Spirit of Hope Honoree
Laurie MacCaskill at An Evening with the Stars, October 2007.
Happy New Year! It is with great enthusiasm that we officially present our new logo and branding to you in this edition of Outreach. As we explained in the last newsletter, our goal was to develop a new messaging platform and branding strategy that would accurately capture the Pancreatic Cancer Action Network’s comprehensive approach to fighting this disease.

The feedback we have received during the initial rollout of our new branding has been extremely positive, and we are excited to create one united, powerful force under the name of the Pancreatic Cancer Action Network.

On January 23rd, the Pancreatic Cancer Action Network launched Raise the Cure, a funding initiative to raise both federal and private dollars for pancreatic cancer research. The Pancreatic Cancer Action Network is asking for an unprecedented $170 million in federal funding to carry out The National Plan to Advance Pancreatic Cancer Research and additionally will raise $25 million in private funding over the next three years to support pancreatic cancer research. The merging of these funds will support Raise the Cure, a comprehensive strategy and action plan to put pancreatic cancer research on the fast track to finding a cure. In the months ahead, the Pancreatic Cancer Action Network has several big activities planned to help push this initiative forward including our second annual Pancreatic Cancer Advocacy Day from Sunday, March 9th to Tuesday March 11th, 2008 in Washington, D.C. Read more about this important initiative on page 4, and please plan on joining us in Washington D.C. or calling our office to see how you can get involved.

Also in the upcoming months, our Patient and Liaison Services (PALS) program will host three educational symposiums to be held in Tampa, Philadelphia, and Seattle. Please visit our website or call us to register today. We hit a milestone this past December when our PALS program received its 25,000th call since its inception in 2002. Way to go team! Thank you to everyone who continues to help us reach out to healthcare professionals and patients so that this valuable resource is utilized.

The Pancreatic Cancer Action Network is funding $945,000 in additional research grants this year to ten scientists through our Career Development Award and Pilot Grant program. All of our grants are peer-reviewed through the prestigious American Association for Cancer Research. The review process will take place in March, and we will be announcing our new grant recipients in April. Watch for this announcement on our website and help us in congratulating our new recipients.

Again, thank you for everything you do to make our efforts successful. We look forward to working with you in the coming year!

Warm Regards,

Jason Kuhn
Chairman of the Board
RAISE THE CURE
THE LARGEST FUNDING INITIATIVE IN THE DISEASE’S HISTORY

The Pancreatic Cancer Action Network recently launched its Raise the Cure initiative—a campaign designed to secure both federal and private funding for pancreatic cancer research.

We are asking the federal government for $170 million in funding to carry out The National Plan to Advance Pancreatic Cancer Research. In addition, we are committed to raising $25 million in private funding over the next three years. The merging of these two funding initiatives will support Raise the Cure, a comprehensive strategy and action plan to put pancreatic cancer research on the fast track to finding a cure.

“The Pancreatic Cancer Action Network always has been a catalyst for progress in the pancreatic cancer community and we will continue to be that force with the Raise the Cure initiative,” stated President and CEO Julie Fleshman. “We’re not just asking for funding, we’re showing the way to take action and we have a comprehensive plan to get us there.” For more information go to www.pancan.org/announcements/raise_the_cure.html.

Fleshman was joined by Carnegie Mellon Professor Randy Pausch, a pancreatic cancer patient whose “Last Lecture” has become an Internet sensation, to meet with Members of Congress and kick off the Raise the Cure appeal on January 23rd. “I fully support the efforts of the Pancreatic Cancer Action Network. Together, we are determined to change the course of history for pancreatic cancer research,” declared Pausch.

The Raise the Cure campaign represents the professional judgment of the leaders in the pancreatic cancer scientific community. It calls for a significant increase in funding to implement a new research program, which includes: launching a targeted research initiative, expanding specialized research centers, developing a cadre of dedicated investigators, ensuring the most effective use of resources and promoting physician and public awareness.

THE LAST LECTURE

When Dr. Randy Pausch delivered his Last Lecture—“Really Achieving Your Childhood Dreams,” last September, he took his audience on a riveting and joyous journey inspired by a list of childhood dreams. It turned out the Last Lecture had only begun. His lecture became an internet sensation and created a media storm of publicity.

His lifetime of notes and stories, woven together with his unique perspective and sense of humor are beautifully captured in his new book, The Last Lecture. The book illustrates his undying optimism, intelligence and dreams, especially the invaluable lessons about never giving up as we hit life’s “brick walls.” To pre-order Dr. Pausch’s compelling book, go to www.amazon.com, type in “last lecture” in the search box. The book is due out April 8, 2008.

