Licking Memorial Health Systems
Quality Report Card

Volume 24, Issue 3 | March 2023 CANCER CARE

Clinical Trials Offered for LMH Patients

Clinical trials are research studies performed on people that are aimed at evaluating a medical, surgical, or behavioral intervention. They are the primary way that researchers find out if a new treatment is safe and effective or has less harmful side effects than the current treatment. Clinical trials provide access to potential treatments that are still being studied, giving options to patients who may otherwise face limited choices.

There are several different types of clinical trials:

- Quality of life – trials that research new ways to minimize the side effects of cancer and treatments
- Prevention – trials that explore ways to reduce the risk of developing cancer, including lifestyle changes, medicines, or vaccines
- Screening – experiments that test new ways to detect cancer
- Genetics – trials that study inherited family genes that might affect a person's risk for cancer
- Treatment – studies that test new therapies, surgeries, drugs, and wellness treatments

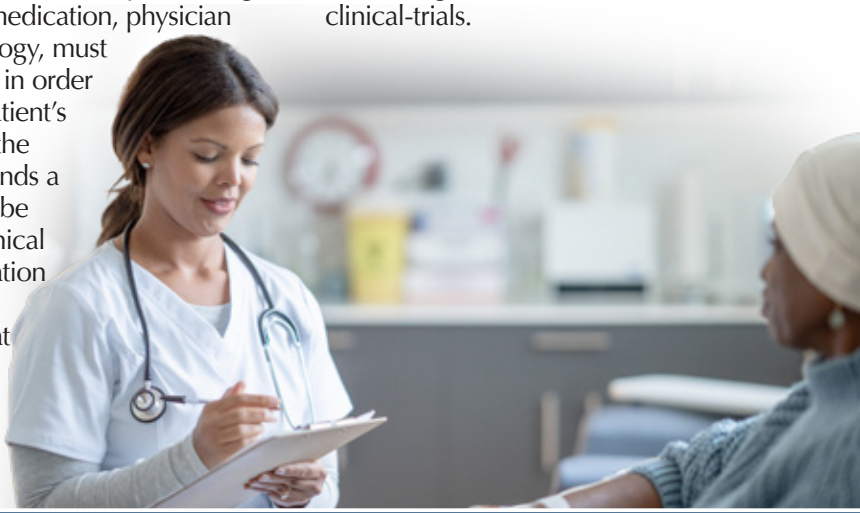
Licking Memorial Hospital (LMH) offers clinical trials to new and existing cancer patients who may be eligible for certain studies. Clinical Trial A212102 is a current screening study that collects blood samples from various populations of cancer and non-cancer patients. The collected samples are added to a biobank, which will help to develop a blood test that will determine genetic markers in people who have a higher risk of getting cancer. LMH was recently recognized for having the highest accrual in the nation for this clinical trial.

Clinical research nurses play an important role in the clinical trial process. They serve as liaisons between researchers and patient volunteers and advocate for the safety and well-being of their patients throughout the research process. Clinical research nurses attend tumor board and pathology reviews and meet with care teams to study labs, test results, and adverse events. They ensure that all staff and patients are following all protocols of the trial.

Clinical trials are available for all stages of cancer. The National Cancer Institute (NCI) Community Oncology Research Program (NCORP) is a national network that brings cancer clinical trials and care delivery studies to people in their own communities. Licking Memorial Oncology receives packets from NCORP containing clinical trial information, which clinical trial nurses review and compare with oncology patients who are treated at LMH. Each trial has specific requirements for each study, and criteria, such as a patient's age, stage of cancer, medication, physician notes, and pathology, must all be considered in order to determine a patient's eligibility. Once the oncology nurse finds a patient who may be qualified for a clinical trial, their information is recommended to an oncologist at LMH for trial.

Once a patient is accepted into a trial, a baseline visit is scheduled where the patient receives a health assessment to establish a starting point to compare the patient's progress throughout the study. The patient is then assigned to a treatment or control group. The procedures of the clinical trial will be explained and subsequent visits will be scheduled that will last throughout the trial. During each visit, the research team will monitor the patient's health and collect information to measure the impact of the treatment. All patients who participate in clinical trials at LMH will receive high quality, care.

