

AWARE!

Assessing Your Cancer Risk with Genetic Testing

Genetic testing – looking back

The first genetic test for cancer became available in 1996. That test, the BRCA 1/2 test, looked for mutations in the two genes most commonly affected in hereditary breast and ovarian cancer — the breast cancer 1 (BRCA1) and breast cancer 2 (BRCA2) genes. Since then, many more cancer genes have been identified, and tests developed to look for mutations.

“I have been doing genetic testing since 2006, and back then it was only two genes and it was only for breast cancer,” says Yvonne Ruddy-Stein, APRN. “That’s not the case anymore. Now we know that there are at least 23 more genes that influence the risk of breast cancer, even if you don’t have BRCA1 and 2.”

Dr. Beth Sieling agrees. “When I arrived to start my first job in Waterbury, there was no genetic counseling here,” says the breast surgeon. “I realized that had to change, and we started counseling.”

People who had genetic testing done years ago may be able to benefit from the more comprehensive screening panels now available. Today, a typical genetic testing panel includes screening for mutations in 77 different genes that have been linked to a higher cancer risk.

Understanding your hereditary cancer risk



To help patients better understand their family medical history and their personal risk of being diagnosed with a hereditary type of cancer, Trinity Health Of New England Oncology Center’s genetic counseling program at HLRCC offers comprehensive genetic screening and support.

“Genetic testing is looking for a genetic predisposition to cancer,” says Yvonne. “If you have inherited a muta-



Genetic testing allows us to understand the risk the patient has to developing certain cancers and allows healthcare providers to increase surveillance or take steps to prevent development of cancer in these patients.

Nicole Sookhan, MD, FACS, FRCS



tion, that gives you a higher risk for developing cancer in your lifetime.”

Genetic counseling and testing is also conducted at local breast centers. Dr. Elizabeth Riordan says, “We perform breast cancer risk assessments on a majority of the patients that we see. I cannot overemphasize the importance of knowing one’s family medical history, especially

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when it comes to cancer incidence; this information may be vital in accurately calculating a patient's future breast cancer risk and in making appropriate referrals for genetic testing."

What is genetic testing?

Genetic testing actually involves three steps: **genetic counseling**, **genetic testing**, and **post-test counseling**. With genetic counseling, the individual's personal and family history is thoroughly reviewed to determine if genetic testing is recommended and which specific genetic mutations may have been inherited.

"We're looking for certain red flags, like family members who have been diagnosed with cancer or people with multiple cases of cancer in the family," says Ruddy-Stein. "Not everybody who has those red-flag characteristics will test positive, and somebody who doesn't have any of those characteristics might test positive. Those characteristics are just guidelines, but they do help us determine the right testing and management plan."



*Yvonne Ruddy-Stein,
APRN, AGN-BC*

Beth Sieling, MD, FACS

Elizabeth Riordan, MD

If, after reviewing family history, both the patient and the provider agree to move forward with testing, blood is drawn and the sample is sent to the appropriate testing facility, which detects mutations in the genetic code. Once the test results are available, a second counseling session is conducted, either on the phone, by video, or in person, to discuss the results.

Dr. Sieling stresses the importance of genetics for all providers. "It is important for healthcare providers to incorporate genetics into their patient care plans, as it can significantly impact treatment decisions and ultimately improve patient outcomes. As the field of genetics continues to advance, we can expect to see more personalized patient care."

For more information, talk to your healthcare provider to see if you might be a good candidate for genetic testing.



Genetic Testing FAQs

Who qualifies for genetic testing?

Anyone can get genetic testing, but it's recommended for those who meet any of the following conditions:

- Personal or family history of breast, colon, or uterine cancer diagnosed before age 50
- Personal or family history of ovarian, pancreatic, or metastatic prostate cancer diagnosed at any age
- Multiple cancers on the same side of the family

Is the cost of genetic testing covered by insurance?

