CANCER COMMITTEE MEMBERS NORTHWESTERN LAKE FOREST HOSPITAL\ 2010

Michael Cochran, MD	Susan Balling R.N.	Karline Peal RT
Stephen Ganshirt M.D.	Nancy Bulzoni	Emily Rosecrans
Joseph Imperato M.D	Linda Dickson MT	Sarah Russ
Edward Kaplan M.D.	Robin Flory PT	Cathy Spagnoli RN
Marlon Kleinman M.D.	Leah Haverhals PT	Carroll Stovold LSCW
Victoria Kut M.D.	Damon Havill	Lourdes Swanson
Michelle Lee M.D	Mallory Johnson, RHIA	Mary Tebbe RN
Leonard Lu M.D.	Barb Lichty	Jennifer Tepper APN
Thomas Mientus M.D.	Cindra Macciomei	Edye Wagner R.D.
Lisa Miller M.D.	Linda McBride, CTR	Kim Welton
Ira Piel M.D.	Marianne Mocogni R.N.	Kim Wiersma RN
Marc Posner M.D.	Kim Nagy R.N.	Claudia Wiser PT
Sonya Sharpless M.D.	Marsha Oberrieder	
Dean Tsarwhas M. D.	Alisa Ostebo	

CANCER COMMITTEE ANNUAL REPORT

The 2010 Cancer Committee had a very productive year. The annual goals were set as follows:

<u>Quality</u>: Pursue NAPBC Accreditation for Breast Center. Establish a weekly prospective multidisciplinary breast conference.

Programmatic: Provide garment fitting services onsite to NLFH Breast Cancer patients.

<u>**Community Outreach:**</u> Improve communication to the general community about Cancer related educational programs offered at NLFH locations.

<u>Clinical:</u> Expansion of Radiation and Medical Oncology Services at NLFH Grayslake Facility.

We also established that the study topic would be breast and that Dr. Ganshirt would tackle that project.

We successfully opened both the Radiation Oncology center at Grayslake, as well as the Outpatient Infusion center, and both were treating patients before the end of the year, improving the quality of care in that region of the state. Karline Peal was named Director of Oncology Services, and has worked tirelessly to integrate the various programs. See was given the task to oversee the Cancer Center at Grayslake, Radiation Oncology, Outpatient Oncology and the Tumor Registry at the hospital.

We have received our results from the Commission on Cancer Survey. We received one contingency on Clinical Staging by Managing Physician Standard 4.3. It should be noted that 50% of programs surveyed have received this contingency. On a positive note we did receive five commendations on the program. We will work to comply with Standard 4.3 and submit supporting documentation to CoC in a timely manner.

Since I stepped down as Chair of the Cancer Committee, this will be my last report. I welcome Dr. Lisa Miller as the new Chair.

By every measure that we were able to obtain we have been operating extremely successfully with our Cancer Care Program across the board and we look forward to increased improvement of the quality of care of our patients in the forthcoming year.

Marc Posner, MD Cancer Committee Chairman

2010 CANCER INCIDENCE

	Total Cases		Brea	st	Lun	g		Skin	Corpu Uter		Blade	der
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
NLFH	546	100	260	47.62	64	11.72	64	11.72	41	7.51	27	4.95
Illinois	63,890	100	8,770	13.73	9,190	14.38	2,060	3.22	1,960	3.07	3,050	4.77
National	1,529,560	100	209,060	13.67	222,520	14.55	68,130	4.45	43,470	2.84	70,530	4.61

New Cancer Cases - Top 5 Sites

County at Diagnosis

Count (N) Percentage(%)

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IL- Lake	649	90.52%
IL- Cook	37	5.16%
WI	13	1.81%
IL-McHenry	7	0.98%
FL	3	0.42%
IL-Du Page	3	0.42%
IL-Boone	2	0.28%
IL- Kane	1	0.14%
NM	1	0.14%
VA	1	0.14%
Total	717	100%