Major medical breakthroughs could not happen without the participation of clinical trial patients. The information learned in clinical trial studies help physicians and researchers discover how a disease affects the body and help to develop or improve ways to diagnose and treat it. Individuals who are interested in learning more about clinical trials can discuss options with their physician. The NCI also provides an online search tool for cancer clinical trials at cancer.gov/about-cancer/treatment/clinical-trials.



Patient Story – Billie Hoy

Since moving to Licking County as an 11-year-old, Billie Hoy has turned to Licking Memorial Health Systems (LMHS) to meet her health and medical needs. Her father moved the family from West Virginia for employment reasons, and retired from Rockwell International in 1989. Her mother obtained a position at Licking Memorial Hospital (LMH) in the kitchen and also retired in 1989. Billie has spent most of her life in banking and currently holds a position with PNC Bank.

Unlike her parents, Billie has no plans of retiring; rather, she hopes to continue working and serving the Licking County community. While Billie did enjoy staying home to care for her three children, she found spending time away from work to heal from surgery more challenging. "The time at home about drove me crazy," Billie commented. "I enjoy my work, and I want to stay as active as possible."

Billie has survived cancer three times. Her first diagnosis was breast cancer in 1995 which required removal of the cancerous tissue and breast reconstruction. She remained cancer free until early 2020. While visiting her primary care physician, Katrina M. Timson, M.D., Billie asked about a spot on her leg. Dr. Timson suggested a biopsy of the tissue and laboratory results confirmed Billie had developed melanoma. Melanoma occurs when the pigment-producing cells that give color to the skin become cancerous. Billie's treatment began with surgery to remove the cancerous tissue and several lymph nodes in her groin after it was discovered that the cancer cells had spread.

In addition to the surgery, to ensure all cancer cells were destroyed, Billie was prescribed immunotherapy, which is the use of medicines to target specific proteins in the immune system. This process assists the body in recognizing and fighting cancer cells more effectively. The medications can be administered intravenously; however, the staff at the Licking Memorial Oncology Clinic were concerned about the condition of Billie's veins. They suggested she have a port placed in her chest to simplify the process. A port is a small, implantable reservoir with a thin silicone tube that attaches to a vein. Utilizing the vein-access device allows the chemotherapy medications to be delivered directly into the port rather than a vein, eliminating the need for needle injections every treatment.

"Every three weeks, I would visit the Clinic for my treatment. The staff were so kind to me, and I cannot say enough good things about them," Billie shared. "Jean Moyer, the Physician Center Clerk, always greeted me by name and made me feel welcome. The process took about an hour, and during that time, they would continually check on me, and ask if I wanted something to eat or drink. I felt so comfortable, and I considered them all friends."

After healing from the surgery, Billie returned to work. She was concerned that her work hours might interfere with scheduling the immunotherapy treatments. "The Oncology staff was so efficient and willing to consider my scheduling needs. They were able to rearrange and organize my visits no matter what I had going on at the time."

Billie's family surrounded her and provided support and comfort during her treatments as well. Her three children, Staci, Richard, and Matt, attended her first appointment at the Oncology Clinic. "As we were heading to LMH, I told my children that they would really like D'Anna N. Mullins, M.D., and they did. They were impressed by the depth of her concern for me and her confidence in the treatment plan," Billie said.

In April 2021, Billie received her last immunotherapy treatment for melanoma and was declared cancer free. She felt compelled to do something for the team of providers who displayed friendship and kindness toward her, so she brought a cheesecake to the appointment. To her surprise, the staff was eager to celebrate with her and had also brought a cake for the special occasion.

In November 2022, Billie was once again informed she had cancer. A lump was discovered in the opposite breast from the one that had been affected in 1995. Fortunately, the tumor was discovered while in the early stages. Billie was scheduled for a lumpectomy. The surgeons removed the lump and several lymph nodes to determine if the cancer had spread. The biopsies on the lymph nodes detected no signs of cancer.

Her healthcare team determined that no chemotherapy or radiation would be needed. To reduce the risk that the cancer would return, Billie was prescribed hormone therapy. Hormone therapy for breast cancer is a treatment to battle estrogen receptor-positive or progesterone receptor-positive cancers that are sensitive to hormones. The medication blocks the hormones from attaching to receptors on cancer cells or by decreasing the body's production of hormones in order to prevent cancer cells from growing.