Most people with a personal or family history of cancer as described above will meet their insurance guidelines, and the testing will be covered in full. Patients should always check with their insurance provider before any procedure to learn what is and is not covered.



THANK YOU, ACS!



Transportation can be one of the biggest barriers to receiving cancer treatment.

To help people facing cancer get to the treatment they need, the American Cancer Society has awarded grants to healthcare systems including The Harold Leever Regional Cancer Center.

We are so grateful for this grant, which will allow us to provide eligible patients rides to and from treatment.



IN MEMORY OF Curtis V. Titus

The Leever Center community is saddened by the loss of Curtis V. Titus, who passed away July 26, 2022. Curt was one of the founding members of The Harold Leever Regional Cancer Center and served as chairperson of the HLRCC Board of Directors for many years.

Kevin Kniery, HLRCC Executive Director, spoke of Curt's pro bono work for more than 12 Greater Waterbury organizations and his dedication to Leever: "Curt was a true gentleman who always wanted to do what was right for our community."

Thank you, Curt, you will be remembered.

I do not have a personal or family history of cancer; can I still get genetic testing?

Anybody who wants to be proactive about their cancer screening is a candidate for genetic testing, but people who do not have a personal or family history of cancer may likely pay the cost for the test out of pocket.

How much does genetic testing cost?

In 2006, genetic testing for just the BRCA1 and 2 genes cost \$6,000. Now, technological advancements and competition in the testing industry have brought the prices down to a much more reasonable level. At one lab, a complete panel testing 77 different genes costs \$249.

What does genetic counseling and testing involve?

Genetic counseling and testing is a three-part process: the initial consultation, the test, and post-test counseling. At the initial consultation, the provider will spend about 60 minutes reviewing the patient's personal and family history, explaining the testing process, and talking about possible outcomes.

For the test, two tubes of blood are taken, then sent to a lab.

The results are usually available within three weeks, at which point the provider will schedule a post-test counseling session to go over the results, answer any questions, and discuss any ongoing management and testing plans that might be recommended.

Can genetic testing tell me if I will get cancer?

The provider can use your test results to estimate the likelihood of a cancer diagnosis in your lifetime. Keep in mind there are many other factors besides genetic makeup that will influence the possibility of a cancer diagnosis.

If my genetic testing is negative, does that mean I will not get cancer?

Not necessarily. A negative genetic test result means you do not have a genetic disposition to cancer. Only five to 10 percent of cancers are hereditary, so you may have other risk factors for the development of cancer.



Celebrating a Ray of Hope: Greater Waterbury Relay for Life Marks 30-Year Milestone

Saturday, June 10, 2023 • Holy Cross High School, 587 Oronoke Road, Waterbury

Once again, the Leever Cancer Center is a gold sponsor for this year's Greater Waterbury Relay for Life. The theme of this year's event is "Ray of Hope - Celebrating 30 Years."

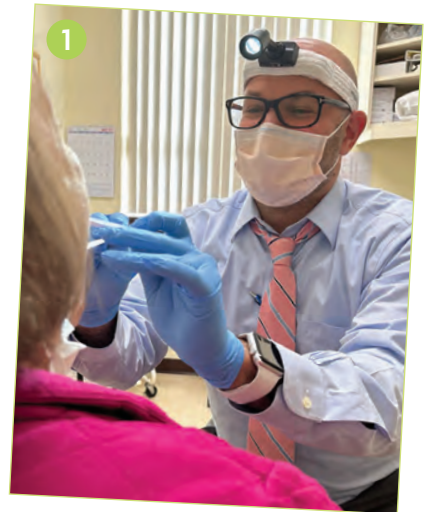
As with previous Relay events, it will include a survivor lap, commemorative luminaria, and other special events and activities to honor and support cancer survivors and their caregivers. We hope to see you there!

If you would like to participate or for more information, visit relayforlife.org/waterburyct.