A LESSON YOU DON’T WANT TO MISS

When you first meet Dr. Randy Pausch, a youthful and energetic Carnegie Mellon professor who once had dreams of “being Captain Kirk”, the first thing you notice is his sense of humor and spirited laugh. This computer science pundit who knew exactly what he wanted to do in life by age 8, hardly mentions his pancreatic cancer, instead he focuses on how he achieved those life goals and compels people to go after their own dreams.

Actually becoming Captain Kirk didn’t happen, but Dr. Pausch did get to meet actor William Shatner. His other goals included being in zero gravity, playing for the NFL, and authoring an article in the World Book Encyclopedia. You learn about all this and his philosophy on life when you watch his Last Lecture speech.

Dr. Pausch recently became very involved with the Pancreatic Cancer Action Network. He attended several meetings on Capitol Hill in January to help launch Raise the Cure and speak out about the urgent need for funding pancreatic cancer research. He will also be featured in a new Pancreatic Cancer Action Network PSA.
Many of us have been affected by pancreatic cancer, yet the efforts to cure this disease remain underfunded and under-researched. Medical research offers the only hope for conquering pancreatic cancer. Yet only 1½ percent of the government’s cancer research budget is devoted to finding ways to prevent or cure pancreatic cancer.

The Pancreatic Cancer Action Network has developed a detailed plan, called The National Plan to Advance Pancreatic Cancer Research (The Plan), for getting more research funding and stopping pancreatic cancer. This new and innovative plan will be a primary focus at our second annual Pancreatic Cancer Advocacy Day in Washington, DC from March 9th-11th. This is the first time that Congress has been presented with a specific proposal of steps they can take to impact pancreatic cancer. Lawmakers need to hear how pancreatic cancer has affected you, your family and your loved ones. They need to understand the pain and anguish pancreatic cancer causes. They need to implement our plan!

Your participation in our Advocacy Day is critical to the success in the fight against pancreatic cancer! In addition to learning about The Plan, you will have the opportunity to meet your Members of Congress, tell them how pancreatic cancer has affected you and your loved ones, and ask them to provide more funding in the fight against this lethal disease.

Last year, over 160 advocates from around the country participated in the first Pancreatic Cancer Advocacy Day. We hope to have even more participants at this year’s event so that our collective voice rings in the marble halls of Congress!

Congress has the power to enact The Plan, but they must hear the message directly from you, their constituents! We look forward to having you join us for the Second Annual Pancreatic Cancer Advocacy Day.

For any questions, please contact the Pancreatic Cancer Action Network’s Government Affairs Department at 202-742-6699 or advocacy@pancan.org.
THE SUMMIT ON PANCREATIC CANCER

Pancreatic Cancer Action Network hosted the first Summit on Pancreatic Cancer August 2–5, 2007 in La Jolla, CA. The genesis of this meeting was to address the important questions for our community: Which approaches to studying the disease show the most promise in early detection or the development of therapeutics? Which are dead ends? Where are the gaps in understanding and how can we address them? And how can scientists at different institutions better coordinate their efforts to produce discoveries that have the greatest potential to benefit patients?

The outcomes of the Summit will result in the publication and distribution of a White Paper (March 2008). The format of the White Paper will break down each topic with a one paragraph summary of the current state of research and one paragraph with key questions and challenges facing the research community in this area. In keeping with our mission to share information and expand ideas, we also worked with Dr. Roger Bingham of The Science Network to capture this historic and important meeting via webcast. Watch segments of the Summit on Pancreatic Cancer at www.thesciencenetwork.org.

Over the next few issues of the newsletter, we will be highlighting specific topics from the Summit and the White Paper. In this issue, we’ll review Pancreatic Cancer Stem Cells. We welcome your questions and comments.

WEBCAST: THE SUMMIT ON PANCREATIC CANCER
Listen to leading researchers give state of the science lectures on topics ranging from the origins of pancreatic cancer to emerging thoughts about personalized therapeutics in pancreatic cancer care.
GO TO: WWW.THESCIENCENETWORK.ORG

EXCERPT FROM THE WHITE PAPER
EXPLOITING MOLECULAR TOOLS TO PERSONALIZE PANCREATIC CANCER THERAPEUTICS
Dr. Timothy Yeatman, Moffitt Cancer Center, Tampa, FL