Billie is fully recovered from the surgery and has again returned to work. She does not plan to slow down anytime soon, and looks forward to spending more time with her children, six grandchildren, and five great-grandchildren, who live in Licking County.

Cancer Care – *How do we compare?*

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare to benchmark measures. Then, we publish the information so you can draw your own conclusions regarding your healthcare choices.

1. Statistics are collected for all screening mammograms to assess the accuracy of the testing. Some parameters that are determined include the probability that any individual case of breast cancer will be identified by the mammogram and the probability of the mammogram correctly identifying patients who do not have cancer.

	LMH 2019	LMH 2020	LMH 2021	LMH Goal
Percentage of cancers correctly identified by the mammogram	98.5%	100%	95%	**78%**[1]
Percentage of patients without cancer correctly identified by the mammogram	98.7%	98.4%	92%	**90%**[2]

2. Screening mammograms are conducted to detect breast cancer before the patient has any noticeable symptoms. Breast cancer is most easily and effectively treated when it is diagnosed in its early stages. Although the results from most screening mammograms are negative, meaning no cancer was detected, for patients who are found to have breast cancer, the screening mammogram may have been life-saving technology. Licking Memorial Hospital (LMH) tracks the number of screening mammograms that have positive interpretations, meaning that the tests detected cancer that may have remained unnoticed until it was more advanced.

	LMH 2019	LMH 2020	LMH 2021	LMH Goal
Cancer detection rate with positive interpretations (per 1,000 screening mammograms)	6	6	9	**2 to 10**[3]

3. Wait time is defined as the number of days between the completion of the first procedure and the second scheduled procedure. The amount of time between testing and the procedure is significant to enabling physicians to more quickly identify and diagnose breast cancer and begin patient treatment.

	LMH 2019	LMH 2020	LMH 2021	National[4]
Wait times:				
Screening to diagnostic mammogram	4.8 days	4.4 days	5.9 days*	**6.5 days**
Diagnostic mammogram to needle/core biopsy	5.1 days	5.2 days	10.2 days*	**5.1 days**
Biopsy to initial breast cancer surgery	20.3 days	18.4 days	24.2 days*	**24 days**

Increased wait times due to Epic implementation. Preliminary 2022 data demonstrates a return to prior year averages.

4. Chemotherapy drugs are toxic and could be dangerous if not prepared correctly. Therefore, LMH follows a rigorous five-step safety procedure to prevent chemotherapy errors.

	LMH 2019	LMH 2020	LMH 2021	LMH Goal
Number of chemotherapy medication errors negatively impacting patients	0	0	0	**0**

5. When a person is either diagnosed with or treated for cancer, the person is entered into the Cancer Registry. It then is 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. Cancer Registry staff also may contact the primary care physician to ensure the health of the patient.

	LMH 2019	LMH 2020	LMH 2021	LMH Goal
Cancer Registry patients with annual follow-up	94%	94%	95%	**greater than 80%**

6. Clinical research ensures that patient care approaches the highest possible level of quality. There is no minimum requirement for how many patients are placed in cancer-related clinical trials in a community hospital cancer program; however, to provide maximum service, LMH offers access to national clinical trials to patients as a member of the Columbus Community Clinical Oncology Program.

	LMH 2019	LMH 2021	LMH 2021	LMH Goal
Newly diagnosed and/or treated patients in clinical trials	8%	12%	8%	**greater than 2%**

Cancer Care – How do we compare? (continued on back page)

Check out our Quality Report Cards online at **LMHealth.org.**

7. In an effort to prevent and promote early detection and treatment of cancer, the physician offices of Licking Memorial Health Professionals (LMHP) measure and track results of cancer screening tests for breast cancer, cervical cancer, and colorectal cancer for all active patients. Active patient population is defined as patients seen within the last three years.

