Gaining knowledge ... changing lives!

Welcome to our August 2011 Newsletter

Special points of interest

- New look for Pink
 Walk, are you up for the challenge?
- 2012 NZ Women's Health Diary
- Ever wondered who is behind the scenes?



A/Professor Ian Campbell Chair, WBCT

Dear Reader,

You will be interested to know that this year, Waikato has been the top contributing site in Australia and NZ for both the SNAC2 and for the LATER trials. SNAC2 is a surgery study and tests the limits of application of sentinel node biopsy based management instead of full axillary dissection for women with larger or multifocal and more aggressive cancer types.

September

2011

The LATER study looks at whether we can intervene with the drug letrozole, to prevent late (5-15 years after diagnosis) breast cancer recurrence in women with a history of hormone receptor positive breast cancer.

We are the third top site in Australia and NZ for accrual to our breast cancer prevention trial, IBIS II (top recruiter for the decision aid substudy). This is a tribute to the efforts of our research team and to the courage and interest of Waikato (and NZ) women when it comes to breast cancer research.

We are in the process of meeting with the Minister of Health to try and move forward Government funding of a Nationwide detailed breast cancer database, such as the one run by the WBCT here in the Waikato, so that we can properly monitor the quality of care provided and outcomes for all NZ women. On this note we have recently supplied some important information from the Waikato Breast Cancer Register (WBCR) to the Breast Cancer Aotearoa Coalition to help with their lobbying Government both for a national database and for better access to surgery in our public hospitals.

In the public sector, over 40% of women are waiting more than 6 weeks from tissue diagnosis to surgery. This figure should be well under 10% if we are to treat women in a timely fashion. My especial thanks to the NZ Breast Cancer Foundation and to the Waikato Bay of Plenty Division of the Cancer Society for giving us the funding so that we can continue the WBCR and produce this kind of essential planning information.

I hope you enjoy reading the rest of this newsletter, which includes a profile on Jenni Scarlet, Secretary of the WBCT and Co-ordinator of our research programme (i.e the backbone of the WBCT!) plus more information on the IBIS 2 breast cancer prevention study, as well as some fun upcoming events that we would love your support for.

Kind regards Ian Campbell

Inside this issue: **IBIS 2 Prevention** 2 **A Personal Journey ANZBCTG Scientific** 3 Conference **Progress through** 3 research **Progress through Clinical Trials LATER Trial Behind The Scenes** 5 2012 NZ Women's **Health Diary New Look for Pink** 6 Walk

Upcoming Events

Sponsors

7

8

Need to contact us?

Issue 3 Page 2

IBIS II PREVENTION STUDY

North Island Women Needed for Breast Cancer Prevention Study

The International Breast Cancer Intervention Study, IBIS-II is seeking postmenopausal women aged 40-70 with a family history of breast cancer to take part in this study to find out if breast cancer can be prevented. To be eligible for the study women need to be at increased risk because of a family history of breast cancer, or other risk factors such as certain non cancerous breast conditions. Women must not have already had invasive breast cancer. The study is being co-ordinated by Australian New Zealand Breast Cancer Trials Group (ANZBCTG). Waikato Hospital (enabled by the Waikato Breast Cancer Trust) is a centre for women in the mid and upper North Island and Wellington Hospital for lower North Island are providing the opportunity for women to join the study.

For more information telephone Freecall 0800 888 656 or register your interest online at www.anzbctg.org

Background Information

IBIS-II is the first trial to investigate whether the breast cancer treatment drug, anastrozole can prevent breast cancer in postmenopausal women at higher risk of developing the disease. Women joining the study take a tablet a day for five years. They receive excellent care, which includes a bone health check, regular mammograms and an annual check up with a clinician (twice annually in the first year).

Worldwide the study is seeking 8,000 women. More than 6,100 women have already joined, including close to 850 Australian and New Zealand women, but more volunteers are needed.

In NZ we are participating in this study through the ANZBCTG. The ANZBCTG is a not-for-profit organisation and is Australia and New Zealand's national organisation dedicated entirely to breast cancer research. It conducts a national clinical trials programme for the treatment of all stages of breast cancer and for the prevention of breast cancer.

In New Zealand women, breast cancer is the most common invasive cancer diagnosed and the leading cause of death from cancer. Nearly 2,500 New Zealand women are diagnosed with breast cancer annually, and every year approximately 640 die from this disease.