Early Detection Is More Important Than Ever HLRCC hosts Oral, Head and Neck Cancer Screenings

On April 18, the Leever Cancer Center provided free oral, head and neck cancer screenings. Assisted by six providers and eight staff members who volunteered their time, Leever screened 26 people at high risk for these types of cancer. A follow-up appointment with their primary care physician was recommended for 22 of the people screened. Four were referred for further head and neck evaluation, one of whom received an immediate referral.

All of the people screened said they did not know how to do an oral self-examination, and 65% said the screening improved their awareness of the disease. Thank you to all who made the event a success!



- 1: Dr. Douglas Housman, HLRCC Radiation Oncologist, performing an oral, head and neck screening on a participant
- 2: Deborah Mastrianni, APRN, of Connecticut Ear, Nose, Throat, Sinus & Allergy Specialists
- 3: Dr. Christopher Loughlin of Westwood Ear, Nose & Throat



- 4: Dr. James Williams and Dr. Raymond Winicki of Naugatuck Valley Ear, Nose & Throat Associates; Dr. Mahesh Bhaya of Connecticut Ear, Nose, Throat, Sinus & Allergy Specialists
- 5: Sincere thanks to our volunteers for helping to make this screening possible

WELCOME TO OUR NEW PRACTITIONERS!



Michael Grant, MD

Dr. Michael Grant is an Assistant Professor of Medicine in the Section of Medical Oncology at Yale University School of Medicine and a Medical Oncologist and Hematologist at Smilow Cancer Hospital Care Center in Waterbury. He sees patients with a broad range of hematologic and oncologic diagnoses with a particular clinical focus on thoracic and genitourinary malignancies.

Dr. Grant's current research interests include targeted and immunotherapy approaches in the treatment of non-small cell lung cancer.



Sharynn Hall, MD, PhD

Dr. Sharynn Hall is the Instructor of Medicine (Medical Oncology) at Smilow Cancer Hospital Care Center in Waterbury. Dr. Hall received her medical degree from the University of Connecticut School of Medicine, and her PhD in Biological Chemistry & Molecular Pharmacology from Harvard Graduate School of Arts & Sciences.

She cares for patients with a variety of hematologic and oncologic disorders, with a focus on breast cancer.



Daniel O'Neil, MD, MPH

Dr. O'Neil is an Assistant Clinical Professor of Medicine (Medical Oncology) and treats women with breast cancer of all stages and subtypes as part of Smilow Cancer Hospital Care Center in Waterbury.

Dr. O'Neil strongly believes in the value of multidisciplinary patient care and collaboration. He aims to incorporate the latest evidence-based practices, alongside a holistic understanding of each of his patients, to offer truly personalized care.

Drs. Grant, Hall and O'Neil can be reached at 203-755-6311, Smilow Cancer Hospital Care Center in Waterbury, Suite B at The Harold Leever Regional Cancer Center.

INTRODUCING OUR NEW PODCAST SERIES: **Leever Cancer Conversations**



"Leever Cancer Conversations" is a new podcast series by The Harold Leever Regional Cancer Center discussing all things cancer and providing information to improve your or a loved one's cancer journey.

In March, we released our first ever in the series: "Learn About Colorectal Cancer." Renowned colorectal surgeon John Zhang, MD, PhD, FACS, FASCRS (right), was our guest, and he answered all our questions from prevention and symptoms to screening and treatment. Scan the QR code to listen! ▶



Watch for the next installment of "Leever Cancer Conversations" coming soon.

Positivit-tea

By Leever Nutritionist
Karen Sabbath, MS, RD, CSO
(ksabbath@leevecancercenter.org
or 203-575-5510)

What is the second most consumed beverage in the world after water?

If you guessed tea (and had a HUGE hint from the title of this article), you are correct. The annual worldwide consumption of tea is 3.6 billion cups.

You might guess that China consumes the most tea, and at 1.6 billion pounds of tea per year, that is true. However, if you look at the amount of tea consumed per person, you may be surprised at the five countries that top the list. Number one is Turkey, with an average of 1,300 cups (seven pounds!) of tea per person per year, followed by Ireland, Great Britain, Russia, and Morocco. The US ranks 69th of all countries, with about half of Americans drinking a cup of tea every day.