2010 SITE DISTRIBUTION BY SEX AND BY CLASS OF CASE

	ANALYTIC	NON- ANALYTIC	MALE	FEMALE
Tongue	5	0	3	2
Salivary Gland	2	1	2	1
Gum and Other Mouth	2	0	1	1
Total Oral Cavity & Pharynx	9	1	6	4
Esophagus	3	1	4	0
Stomach	11	1	5	7
Small Intestine	2	0	1	1
Cecum Ascending Colon Transverse Colon Descending Colon Sigmoid Colon Large Intestine, Nos Total Colon	3 5 1 5 2 17	0 0 0 0 1 1	0 2 1 0 4 0 7	3 3 1 1 3 11
Rectosigmoid Junction	1	0	1	0
Rectum	9	1	4	6
Total Rectum/Rectosigmoid	10	1	5	6
Anus, Anal Canal, Anorectal	2	0	0	2
Liver & Intrahepatic Bile Duct	3	1	2	2
Pancreas	10	3	7	6
Retroperitoneum	1	0	0	1
Total Digestive System	59	8	31	36
Larynx	5	0	4	1
Lung & Bronchus	64	11	38	37
Total Respiratory System	69	11	42	38
Soft Tssue including Heart	2	0	1	1
Total Soft Tissue	2	0	1	1
Melanoma - Skin	62	3	35	30
Total Skin Excluding B &S	54	5	33	26
Breast	260	10	0	270
Total Breast	260	10	0	270
Cervix Uteri Corpus Uteri Ovary Vulva Total Female Genital	4 41 8 7 60	0 0 0 0 0	0 0 0 0	4 41 8 7 60

System

Prostate Testis Penis Other Male Genital Organs Total Male Genital System	24 5 2 1 32	5 0 0 5	29 5 2 1 37	0 0 0 0
Urinary Bladder Kidney & Renal Pelvis Ureter Total Urinary System	27 5 2 34	2 2 0 4	19 5 1 25	10 2 1 13
Brain	2	1	1	2
Cranial Nerves & Other Nervous Total Brain & Other	14	0	5	9
Nervous	16	1	6	11
Thyroid Total Endocrine	15 15	1 1	4 4	12 12
Hodgkin Lymphoma Non-Hodgkin Lymphoma NHL-Nodal NHL-Extra Nodal Total Lymphoma	2 21 18 3 23	0 6 3 3 6	1 15 13 2 16	1 12 8 4 13
Myeloma	4	3	6	1
need tp dp leukemia Lymphocytic Leukemia Other LL Chronic LL	1 0 1	2 1 1	0 0 0	3 1 2
Myeloid & Monocytic Leukemia Total Leukemia	2 3	1 3	1 1	2 5
Mesothelioma	1	0	1	0
Miscellaneous	10	1	5	6
GRAND TOTAL 717	662	55	219	498

NORTHWESTERN LAKE FOREST HOSPITAL BREAST CANCER STUDY

This is a retrospective review comparing data from Lake Forest Hospital to 186 hospitals in Illinois for the years 2003-2008. This data does not include review of individual charts. While this data allows us to gauge our hospital relative to similar hospitals in Illinois, it does not provide details for the differences. *Incidence of breast cancer 2000-2008*

The percentage of breast cancers diagnosed over the past 9 years, as a percentage of total breast cancer diagnosed was highest in 2006 at 14.02% and lowest in 2002 at 9.32% at Northwestern Lake Forest Hospital. The range for the remainder of the state was highest in 2001 at 11.95% and lowest in 2004 at 10.43%. *Age group of breast cancer diagnosed 2000-2008*

There were 9 categories for patients at the age of diagnosis. There were no patient's under age 20 at Northwestern Lake Forest Hospital versus 3 in Illinois; age 20-29 0.37% versus 0.43%; age 30-39 4.85% versus 4.19%; age 40-49 23.86% versus 17.87%; age 50-59 28.64% versus 24.24%; age 60-69 20.43% versus 22.07%; age 70-79 15.51% versus 18.94%; age 80-89 5.44% versus 10.65%, 90, and over 0.89% versus 1.6% *Race/ethnicity of breast cancer diagnosed 2000-2008*

The percentage of patients that are White at diagnosis is 88.22% at Northwestern Lake Forest Hospital compared to 81.07% in Illinois; 3.58% were Black versus 11.63% in Illinois; 1.86% was Hispanic versus 3.52% in Illinois. *Histology of breast cancer diagnosed 2000-2008*

Infiltrating duct carcinoma was 53.91% at Northwestern Lake Forest Hospital versus 64.07% for the remainder of Illinois; lobular carcinoma accounted for 11.56% versus 9.74%; infiltrating duct and lobular carcinoma comprised 12.9% versus 6.11%; infiltrating duct mixed with other types of carcinoma was 7.01% versus 4.19%; other specified types was the remaining 14.62% versus 15.89%