Researchers are hoping this study will find that anastrazole can prevent breast cancer and reduce the prevalence of breast cancer worldwide. For further information please visit www.anzbctg.org

A Personal Journey by Lorrie Kurth

My name is Lorrie Kurth and I have worked as an Oncology Nurse at Waikato Hospital for 30 years consequently I have nursed many women with breast cancer during this time.

For the past 30 years I have also lived with breast cancer in my family...my Grandmother, my Mum and my cousin have all died from breast cancer and I have an Aunt and two other cousins still living with breast cancer.

I am participating in IBIS II Prevention Trial to help researchers find a way to prevent this disease. It is probably unlikely to make a difference to my life but I am hoping it will improve the chances of survival for future generations of my family who have inherited this high risk family history.

While participating in this trial I know that I am receiving excellent surveillance and this is very reassuring. Throughout the trial I have always been well informed and treated in a professional manner.

Because of my many years of Oncology Nursing and my own experiences within my family I am pretty philosophical about cancer and death and I truly believe that you have to live each and every day to the fullest.

> "I do not spend a lot of time worrying about my higher risk of getting breast cancer as I prefer to spend my time enjoying life and making the most of "now" rather than wondering about the "what ifs in life...".

A personal journey by Lorrie Kurth IBIS II participant (right) pictured with Shelley Cavanagh, Research Nurse/IBIS II Study Co-Ordinator



Issue 3 Page 3

ANZBOTG ANNUAL SCIENTIFIC MEETING

research carried out in the Waikato are the standard of care for women. coordinated through the ANZBCTG. QUT is continuing research in this This group is the largest breast cancer research organisation in NZ. Through our collaboration with our Australian colleagues we are able to also work with other international cancer research groups. This ensures specialist and research staff are able to bring international best practice and care to Waikato women.

A range of research topics were presented at this international conference, including;

• Exercise is medicine! Research from the Queensland University of Technology continues to highlight the importance of exercise for women following a diagnosis of breast cancer. Exercise is proven to help poor body image, sleeping difficulties, hot flushes, aching joints, depression, fatigue and weight gain and maybe even help cancer outcomes. These are all health concerns that women can experience during and after breast cancer treatment. There is increasing evidence

A majority of breast clinical trials for introducing exercise as part of

- Consumer involvement in research: Leonie Young, Chair of the ANZBCTG Consumer Advisory Panel spoke on the involvement that CAP members have in promoting participation in clinical trials. CAP members are involved in reviewing trial protocols and information sheets to ensure acceptability for other women and that the questions most important for woman get answered.
- Sentinel node biopsv: Controversial results were presented on an American sentinel node biopsy trial. These highlighted the importance of completing the Society of Breast Surgeons ANZ sentinel node biopsy trial (SNAC 2) in women with larger or multi focal (more than one focus) breast cancers. We need to very carefully ascertain the safe limits of this lesser surgery to the armpit (axilla).



L-R Raewyn Calvert Marion Kuper, Glenys on, Debbie Metcalfe. Jenni Scarlet & Ian

• Later use of letrozole: After reaching the end of their five years of hormonal treatment there is still an ongoing risk for a woman of developing another breast cancer, or her original breast cancer returning. The LATER trial is an ANZBCTG research testing whether taking the drug letrozole a year or more after finishing five years treatment with hormonal therapy (e.g. tamoxifen); can prevent or delay breast cancer recurring in post-menopausal women. The Waikato is a centre for this trial.

Other topics presented included basic cancer biology, new drugs and drug targets and an excellent session on strategies for preoperative drug treatment of breast

Waikato staff who attended this conference found it stimulating to attend and valuable to network with colleagues from both countries and with international speakers.

PROGRESS THROUGH RESEARCH

What's coming up in the Waikato?

Post-operative radiotherapy omission in selected patients:

For women who undergo breast conservation surgery for early breast cancer, radiotherapy treatment is usually given to the affected breast after surgery, to reduce the risk of breast cancer returning in that breast.

Radiotherapy treatment requires daily treatment over four or five weeks, and receiving radiotherapy can lead to some side effects such as fatigue, skin redness and discomfort (in the short term), and discomfort in the breast, thickening of breast tissue and very occasionally bone, lung and heart problems.

