

Women At Risk

Letter From the President

By Lynda Wertheim

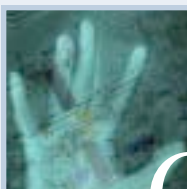
In this issue:



Research Updates



WAR's New
Patient Navigator



Managing
Information Overload

Together we have celebrated the past fifteen years, accomplishing meaningful work to enhance the lives of women who are at high risk for and with breast cancer through research, education and support. Through our partnership, Women At Risk's mission has flourished with the addition of new friends and new programs. Your generosity continues to spur WAR's innovative growth, which includes the expansion of the High-Risk Program, and the establishment of a Patient Navigator program.

With the launch of the new Patient Navigator program we have invested even more energy into providing excellence in patient care and support. The newly hired navigator guides patients who have been diagnosed with breast cancer through the clinical process, facilitating the delivery of the appropriate medical and ancillary services. This distinctive program gives patients transitional support that may have otherwise not been available to them during a most confusing and challenging point in their lives.

We have also begun the preliminary expansion of our High-Risk Program, forming a partnership with Nyack Hospital. This expansion will allow additional women to enroll in our high-risk database and enable our organization to collect even more vital information while also expanding the demographic of the women we support. As more women who are at high risk are registered, a larger pool of information can be utilized in essential breast cancer research that may lead to further innovations in the fight against this disease.

This past year in particular has brought many wonderful changes, and we are grateful for those of you who have joined us to celebrate a most memorable anniversary. The start of another new

year brings many new faces to Women At Risk as our staff and board membership increase and diversify. As we continue to grow together, experiencing new endeavors and giving thanks for your many years of support, we hold strong to our commitment and mission of enhancing the lives of those affected by breast cancer. ■

Mark Your Calendars

Sixteenth Annual Luncheon

MONDAY, MAY 14, 2007

KEYNOTE SPEAKER

Dr. Mehmet Oz

Health Expert for the Oprah Winfrey Show
& Bestselling Author

Director, Cardiovascular Institute
Vice Chair, Department of Surgery

NewYork-Presbyterian Hospital/Columbia University

HONORING

Linda Kaplan Thaler

CEO & Chief Creative Officer,
The Kaplan Thaler Group

LUNCHEON CHAIR

Carole Scherzer

Executive Vice President,
Scherzer International

Waldorf=Astoria Hotel, New York City

For more information, please call
(212) 305-4486.

Staffed by breast cancer survivors, offering confidential one-to-one support and informational materials.

HOURS OF OPERATION:

Monday

10:00 a.m.–4:30 p.m.

Tuesday

10:00 a.m.–4:30 p.m.

Wednesday*

10:00 p.m.–4:30 p.m.

Thursday

10:00 a.m.–4:30 p.m.

Friday

10:00 a.m.–4:30 p.m.

**Bilingual (English/Español)*
1:00 p.m.–4:30 p.m.

Herbert Irving Pavilion
Tenth Floor, Room 1035
161 Fort Washington Ave.
New York, NY 10032

The difference is you...

Thanks to all our volunteers who make a difference every day in Women At Risk's Resource Library:

Helene Bland
Clare Cooper
Marianne Glasel
Renee Goodman
Rita Heller
Rise Liskov
Laura Minella
Karen Small
Helen Tarr
Iris Tolksdorf
Angela Vallaro

WAR-Funded Research Presented at the 29th Annual San Antonio Breast Cancer Symposium

By *Jennifer Chun*

This past December, a study funded by Women At Risk was presented at the 29th Annual San Antonio Breast Cancer Symposium, the premier international conference in the world of breast cancer. With more than 7,000 attendees, this symposium provides cutting edge information on experimental biology, etiology, prevention, diagnosis, and therapy for breast cancer and pre-malignant breast disease to an international audience of academic and private physicians and researchers.

The study, led by Dr. Nikki Feirt, Associate Professor in the Department of Pathology, was entitled, "Angiogenic and Lymphangiogenic Markers are Differentially Expressed in Comedo and Non-comedo Ductal Carcinoma In Situ." The study contributes to our understanding of breast cancer metastasis as it relates to angiogenesis and lymphangiogenesis. Angiogenesis is the process of

size, enter into dormancy, or die. The findings of this study help to explain the progression of ductal carcinoma in situ (DCIS) and the underlying mechanism of blood and lymphatic vessel activity in both comedo and non-comedo DCIS.