Tea is thought to have originated in southern China in 2737 B.C. when leaves from a tea bush fell into the emperor's boiling water. He drank it, liked it, and used it medicinally before it became a daily drink. Tea didn't arrive in Europe until the late 1500s, when a Portuguese Jesuit priest visiting China was granted trading privileges and brought some tea home with him. The rest is history. Tea is now grown in 52 countries, but China remains the biggest producer, followed by India.

All "true" teas come from the same plant: *Camellia sinensis*. The most common types of teas are black, green, white and oolong, with many variations within each type, for a total of 3,000 varieties. Their individual flavor profiles are from differences in how and when the leaves of the plant are harvested and processed, and how much they are oxidized (crushed and exposed to the air). Tea leaves that are highly oxidized are darkest in color (black teas including Earl Grey, English and Irish Breakfast, for example). All tea contains caffeine in varying amounts with black tea having the most and green tea, the least, but typically a cup of tea has half the caffeine of coffee. Herbal tea is not true tea.

Health benefits of tea: Brewed is best! Brewed teas contain antioxidants called polyphenols that may reduce the risk of certain chronic diseases. When overly processed, as in tea powders used in bottled teas, the antioxidant content drops by 10% -100%, resulting in a high sugar and calorie beverage with minimal benefits.

There is a lot of information indicating that all teas, especially green, may have anti-cancer effects due to the antioxidant/polyphenol called epigallocatechin-3 gallate, or EGCG, thought to prevent or slow the formation of cancer cells. Observational studies appear to associate regular intake of green tea with reducing risk for bladder, colon, stomach, pancreatic and esophageal cancers. Clinical trials are needed to provide more precise data. Research exploring the effects of tea on heart health, blood pressure, diabetes and weight loss is ongoing.

People ask if it is okay to drink tea during cancer treatment due to its antioxidant content. The answer is yes, if the tea is brewed and not taken in the form of a supplement. There is one exception: Avoid green tea if you are taking Velcade (bortezomib), used to treat multiple myeloma, since it can decrease its effectiveness.

Bottom line: Brewed tea is a healthy beverage, loaded with antioxidants that may have many health benefits. Remember that it does contain caffeine, so be careful to limit it at night if you have issues with insomnia.

Some people complain that tea, especially green tea, tastes bitter. If that is the case for you, try some of the following suggestions:

- Add a little bit of sugar, lemon or honey, which softens the taste.
- Brew the tea with hot, but not boiling water, and let it steep for only three minutes.
- Try to "cold-brew" your tea by letting it steep at room temperature for two hours. This also cuts down on the caffeine content.
- Add-ins can also help enhance the flavors. These include chopped ginger, fresh mint, unsweetened orange juice, or spices (cinnamon, ginger, allspice, cardamom, often found in Chai tea).



Tea Tips

A Community of Caring

The Harold Leever Regional Cancer Center wishes to express its appreciation to our neighbors and friends...

Thank you to **Maryann and Richard Jackson** for crocheted items and chemo caps in memory of their brother-in-law, **Andy Guerrieri**.

Special thanks to the **Women's Golf Association of East Mountain** for their wonderful Breast Cancer Awareness Tournament donation.

Many thanks to the **W. F. Kaynor Tech Students** and to **Woodbury Middle School** for their generous donations.

Our sincere gratitude goes to **Mr. Edward F. DiTota, family and friends** for honoring the HLRCC staff with a donation designated "The Staff Recognition Fund." Your continuing support is always appreciated.

Our strength is our people! Heartfelt appreciation to the **HLRCC staff** who contributed so generously to the holiday collection this year.



Pink Progressions We are very appreciative to **Progressions Salon & Wig Boutique** who held a "Pampered in Pink" event to benefit HLRCC.

