Expanding Our Horizons

Body, mind and spirit • Helping the whole patient • Arizona’s cancer center
Solving new problems • Highlights in giving
**Director’s message**

Locating an outpatient clinic and translational research facility in the state’s and region’s population center will go a long way to make that a reality.

Sincerely,

David S. Alberts, MD
The University of Arizona Cancer Center Director

Cancer is a disease that attacks more than just a patient’s cells. It often wreaks havoc on an individual’s emotional equilibrium, as well. Karen Weihs, MD, is among the researchers attempting to identify patients who exhibit depressive symptoms in order to help them successfully fight cancer on every level — physically and emotionally.

As the medical director for Supportive Care for Healing and Psychosocial Oncology at the University of Arizona Cancer Center, Dr. Weihs specializes in psychiatric and survivorship care, as she and her team provide whole-person cancer care for patients and their families.

In 2008, Dr. Weihs, along with a handful of the UACC’s top oncologists, including Alison Stopeck, MD, developed a program called COPE-D (the Collaborative Oncology Program to Enhance Depression care). Their work was motivated by the evidence that cancer patients who also suffer from depression do significantly worse in their treatments than their non-depressed counterparts.

“We’ve found that depressed cancer patients suffer from more physical pain and their bodies may not be as responsive to chemotherapy or other treatments,” Dr. Weihs said. “On a purely physiological level, the depressed patient is at a disadvantage. The odds of survival decrease.”

The COPE-D project attempts to identify patients with depressive symptoms and intervene with biopsychosocial treatments as part of their comprehensive care.

During the original screening process five years ago, Dr. Weihs’ team of medical assistants and nurse coordinators found that 15 percent of the 1,500 patients who took part in the study had elevated symptoms of depression for two weeks or more. It took the team more than three years to collect the pilot data, which showed a greater resolution of depression for the people who received intervention with the team of social workers, oncologists, nurses and psychiatrists versus those who didn’t.

The key to COPE-D was determining which patients were genuinely depressed versus patients who simply felt sad.

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The COPE-D model is also being used in the hemophilia clinic, as well as the patients who often give up on their treatment before it can begin to take effect.

In the original study, the rate of resolution for depression symptoms was 25 percent, after patients and their doctors simply received the information about their symptoms. After social worker intervention, supported by the multidisciplinary team, the rate of resolution rose to 65 percent.

Dr. Weihs restarted screening for depression and implementation of the COPE-D intervention with Dr. Lee Cranmer’s multidisciplinary team in January 2013. Shawn Mulligan, RN, BSN, MS, program coordinator for the Supportive Care for Healing team, is leading the effort to re-establish the protocol. The clinic’s medical assistants screen patients when they are being prepared for a visit with Dr. Cranmer and nurse practitioner Agnes Yahl, FNP-C. Patients who exhibit an elevation in depressive symptoms then take a more extensive assessment, which tells the doctors and nurses whether these patients had a likelihood of a depressive disorder.

These patients are then seen by one of the UA Cancer Center’s social workers to discuss their options and receive further education and initiation of treatment for depression with the multidisciplinary team.

The COPE-D model is also being used in the hemophilia clinic, led by Dr. Stopeck. The Supportive Care for Healing team hopes to make this approach the standard of care for the entire oncology practice in the future.

“It is a layered, collaborative approach to patient care,” Dr. Weihs said. “When you treat the whole patient — their body, their mind, and their spirit — you can accomplish some pretty amazing things.”

Karen Weihs, MD, at the University of Arizona Cancer Center — North Campus.

**Healing body, mind and spirit**

A cancer diagnosis can often leave a person feeling powerless. In order to overcome the disease, a patient needs to feel an alignment between mind, body and spirit, as working together to accomplish one goal — a happy, healthy post-cancer life.

That’s where James Lofquist can help.

Lofquist, a T’ai Chi instructor at the University of Arizona Cancer Center, helps patients stimulate the healing process by teaching them how to understand and manage their internal energy.

“I make it my goal to teach people how they can be involved in the healing process themselves,” Lofquist said.

Lofquist, a T’ai Chi practitioner for more than 25 years, has spent the last five years in Tucson helping to empower UACC patients through the slow, steady movements that promote a state of mental and physical relaxation.

“The best part about T’ai Chi is that you can practice it anytime, anywhere,” Lofquist said. “Optimal times are at sunrise, noon and sunset, to keep the movement in tune with one’s body clock.”

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T’ai Chi is one of a handful of movement classes offered through the UACC’s Supportive Care for Healing program. In addition to T’ai Chi, patients can take part in Qi Gong, yoga and many different touch therapy classes.

Classes are open to patients, families, staff and the community. Please visit uacc.arizona.edu/calendar for the schedule of upcoming classes and touch therapies.

**HELPING THE WHOLE PATIENT**

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Construction has begun on The University of Arizona Cancer Center at St. Joseph’s Hospital and Medical Center/Dignity Health outpatient clinic at the Phoenix Biomedical Campus.

The six-story, 230,000-square-foot, $100 million cancer clinic will be located at the northwest corner of Fillmore and Seventh streets and will offer comprehensive cancer services, including infusion, radiation oncology, diagnostic imaging, endoscopic/interventional radiology, a breast center, specialized cancer clinics, patient wellness and support services, a prevention/executive health clinic, clinical lab space and other related support spaces. The new clinic should be open to patients by early 2015.

The University of Arizona has formally affiliated with St. Joseph’s Hospital and Medical Center/Dignity Health to develop a cancer care program at the new outpatient clinic, under a 20-year facility lease, and to provide inpatient care at St. Joseph’s Hospital in central Phoenix.