WAR's poster was presented at the conference by Dr. Freya Schnabel, WAR's Medical Director, and Jennifer Chun, WAR's Research and High-Risk Program Director. ■

WAR's High-Risk Registry Illuminates Breast Cancer Risk Factors in Young Women

By *Jennifer Chun*

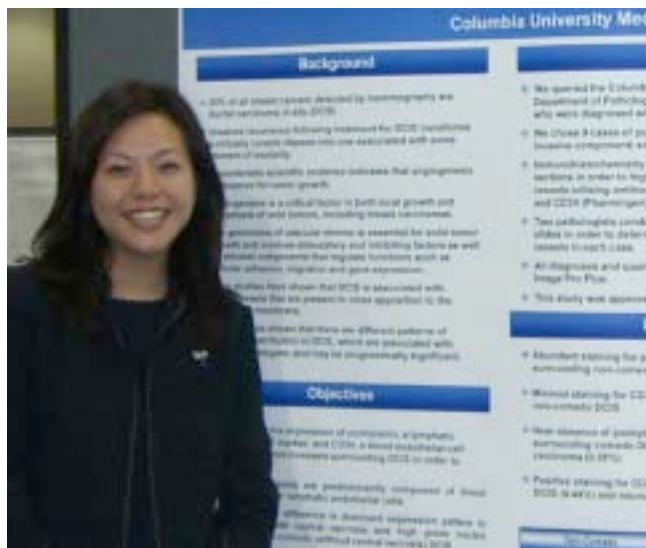
Currently little data exists regarding women age 35 or younger and their risk for developing breast cancer. To help fill this gap, researchers using the WAR High-Risk Registry looked at young women over time to determine the significance of established risk factors in a young, high-risk population.

Out of 199 women age 35 or younger, 178 (89%) women had a strong family history of breast cancer (FHBC), 21 (11%) had atypical ductal hyperplasia (ADH), 5 (3%) had atypical lobular hyperplasia (ALH) and 12 (6%) had lobular carcinoma in situ (LCIS). Only 3 (1.5%) developed breast cancer during the study period; each of these 3 cases had a strong FHBC, and none had a prior high-risk lesion.

The findings of this study make an important contribution to our understanding of risk factors for developing breast cancer in younger women: a strong family history of breast cancer appeared to be associated with the development of breast cancer, while other established risk factors were not. Therefore, ADH, ALH, and LCIS may have different prognostic significance in young women, and further studies are needed.

Breast cancer risk evaluation and assessment profoundly affect medical decisions made by patients and clinicians, such as the age to begin screening, which screening methods to employ, and which prevention methods to use.

Results of the study were presented at the 24th Annual Miami Breast Cancer Conference in Florida. Researchers involved in this study were Ben Pockock, M.D., Jennifer Chun, M.P.H.,



Jennifer Chun with WAR's poster presented in San Antonio

tumor growth that induces the growth of new blood vessels, and lymphangiogenesis induces the growth of lymphatic vessels. Currently, there is considerable scientific evidence indicating the necessity of angiogenesis for tumor growth. Without angiogenesis or lymphangiogenesis, a tumor would only grow to a limited microscopic

Kathie-Ann Joseph, M.D., M.P.H., Mahmoud El-Tamer, M.D., and Freya Schnabel, M.D.

To learn more about this study and other research projects that WAR has funded from 1996 to the present, please contact WAR's Research and High-Risk Program Director, Jennifer Chun, at 212-305-3238 or jec7001@nyp.org ■

Researchers Link Mammographic Density to Breast Cancer Risk

By Sally Sherwood

A Canadian study has revealed that women with a high proportion of dense breast tissue are five times likelier to develop breast cancer than women with low-density tissue.

According to Mary Beth Terry, Ph.D, associate professor of epidemiology at the Columbia University Mailman School of Public Health, these conclusions are far more definitive than previous similar studies. "We have long been aware of a relationship between breast density and elevated cancer risk. This study adds to the evidence by finding an association between density in screen and non-detected breast cancer."

According to Dr. Terry, medical professionals had long suspected a link between breast density and cancer, but the notion was related to inconclusive images rendered by traditional mammography. "Initially the thought was that dense breast tissue simply hid—or masked—tumors during screening; but this longitudinal study actually confirmed the relationship between dense tissue and elevated cancer risk many years later."