Pancreatic cancer is likely a molecularly heterogeneous disease, explaining why some patients do see responses to therapy and others do not. As new agents are developed that precisely target “driver” molecular pathways rather than single genes, identifying the patients whose tumors depend on these pathways for growth will be critical. One means of accomplishing this is to simply profile each tumor for thousands of genes, resulting in a digital signature representative of each individual’s tumor. This technology is currently available today. The future holds promise for researchers to actually match the right patients to the right drugs, first in clinical trials and then in practice. The “Total Cancer Care” initiative in personalized cancer care, led by the Moffitt Cancer Center, Tampa, FL, seeks to develop a database of thousands of patients, each with a personal tumor gene profile that might be later used to perform “trial matching” through a larger nationwide consortium of hospitals. The hope would be that trials could be completed faster and that response rates would be higher in these trials, simply because the right patients were accrued to these specialized trials. These trials would depend heavily on the capacity to obtain fresh biopsies of the tumor, usually done with a small needle by interventional radiologists, so that gene analysis can be performed. While these sorts of population based matching trials are not yet available today, they could be within a matter of a few years.
Dr. Diane Simeone, University of Michigan Medical Center, and discussants Dr. Geoff Wahl, the Salk Institute, and Dr. Susan Bonner-Weir, the Joslin Institute at Harvard, opened the Summit with a presentation and thought-provoking discussion on pancreatic cancer stem cells. Dr. Simeone and the team at the University of Michigan have detected cancer stem cells in tumors from patients with pancreatic cancer. Experiments in mice suggest that these cancer stem cells may help explain the aggressive growth and spread of pancreatic tumors seen in patients, the researchers report in Cancer Research. And, this information may help the research community understand how to develop new therapeutics that can be more effective against this aggressive cancer.

Cancer stem cells have been identified in blood, brain, and breast cancers, and more recently in ovarian and colon cancers. The new findings provide further support for the stem cell hypothesis, the theory that some tumors contain small populations of self-renewing cells that give rise to all of the cells in the tumor. Please note that all of the work referenced about pancreatic cancer stem cell research involves adult stem cells.

Though cancer stem cells make up less than 5 percent of a tumor, they may underlie the cancer and be resistant to conventional treatments. “The new research adds to the growing evidence that within tumors there is a small subset of cells that drives the tumor and that has stem cell-like characteristics,” says lead researcher Dr. Simeone.

A defining characteristic of human cancer stem cells is the ability to grow new tumors in mice. As few as 100 pancreatic cancer stem cells could regenerate copies of the original tumor when transplanted into mice, the researchers found. Some tumors rapidly spread to other organs, as often happens in patients.

The aggressive behavior of the cells in mice is consistent with what clinicians have observed in patients with the disease, the researchers say. “Cancer stem cells represent a whole new way of thinking about the disease,” says Dr. Simeone. Her team has preliminary evidence that pancreatic cancer stem cells may not be touched by conventional treatment, and they will be testing this in the coming months.

The new findings will influence research on pancreatic cancer almost immediately, predicts Dr. J. Milburn Jessup of National Cancer Institute’s Division of Cancer Treatment and Diagnosis. “The study shows that it is possible to isolate the pancreatic cancer stem cell in order to investigate its properties, determine its weaknesses, and then develop therapies that target this cell,” says Dr. Jessup.

Along with new therapies, new ways of evaluating these therapies may be needed. The current method of measuring tumor size would clearly be inadequate given the likelihood that a tumor would return despite shrinking. “In the future we might need to measure the burden of cancer stem cells in tumors before and after therapies in order to establish their effectiveness,” says Dr. Simeone.

### Key Questions

- **Are pancreatic cancer stem cells responsible for residual disease, therapeutic resistance, or recurrence in pancreatic cancer patients?**
- **Can the findings with human pancreatic cancer stem cells be extrapolated to mouse models?**
- **Do pancreatic cancers arise from a resident adult pancreatic stem cell?**
- **Is there a target stem cell that is expanded in the setting of chronic injury in the pancreas, and if so, how does this contribute to tumorigenesis?**
- **What is the contribution of the tumor microenvironment to this process?**
CANCER STEM CELL HYPOTHESIS

- Cancers are “driven” by cells with stem cell properties
- Cancers arise from tissue stem or progenitor cells.

