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Licking Memorial Health Systems

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*Please take a few minutes to read
this month's report on patient
care quality. You'll soon discover
why Licking Memorial Hospital
is measurably different
for your health!
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**Licking Memorial
Health Systems**

September 2003
Volume 9
Number 3

**Cancer
Care**

measurably
different
for your
health!



HEALTH TIPS

According to the American Cancer Society (ACS), tobacco smoke contains at least 43 cancer-causing substances. ACS offers these tips for avoiding smoking once you've decided to quit:

- Stay away from situations you associate with smoking.
- Don't drink any beverage you associate with smoking.
- Remember your goal and that the urge to smoke eventually will pass.
- Call a supportive friend.
- Don't think that "one won't hurt;" it will.



...a community report on patient care quality.

Cancer Care: How do we compare?

At Licking Memorial Hospital, we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then we publish them so you can draw your own conclusions regarding your health care choices.

1 If you have a mammogram, you want to be confident that it is interpreted accurately. Specificity is a measure of the accuracy of mammography interpretation related to normal (negative) results. Sensitivity is a measure of the accuracy of mammography interpretation related to abnormal (positive) results.

	LMH 2001	LMH 2002	National ⁽¹⁾
Specificity	95%	95%	>90%
Sensitivity	100%	98%	>85%

2 Sometimes a radiologist will recommend a biopsy after a mammogram is read. To be accredited for mammography, health care organizations are required to look at the number of cases recommended for biopsy that result in cancer diagnosis – called the positive predictive value. This helps monitor the accuracy of the radiology interpretations.

	LMH 2001	LMH 2002	National Recommended Range ⁽¹⁾
Positive predictive value	33%	38%	25-40%

3 LMH follows a rigorous five-step safety procedure to prevent chemotherapy medication errors. LMH administers approximately 4500 doses of chemotherapy each year.

	LMH 2002	LMH 1/03-6/03	LMH Goal
Number of chemotherapy medication errors	0	0	0

4 For a community cancer care program to be approved by the American College of Surgeons Commission on Cancer, the hospital must hold multidisciplinary, patient-oriented treatment planning conferences at least monthly. The goal of this requirement is to increase the number of cases that are reviewed while patient care can still be influenced.

	LMH 2002	LMH 1/03-6/03	Standard
Number of meetings monthly	3	3	1
% cases reviewed while patient care can still be influenced	94%	94%	>51%

5

When a person is either diagnosed with or treated for cancer, the person is entered into the Cancer Registry. It is then the responsibility of the accredited organization to follow up with the person for the rest of his/her life on an annual basis to encourage appropriate care. The staff in the Cancer Registry may contact the primary care physician or the patient to do this.

% cancer patients followed up annually

LMH 2002	LMH 1/03-6/03	Standard
93%	92%	>90%

6

Another requirement for cancer care program accreditation is that a hospital have a minimum percentage of its newly diagnosed and/or treated cancer patients entered in clinical trials.

% newly diagnosed and/or treated patients in clinical trials

LMH 2001	LMH 2002	Standard
3.9%	4.0%	>2%

Data Footnote:

⁽¹⁾ Quality Determinates of Mammography, Clinical Practice Guide #13, AHCPR Publication No. 95-0632.

Offering Encouragement after Cancer

A PATIENT'S STORY



William Marriott encourages others to regularly have physicals. After fighting colon cancer, he now sees his physician for biannual check-ups.

William Marriott was 57 when his family physician suggested he be tested for colon cancer. Three years later, he's the one making the suggestion. "Now, every time I get the chance, I tell people to get checked," William said.

A bleeding hemorrhoid led William to his doctor in September 2000. Test results showed he had colon cancer. In October 2000, he had surgery at Licking Memorial Hospital (LMH) to remove part of his colon. "Licking Memorial Hospital does a great job," William said. "I'd go back there in a heartbeat."

He was told he would be hospitalized for at least a week following surgery, but William replied, "I don't think so," he said. "I was determined to recover quickly. I wasn't going to let cancer keep me down." His operation was early in the week, and William was released in time for Sunday service at First Baptist Church of Heath.

He later underwent 26 weeks of chemotherapy at LMH. "My family was behind me, and there were a lot of prayers from my church. The surgery staff, nurses, doctors and oncology staff at Licking Memorial were great. I give them credit, but my faith got me through this. I thank God more than anything."