Researchers analyzed mammograms from three Canadian screening programs and compared results from 1,112 women who developed breast cancer after an initial baseline mammogram with an equal number of women who did not get the disease. Focusing on how and when cancers were found over eight years in existing records assembled between 1981 and 2006, the Canadian study showed that women with density in more than 75 percent of their breasts were five times more likely to develop breast cancer than those with less than 10 percent tissue density. These results took into account other such commonly known risk factors as family history, number of children and age of onset of menstruation and menopause.

Quoted in *The Toronto Star*, study leader Dr. Norman Boyd acknowledged that for many years the impact of dense breast tissue on elevated cancer risk was "ignored to an absolutely unbelievable degree." A full report of the study can be found in the January 18, 2007, *The New England Journal of Medicine*.


Dr. Terry cautioned that the kind of very high density in question is not prevalent among women. Mammographic density is the percent of the total breast tissue that is comprised of epithelial and stromal tissue. Breast tissue is comprised of fatty, epithelial, and stromal tissue. "In this study only about 5 percent of the controls and 10 percent of the cases had very high density. Dense breast tissue is an important marker for breast cancer risk, just as polyps are for colon cancer."

For the 5 to 10 percent of the population whose breast density potentially reduces sensitivity to mammograms, doctors may recommend further diagnostic tests such as ultrasound, MRI's or computerized mammograms. In any case, measuring breast tissue density may help doctors evaluate risk, detect tumors earlier and recommend aggressive radiological protocol.

Dr. Terry and her fellow researchers are currently collaborating with pathologists at Columbia University Medical Center to evaluate the characteristics of tumors found in women with dense breast tissue. She is hoping to publish results later this year. ■

Survivors Needed!

Do you want to use your breast cancer experience to help others? Volunteering at WAR's Resource Library is a wonderful way to help women and their families by offering support and information. Training will be provided. If you are interested, please call Annie Geddes at 212-305-3269.



WAR is pleased to announce our successful expansion of the High-Risk Program to Nyack Hospital! If you or anyone you know is interested in enrolling in the High-Risk Program at Nyack Hospital, please contact Nick Tsirkas at 845-348-8502 or our program director, Jennifer Chun, at 212-305-3238.

*This issue of Women At Risk's newsletter is made possible through the generous support of
The Larry and Jane Scheinfeld Foundation.*

Support Groups

The Women At Risk Support Group for Women with Breast Cancer

Every other Thursday
10:00 a.m.–11:00 a.m.

For more information,
please call
Angie Lloyd, LMSW at
(212) 305-2347.

*Co-sponsored by Women
At Risk and Social Work
Services, CUMC/NYPH.*

Grupo de Apoyo para las Mujeres Latinas con Cancer del Seno

Every other Thursday
10:00 a.m.–11:30 a.m.

For more information,
please call Lola Ruz-Curry,
at (212) 305-9894.

*Co-sponsored by Women
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Training Leaders: Spotlight on WAR's Fourth Breast Surgery Fellow

By Annie Geddes

Women At Risk's fourth Breast Surgery Fellow, Dr. Ben Pocock, shows just as much passion and excitement about breast surgery that one would want and expect from an emerging leader in the field.

With his quick and broad smile, Dr. Pocock explained how rewarding it is to be in a field where great progress has been made in screening and treating women, and where doctors can really feel like they are making a difference.

"There is so much change going on in the ways we diagnose and treat women," he said. "Especially at Columbia, people are developing really interesting and exciting new techniques to treat people." One of the concepts he is most interested in is oncoplastics, which is the idea of eliminating the cancer in a woman's breast in both the most medically beneficial and cosmetically pleasing way.

Another reason Dr. Pocock was drawn to this field is because breast surgeons are the central figure in a woman's care: before, during and after surgery. He appreciates the time he has to talk to the patient and develop a plan for treatment and long term follow-up.

Growing up in several countries around the world, Dr. Pocock always knew he wanted to be a doctor. He attended medical school in London and came to this country in 2000 for his residency, which he did at Johns Hopkins and Tufts University. Last year he was selected as WAR's Breast Surgery Fellow for 2006–2007.