STUDIES UNDERWAY

- Define the mechanisms by which pancreatic cancer stem cells are resistant to standard therapies
  - key signaling molecules in DNA damage response
  - gene profiling comparing treated and untreated cells
- Determine if enrichment of cancer stem cells after radiation and/or chemotherapy occur in patients
  - measure cancer stem burden in biopsy samples of human tumors before and after chemoradiation

IMPLICATIONS OF CANCER STEM CELLS ON THERAPEUTICS

- Tumor regression is an inadequate endpoint (at least in the short-term)
- Need to devise methods to detect effects of therapy on cancer stem cell population
- Need to determine best way to measure cancer stem cell burden in biopsy samples of human pancreatic cancers (cell sorting, IHC as a surrogate, which markers)

SUMMARY

- CD44+ CD24+ ESA+ (and c-Met+) pancreatic cancer stem cells demonstrate a high tumorigenic potential.
- Unlike breast cancer stem cells, which are ESA+ CD44+CD24-, tumorigenic pancreatic cancer stem cells are ESA+ CD44+CD24+
- CD44+CD24+ESA+ pancreatic cancer cells possess the stem cell characteristics of self renewal, production of differentiated progeny, and increased expression of developmental signaling pathways
- Scientists at the University of Michigan are currently defining how to best measure cancer stem cell burden in biopsy samples of human pancreatic cancer
- Studies are underway to provide new therapies to treat pancreatic cancer with agents specifically targeting pancreatic cancer stem cells

WHAT ARE STEM CELLS?

As described by the National Institutes of Health, stem cells differ from other cells in three main ways. First, they are “unspecialized,” meaning they do not perform specialized functions, such as the way heart muscle cells help blood flow or red blood cells carry oxygen through the bloodstream. Second, under certain conditions, they can be transformed into cells with specialized functions. Third, these cells are capable of reproducing themselves over an extended period of time. As a result, these cells can serve as a repair system for the body by replenishing other cells for as long as the person or animal is alive.

WHAT ARE EMBRYONIC AND ADULT STEM CELLS?

Human embryonic stem cells appear in an embryo, a fertilized human egg, five to seven days after conception. They are ordinarily extracted from extra embryos that have been donated for research by parents who tried to conceive a child through certain procedures performed at fertility clinics. Embryonic stem cells have the potential to develop into all cell types of the body. Adult stem cells are obtained for scientific research from many organs and tissues including the brain, bone marrow, blood vessels, skin, and the liver. These stem cells are generally limited to becoming the cell type of its tissue of origin.

WHY DO RESEARCHERS WANT TO STUDY STEM CELLS?

Scientists indicate that there are many ways in which human stem cells can be used in basic and clinical research. Stem cell research may provide information on the complex events that occur during human development that lead to serious medical conditions like cancer and birth defects. Human stem cells could be used to test the safety of drugs. Also, researchers indicate that stem cells offer the possibility of a renewable source of replacement cells and tissues to treat diseases such as Parkinson’s, Alzheimer’s, heart disease, or diabetes, or to treat spinal cord injuries.

WHAT IS PANCAN’S POSITION ON STEM CELL RESEARCH?

Today, the field of pancreatic cancer stem cell research is focused on the use of adult stem cells (tissue that comes from adults who have been diagnosed with pancreatic cancer and are donating their tissue to science for research purposes). At this writing, our research community is not involved in embryonic stem cell research. We will continue to review the scientific exchanges and share all new advances with you.
Diarrhea is a common side effect experienced by many cancer patients. It is generally described as abnormally frequent bowel movements that are more fluid than usual. Patients describe it based on their own experiences—what is normal for one may be considered diarrhea to another. Often it is explained as four or more loose bowel movements a day.

Diarrhea is the result of one or a combination of the following: increased intestinal secretions, decreased absorption of fluid from the intestinal tract, and/or excessive intestinal motility. The source of these disturbances may include: lactose intolerance, bacterial infection, damage to the intestinal wall, hormone-producing tumors such as neuroendocrine tumors, inflammation or ulceration of the bowel, surgery that has shortened the gut causing malabsorption, chemotherapy, radiation therapy to the lower abdomen, or medication.

If a patient is experiencing diarrhea, a journal may be helpful for recording the onset, frequency, duration, stool consistency, and self-care measures taken for control. This record can then be shared with the patient’s doctor in order to help devise a plan to manage it.

People may experience different types of diarrhea

Two types that are common with pancreatic cancer are diarrhea resulting from a blockage of the biliary tract and diarrhea resulting from malabsorption due to digestive insufficiency.

Biliary blockage: The biliary tract is the drainage system for the gall bladder, pancreas and liver. If there is a blockage of the biliary tract stools will become clay or very pale-colored and will often be loose. Individuals with clay or very pale-colored stools should seek the care of a physician immediately.

Malabsorption: Floating stools often occur as a result of malabsorption of nutrients. Malabsorption is common for patients with pancreatic cancer because the pancreas may not be able to produce or release enough pancreatic enzymes to aid in the digestion of food. Other symptoms of malabsorption include stools that are floating, foul smelling, and/or greasy, or are accompanied by large amounts of gas. Symptoms of malabsorption are relieved by supplementing pancreatic enzymes.

