Compared to Caucasian women, African-American women are more likely to be diagnosed with breast cancer at a younger age and at a later stage, and have more aggressive features associated with poor prognosis. However, the reasons for these differences remain unknown. To address these issues, The Cancer Institute of New Jersey (CINJ) is expanding its current research efforts as part of a new consortium of four studies in African-American women.

The Women’s Circle of Health Study, the Carolina Breast Cancer Study, the Black Women’s Health Study, and the Multiethnic Cohort Study will examine 5,500 women with breast cancer and 5,500 women without cancer, representing the largest study to date on this subject. In all, the National Cancer Institute awarded $19.3 million to support the collaborative effort, which is being led by Christine Ambrosone, PhD, Roswell Park Cancer Institute; Julie Palmer, ScD, Boston University; and Robert Millikan, PhD, University of North Carolina at Chapel Hill.

The Women’s Circle of Health Study, based at CINJ and led by epidemiologist Elisa Bandera, MD, PhD, will receive $1.6 million in funding to continue recruiting women from an expanded target area across New Jersey.

Investigators are gathering demographic and medical information, as well as reproductive, lifestyle and diet histories. Saliva and tumor samples are also collected for molecular analyses. Through the evaluation of these potential risk factors, the researchers hope to determine how they relate to the early development of breast cancer in the African-American population. “Most studies of breast cancer have been conducted in Caucasian women. Therefore, there is great need for studies like this, focusing on African-American women and with large enough numbers to be able to study the rare breast cancer subtypes, which tend to be more common in African-American women,” noted Dr. Bandera, who is also an associate professor of epidemiology at UMDNJ-Robert Wood Johnson Medical School and UMDNJ-School of Public Health.

To learn more, visit: http://cinjweb.umdnj.edu/CircleofHealth, or call 732-235-9874
Director’s Corner

“Discovery consists of seeing what everyone else has seen and thinking what no one else has thought.” That sentiment by Nobel Prize-winning physicist Albert Szent-Györgyi captures the essence of what physician-scientists at The Cancer Institute of New Jersey strive for each and every day—to engage in new ways of looking at the biology of cancer. Additionally, and most importantly, however, physician-scientists at CINJ work passionately at the process of discovery for a purpose: to cure and prevent cancer.

In fact, we are well on this road to the cure. Not too long ago, deciphering the sequence of a single human gene was difficult; today, we know the sequence of the entire human genome. A few years ago, we knew little of what made a cancer cell different from a normal one; today, we know almost every one of those differences. Such scientific discoveries could be described as a ‘spectrum of promise,’ with each new finding continuing to advance our collective knowledge in the oncology field.

At CINJ, our investigators remain on the cutting-edge of cancer research, unlocking new clues that will serve as a strong foundation for future scientific advancements.

As you’ll read in our cover story, the Women’s Circle of Health study, led by CINJ epidemiologist Dr. Elisa Bandera, aims to further examine the mysteries of breast cancer by studying the disease in African-American women. Information collected from this study will be merged with findings from three other large studies from across the nation. Upon completion, researchers will have a data set of more than ten-thousand from which to draw conclusions relating to this segment of the population, which is more likely to be diagnosed with breast cancer at a younger age and at a later stage than compared to Caucasian women.

And we’re breaking new ground in the area of cancer vaccine therapy. Led by CINJ Deputy Director Dr. Edmund Lattime and CINJ’s co-director of the Gastrointestinal/Hepatobiliary Oncology Program, Dr. Elizabeth Poplin, investigators are in the midst of a unique clinical trial that aims to harness the body’s own defense mechanisms in fighting pancreatic cancer. Early results are showing an association with stable disease, following a direct vaccine injection into the tumor itself (see page 5).

None of these discoveries happen without collaboration. CINJ investigators are working closely with CINJ member Dr. Anant Madabhushi of Rutgers, The State University of New Jersey, in helping to bring new imaging technologies to the patient bedside. As you’ll read on page 6, Dr. Madabhushi recently was awarded a grant to develop a better tool to predict breast cancer aggressiveness.

It is advancements such as these that we recently celebrated with the CINJ Foundation during its annual Award of Hope Gala, which boasted the theme — ever so appropriately — ‘Spectrum of Promise’ (see page 12). It is through the support of our collaborators and all of you that we are able to fulfill our mission. We hope you will continue with us on this journey.