Above: Dr. Nicole Sookhan (left) accepted on behalf of HLRCC.



Homemade and Heartmade

Let's Beat It! A "Beat It" hat fundraiser sold well over 100 hats, and proceeds were donated to HLRCC. Thank you to all who participated in this stylish fundraiser!



We are most grateful for the following donations from our caring community:

- Hats donated by **Rose Tichy, Alissa Henderson,** and the **North Purchase Happy Hookers**
- Valentine's Day cards for patients from **The Joy Squad at Judson School, Watertown** in memory of **LeRoy Cote, Jr.**
- Gift cards for patients from the **Brave at Heart Support Group**
- Shawls from **The KnitWits, Our Lady of Mount Carmel Church Knitting Ministry Waterbury,** and **Falls Avenue Senior Center**
- Cards donated by the **Interact Club at Pomperaug High School**
- Handmade ornaments from **St. John of the Cross Women's Group**
- Crocheted items from **Roni Sorrentino** and **Mary Ann Barone**
- Blessing bags for patients undergoing chemotherapy from the **third grade at Blessed Sacrament Catholic Academy**
- Comfort pillows and port protectors from the **Farmington Women's Club Busy Bee Committee**

aware!

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We encourage your feedback.
If there is a cancer topic you would like covered, to respond to an article you've read, or to be put on our mailing list, please call 203-575-5555 or email: dparkinson@leevecancercenter.org



**THE HAROLD LEEVER
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Community Events and Monthly Support Groups



HLRCC HONORS NATIONAL CANCER SURVIVORS DAY 2023

Friday, June 2 • 4:00 – 5:00PM • The Harold Leever Regional Cancer Center

On National Cancer Survivors Day, we honor those who are living with a history of cancer for their strength and courage.

Join us for a free celebration for those who have survived, an inspiration for those recently diagnosed, and a gathering of support for families. Speaker will be Dr. Jeffrey Bitterman, Radiation Oncologist at HLRCC.

All are welcome! Please RSVP to dparkinson@leevercancercenter.org

GREATER WATERBURY RELAY FOR LIFE

Saturday, June 10 • Holy Cross High School, 587 Oronoke Road, Waterbury

See more information on page 4. If you would like to participate or for more information, visit relayforlife.org/waterburyct.

The following support groups will be held at the Leever Cancer Center:

WATERBURY AREA OSTOMY SUPPORT GROUP: 1st Monday of each month, 6:30 – 8:30 PM, contact Bob Baker: 860-248-1116.

THE HOPE SUPPORT GROUP: 1st and 3rd Tuesday of each month from 4:00 – 5:00 PM. See more information on this new group below.

HELPFUL RESOURCES

For programs providing support and information:
211 or 211.org

Direct numbers for specific resources:

Domestic violence
888-774-2900 English
844-831-9200 Spanish

Suicide
866-794-0021 Greater Waterbury

Child abuse
800-842-2288

Crisis hotline for young adults
Text “listen” to 741741

Elder abuse
888-385-4225

Sexual assault
888-999-5545 English
888-568-8332 Spanish

Veterans crisis hotline
800-273-8255 and press 1
Text: 838255
or veteranscrisisline.net

Alcoholics Anonymous
866-783-7712 English
or ct-aa.org

Narcotics Anonymous
800-662-4357/800-420-9064
ctna.org

National Alliance of Mental Health (NAMI)
800-215-3021

Food resources
ctfoodbank.org
(Local food pantries can be looked up by zip code)

Join us in
HOPE

Help ease stress and enhance coping.
Obtain and share useful information, resources and advice.
Provide and receive support as you learn, heal and grow.
Express your thoughts, feelings and concerns.

...a mutual aid group for patients and their loved ones.

This group provides a comfortable and confidential environment in which to share your experiences and gain strength and encouragement.

For more information, contact Melissa Seres, MSW, LCSW, OSW-C, at 203-575-5511 or mseres@leevercancercenter.org