This one-year program provides the trainee with advanced knowledge and skill in the evaluation and treatment of patients at high risk for and with breast cancer. The Fellow spends time in the breast surgery service, the medical oncology outpatient clinics, mammography, pathology, radiation oncology and genetic counseling. There are other components to the fellowship as well, including completion of at least one scholarly project suitable for publication in a peer-reviewed journal.

To this end, Dr. Pocock is involved in a number of research projects, some of which utilize WAR's High-Risk Registry.

One study, which was presented on a poster at the Miami Breast Cancer Conference in February, looked at young women with high-risk lesions and found that over time the women did not develop breast cancer at the same rate that had previously been expected. (See page 2 for details.) A similar study looks at high-risk lesions in women over 70.

A poster will also be presented by Dr. Pocock and Dr. Kathie-Ann Joseph, WAR's first Breast Surgery Fellow, at the next conference of the American Society of Breast Surgeons. This poster will demonstrate their findings that African American women with ductal carcinoma in situ, on average, have a longer period of time between diagnosis and the point of surgery than their white counterparts.

Dr. Pocock has also been working to update research that Columbia's Dr. Mahmoud El-Tamer had previously conducted on male breast



WAR's Breast Fellow, Dr. Ben Pocock

cancer, which found that men who develop breast cancer generally do so later in life than women and are more likely to die of something other than breast cancer.

When the Fellowship ends in July, Dr. Pocock plans to continue learning about oncoplastics and other techniques for optimal treatment, furthering WAR's mission of providing the highest quality of care to women in and around New York City. ■

WAR Expands Services to Include Patient Navigation

By Annie Geddes

A diagnosis of breast cancer is overwhelming enough, let alone having to get through the medical maze of doctors, treatment options, and web of available resources. Women At Risk understands the needs that women and their families face during this time, and is proud to announce our new Patient Navigator Program to the list of services we provide to women with breast cancer.



A new addition to WAR's staff, Nancy Singleton, Patient Navigator

With a generous grant from the Westchester group, A Cure In Our Lifetime, Women At Risk has developed and implemented this new program, which will help all women newly diagnosed with breast cancer navigate the clinical process

here. By serving as the primary liaison between the patient and the hospital and facilitating the receipt of medical and auxiliary services, our navigator will help patients overcome barriers they face in receiving care, and ensure an easier and more comfortable experience.

"This program is a wonderful fit with Women At Risk's mission," says Lynda Wertheim, WAR's President. "The Navigator, along with the other services we provide, enhances the lives of women who are diagnosed with breast cancer. We are grateful to A Cure In Our Lifetime, which funded the program."

Our Patient Navigator, Nancy Singleton, is a breast cancer survivor who is highly trained in providing support and resource referrals to people diagnosed with breast cancer, as well as their friends and family. Through her work as a SHARE hotline volunteer and a Y-Me peer counselor, Nancy has helped countless women and is passionate about helping more. "The hospital where I was diagnosed had no support," said Nancy, "and I knew that my experience could help other women. Peer-led support is key for providing hope and strength."

Patient navigation is a relatively new concept that is gaining popularity, especially in places where great disparities in cancer outcomes exist. Dr. Harold P. Freeman, who is largely considered the founder of patient navigation, established the nation's first patient navigation program at Harlem Hospital Center in 1990. Studies have shown that this model is successful in improving cancer outcomes and increasing patient satisfaction during their experience. ■

Helping Women Help Themselves

Saturday,
October 28, 2006
Free Screening Day
Statistics

- 94 women received breast screenings
- 112 women received cervical screenings
- 40 women received colorectal screenings

With your support, Women At Risk is able to help provide these life-saving services free of charge.

All recent breast cancer survivors treated at NewYork-Presbyterian Hospital are invited to a

Celebration in the Garden!

Friday, May 18, 3-5pm

The Garden, NewYork-Presbyterian Hospital
Fort Washington Avenue at 166th Street

Registration is required.
For more information and to RSVP, please call
Josephine Caputo at 201-346-7003.