Sincerely,

Robert S. DiPaola, MD
Director, CINJ; Associate Dean for Oncology Programs and Professor of Medicine, UMDNJ-Robert Wood Johnson Medical School
Menthol Cigarettes May Make it Tougher to Quit Smoking for Certain Populations

Could a mint-flavored additive to cigarettes have a negative impact on smoking cessation efforts? Recent research from investigators at The Cancer Institute of New Jersey and UMDNJ-School of Public Health finds that menthol cigarettes are associated with decreased quitting in the United States and that this effect is more pronounced for blacks and Puerto Ricans. The findings appeared in the American Journal of Preventive Medicine (doi:10.1016/j.amepre.2011.06.039) in October.

Previous studies regarding the impact of smoking menthol cigarettes and smoking cessation efforts have produced mixed results. For instance, some research did not take into account the overall population of smokers, while other studies lacked focus on periods of successful smoking cessation and instead targeted attempts to quit. This current study, Smoking Cessation Prevalence among Menthol and Non-Menthol Smokers in the United States, looks at whether those who smoke menthol cigarettes are less likely to quit than smokers of non-menthol cigarettes and whether these findings differ by race/ethnicity as well as among various subgroups of smokers, such as those trying to quit.

Utilizing data from the 2003 and 2006-2007 National Cancer Institute Tobacco Use Supplement to the Current Population Survey, investigators focused on white, black and Hispanic “ever-smokers,” who were defined as current smokers and former smokers who quit in the past five years. Overall, menthol smoking was more common among females and young adults, ages 18 to 24. Menthol smoking varied considerably by race/ethnicity; among blacks, 71.8 percent smoked menthols, which is significantly greater than whites (21 percent) and Hispanics (28.1 percent). However, among Hispanics there were wide variations. Menthol smoking was more common among those of Puerto Rican descent (62 percent) than among those of Mexican (19.9 percent) and other Hispanic origins (26.5 percent).

The study further found that menthol cigarette smoking was associated with lower levels of smoking cessation compared to non-menthol smokers.

CINJ Member Cristine Delnevo, PhD, MPH, director of the Center for Tobacco Surveillance and Evaluation Research Program and interim chair, Department of Health Education and Behavioral Science at UMDNJ-School of Public Health, is the lead author of the study.

The research was supported by the FDA Center for Tobacco Products; however, the work and conclusions of this study are solely those of the authors and not the FDA.

Energy Boost

The metabolism of cancer cells has attracted great attention in the last few years. Energy metabolism is an essential function sustaining the increase in cancer cells by division, the movement of cancer cells from one place to another, and survival of cancer cells. Both normal and cancer cells utilize two major pathways to satisfy their energetic demands. One is glycolysis, the conversion of the simple sugar glucose into lactate. The other is mitochondrial respiration. Both pathways can generate energy from glucose, however mitochondrial respiration is sixteen times more efficient in terms of how much energy is produced per molecule of glucose.

About a century ago, it was observed that cancer cells have an increased use of glycolysis relative to normal cells. However, the reason of why cancer cells rely more on this inefficient pathway has remained a puzzle until today.

CINJ systems biologist Alexei Vazquez, PhD, and his collaborators have observed that glycolysis is a simpler pathway, with fewer steps and broken down by enzymes of smaller size than those required for mitochondrial respiration. In a loose space, those size differences would not be an issue. However, the intracellular make-up is a crowded environment and the cell is very sensitive to any attempt of overcrowding. To handle this physical constraint, cancer cells switch from mitochondrial respiration to glycolysis.

The work by Dr. Vazquez’s group has also shown that the switch to glycolysis is aided by a concurrent increase of the protein building block known as glutamine, which is another hallmark of cancer cell metabolism. More surprisingly, it has predicted that there is a third pathway that lies between glycolysis and mitochondrial respiration in terms of energy yield and crowding. Vazquez, who is also an assistant professor of radiation oncology at UMDNJ-Robert Wood Johnson Medical School, and his group are investigating the inhibition of these pathways as a potential anticancer therapy.
Edmund C. Lattime, PhD, is the deputy director at The Cancer Institute of New Jersey, as well as the associate director for education and training. He also is a professor of surgery, director of surgical oncology research and professor of molecular genetics, microbiology and immunology at UMDNJ-Robert Wood Johnson Medical School.

Dr. Lattime is well known for his work in tumor immunology. His laboratory studies the interaction between the tumor and immune response with the ultimate goal of developing effective immunotherapeutic approaches. During his postdoctoral fellowship and subsequent ten years as a faculty member at Memorial Sloan-Kettering Cancer Center, Dr. Lattime carried out the defining studies into the identification and regulation of natural cytotoxic cells shown to have significant antitumor activity. Also at Sloan-Kettering, his laboratory began studying the interaction between tumor and the immune response in patients with bladder cancer. These studies identified the tumor microenvironment as a target for therapy. In the late 1980s when he was recruited to Thomas Jefferson University, Dr. Lattime used data from these clinical and preclinical studies to further explore the modulation of antitumor immunity via drug/gene delivery to the tumor microenvironment.

