared Resource at Yale Cancer Center, explained the need for a new method of identifying protein expression in tissues, "the next generation of therapies will require determination of protein expression levels in order to provide the best



Above The PM1000 is pictured above. It is designed to measure protein concentrations in tissue samples.

treatment. The new technology will accurately measure protein levels in tissue samples without the need of a pathologist's assessment."

Rimm and his colleagues have created a computer assisted imaging device, which allows the computer to analyze tissue microarray samples of cancerous tissues and generate a quantitative score representing protein expression in the sample. Tissue Microarrays enable researchers to analyze several hundred tissue samples within a single paraffin block, providing highly efficient evaluation and assessment of the samples. Robert Camp, PhD, Associate Research Scientist and the Principal Investigator of the project, created the software using a set of algorithms they titled AQUA to analyze the tissue samples. Their initial findings were recently published in the November 2002 issue of Nature Medicine.

"The program uses a unique and newly invented set of algorithms that allows analysis to be more quantitative. Ultimately, we envision using these algorithms on biopsy samples from patients to see how they will respond to specific treatments," Rimm said. The researchers used the paradigm of Herceptin, a targeted therapy for breast cancer, which is only effective in patients that overexpress HER-2, to test their process. They were also able to use the technology to discover a new marker that predicts poor outcome in colon cancer that had been missed by previous pathologist-based analysis.

Although initial testing of the machine has revolved around breast and colon cancer tissue samples, investigators are broadening its use and hoping to find protein expression patterns in all types of cancer arrays. "We are currently piloting an investigation to see how well the machine analyzes tissue biopsies," Rimm said. Adding that there is a perfect opportunity for a clinical trial to be created to test the machine results of biopsies against prescribed targeted therapies.

"This technology has the potential to provide that critical expression information needed to effectively match bio-specific therapeutics to tumor expression patterns and it also represents the first step toward digital pathology," Rimm explained.

The Breast Cancer Alliance, Inc. awarded funding for this project to Rimm in their 2002 grant period.

Spotlight on Nursing:

Palliative Care Nurse Works to Ease Patient Discomfort

THE INTERDISCIPLINARY TEAM of oncology care providers has recently added a new perspective with the addition of a palliative care nurse to their staff. Didi Loseth, RN, MSN, an advanced practice palliative care nurse joined the oncology care team in August through a joint appointment by Yale Cancer Center and Yale-New Haven Hospital. Loseth has over twenty years of nursing experience, which includes eleven years of palliative care nursing.

Palliative care focuses on the comprehensive management of a patient's physical, psychological, and spiritual needs during the progression of an incurable illness. Loseth will be the first specialist at Yale dedicated to concentrate on these needs, helping to review and alleviate the discomfort an oncology patient faces when confronting advanced disease. "The opportunity to build a comprehensive palliative care program at Yale is an exciting challenge for me," Loseth said.

The formal inclusion of a patient's physical, psychological, and spiritual care creates a broad spectrum of options when attending to a patient's needs. The first component is to provide symptom and pain relief, followed by a combination of psychological and spiritual intervention. Effective palliative care increases a patient's ability to cope with the difficult treatments they face while maintaining an adequate quality of life.

The addition of a palliative care nurse has been the goal of the Palliative Care Resource Group since its inception in 1997. They realized the need for pain management and palliative care and met in an effort to address these issues. The group, comprised of nurses, social work, chaplainry, pharmacy and the Yale of School of Nursing, will now be an advisory group to Loseth.

Part of Loseth's time will be spent assessing the palliative needs of patients and families. She will also be evaluating current policies and with the Resource Group, determining what is needed to provide more comprehensive care. Currently knowledge and attitude surveys on pain management, completed by nurses, pharmacists, and physicians, are being analyzed. Loseth hopes to survey family members of former patients to evaluate their experience while their loved one was cared for at Yale.

"It is a wonderful step for Yale to place value on palliative care; we realize that the addition of palliative care will establish more comprehensive care for the patient," Loseth explained.



ove Didi Loseth, RN, MSN

Breast Cancer Alliance Supports YCC Researchers

The Breast Cancer Alliance, Inc. has once again pledged to support research at Yale Cancer Center giving \$217,000 to fund three projects. Bonnie King, PhD, Susan Mayne, PhD, and David Rimm, MD, PhD (see accompanying story on page 5) were all recipients of funding from the Alliance in the 2002 round of grants. To date, the Alliance has supported research efforts at Yale with over \$700,000 in funding.

The Alliance raises the majority of its grant funds through an annual fashion show held at the Greenwich Hyatt. This year's show raised a record \$1,080,000. For more information on the Breast Cancer Alliance please contact their office at (203) 861-0014, www.breastcanceralliance.org





Left A model wears a Badgley Mischka ivory beaded gown with Guiliana Teso dyed fox. Above Judith Borrkowski, Breast Cancer Alliance (BCA) Supporter, Joanne Masin, BCA Member, Bonnie King, PhD, Yale Cancer Center Researcher, and Carol Santora, BCA President.

Yale Cancer Center's quarterly newsletter is written to inform the public and the Center's friends, volunteers, donors, and staff on current items of interest at Yale Cancer Center. All inquiries should be addressed to: Renee Gaudette, *Public Affairs Manager*, 100 Church Street South, Suite 211 New Haven, CT 06519-1714

UPCOMING EVENTS

February 12, 2003

Understanding Cancer: Second Wednesdays Lecture Series
Intimacy and Sexuality:
Impact on those with Cancer and their Partners
6:00 p.m.; for more information please call
(203) 688-2000.

March 12, 2003

Understanding Cancer: Second Wednesdays Lecture Series Prostate Cancer: Surgery, Implant, and IMRT 6:00 pm; for more information please call

March 17, 2003 Lunch N' Learn Managing Fatigue throughout Cancer Treatment Marianne Davies, APRN 12:00-1:00 pm; Grace Building Lounge For more information please call Bonnie Indeck at (203) 688-6573

April 9, 2003

Understanding Cancer: Second Wednesdays Lecture Series Dispelling Myths, Navigating Treatment Options, and Using New Technology 6:00 pm; for more information please call (203) 688-2000.

May 29, 2003 Cancer Survivors Day 11:00 am – 2:00 pm For more information please call Kelly Bozzuto at (203) 737-2439.

Please check the Yale Cancer Center Calendar of Events frequently for new information at: $\underline{http://info.med.yale.edu/ycc/ni02.htm}$

April 26, 2003 La Cassa Magica Yale Cancer Center's Annual Benefit
The Country Club of Fairfield
For more information please call Kelly Bozzuto at
(203) 737-2439.



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