First course of treatment of breast cancer diagnosed 2000-2008

There were 10 different treatment protocols following diagnosis including surgery only 18.57% at Northwestern Lake force hospital versus 21.69% in Illinois; surgery and radiation 14.69% versus 12.04%; surgery and chemotherapy 4.7% versus 8.44%; surgery, radiation and chemotherapy 8.5% versus 9.96%; surgery, radiation and hormone therapy 24.38% versus 18.07%; surgery and hormone therapy 5.44% versus 9.33%; surgery, radiation, chemotherapy and hormone therapy 13.72% verses 7.97%; surgery, chemotherapy and hormone therapy 4.85% versus 3.70%; other specified therapy 4.25% versus 6.48%, and no first course of treatment 0.89% versus 2.27%

First course surgery of breast cancer diagnosed 2000-2008

There were 11 different treatment options involving surgery after the diagnosis of breast cancer. These included no surgery of the primary site 1.72% for Northwestern Lake Forest Hospital versus 5.95% in Illinois; local tumor destruction 0% versus 0.02%; partial mastectomy 70.62% versus 58.92%; subcutaneous mastectomy 0.07% versus 0.08%; total mastectomy 15.73% versus 15.57%; modified radical mastectomy 11.41% versus 18.36%; radical mastectomy 0% versus 0.46%; extended radical mastectomy 0% versus 0.02%; mastectomy 0.15% versus 0.25%; surgery NOS 0% versus 0.2%; unknown if surgery performed 0.3% versus 0.16%

Stage of breast cancer diagnosed 2000-2008

Stage 0 31.47% at Northwestern Lake Forest Hospital versus 20.49% in Illinois; Stage I 35.5% versus 37.71%; Stage II 22.15% versus 26.17%; Stage III 6.56% versus 8.06%; Stage IV 1.64% versus 4.05%; NA 0.07% versus 0.1%; UNK 2.61% versus 3.41% Additionally, there is data supplied looking at five-year survival from 2003 for Stage 0 through Stage IV disease comparing Northwestern Lake Forest Hospital to 73 Illinois hospitals.

Analysis and conclusions

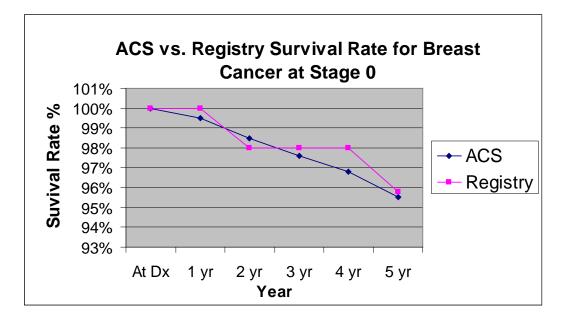
The most impressive indicators from reviewing the above data reveal excellent five-year survival statistics for Stage 0 through Stage III patients treated at Northwestern Lake Forest Hospital versus Illinois in general. The number of patients in the Stage IV group was too small for comparison. Unfortunately this does not break out the treatment the patient received in either group to help differentiate the reasons for the difference in survival. The first part of this study indicates a consistent pattern between Northwestern Lake Forest Hospital and the state of Illinois for most statistics. There were large differences especially with lumpectomy versus mastectomy, with lumpectomy much more common at Northwestern Lake Forest Hospital. The stage of cancers diagnosed also tended to be of a lower stage at Northwestern Lake Forest Hospital, and the age of the patient at diagnosis was also younger overall at Northwestern Lake Forest Hospital.

Stephen Ganshirt M.D.

Stage 0 revealed five-year survival of 95.8% (50) at NLFH versus 95.5% (1160) in Illinois

STAGE 0 SURVIVAL BREAST CANCER DX 2003

	ACS	Registry
At Dx	100%	100%
1 yr	99.5%	100%
2 yr	98.5%	98%
3 yr	97.6%	98%
4 yr	96.8%	98%
5 yr	95.5%	95.8%