Building from this work, his group ultimately developed a genetically engineered version of the smallpox vaccine virus (vaccinia) containing the gene for GMCSF – a substance naturally produced by the body’s immune system that stimulates immune recognition. They took the virus from preclinical validation to the generation and regulatory approval of a human grade virus used in their first-in-man study in melanoma. The virus was patented and ultimately licensed to the Jennerex Biotherapeutics Company. It is currently in Phase II/III study in patients with liver cancer. Most recently, results from a Jennerex clinical trial of the virus was the focus of a publication in the journal Nature demonstrating for the first time a gene therapy given intravenously that localized and preferentially targeted tumor metastases.

When recruited to CINJ in 1998, Dr. Lattime and colleagues continued building on these previous findings. They completed a first-in-human Phase I clinical trial sponsored by the National Cancer Institute (NCI) Cancer Therapy Evaluation Program, which focused on the treatment of advanced bladder cancer tumors with a human-engineered fowlpox virus. Most recently, Dr. Lattime’s laboratory has identified the effectiveness of intratumoral immunization with a related vaccinia-based tumor vaccine. Teaming with the CINJ Gastrointestinal Tumor Study Group, they have translated these latest findings to an innovative Phase I study, also sponsored by the NCI, where patients are immunized directly into the pancreas using an engineered poxvirus containing tumor markers (antigens) expressed on pancreatic cancer. Early results of this study, presented this past November at a national scientific meeting showed that in four out of six participants, the direct-injection vaccine treatment was shown to be associated with clinically stable disease (see page 5).

While research is a main component of his work, in his role as Deputy Director at CINJ, Lattime also is responsible for the Education and Training Programs at the center. This includes, The Governor’s Conference on Effective Partnering in Cancer Research, which was started in 2003, with the goal of raising the visibility of cancer research in New Jersey, and the Annual Retreat on Cancer Research in New Jersey, which brings together cancer researchers from across the state to present their findings and build statewide collaborations. He is also responsible for overseeing Faculty Affairs at CINJ.

Dr. Lattime’s research is supported by grants from the National Cancer Institute.
Direct Injection Vaccine Treatment for Pancreas Cancer Associated with Stable Disease

A series of vaccine injections given directly into a pancreatic cancer tumor is shown to be associated with stable disease in patients who are not candidates for surgery. Early results of a clinical trial being conducted at The Cancer Institute of New Jersey were recently presented at the AACR-NCI-EORTC International Conference: Molecular Targets and Cancer Therapeutics meeting held in San Francisco.

Previous studies by scientists at CINJ have shown that injecting a vaccine and other immunity-producing drugs into a cancer tumor itself – rather than the traditional site of the skin – can result in a reversal of the traditional immune blockade and the development of specific immunity to the tumor. This body-wide tumor-specific immunity has the potential of blocking the growth of the original tumor as well as eliminating small deposits of tumor that can cause the cancer to spread. Stemming from this research is a clinical trial that was the focus of this poster presentation. The study by CINJ investigators further tests this vaccine strategy, designed to harness the body's own immune system to fight cancer.

Researchers are utilizing two types of the investigational vaccine known as PANVAC.

PANVAC contains gene additives that might stimulate a person's immune system to recognize and develop an immune response to the disease. PANVAC-V, which uses the same virus as the smallpox vaccine, is a live but weakened vaccinia vaccine (meaning the virus can still multiply) that is given in the arm. PANVAC-F (a live Fowlpox virus that cannot multiply) is injected into the arm and into the pancreas tumor itself through endoscopic ultrasound.

During the first phase of the study, which looked at six participants whose cancer could not be removed through surgery, patients were evaluated for toxicity, tumor progression and the presence of tumor markers for pancreatic cancer. Two patients were removed from the study after two weeks due to rapid disease progression. Of the remaining four patients, three had received gemcitabine – a standard treatment for pancreatic cancer – after receiving vaccination treatment. The other patient was treated with gemcitabine, followed by capecitabine and radiation, prior to the vaccination regimen and received no other treatment after.