Pancreatic enzymes provide the body with the adequate amount of enzymes to break down carbohydrates, proteins, and fats from food. It may be needed if the levels of enzymes produced by the pancreas are insufficient due to an illness and/or a procedure. The doctor will prescribe the type, dosage, and administration schedule based on individual needs, symptoms, and quantity of food intake.

Nutrition tips while coping with diarrhea

- Avoid fatty, greasy or fried foods including: high-fat meats or cheeses, whole or 2% milk, rich desserts, most fast foods, foods with added oil, butter, margarine, sour cream, cream cheese, or salad dressing.
- Select lower-fat food choices. Fat-free or reduced fat products may relieve symptoms of gas, bloating and diarrhea.
- Plan to eat five to six small meals each day.
- Avoid high intake of insoluble fiber food sources because they increase intestinal motility. (Sources include bran, whole grain breads/cereals, raw fruits and vegetables, nuts)
- Increase soluble fiber foods such as oats, applesauce, and bananas.
• If watery diarrhea occurs after high sugar foods are eaten, avoid these and similar foods such as rich desserts and sugar sweetened beverages.
• Limit milk products containing lactose if you have or develop lactose intolerance. Yogurt, buttermilk, and lactose-free milk are all okay when limiting lactose.
• Avoid gas-forming foods, such as vegetables in the cabbage or onion family, dried beans, corn (including popcorn), and chewing gum. If carbonated beverages are used, it is suggested that they be left open for at least 10 minutes prior to drinking.

SUGGESTIONS TO AVOID DEHYDRATION
• Drink six to eight cups of mild, clear liquids throughout the day to replace fluid loss from diarrhea. Try apple juice and broth. Liquids are better tolerated at room temperature. Ask your doctor if sport drinks or electrolyte replacement drinks (i.e. Gatorade® or Pedialyte®) may be beneficial.
• Avoid beverages that contain caffeine.
• Drink an extra cup of fluid for each loose bowel movement.
• Broth, soup, crackers, pretzels and sports drinks or electrolyte replacement drinks (i.e. Gatorade® or Pedialyte®) can help replace lost sodium.
• Fruit juices, sports drinks/electrolyte replacement drinks, peeled potatoes and bananas can help replace potassium.

OTHER SUPPORTIVE CARE TECHNIQUES
Before starting any of these medicines, talk to the patient’s doctor to help decide which would be best.

OVER-THE-COUNTER ANTI-DIARRHEA MEDICINES
• Loperamide: Slows down the time it takes food to travel through the intestinal tract (i.e. Imodium AD® and Imodium®).
• Adsorbents and Absorbents: Adsorbents (e.g. Pepto-Bismol®) attract diarrhea-causing substances from the digestive tract. Absorbents (e.g. Metamucil®) make stools more solid by adding bulk.

PRESCRIPTION ANTI-DIARRHEA MEDICINES
• Opioids: Slow down the time it takes food to travel through the intestinal tract (e.g. Lomotil®).
• Anticholinergics: Relieve spasms and cramping (e.g. atropine, belladonna, and scopolamine).
• Somatostatin analogues: Reduce the secretion of extra fluid and helps the body absorb back valuable water and electrolytes. It also slows down the time it takes food to travel through the intestinal tract (i.e. Sandostatin®).
I thought I was becoming a hypochondriac: indigestion, constipation, mysterious aches. My symptoms changed on a daily, if not hourly, basis. I was uncomfortable, but never in pain. I’ll never forget the horrible feeling that washed over me as soon as I scheduled the appointment.

It wasn’t long before a new word entered my vocabulary: adenocarcinoma.

Actually, I’ve learned a lot of new words since last December, very intimidating ones like para-aortic adenopathy, confluent ground glass opacification, satellite hypodensities. Yes, they are very scary, but they didn’t compare to the word “eke”. The doctor said, “We will try to eke out a remission.”

After years of medical training and practice, my doctor decided that eke was the most appropriate word to define my prognosis. There is no strength in eke, certainly no confidence. There is a hint of hope, but not much. Funny, but I can’t think of a word that is more opposite to how I’m feeling today.

What are my chances? It’s the first thing you want to ask and the last thing you want to hear. A percentage has never held so much importance. I know now that whether the answer was 99% or less than 2%, it’s just a number. It’s a statistic that’s filled with a zillion variables. Sure, I have moments when the statistics are almost unbearable, but it’s at those moments when I try to focus on how strong I am, both mentally and physically. And, really, isn’t that more important than a statistic?