Hosts: Columbia University Breast Cancer Screening Partnership • Columbia University Department of Surgery • Herbert Irving Comprehensive Cancer Care Center/Recruitment CORE • NewYork-Presbyterian Hospital/Columbia University Medical Center • Women At Risk



(L to R)
Marianne Glasel,
Dr. Freya
Schnabel, Toby
Wertheim, Dr.
Pamela Gallin

The Laurie Bass Sklaver Annual Symposium: Managing Your Health in the Age of Information Overload

By Annie Geddes

These days, there is an overwhelming amount of health information available to the public, “some good, some bad, and some very bad,” said WAR Medical Director Dr. Freya Schnabel. The 2006 Laurie Bass Sklaver Annual Symposium, held in November, sought to address this issue of information overload and how to best navigate the resources to manage your health.

“News is not a public service,” said Toby Wertheim, a career researcher and journalist. “And television executives don’t like mice,” she added, while outlining the constraints that determine which health stories get covered on television and in print. It is important that we be critical readers and listeners by looking for: how many people were included in a study; the duration of a study; and whether this was the first time a study had been done. If you are not satisfied with specific coverage, letters to the editor are taken seriously.

As we get more and more of our information from the Internet, we need to know how to evaluate what we find there. Marianne Glasel, Director of Women At Risk’s Resource Library and Support Services, suggested various search engines and health-related websites with credible content. Common sense will be your best guide to finding the most accurate information, especially when using message boards or chat rooms, which may or may not be monitored by medical professionals.

Since we also look for trusted information from our physicians, finding the right doctor is

essential. Dr. Pamela Gallin, a pediatric ophthalmologist at NewYork-Presbyterian/Columbia University Medical Center provided useful tips: look for the best possible institution from which to receive your care; when obtaining second opinions, make sure to ask doctors at the same level of specialization; bring someone along to your appointment to help absorb the information; and don’t be afraid to take notes or ask questions.

The amount of information and ease with which people can access it simultaneously make it easier and harder to obtain high-quality, medically accurate health information. The consensus of the symposium was that critical thinking, common sense, and persistence will always be the best tools to manage your health. ■

Women At Risk

First Annual Dinner Dance

WEDNESDAY, SEPTEMBER 26, 2007

HONORARY CHAIRPERSON

Tiki Barber

Former NFL Running Back,
News and Sports Broadcaster for NBC, and Author

Central Park Boathouse

Tickets \$750 each

Exclusive Corporate Sponsorships Available

Invitations will be mailed in early August

For information, please call Cynthia Lieb
at (212) 706-0014.

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Please visit WAR’s Website:
[www.breastmd.org/
war.html](http://www.breastmd.org/war.html)

Shopping for the Cause!

Many businesses throughout the New York metropolitan area partnered with Women At Risk this past October for Breast Cancer Awareness Month, showing strong efforts in the fight to raise awareness as well as funds. We would like to highlight these partnerships, and express to each of them our deepest gratitude.

WHITE + WARREN

Partners of WAR since 2001, Susan White and Barbara Warren of White + Warren designated their signature cashmere pink hoodie to be sold online for the entire month of October, with 50% of the proceeds donated to our cause. This promotion was a great way to shop online while supporting breast cancer research and education.



Steiner Sports helped raise a record-breaking amount for breast cancer research and support through an online sports memorabilia auction. 40% of the proceeds were donated directly to Women At Risk.



Donating 100% of their proceeds to WAR, Olive and Bette's specially-designed breast cancer awareness t-shirts depicted the theme of life. The t-shirts, which were sold at all of their NYC locations, were a hit.

t h e o r y

Theory hosted two exciting events spanning two different states, and helped kick off and conclude a great month of fundraising. Both shopping events, the High Tea in Greenwich, CT, and the Open House in Soho, proved to be lovely occasions where 15% of all proceeds were donated to WAR.

on the One

On Wednesday, October 11, Jill Heller hosted the 3rd annual charity shopping event benefiting Women At Risk at her store, On the One, in Mt. Kisco, New York. 15% of the proceeds from the day-long shopping event were donated to help support women at risk for breast cancer.



During the second week of October, Zaro's Bakery sold specially made, delicious pink ribbon sugar cookies at all of their NYC locations, with \$2.00 from every cookie going to support our mission.



Giella Cosmetics continues to support Women At Risk with 100% of their proceeds from the sale of a lovely Swarovski Crystal Swing Compact. This item is available at all Giella locations and online at www.giella.com throughout the year.

Partnering with Women At Risk is a great way to show your support in the fight against breast cancer. If you or someone you know is interested in creating a business promotion with WAR, please contact 212-305-4486.