While William is thankful to have his health back, he thinks regular preventive medicine could have made a difference in his fight against colon cancer. "It had been 26 years since I had a physical. We guys are kind of dumb that way," William joked. "Now I have a physical every six months. Had I had regular physicals before my diagnosis, I probably would not have gotten colon cancer. Of course, hindsight is 20-20."

Instead of dwelling on what he should have done, William encourages others not to make the same mistake. "I tell everyone they should have regular physicals," he said. "It could save their lives. I was lucky."

“Licking Memorial Hospital does a great job. I'd go back there in a heartbeat.”

LMHS Helps with Smoking Cessation

“Cigarette smoking is the major single cause of cancer mortality in the United States.” The U.S. Surgeon General's Report included that statement more than 20 years ago, and it still holds true today. Smokers can reduce their risk for developing cancer by breaking the habit for good. Licking Memorial Health Systems (LMHS) can help. The LMHS Education Department offers these tips:

- List the reasons why you want to quit, and carry the list with you so you can review it several times each day.
- Choose a quit-date within the next one to two weeks.
- Tell someone that you are quitting, and ask for his or her support.
- Throw away all tobacco, lighters, ashtrays, etc.
- Clean your clothes, car, drapes, and furniture to get rid of the smoke smell.
- Stay away from other tobacco users and tempting situations.
- Spend more time with friends who do not smoke.
- Find activities that make smoking difficult.
- Keep oral substitutes – such as carrots, celery and straws – handy.
- Change your daily routine to break your old habits.

Watch for upcoming programs for adults and teens for help to stop smoking. **For more information, contact Roanne Gottschalk, B.S.N., a registered nurse and trained smoking cessation facilitator with LMHS, at 348-1424.**

Tobacco Users Face Increased Risk for Cancer

THERE ARE AT LEAST 43 CANCER-CAUSING SUBSTANCES IN TOBACCO SMOKE, AND TOBACCO USE IS ATTRIBUTED TO APPROXIMATELY ONE-THIRD OF ALL CANCER DEATHS IN THE UNITED STATES. DESPITE THE POTENTIAL FOR THESE AND MANY OTHER KNOWN HEALTH RISKS, TENS OF MILLIONS OF AMERICANS CONTINUE TO LIGHT UP REPEATEDLY EACH DAY.

Approximately 90 percent of lung cancer cases among men and more than 70 percent among women are caused by smoking, according to the American Cancer Society.

Lung cancer isn't the only increased cancer risk faced by smokers. Their odds of developing cancers of the mouth, larynx, pharynx, esophagus, kidney, bladder, pancreas and uterine cervix also are higher. Other health risks include heart disease, stroke, emphysema, chronic bronchitis and chronic obstructive pulmonary disease.

A smoker's risk for lung cancer grows with every cigarette smoked. The good news is that quitting smoking not only keeps that risk from increasing, it can actually reduce an individual's likelihood of developing the disease. According to the American Lung Association (ALA), former smokers' risk of lung cancer decreases each year after they've quit since abnormal cells are replaced with normal, healthy ones.

“After five years as a former smoker, a person's risk of lung cancer and cancer of the mouth, throat and esophagus is half that of a pack-a-day smoker,” said Elliott Gerber of the Licking Memorial Hospital Respiratory Therapy Department. “That's encouraging, and the odds only get better for former smokers who continue to be smoke-free.”

After 10 years, a former smoker's risk for lung cancer is one-third to one-half of what it would have been had he continued to smoke, and his odds of developing cancer of the mouth, throat, esophagus, bladder, kidney and/or pancreas also decrease.

Is Smokeless Tobacco Safe?

Quitting isn't easy. Not only is smoking addictive, breaking any habit can be difficult. Switching from smoking to using smokeless tobacco isn't a healthy alternative to quitting. Risk for cancer of the cheek and gums increases nearly 50 times for long-term snuff users, as compared to non-users, the ALA warns. Additionally, the longer an individual uses smokeless tobacco, the more likely he is to develop leukoplakia – white sores or patches in the mouth that can lead to cancer.

“By quitting, smokers can breathe easier and reduce their risk for various forms of cancer, heart disease and stroke,” Gerber said. “Continuing to use tobacco products is not only dangerous, it can be deadly.”