Of these four patients, all were shown to have clinically stable disease after 15 months, 13 months, 12 months and nine months respectively. The second part of the trial is accruing additional participants, who are being given a higher dosage of PANVAC-F during direct injection of the tumor.
Robotic Surgery and Gynecologic Cancers

A gynecologic oncologist at The Cancer Institute of New Jersey, Mira Hellmann, MD, is specially trained in the area of robotic surgery. Utilizing the tiniest of instruments, Dr. Hellmann, who is also an assistant professor of obstetrics, gynecology and reproductive sciences at UMDNJ-Robert Wood Johnson Medical School, operates in fine precision through the use of controllers on a console that is steps away from the patient.

Q: What is robotic surgery?
A: Robotic surgery is a form of minimally invasive surgery (similar to laparoscopy) that utilizes the assistance of a “robot” to increase the ease of the surgery. The instruments are inserted into the patient via very small incisions — a centimeter or less in size — then attached to a robot. The precise movements of the robot are controlled by the surgeon through controls present on a console, usually located in the same room, directly at the patient’s bedside.

Q: What are the benefits of this procedure versus traditional surgery?
A: There are several, but one of the main benefits is patients experience significantly less pain post-operatively and therefore recover faster. This usually allows the patients to leave the hospital after only one night’s stay – compared to the routine three or four nights in the hospital.

Q: Is everyone a candidate for robotic surgery?
A: Unfortunately, not everyone is a candidate for robotic surgery. Consultation with a robotic surgeon is necessary in order to determine who is and who is not an appropriate candidate, as many factors are considered, including type of cancer and general health of the patient.

CINJ’s entire team of gynecologic oncologists is trained in robotic surgery and has performed more than 100 of these procedures within the past year. To learn more about robotic surgery or CINJ’s Fannie E. Rippel Center for Women’s Reproductive Cancers/Gynecologic Oncology Program, call 732-235-2465 or visit www.cinj.org.

Q: What are some examples of how this method is being used to treat gynecologic cancers?
A: The technology is used for lymph node dissection, radical hysterectomy, radical trachelectomy, and complicated hysterectomy (including pelvic masses). Therefore, women with endometrial and cervical cancer (and pre-cancer) are primary candidates for this type of surgery. In addition, women with ovarian masses, and/or early stage ovarian cancer may benefit from this surgery as well.

CINJ medical oncologist, Shridar Ganesan, MD, PhD, who is an assistant professor of medicine and pharmacology at UMDNJ-Robert Wood Johnson Medical School, is the clinical principal investigator for this project.
The Time is Right to Save Your Life

ushering in a new year, many of us set resolutions to improve our health and kick bad habits…including stopping the use of tobacco. While not an easy task, there are a great deal of resources available to help tobacco-users be successful in their quest for longer and healthier lives.

Whatever your reasons, give it a try

There are many reasons to stop smoking – your health, money, protecting your family and friends from second-hand smoke, not wanting to be addicted, etc. Whatever is making you think about stopping – give it a shot, even for a day. You are never too young, too old, too sick, or too healthy to stop. You have nothing to lose and everything to gain.

Some things you can do to help you achieve this goal:

• Identify people, situations, emotions and other things that trigger your desire to use tobacco. For each trigger, list different things you can do to cope besides smoking.
• Keep a journal to list daily accomplishments, slips, and thoughts about how things are going.
• Change your behaviors to avoid triggers. Change your routines (drink orange juice instead of coffee; drive a different way to work; stop at a donut shop for coffee instead of a convenience store).
• Clean out your home, car, and office from any related tobacco items.
• Do things that are tobacco-free. Spend more time in places where you can’t use tobacco (mall, library, movies, stores).
• Spend time with people who don’t use tobacco.
• Tell others who might be supportive of you that you are trying to stop using tobacco.

Don’t get frustrated

Smoking is not just a “bad habit” – it is an addiction. Nicotine is one of the most addictive substances on the planet and tobacco use affects the chemistry of the brain. Having difficulties with quitting is not a sign of weakness and will-power is not the issue. Once you decide to try and stop – get help. Cessation treatment can double or triple your chance for success. Keep in mind, slip-ups may be part of the process. Just keep going. The only failure is when you give up trying.

Help is out there – use it

There are many things you can do to help you quit smoking successfully. Comprehensive treatments that include behavioral skills, support, and medications have been proven to be the most effective way to quit.

Medications and nicotine replacement therapies can relieve cravings and withdrawal symptoms so that you feel more comfortable and can deal with the quitting process more easily. Telephone quitlines (1-800-QUIT NOW) can provide support. Face-to-face treatment, whether it is individual or group, is the most effective way to stop smoking. The UMDNJ-Tobacco Dependence Program is here to help at 732-235-8222. Stopping smoking starts here!
‘Jersey Girl’ Study at CINJ Looks at Understudied Hormone Disruptors

Puberty is a time in a girl’s life considered highly sensitive to stimulation by the hormone estrogen and a critical window during which estrogen exposure could greatly influence the risk of breast cancer later in life. An early onset of puberty also has been consistently shown in studies to increase the risk of breast cancer. The Jersey Girl Study, which aims to examine factors affecting puberty in girls and is based at The Cancer Institute of New Jersey, has shown that estrogen-like substances produced by fungi may act as a hormone disrupter.