It goes without saying that my life has radically changed this past year. Everything I do now is focused on one goal—living. I read once that the secret to survivorship is ‘finding a balance’ between life and cancer. But really, it’s more than that. It’s about throwing everything I love, everything wonderful in life, at the tumors; recognizing my fear and anger, and still finding the strength within to seek out my dreams; ultimately, squeezing as much life as possible in between doctor visits, PET scans, and treatment; and simply loving life.

My mom, Carol, 76, was diagnosed with stage III pancreatic cancer in September 2004. My brothers, Ronnie and Gary, and I all live out of town. In the beginning, each of us spent weeks in Florida with mom, juggling our home lives and jobs. Although that became a balancing act, we would have it no other way. I soon realized that as a caregiver, I was overwhelmed with sadness and found that the best way for me to deal with it was to move into action.

There are two things that are most important to me about my story, and I know with certainty that they have kept my mom alive for the last three and a half years. First, she had to have a reason to live (her kids); something that would hold her vision of hope. Every step in this journey was always governed by her personal desire to prevail.

Secondly, the most important part of our jobs as caregivers was to cheerlead her to healing herself. We believe that the spirit and will to survive is the most important treatment in her recovery. I became her coach. Think about it as you would training an athlete. We told her to ignore the statistics, the negative press, and to stay away from the naysayers. We found an incredible doctor who understood the power of positive thinking, who was mindful of surviving. Whether we were with her in person or on the phone, we molded the conversation around affirming she was beating it. We believe that if you’ve been there in the mind, you will go there in the body.

We coached her through radiation. A year later the tumor got a little bigger, so she received chemotherapy, begrudgingly. Knowing that the radiation worked was a motivating factor. In year three it flared up again and so she did CyberKnife, successfully. Let me tell you, it was more difficult to deal with the insurance companies than the disease, but that’s another article!

My mother is an extraordinary woman. Her experience with cancer has been an inspiration to many. It is important for her story to be told so that we create an atmosphere of unlimited possibility.
NOVEMBER 2007 AWARENESS CAMPAIGN MOST SUCCESSFUL YET

- 1,439 Individuals sent 5,255 letters to their members of Congress
- 231 individuals sent 1,598 letters to editors of their local papers
- Over 100 mentions of pancreatic cancer and the Pancreatic Cancer Action Network in US print media
- We reached over 19 million people!

On November 15th, we challenged you to Picture Your World Purple! We received an outpouring of entries for this photo contest but could only choose a few winners. View all the entries at www.pancan.org/raiseyourvoice/pywp.html.

FIRST PLACE

Submitted by Allison Vo, Dallas, TX
Members of the pancreatic cancer support group at Methodist Dallas Medical Center dressed as the “Purple Posse” and hosted a series of events throughout the month. Congratulations!

SECOND PLACE

Submitted by Kristi Pohly, Denver, CO
Employees of Pharmatech, winners of last year’s photo contest, went from being “grape-ful” to “raisin awareness”!

THIRD PLACE (TIE)

Submitted by Wendy Melara, Richmond, VA
Wendy Melara, a volunteer in our Richmond Affiliate, and her friends want to “KISS” pancreatic cancer goodbye!

Submitted by Sue Bailey, Haddonfield, NJ
Residents of the Coles Landing Senior Center decorated purple balloons, earning themselves a half-page article in their local paper!

YOUTH DIVISION: SECOND PLACE

Submitted by Susan Clouthier-Braiman
Mohonasen High School students show off their purple wardrobe! Pancreatic cancer information was included in their school announcements all month, and they also raised $600 for the cause.

YOUTH DIVISION: THIRD PLACE (TIE)

Submitted by Cathy Kern
Pre-schoolers at the St. Anne’s Hospital Educare Center wore purple tie-dyed shirts and created a banner using their handprints.

Submitted by Shaana Hollingsworth
Kindergarten students at J.S. Pate Elementary School also wore purple tie-dyed shirts and created a banner that was displayed on a fence outside the school.

Submitted by Bill Arzt
Affiliate Coordinator Bill Arzt’s 9-year-old daughter Kaylee organized the creation of a banner at Broad Brook Elementary School. Over 400 students helped decorate the banner which is now being displayed at a local Wal-Mart!
VOLUNTEERS REACH NEW HEIGHTS IN 2007
This year we not only had a large number of events, we had a handful of events that saw tremendous growth from the previous year.

PurpleRide Minnesota took place on September 15 and hosted over 800 riders, more than double the numbers they had the year before, and they raised over $235,000! Every aspect of the event was coordinated by the volunteer committee, led by Jim and Renita Van Dusen, and the group is already working on next year’s ride.

In Detroit, our newly formed affiliate held their first event in August, a golf tournament called Links for a Cure. Over $70,000 was raised thanks to the hard work of Event Coordinator Marge Ohryn, Affiliate Coordinator Gael Sandoval and their team of volunteers.