LMHP active patient population that received screening tests for:	LMHP 2019	LMHP 2020	LMHP 2021	LMHP Goal
Cervical cancer (female patients, age 21 to 65)	73%	73%	62%*	**75%**
	LMHP 2019	**LMHP 2020**	**LMHP 2021**	**National[5]**
Breast cancer (female patients, age 50 to 75)	78%	73%	69%*	**69%**
	LMHP 2019	**LMHP 2020**	**LMHP 2021**	**National[5]**
Colorectal cancer (all patients, age 50-75)	67%	67%	57%*	**66%**

Due to COVID-19 restrictions throughout 2020 and 2021, some patients were unable to obtain regular testing or attend in-person appointments.

8. Hereditary cancers, such as breast cancer, are caused in part by gene mutations passed from parents to children, and generally begin to develop in a person at a younger age. Through genetic testing, researchers can determine if someone carries a specific mutation that puts them and their family members at an increased risk and need for early screenings. LMH offers genetic testing to newly diagnosed patients with breast cancer who meet certain qualifications in order to equip them with the knowledge to make the best choices for themselves and their families.

	LMH 2019	LMH 2020	LMH 2021	LMH Goal
Breast cancer diagnoses that met criteria and received genetic testing	*	61%	74%	**90%**

**LMH began tracking the number of breast cancer diagnosis that met and received genetic testing in 2020.*

Data Footnotes:

(1) Kolb TM, Lichy J, Newhouse JH. Comparison of the performance of screening mammography, physical examination, and breast ultrasound and evaluation of factors that influence them: an analysis of 27,825 patient evaluations. Radiology. 225(1):165-75, 2002. Oestreicher N, Lehman CD, Seger DJ, Buist DS, White E. The incremental contribution of clinical breast examination to invasive cancer detection in a mammography screening program. AJR Am J Roentgenol. 184(2):428-32, 2005.

(2) Bassett LW, Hendrick RE, Bassford Tl, et al, Quality determinants of mammography: Clinical practice guidelines, No. 13. Agency for Health Care Policy and Research Publication No. 95-0632. Rockville, MD: Agency for Health Care Policy and Research, Public Health Services, U.S. Department of Human Services, 1994.

(3) D'Orsi CJ, Bassett LW, Berg WA, et al, BI-RADS: Mammography, 5th Edition in: D'Orsi CJ, Mendelson EB, Ikeda DM, et al: Breast Imaging Reporting and Data System: ACR BI-RADS – Breast Imaging Atlas, Reston, VA, American College of Radiology, 2013.

(4) National Quality Measures for Breast Centers (NQMBC) www.nqmbc.org database.

(5) Percentages are compiled by averaging Commercial, Medicare and Medicaid data as reported in "The State of Health Care Quality Report," 2017 Screening Rates.

Genetic Testing for Cancer Risk

Knowing family medical history can help people identify whether they may have a greater risk of having inherited medical conditions, such as heart disease, diabetes, and certain types of cancers. Licking Memorial Health Systems offers a hereditary cancer screening tool for patients to determine if they may be eligible for genetic testing for certain cancers.

Prior to their appointment, patients who visit Licking Memorial Oncology, Women's Health, Urology, and some Family Practice offices will receive a questionnaire about family history of cancers, including colon, uterine, breast, ovarian, prostate, and melanoma. The form is accessible through LMHS' patient portal, MyChart, and may be completed at home, allowing extra time for patients to consult family members about their medical history and provide more accurate information.

Individuals who answer yes to any of the questions may receive free genetic education from a board certified genetic counselor. The counselor will help the patient determine if they and their family are at risk for a gene mutation that can cause cancer, and if genetic testing is appropriate.

Once a patient has received counseling, they may choose to receive genetic testing, in which a blood or saliva sample is collected. The sample is sent to a laboratory that specializes in genetic testing to detect biomarkers that provide information about certain cancers. If the test is positive, patients can discuss next steps with their genetic counselor and physician.

It is important to note that genetic testing is a tool that can help to evaluate a person's cancer risk. It does not diagnose cancer and is not a substitute for regular cancer screenings. Individuals who have questions about genetic testing and their risk for cancer should consult their physician.

Please take a few minutes to read this month's report on **Cancer Care.** You will soon discover why Licking Memorial Hospital is measurably different ... for your health!

The Quality Report Card is a publication of the LMHS Public Relations Department. Please contact the Public Relations Department at (220) 564-1572 to receive future mailings.