Led by CINJ epidemiologist Elisa Bandera, MD, PhD, a multidisciplinary team of investigators recently found detectable levels of these fungal compounds, known as mycoestrogens, in urine samples donated by girls participating in the Jersey Girl Study. The findings suggest that the presence of these mycoestrogens may delay height growth and the onset of breast development in young girls.


Another Successful Prostate Cancer Screening Event

The Cancer Institute of New Jersey and its Flagship hospital Robert Wood Johnson University Hospital (RWJUH) reached a significant landmark in their annual prostate screening event this past year, having tested more than 700 men over a three-day period. This figure surpasses the number of attendees who participated in previous years and brings the total number of men checked over the past five years to around 3,000.

CINJ urologic oncologist Thomas L. Jang, MD, MPH, who led the clinical component of this year’s screening, noted that the best available studies show that screening men for prostate cancer saves lives. “The goal is to find aggressive cancers that are potentially curable at an early stage, so these men can have a successful outcome while limiting over-detection and over-treatment of less harmful cancers,” said Dr. Jang, who is also an assistant professor of surgery at UMDNJ-Robert Wood Johnson Medical School.

This screening was funded in part by a special gift from the Robert Wood Johnson Foundation and co-sponsored by Panera Bread.

Sharing a Survivor’s Moment

As we look ahead to our National Cancer Survivors Day celebration this June, we at The Cancer Institute of New Jersey want to thank all of those who shared the story of their personal journey with us at last year’s event. The segments, “Sharing a Survivor’s Moment,” are now available at www.cinj.org/SurvivorsMoment.html.

Outreach Director at CINJ Tapped for National Program

Kiameesha Evans, MPH, MCHES, program director of the Office of Community Outreach at The Cancer Institute of New Jersey, has been selected to take part in a unique pilot program for cancer control practitioners through the National Cancer Institute.

As one of only six participants selected nationwide, Evans is taking part in the Research to Reality (R2R) Mentorship Program for one year. The R2R Program aims to strengthen the ability of public health professionals to effectively navigate and execute evidence-based cancer control and prevention interventions in community or clinical settings under the guidance of a mentor.

As a mentee, Evans will work with Evelyn Gonzalez, MA, from Fox Chase Cancer Center on the implementation and evaluation of the Body & Soul Program. The program will provide resources such as healthy recipes and exercise DVDs to leaders at New Jersey houses of worship to help them build awareness of healthier living within their congregations.
Kudos!

**Susan Goodin, PharmD, FCCP, BCOP,** assistant director for clinical science at The Cancer Institute of New Jersey and professor of medicine at UMDNJ-Robert Wood Johnson Medical School, recently received the Distinguished Service Award at the 2011 American Society of Health-Systems Pharmacists Midyear Clinical Meeting. This award spotlighted her volunteer activities and contributions which supported the mission of the Section of Clinical Specialists and Scientists. Dr. Goodin was one of six individuals to receive this prestigious honor.

**Bruce G. Haffty, MD,** chair of radiation oncology at CINJ, and chair and professor of radiation oncology at the UMDNJ-Robert Wood Johnson Medical School was recently recognized by the New York Roentgen Society at its 2011 Annual Meeting for his vast contributions to the radiation oncology field.

**Atif Khan, MD,** radiation oncologist at CINJ, and assistant professor of radiation oncology at UMDNJ-Robert Wood Johnson Medical School, was named a recipient of the 2011 Educator of the Year Award. Sponsored by the American Society for Radiation Oncology and the Association of Residents in Radiation Oncology, this award recognizes outstanding teachers and mentors of radiation oncology students.

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**On Tour**

Dr. Guna Rajagopal (bottom, far right), Executive Director of Bioinformatics at CINJ, recently gave a tour to several students involved in programs at the Center for Discrete Mathematics and Theoretical Computer Science (DIMACS) at Rutgers University. The students, who are studying how math, science and computers come together to measure and analyze large data sets, had a chance to visit CINJ’s zebrafish lab, as well as the radiation oncology clinic.

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**Surviving and Thriving**

We hope you’ll join us for our 2012 Survivors Day Celebration: “iThrive...iSurvive”

When: Sunday, June 10, 2012
Where: CINJ 195 Little Albany Street Newark, NJ

Visit www.CINJ.org/survivorship for more information.