On November 3, volunteers from our Philadelphia Affiliate hosted what they considered a “small walk” which just happened to raise over $145,000 and involve over 500 participants! Organizers Kevin Kelly and Christina Tabarrini are already planning next year’s event.

By the close of 2007 we had affiliates in over 70 cities, helping us reach more people and patients than ever. We look forward to another year of raising awareness and educating the public.

WELCOME TO OUR NEWEST AFFILIATE COORDINATORS!
Tammy Baker and Trishelle Montano, Albuquerque NM
Susan Bruck, Dallas TX
Kimberly Cakal, Winston-Salem/ Greensboro NC
Shelly Golf, Des Moines IA
Shannon Hayes, Wilmington DE
Taryn Jones, Scranton PA
Julie Moore, Indianapolis IN
Katie Mulkearns, Jacksonville FL
Jessica Otis, Chicago IL
Gary and Tiffany Rozek, Charlotte NC
Sondra Skaggs, Fort Wayne IN

Our volunteers are the reason the Pancreatic Cancer Action Network is able to fulfill its mission of educating the public and raising awareness about pancreatic cancer. If you’re interested in events or volunteer opportunities, please contact us at volunteer@pancan.org or call toll free 877-272-6226.

EVENT SUMMARY
OUTREACH ACTIVITIES FROM AUGUST–DECEMBER 2007

NATIONAL EVENTS
• Macy’s Shop for a Cause: 10/13/07
• PanCAN Running Team Toronto Marathon: 10/14/07; Toronto, Ontario, Canada

ARIZONA
• PanCAN Night with the Arizona Diamondbacks: 9/23/07; Phoenix
• 3rd Annual Dave Thiele Memorial Golf Tournament: 10/13/07; Scottsdale
• 5th Annual Seena Magowitz Golf Classic: 12/1/07; Phoenix

CALIFORNIA
• Alpha Companies Golf Tournament: 9/16/07; Santa Clarita
• Cups of Hope Tea Celebration: 11/4/07; San Diego
• Holiday B&B Tour and Taste 2007: 12/1/07; Napa

COLORADO
• 2nd Annual Golden Gallop: 9/8/07; Golden
• TeamHOPE Colorado Western Slope Golf Tournament: 9/23/07; Montrose
• PanCAN Night at Rubio’s Baja Grill: 11/15/07; Highlands Ranch

CONNECTICUT
• Hancock Pentathlon: 9/15/07;

FLORIDA
• Passion in Purple, Legacy of Life: 10/20/07; Boca Raton
• First Annual 5K Walk/Run: 10/27/07; Orlando
• Tampa Bay Auction for Action: 11/8/07
• All in For a Cure Charity Poker Tournament: 11/17/07; Altamonte Springs

GEORGIA
• TeamHOPE Atlanta Walk 2007: 11/11/07
• Breakfast with Santa: 12/8/07; Savannah

HAWAI’I
• Tribute to Carol West: 11/20/07; Kapaa

ILLINOIS
• Rick Vogel Fundraiser: 9/22/07; St. Charles
• First Annual Robert T. Smutzer Charity Golf Outing: 10/6/07; Lena
• MDR’s First Annual 5K Walk for Pancreatic Cancer: 11/3/07
• Buffalo Wild Wings Grand Opening Fundraiser: 11/5/07; Shorewood

INDIANA
• Baking for PanCAN: 11/5/07; Terre Haute
• Pancakes for PanCAN: 11/10/07; Fort Wayne
• Indianapolis Craft Bazaar: 11/17/07

IOWA
• Hike Iowa for Hope: 9/07
• 2nd Annual Becky Benz Memorial Fun Run/Walk: 11/17/07; Mt. Pleasant

KENTUCKY
• Max & Erma’s FUN-draiser for PanCAN: 11/15/07; Louisville
• Color Your World Purple Salon Fundraiser: 11/15/07; Louisville

LOUISIANA
• TeamHOPE Walk 2007 In Memory of Wayne Remy: 12/1/07; Lake Charles

MARYLAND
• University of Maryland Bake Sale: 11/7/07
• TeamHOPE Walk – Maryland 2007: 10/7/07; Bel Air
• Robbie’s Run to Benefit PanCAN: 11/10/07; Odenton
• 2nd Annual Bowling for Hope Memory of Karl Barth: 11/18/07; Huntington

MASSACHUSETTS
• Morton Hospital Health Fair: 9/15/07; Taunton
**Community Outreach**