To determine whether radiotherapy treatment can be safely avoided in women whose risk of local recurrence is very low, researchers from the ANZ Breast Cancer Trials Group have developed a new pilot clinical trial called PROSPECT. This trial will use magnetic resonance imaging (MRI) scanning to help select women for whom radiotherapy may be avoided because their risk of cancer recurring in the breast is low.

If it is found that radiotherapy can be omitted without compromising local recurrence, this would result in a major saving in human and financial cost.

Can we use the arm that has undergone lymph node surgery for chemotherapy?

Health professionals involved in breast cancer care mostly advise women to avoid having venopuncture (e.g. insertion of IV lines or blood samples) in the arm that has had armpit lymph nodes removed. This has been thought to reduce the risk of lymphoedema or arm swelling (one of the most feared complications of surgery) with intravenous chemotherapy.

Many women may run out of veins in the non operated arm and choose to a central venous access device (CVAD) inserted. The use of CVAD (e.g. a portacath) isn't without risk and potential complications include infection, thrombosis (blood clots), catheter blockage, catheter migration (travelling) and chest scar.

However, several small series show no increased risk of ymphoedema with venopuncture, taken on the operated arm. A NZ led protocol is being developed to test the safety of using venous access (for chemotherapy) in the arm which has undergone lymph node surgery.

These are just some of the clinical trials that will be available some time in the future for Waikato and other NZ women.

Issue 3 Page 4 Page 5

PROGRESS THROUGH CLINICAL TRIALS RESEARCH

What are clinical trials?

Clinical trials are research studies that involve patients to help find better ways to improve health and care of people with diseases such as cancer. Clinical trials are important as they help establish whether treatment options are safe and effective.

When we think of treatments for breast cancer, we often think that only means drugs, but trials can include screening for the diagnosis of cancer, radiotherapy, surgery, supportive care programmes, complementary therapies or even nutrition and exercise.

Clinical trials are carried out under the supervision of research staff so that the effects of the treatments (or diagnostic techniques or preventative measures) being studied are properly monitored. Some trials compare new treatments with standard or current treatments. Other trials look at different ways of using treatments or combining two or more existing treatments to see if they lead to improved benefits for patients.

Common medications that we take for granted in our lives, such as aspirin and antibiotics, have all been tested in clinical trials.

Why participate in a clinical trial?

The most common spontaneous feedback regarding why women take part in breast cancer trials is that their participation may help future generations. Participation in a clinical trial does assist with the advancement of medical knowledge.

Women take part in trials for a number of different reasons. They may receive a new treatment before it is widely available to other cancer patients. Evidence shows people can also have a better outcome because they have been involved in a trial, even if they have received a standard treatment. This may be because most participants on a clinical trial receive carefully and often more rigorously monitored treatment and follow-

Why do we need clinical trials?

We need clinical trials because they help establish whether new treatments are safe and effective. Clinical trials have an important role in a research process that can sometimes take years before new discoveries (e.g. from cancer research laboratories) become part of standard breast cancer care.

Most of the major advances in breast cancer care have resulted because the value of new treatments was first demonstrated in clinical trials. Major advancements include; breast conserving surgery (lumpectomy) as a safe alternative to mastectomy (removal of the whole breast); and the addition of chemotherapy and hormonal therapy to surgery to improve survival outcomes. Other advances are; the use of sentinel node biopsy (removal of the first lymph nodes/s most closely related to the cancer and associated with less side effects) as an alternative to removing all the armpit/axillary lymph nodes; and the use of Herceptin in women with the HER2 positive breast cancer - a more aggressive sub type.

By being knowledgeable about or directly involved in clinical trials, doctors demonstrate that they are up-todate with the latest developments in breast cancer care.

How to get involved in a clinical trial

For women undergoing breast cancer treatment discussions, a cancer specialist may raise the option of a clinical trial that includes a new treatment appropriate for an individual women's situation. Alternatively, women can ask their doctors as to whether they know of any suitable trials available.

THE LATER TRIAL

Extending hormonal treatment beyond 5 years

The standard length of time that hormonal or endocrine treatment is taken (daily) is five years. However, after reaching the end of their treatment there is still an ongoing risk for a woman of developing another breast cancer, or her original breast cancer returning in another part of her body. For these women, the chance of this happening can be 1 in 50 (2%) each year or more - this risk translates to 1 in 5 over ten years. Long term management of early breast cancer after completion of five years of hormonal treatment, has until recently, been confined to annual checks and mammography.