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Breast cancer survivor Dorothy Reed prepares to go on camera.
Somerset Medical Center’s Steeplechase Cancer Center has launched a specialized Lung Cancer Clinic dedicated to the early diagnosis of lung cancer. Low-dose CT scans are offered for current or former smokers over 50 years old with 30 or more “pack years.” Results are evaluated by a pulmonologist and patients with positive findings have access to the cancer center’s Lung Cancer Institute, a multidisciplinary team of specialists that includes pulmonologists, oncologists, a nurse navigator and thoracic surgeons.

The Steeplechase Cancer Center recently received a grant from the Central and South Jersey Affiliate of Susan G. Komen for the Cure® to promote annual mammograms among older women. The cancer center also promotes annual screenings among medical center

New Leadership for CINJ Hamilton

Board-certified oncologist and hematologist Biren Saraiya, MD ’02, (left) of Lawrenceville has been named medical director of The Cancer Institute of New Jersey Hamilton (CINJ Hamilton) – the oncology program at Robert Wood Johnson University Hospital Hamilton (RWJ Hamilton).

“I view this position as an opportunity to give back to the community in which I live,” says Dr. Saraiya, whose association with UMDNJ-Robert Wood Johnson Medical School started more than 13 years ago – first as a medical student and resident, then as a hematology-oncology fellow, and most recently as an assistant professor of medicine. For the past three years, Saraiya has also served as a member of the Thoracic Oncology and Hematologic Malignancies Programs at The Cancer Institute of New Jersey in New Brunswick.

According to Skip Cimino, president and CEO of RWJ Hamilton, Saraiya’s research and expertise on end-of-life care, advanced cancer therapies, and patient-physician communication makes him the best choice for developing CINJ Hamilton into the “premier, patient-centered cancer program in Mercer County.”

“I’m excited to help expand the current infrastructure and services offered at CINJ Hamilton, and I look forward to collaborating with my colleagues in New Brunswick to develop a more integrated program here in Hamilton,” noted Saraiya.
Doctors at The Cancer Institute of New Jersey provide state-of-the-art healthcare and are tirelessly dedicated to their patients. CINJ would like to congratulate its “Top Doctors” who were voted as such by their peers in various publications over the past few months.

**Inside Jersey – October 2011**
- **Joseph Aisner, MD**, Associate Director for Clinical Science, CINJ; Professor of Medicine, UMDNJ-RWJMS
- **David August, MD**, Chief, Surgical Oncology, CINJ; Professor of Surgery, UMDNJ-RWJMS
- **Robert DiPaola, MD**, Director, CINJ; Associate Dean for Oncology Programs and Professor of Medicine UMDNJ-RWJMS
- **Richard Drachtman, MD**, Interim Chief, Pediatric Hematology/Oncology, CINJ; Professor of Pediatrics, UMDNJ-RWJMS
- **James S. Goydos, MD**, Director, Melanoma and Soft Tissue Oncology Program, CINJ; Professor of Surgery, UMDNJ-RWJMS
- **Bruce G. Haffty, MD**, Chair, Radiation Oncology, CINJ; Chair and Professor of Radiation Oncology, UMDNJ-RWJMS
- **Salma Jabbour, MD**, Radiation Oncologist, CINJ; Assistant Professor of Radiation Oncology, Department of Radiation Oncology, UMDNJ-RWJMS
- **Thomas J. Kearney, MD**, Director, Breast Care Services, CINJ; Associate Professor of Surgery, UMDNJ-RWJMS
- **Lorna Rodriguez, MD, PhD**, Chief, Gynecologic Oncology, CINJ; Professor of Obstetrics, Gynecology and Reproductive Sciences, UMDNJ-RWJMS
- **Roger Strair, MD, PhD**, Chief, Hematological Malignancies/Hematopoietic Stem Cell Transplantation, CINJ; Professor of Medicine, UMDNJ-RWJMS
- **Deborah L. Toppmeyer, MD**, Chief Medical Officer and Chief, Solid Tumor Oncology, CINJ; Associate Professor of Medicine, UMDNJ-RWJMS

**New Jersey Monthly – November 2011**
- **Darlene Gibbon, MD**, Clinical Director, Gynecologic Oncology, CINJ; Associate Professor of Obstetrics, Gynecology, and Reproductive Sciences, UMDNJ-RWJMS
- **Roger Strair, MD, PhD**, Chief, Hematological Malignancies/Hematopoietic Stem Cell Transplantation, CINJ; Professor of Medicine, UMDNJ-RWJMS

For more information about The Steeplechase Cancer Center at Somerset Medical Center, visit www.steeplechasecancercenter.com
Award of Hope Gala Brings Promise

The 2011 Award of Hope Gala was a wonderful celebration of all that makes The Cancer Institute of New Jersey great! Three terrific honorees and an inspiring young philanthropist were applauded by an appreciative crowd of nearly 400 CINJ donors, supporters, patients and well-wishers.