Giving to WAR in Creative Ways: Margo's Caps for Cancer

By Sasha Growick

For her mitzvah project, thirteen-year-old Emily Trock wanted to make a difference during Breast Cancer Awareness Month. This coming-of-age tradition encourages young girls to volunteer in their communities. Spurred by her passion for knitting, the enterprising teen-ager created Margo's Caps for Cancer, an afternoon tea and fundraising event held on the last Sunday in October at the Temple Israel Center in White Plains.

Margo Kornfeld, the mother of Emily's best friend, had recently been diagnosed with breast cancer. "I wanted to create a project that would help more than just one or two people," explained Emily as she described the rationale behind this fundraising initiative developed to support a local breast cancer organization.

Emily dedicated and named the event for Margo Kornfeld, who

was more than grateful to be honored. Next, Emily approached a local yarn store, Sticks & Strings, which donated all of the necessary knitting materials. This generosity enabled close to 100 mothers and daughters to come together and knit caps, raising vital funds for breast cancer research, education and support.

When the proposal of this new knitting fundraising event was brought to Women At Risk, no one was sure what to expect. But with greater attendance than originally expected and donations streaming in from those unable to participate, Margo's Caps for Cancer turned out to be one of the most successful as well as most inspiring promotions held this past October. Raising more than \$10,000, twice the anticipated amount, Emily donated 100% of the proceeds to Women At Risk. Her vision, dedication and compassion are an inspiration to us all. ■



SIGN ME UP for the fight against breast cancer!

Add me to the mailing list Please send me information about WAR's High-Risk Program

I would like to join the fight against breast cancer with the following contribution of \$_____.

YOUR NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____

Payment method: Check Please charge my: Amex Visa MC

NAME ON CARD _____ ACCOUNT # _____

EXP. DATE _____ SIGNATURE _____

Mail to: Women At Risk, 601 West 168th Street, #7 & #8, New York, New York 10032

Thanks to our Donors

Women At Risk would like to thank all of its donors for their generous support. While lack of space precludes us from acknowledging each person individually, we would like to give special mention to the individuals and companies whose cumulative gifts to WAR totaled \$500 or more in 2006.

A gift to Women At Risk is a thoughtful way to honor a friend, family member or caregiver. Your contributions enable us to continue to provide vital services and fund research initiatives that benefit women at high risk for and women with breast cancer.

For stock or wire transfers or to make a donation, please use the enclosed envelope or call Kitty Silverman at (212) 305-9525.

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Included in this list are donations received between January 1, 2006 and December 31, 2006. Our apologies for any inadvertent omissions.

WAR's Board Expands

Women At Risk is proud to welcome six new Board members to our organization. We are confident their professional backgrounds, personal experiences and dedication to WAR's mission will greatly enhance the work we are doing for women at high risk for and with breast cancer.

Abby Black Elbaum is a principal of Ogden CAP Properties, LLC, which manages a portfolio of residential, commercial and hotel properties. She also participates in several not-for-profit organizations focusing on health, education and the arts including the NYPH Heart Center Steering Committee, the Sloane Hospital for Women Advisory Committee and the Columbia College Board of Visitors.

Marianne Flanagan currently works in corporate communications at Siemens Medical. Before joining Siemens, Marianne spent many years in health plan communications. Her mission as a board member is to help support programs for the underserved.

Marquita Pool-Eckert recently retired from a 30-year career as a producer for CBS News. She currently serves as an adjunct professor at Columbia University

School of Journalism, and is involved with several professional and cultural organizations, including New York Women in Film & Television, and the Museum of Modern Art.

Jane Scheinfeld devotes the majority of her time to various philanthropic organizations, including The Larry and Jane Scheinfeld Foundation, of which she is President. Prior to her work in philanthropy, Jane founded a fashion consulting business, and sold municipal bonds for JP Morgan Chase.

Carole Scherzer is currently serving as WAR's 2007 Luncheon Chairperson. With a background in insurance, Carole and her husband started a business, Scherzer International, which focuses on corporate and management employee background investigations. A survivor herself, Carole supports the American Cancer Society and the Lymphoma Group as well as several other non-profit organizations.

Susan Wiseman is a former corporate attorney, with a JD from the NYU School of Law. Susan is currently not practicing law, choosing instead to stay at home raising her two children. She is a breast cancer survivor.

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