Research has shown that extending hormone or endocrine treatment with an aromatase inhibitor, after five years of tamoxifen, improves breast cancer outcomes.

It is not certain if this is the case after five years of treatment including an aromatase inhibitor (e.g. letrozole).

The Waikato is the only NZ centre for the LATER or "Later adjuvant Aromatase inhibitor Therapy for postmenopausal women with Endocrine Responsive breast cancer" study is finding out whether taking the drug letrozole a year or more after finishing five years treatment with hormonal therapy (e.g. tamoxifen); can prevent or delay breast cancer recurring in post-menopausal women.

For further information please phone 0800 770 119.

BEHIND THE SCENES.....



meet Jenni Scarlet

I was 21 when my mother was first diagnosed with breast cancer. My two younger sisters were eight and 11 at the time and we were devastated by this news. I worried for the future of my sisters as they were still so young but my In 2000 I was one of a group of committed mother lived for another 10 years following her initial treatment then unfortunately died of her advanced breast cancer. Our family nursed her at home things I have ever done.

worked in an inpatient Oncology ward. I thought I understood how women diagnosed with breast cancer must feel treatments and for better quality of life.

different experience.

My mother died in the same year that I completed a post graduate qualification in My commitment to breast cancer research research and throughout my studies I have remains stronger than ever. been inspired to work in research as a means of making positive change.

based at the Breast Care Centre. Waikato Hospital since 1997. This role requires me Today, women with breast cancer are cancer health professionals to introduce out over the past 25 years. new and better care and treatments through research. For the past 13 years I With the knowledge we have gained from after a breast cancer diagnosis.

people who set-up the Waikato Breast Cancer Trust, a charitable trust which enables our Waikato based breast cancer research programme. From humble until the end which is one of the hardest beginnings with myself working part time and coordinating three international studies, we now employ seven dedicated In the early years of my nursing career I staff and are running or have completed some 30 projects and clinical trials ranging from breast cancer prevention, to new

but when it is your own mother, it is a very We have also established a Waikato breast cancer register which has a 95% consent

I continue to be inspired by the many courageous women who participate in our I have been working as a research nurse research and our breast cancer register.

to work closely with specialist breast benefiting from results of research carried

have considered myself very fortunate in research, I am determined, along with my my professional life to be able to make a research and health professional coldifference with extending women's lives leagues, that the outcome for more and more women will be very different from that of my mother.

Only \$14.95 each



2012 NZ WOMEN'S HEALTH DIARY

Pre order your copy NOW contact julie.wilson2@waikatodhb.health.nz

Almost everyone knows someone who has been affected by breast cancer, it could be you or someone you love.....

High quality research is expensive. Buy the NZ Women's Health Diary in order for us to continue our vital work. The diary is packed full of useful health tips, from skin care to healthy eating and lifestyle choices; it features a financial health section and contains a wealth of important information on breast cancer itself as well as a dedicated men's health section.

This is the third year that we have produced the diary and we have some wonderful sponsors who have come on board. The WBCT would like to thank: Fusion Print Ltd who designed the diary pro bono, New World and PaknSave Supermarkets who are our major distributor, Braemar Hospital, Hamilton East Medical Centre, Anglesea Women's Health, Classic Hits 98.6, Westpac and Deloitte.

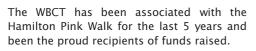
Proceeds from the sale of the diary go towards our breast cancer research programme.

It's not just a diary.....it's a way of life!

Page 6

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NEW LOOK PINK WALK



This year the WBCT have become the proud owners of the walk and have brought in some key people to help us grow the event to help raise much needed funds for our breast cancer research programme.

Introducing the 'PINK CHALLENGE'

For the fist time not only can you walk around the lake but runners can take part officially now to! We have introduced the 'Pink Challenge' which is a surveyed 5km Walk/Run which will take place at the same time as the Pink Walk. Register for the 5km Pink Challenge and you will be supplied with a race bib and timing chip to record your time. You can walk, run or race this event—cater to your own fitness levels.

Also introducing the 'Pink Challenge Corporate Cup' donated by Direct Group. Get your workmates together (and your boss) enter a corporate team and see if your company can win the coveted 'Pink Challenge Corporate Cup'. Corporate hospitality packages are also available.

So...what's Different?

For the first time the event will be held at the weekend, Sunday 30th October 2011. It couldn't be easier, visit www.pinkwalk.co.nz to register on-line from Friday 26th August 2011 or download a copy of our registration form and send it to us with payment.