As they were seated in the ballroom at the Hyatt Regency New Brunswick, guests celebrated the outstanding contributions to advancing cancer research and treatment that have been made by Award of Hope for Leadership in Research recipient, Eileen P. White, PhD, who is associate director for basic science at CINJ as well as a professor of molecular biology and biochemistry at Rutgers University. Dr. White’s groundbreaking discoveries have translated into the development of new cancer therapies and novel clinical trials for patients.

A special video was then shown highlighting Award of Hope for Philanthropic Leadership honorees Scott and Aileen Glickman, founders of the Century for the Cure annual bike ride. Scott and Aileen created the ride as a way to give back to the institute that saved his life and to fund research so others may have better treatment options in the future. The amazing efforts of this couple have resulted in more than $825,000 for cancer research and programs at CINJ since 2004. Scott and Aileen’s heartfelt acceptance underscored the compassion and humility that are hallmarks of this incredible couple.

Finally, guests were introduced to an outstanding young man, Dan Hertz, who received the Young Philanthropist Award for his efforts to bring awareness to and raise funds for cancer research while at Rutgers University. He described his motivation to become involved with a poignant recollection of his mother, in her mid-thirties, taking his
Training Future Breast Cancer Surgeons

Eighteen months ago, Archit Naik, MD, MBA, submitted his application to the Society of Surgical Oncology (SSO), the organization which reviews and approves surgical fellowship training programs in the United States and conducts a Matching Program to match qualified candidates with SSO-approved training program. Of the outcome, Dr. Naik, the C.R. Bard Surgical Breast Oncology Fellow, says, “After six months, I feel that I could not have matched at a better place than The Cancer Institute of New Jersey.”

The one-year fellowship at CINJ provides surgeons who have completed their general surgery residency with advanced training and experience that prepares them to provide state-of-the-art care specifically for patients with breast disease. Through the program, they learn how to apply a multi-disciplinary approach to the prevention, diagnosis, treatment and rehabilitation of breast cancer patients in a compassionate manner. In addition, CINJ fellows participate in clinical and/or laboratory research with opportunities to design and implement clinical protocols, and train in basic methodology for conducting clinical trials.

Dr. Naik is eager to share his clinical research focus, stating, “I recently submitted an abstract to the American Society of Breast Surgeons researching the role of post mastectomy radiation in patients with three or less positive lymph nodes. The project was conducted with several different departments, including medical oncology and radiation oncology.”

Fellowships like this are made possible through the generosity of donors who recognize the importance of training the next generation of physician-scientists. In describing the fellowship experience made possible by the investment of C.R. Bard, Inc., Dr. Naik notes, “I enjoy working with all the attendings of CINJ. They are all from different training backgrounds, which makes CINJ an invaluable place to learn the intricacies of breast surgery.”

In fact, the surgical breast oncology fellowship at CINJ is one of the most desirable placements by SSO. In 2010, over 70 candidates applied for positions in 32 approved programs and CINJ received 41 applications for the one available position.
The Cancer Institute of New Jersey (CINJ) Foundation has named Colleen D. Brennan and Michael E. Lubowitz the newest members of its Board of Trustees.

**Colleen D. Brennan, Esq.**

Colleen D. Brennan is a Vice President and Chief Compliance Officer at Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ), which serves approximately 3.6 million members. Brennan has practiced healthcare law extensively during her career. She currently serves as a member of the Horizon BCBSNJ Corporate Compliance and Integrity Program and as Assistant Secretary to the Board of Directors for Horizon BCBSNJ and its subsidiaries. Brennan also held positions as Vice President, Legal Affairs; and Deputy General Counsel at Horizon BCBSNJ. In these roles she advised senior management on legal and regulatory issues relating to insurance, health maintenance organizations, and pharmacy. She previously served as Assistant General Counsel at Prudential Financial, Inc., and as Counsel at Aetna, Inc.