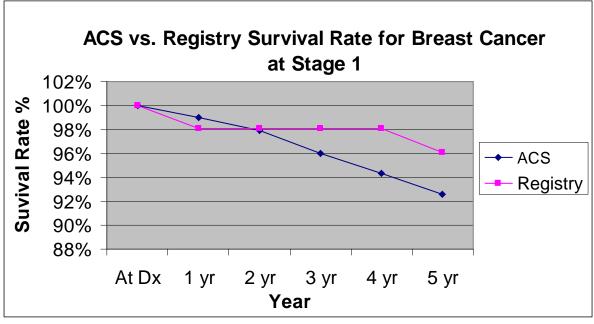


Data from National Cancer Data Base and Northwestern Lake For	est Hospital Registry
NCDB	NLFH
Number of	

cases	1160	50

Stage I reve	ealed five-year survival of 96.1% (54) versus 92.6% (2258)
STAGE 1	SURVIVAL BREAST CANCER DX 2003

	ACS	Registry
At Dx	100%	100%
1 yr	99.0%	98.1%
2 yr	97.9%	98.1%
3 yr	96.0%	98.1%
4 yr	94.3%	98.1%
5 yr	92.6%	96.1%

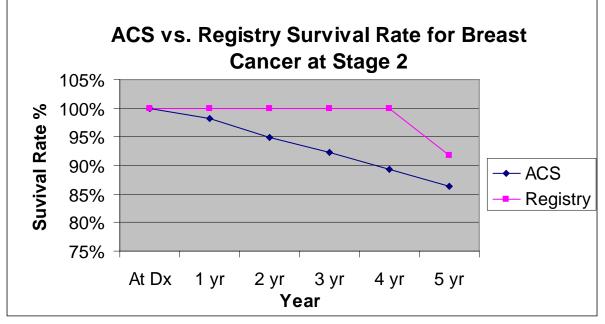


Data from National Cancer Data Base and Northwestern Lake Forest Hospital Registry

	NCDB	NLFH
Number of		
cases	2258	54

Stage II rev	ealed five-year survival of 91.8% (27) versus 86.4% (1661)
STAGE 2	SURVIVAL BREAST CANCER DX 2003

	ACS	Registry
At Dx	100%	100%
1 yr	98.2%	100%
2 yr	94.9%	100%
3 yr	92.3%	100%
4 yr	89.3%	100%
5 yr	86.4%	91.8%



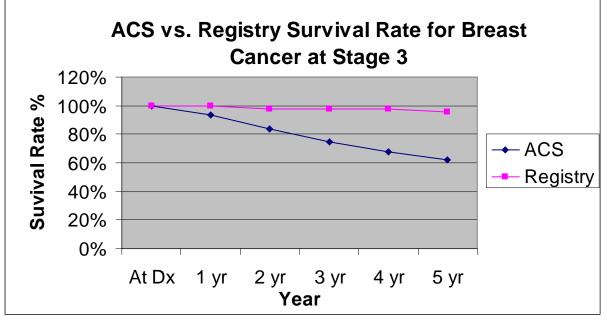
Data from National Cancer Data Base and Northwestern Lake Forest Hospital Registry NCDB NLFH Number of

cases	1661

27

STAGE 3 SURVIVAL BREAST CANCER DX 2003

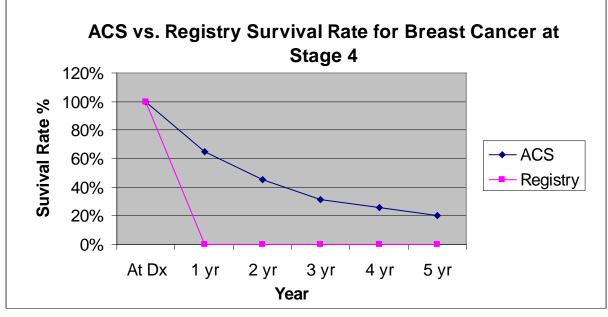
	ACS	Registry
At Dx	100%	100%
1 yr	93.7%	100%
2 yr	83.8%	98.0%
3 yr	74.4%	98.0%
4 yr	67.5%	98.0%
5 yr	61.9%	95.8%



Data from National Cancer Data Base and Northwestern Lake Forest Hospital Registry

nospital Kegisti y	NCDB	NLFH
Number of		
cases	676	18

Stage IV revealed five-year survival of 0% (1) versus 20.5% (252) STAGE 4 SURVIVAL FOR BREAST CANCER DX 2003					
	ACS	Registry			
At Dx	100%	100%			
1 yr	64.8%	0%			
2 yr	45.2%	0%			
3 yr	31.6%	0%			
4 yr	25.8%	0%			
5 yr	20.5%	0%			



 Data from National Cancer Data Base and Northwestern Lake Forest Hospital Registry

 NCDB
 NLFH

 Number of cases
 252
 1