We have \$10,000 worth of spot prizes to give away on the day (prize draw is random and prize giving will be held on event day).

We also have lots of promotional tents, merchandise on display and a kids area with face painting and a bouncy castle (gold coin donation). Why not come along, bring a picnic, friends, family and the dog and make it a day out to remember.

This year a late registration fee of \$25 will be incurred—to avoid this please make sure you register before the closing date of Friday 21st October.

Visit www.pinkwalk.co.nz to register and don't forget to dress in pink to help raise breast cancer awareness. Let's make this our most successful event yet—with your help we can make a difference!

The WBCT are proud to say that ALL proceeds raised from your registration fee go straight back into our breast cancer research programme.

If you are one of the 1st 1,000 people to 'like us' on Facebook you will go in the draw to win a free lpad courtesy of Schick Construction.



BRAEMAR HOSPITAL GOES GOLD FOR

PINK WALK

(Words by Paul Bennett, Braemar Hospital)

Braemar has been an enthusiastic supporter of the Pink Walk for breast cancer awareness for many years. This year we became the first GOLD sponsors of the event.

Last year we had a bigger contingent of staff, family and friends than any other group on the walk – over 100 people! At past events our staff have designed their own pink T-shirts and printed balloons. Some went further and complimented their T-shirts with pink bras, tutus, feather boas, sequins, wigs and face paint!

At Braemar we often see patients after the cancer has been diagnosed when they arrive at the hospital for surgery. Like other New Zealanders, we would like to see new ways to stop this disease developing and we are pleased to be involved in doing our bit to make a difference.

Funds raised from the Pink Walk will go to the Waikato Breast Cancer Trust. This charitable trust administrates an extensive breast cancer research programme and a breast cancer register. The register is a computerised database which enables a comprehensive audit of Waikato based breast cancer care and treatment. Please visit $\underline{www.wbct.org.nz}$ for more information.

We are delighted to have formalised our contribution to this magnificent Hamilton event and look forward to participating for many years to come.







Proud Gold sponsor of the WBCT Pink Walk

A Magical Christmas Celebration





Join us for a fundraising dinner for breast cancer research

Special performance by

Dame Malvina Major and the Hamilton Civic Choir

When: Friday 9th December Time: 6.30—Dinner 7:30pm

Venue: Claudelands Event Centre, Hamilton

Make this evening a unique Christmas function for your staff.

Keep this date free in your diary.
Further details to follow.



WAIKATO HALF MARATHON

The Waikato 2011 Half Marathon takes place on 16th October 2011 at Mighty River Domain, Lake Karapiro. You can Race, Run or Walk 21km, 10km, 5km, 2km. Event information can be found online now at www.waikatohalfmarathon.co.nz or email errol@onyabike.co.nz.

This year the event are proud supporters of the Waikato Breast Cancer Trust and will be donating some of the proceeds from registrations to the Trust—wonderful news!

This is going to be a very popular event so get in quick and register today!

Many thanks to Errol Newlands and Tristyn Gretton for their support of the Waikato Breast Cancer Trust

KARAPIRO HALF IRONMAN

This year the Karapiro Half Ironman takes place on 12th November 2011.

Registrations are open for individual or team entry. Event information for the first Half Ironman of the 2011/12 season is online. Visit www.karapirohalfironman.co.nz or email errol@onyabike.co.nz.

Again the event organizer's would like to support the Waikato Breast Cancer Trust by donating some of the proceeds from registrations and giving you the facility to donate to the Trust online via their website as well.





Gaining knowledge ... changing lives!

The Waikato Breast Cancer Trust (WBCT) is a charitable trust enabling research and education into breast cancer.

We investigate diagnosis, prevention and treatment.

The Waikato is one of the most active centers for breast cancer research in New Zealand and the trust is running or has completed more than 30 different studies/clinical trials. In addition to local studies our research team work collaboratively with international research groups, actively providing NZ women with access to leading- edge protocols and advances in therapy.

The WBCT helps NZ women receive the best!

We would like to thank all our sponsors.....

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SILVER * SPONSORS

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Waikato Business News

HOW CAN YOU HELP US?

Many people are unsure how to sponsor a charitable trust or organisation.

There are lots of ways you can help the Waikato Breast Cancer Trust by becoming a sponsor today.

Details on how to do this are on our website www.wbct.org.nz