**Michael E. Lubowitz, Esq.**

The co-head of Weil, Gotshal & Manges’ New York Private Equity and Mergers and Acquisitions Department, Michael E. Lubowitz is a noted attorney, representing public and private companies in a broad range of transactions. Lubowitz has advised clients that include CBS Corporation, C.R. Bard, DIRECTV, Lehman Brothers, and Verizon Inc. among others. Lubowitz is an active participant in various pro bono and not-for-profit matters. Various areas of participation include providing counsel to youth organizations, services to Holocaust survivors, and counsel to an Iraqi citizen who provided valuable assistance to the U.S. government.

Subha V. Barry, chair of the CINJ Foundation Board of Trustees says the two newest members will be great assets to the CINJ Foundation. “The extensive health and business law expertise from Ms. Brennan and Mr. Lubowitz complements the vast collective experience held by our Board. In propelling the CINJ mission of conducting ground-breaking research, providing innovative cancer treatment, and facilitating prevention and education programs, these new members surely will help make an impact on that progress.”
The inaugural Golf for a Cure, sponsored by Nutley High School Football Alumni, brought together 55 people to raise $13,000 for prostate cancer research. Understanding why the people of Nutley came together is just as touching as the tremendous efforts put forth by event organizer Mario Cocchiola, who was treated for prostate cancer at The Cancer Institute of New Jersey. Grateful for the incredible care he received, Mr. Cocchiola wanted to support CINJ’s efforts to find a cure, as well as provide the community the opportunity to remember Nutley head football coach, Sandy Phillips, who led the school’s football team to its 1960 state championship and lost his battle with prostate cancer…A crisp fall Saturday provided the backdrop for the neighbors of Sayerville to join in the Leprechauns 1st Cancer Walk. The Sayerville Leprechauns Football and Cheerleading Association spearheaded the effort which had hundreds of supporters gathered to take steps forward towards a cure…After celebrating her sixth year as a breast cancer survivor, Jane O’Brien thought the time had come for her, as well as others, to give back to those who spend day and night searching for a cure at CINJ. This past October, Jane rallied her closest family and friends to join her in the “Go Jane Go” breast cancer walk in Bradley Beach – raising more than $1,500 dollars. “My doctor and team are great – there are none better. They explained all that was happening to me while I was receiving treatment. I walked to thank all the people who helped me to get where I am today. CURED!”…Despite the September rain, supporters gathered in Roosevelt Park in Edison for the 3rd Annual Pancreatic Cancer Walk lead by the Mayor of Edison, Antonia Ricigliano; Acting Director of the Middlesex County Office of Public Health, Katherine Antonitis; and Chairperson from the Middlesex County Committee of Public Health and Education, Carol Barrett Bellante. The walk raised more than $2,500 for pancreatic cancer research at CINJ. Special thanks to ParamCARE for helping to organize the event…St. Joseph High School in Metuchen was rocking and rolling in October to find a cure! The Student Council sponsored a record-setting concert featuring “Audio Insight” with alumni band members Anthony Celi, Mike Deverin, and Dan Sullivan. Tickets were $5 each and all proceeds went to support cancer research at CINJ…It was more than just a casual Friday when employees at DiFrancesco, Bateman, Coley, Yospin, Kunzman, Davis, Leher & Flaim in Warren celebrated Denim Day. Employees contributed $5 for the privilege of wearing denim and participated in activities which included a bake sale, gift auction, and a pumpkin decorating contest – raising over $2,000 to benefit cancer research. During the past year, three employees were diagnosed with cancer making this event even closer to home…Roselle Catholic High School held its 4th annual Spike Breast Cancer volleyball tournament in October. With the Central Jersey Police and Fire Department entertaining the roaring crowd with their drum band, the Roselle Catholic varsity team defeated its rival Bishop Ahr. According to coach Jamie Godfrey, winning was just an additional benefit to raising money to fund breast cancer research at CINJ…The Piscataway Braves Pop Warner Cheering Squads took their spirit to the stands on a Saturday in October to collect $400 for breast cancer awareness and research (including a gift from the Piscataway Braves Parent’s Auxiliary).
There's nothing like coming 'home' for the holidays, and that's what a number of the Garden State's most notable musicians did recently in performing a special concert in Red Bank to support the incredible work being done at The Cancer Institute of New Jersey. Under the musical direction of Jersey Shore notable Bobby Bandiera and headlined by Jon Bon Jovi, the Hope Concert featured a cast of the state's finest musicians, who – along with the host venue, the Count Basie Theatre – donated their services to the cause. Bandiera and the Jersey Shore Rock-N-Soul Revue, Bon Jovi, Southside Johnny, Gary U.S. Bonds, Nicole Atkins, Brian Fallon, Tim McLoone and the Shirleys, and others served up classic hits to an audience of about 1,500 and helped raise $175,000 for CINJ!