Plans call for four floors to be built out for immediate use; the fifth floor will be constructed as “shell space” for future development, and the sixth floor will contain mechanical equipment.

Of the total $100 million project budget, the cancer center will raise $20 million from philanthropic giving. The City of Phoenix is supporting the Phoenix cancer center project with $14 million in funding. The UA will issue $66 million in system revenue bonds. The University will use Phoenix cancer center lease revenues and operating revenues to fund the project’s debt service.

“The Phoenix cancer center will focus on delivering the highest standard of cancer care with an evidence-based, research-driven, disease-oriented multidisciplinary model, along with the most modern technologies and a compassionate, patient-centered approach,” said UACC Director David S. Alberts, MD.

The new Phoenix cancer center will be home to approximately 100 providers and hundreds of health-care professionals and administrative staff members. The innovative cancer center will add a clinical health-care component to the Phoenix Biomedical Campus and is projected to treat approximately 60,000 patients a year within 10 years of opening.

In keeping with the UA’s commitment to responsible and sustainable design, the cancer center building will be designed to conform to the standard United States Green Building Council Leadership in Energy and Environmental Design (LEED) Silver Certification.

- By Sara Hammond
Hearing loss has become one of modern cancer therapy’s most prevalent side effects. In fact, hearing loss is among the most underreported, yet potentially devastating, side effects endured by many chemotherapy patients. Often, these patients don’t realize that their hearing has been compromised until it is too late to receive treatment.

Dr. Jacob started the Hearing Conservation Program to educate chemotherapy patients about their risks for hearing loss, while suggesting possible interventions to prevent hearing loss or to recover a patient’s hearing. Dr. Jacob is an associate professor with the University of Arizona Cancer Center, the UA Department of Surgery — Division of Otosurgery and the Bio5 Institute.

“It doesn’t even occur to most cancer patients that their treatment could impact their hearing,” said Dr. Jacob, who, in addition to his role with the UA Cancer Center, is the director of the University of Arizona Ear Institute, which is dedicated to the prevention, detection, treatment and rehabilitation of ear disease through clinical care, research and education.

There have been many incredible innovations in the field of cancer treatment in the last few decades. Patients are now recovering from diseases that were once considered untreatable.

As chemotherapy agents such as cisplatin and carboplatin become more successful and patients live longer, healthier lives, oncologists are discovering side effects that can seriously impact a patient’s quality of life. One such impact is ototoxicity — damage to the inner ear by a toxin.

The hearing loss begins in the upper frequencies; often too late to receive treatment.

This field of study is relatively new, as many cancer patients simply didn’t survive long enough to experience significant hearing loss. But as life expectancy grows, the need for patient education grows along with it.

“If of course, treating the cancer is of primary importance,” Dr. Jacob said. “However, we now have the tools to maintain patients’ quality of life after they have been cured of cancer – monitoring and potentially treating their hearing loss.”

Prior to starting chemotherapy, patients are asked to obtain a baseline audiogram from Stephanie Adamovich, PhD, an audiologist recruited to the UA Ear Institute. This includes ultrahigh frequency testing — something that is only available in Tucson at the University of Arizona Medical Center. Otosacoustic emissions, as well as other specialized measures, are also performed. Then, follow-up hearing tests to monitor changes in hearing are planned at regular intervals according to a schedule recommended by the audiologist.

If sudden chemo-related ear damage is detected, the patient may be a candidate for intratympanic steroid injections to prevent further hearing loss or perhaps even recover function.

“We have the only university-based Otology/Neurotology program in the state of Arizona,” Dr. Jacob said. “Our active laboratory and clinical research program ensures that patients are offered the most up-to-date treatment options. We hope to work together with the oncologists to ensure that the patient’s hearing remains unaffected as they receive treatment.”

-By Nick Prevaras
University of Arizona Cancer Center physician scientist Thomas P. Miller, MD, director of the center’s Lymphoma Program, was the recipient of the UA College of Medicine’s Faculty Science Forum 2012 Founders Day Award.

Dr. Miller, a UA faculty member since 1980, is an internationally known lymphoma researcher who was among the first to pioneer translational research — taking findings from the laboratory and applying them to humans.

He delivered his Founders Day lecture, titled “We Changed Outcome for Lymphoma Patients (‘You Didn’t Get There on Your Own’),” on Nov. 16, 2012, which detailed his extensive and influential career in the field of lymphoma research.

Currently, Dr. Miller is a senior scientist and member of the Director’s Committee of the UA Cancer Center. He has been the principal investigator of the Southwest Oncology Group National Cancer Institute (NCI) U10 grant for the past 27 years and the principal investigator at the UA for the University of Rochester/University of Arizona NCI-designated SPORE (Specialized Program of Research Excellence). He serves on the NCI Lymphoma Research Steering Committee.

Dr. Miller has been included in every edition of America’s Top Doctors and Best Doctors in America®. He served as head of the Division of Hematology/Oncology for 10 years and played a key role in the development of the University of Arizona Cancer Center – North Campus, where he continues to see patients.

The Founders Day lectureship was established in 1979 to recognize and honor UA College of Medicine faculty for their scientific accomplishments. Each year, faculty members select one of their peers to provide a presentation to commemorate the founding of the UA College of Medicine – Tucson, which was dedicated Nov. 17, 1967.

The award recipient is a faculty member who embodies a model of an investigator whose research work has a continuous thread of significance and who effectively can present that research with enthusiasm, vigor and inspiration.