- Rotary Club Bowl-a-thon: 10/27/07; West Springfield
- TeamHOPE Walk - Cape Cod 2007: 10/27/07; South Yarmouth
- TeamHOPE Boston’s Garden Party: 11/4/07; Dorchester
- Ted Packard’s Cyclocross Ride: 12/3/07; Bedford

**MICHIGAN**

- 1st Annual Roger Field Memorial Golf Outing: 8/11/07; Brooklyn
- PanCAN Links for a Cure: 8/27/07; West Bloomfield
- ITC Transmission Casual for the Cause: 10/1/07; Novi

**MINNESOTA**

- PurpleRide Minnesota 2007: 9/15/07; Maple Grove
- Canoers Who Care: 9/26/07; Taylors Falls
- Twin Cities Marathon: 10/7/07

**MISSOURI**

- Golf Tournament to Celebrate the Life of Fred Feut: 10/20/07
- Light Up the Night with Hope: 10/25/07; St. Louis
- Jeremy Davenport Concert: 11/25/07; St. Louis

**NEBRASKA**

- Kool-Aid Days 2007: 8/10/07; Hastings

**NEW JERSEY**

- 2nd Annual Susan Novick Race to Make a Difference: 9/30/07; Vineland
- Picnic for PanCAN: 10/14/07; Clark
- Walk in Memory of Janice Sheldon: 11/3/07

**NEW YORK**

- TeamHOPE Walk - Long Island In Memory of Jimi Lee: 9/23/07; Holtsville
- 11th Annual Poller Enterprises Golf Tournament: 9/29/07
- TeamHOPE Walk - Stamford: 9/29/07
- Candlelight Vigil for Pancreatic Cancer: 11/1/07; Troy

**NORTH CAROLINA**

- Bowling for Hope: 8/18/07; Cary
- Carl Lanfear Lionheart Classic Golf Outing: 9/15/07
- Paws Up for Pancreatic Cancer Research: 9/21/07; Wake Forest
- 2nd Annual Wood D. Sink Memorial Golf Tournament: 10/19/07; Raleigh

**OHIO**

- 3rd Annual Jay (Julian) Pijor Golf Outing: 9/7/07
- An Evening for Chuck: 9/9/07; Akron
- 2nd Annual Tom Hearn Cruise-In for a Cure: 9/15/07; Navarre
- Ron Petrof Poker Run: 9/22/07; Wickliffe
- Bruce Marner Memorial Golf Outing: 9/29/07; North Olmsted
- Happy Hour Fundraiser: 10/12/07; Columbus
- Cincinnati Thanksgiving Day Race: 11/22/07

**OREGON**

- TeamHOPE Portland’s PurpleStride: 9/22/07; West Linn

**PENNSYLVANIA**

- Pancakes for Patty: 9/22/07; Drexel Hill
- 5th Annual Golf Outing for Pancreatic Cancer: 9/22/07; Etters
- TeamHOPE Walk – Philadelphia: 10/3/07; Newtown
- TeamHOPE Philadelphia Night at the Phantoms: 11/23/07

**RHODE ISLAND**

- TeamHOPE Walk - Rhode Island: 10/27/07; Warwick

**SOUTH DAKOTA**

- Proud to Wear Purple Trail Ride and Saddle Raffle: 9/15/07; Canton

**TENNESSEE**

- 2nd Annual Hustle for Hope: 9/15/07; Nashville
- 5th Annual Trail Walk/Run: 10/13/07; Morristown
- 1st Annual Cruise for a Cure Motorcycle Ride: 11/3/07

**TEXAS**

- 8th Annual Hank Granberry Charity Classic: 10/10/07; Grapevine
- Lance Armstrong Livestrong Challenge Expo: 10/12/07; Austin
- Tee Off For PanCAN: 10/15/07; Houston
- Encana Golf Tournament In Honor of Ann Lewis: 10/19/07; Dallas
- 6th Annual Ol’ Country’s Boot Scootin’ for PanCAN: 10/27/07; Fort Worth
- Celebration of Hope: 11/15/07; Corpus Christi
- Bobbi Brown Makeup Event for PanCAN: 11/17/07; Plano

**VIRGINIA**

- Movin’ and Groovin’ for PanCAN: 8/25/07; Richmond

**WASHINGTON**

- 3rd Annual Buck Mabbutt Memorial Ride: 8/25/07; Silverdale
- Holiday Gift Wrapping at Barnes & Noble: 11/25/07; Bellevue

**WEST VIRGINIA**

- Denny Luttrell Memorial Golf Outing: 8/11/07; Martinsburg

**WISCONSIN**

- Vernon Golf Open - In Memory of Daniel J. Kleiman: 9/8/07; Grafton

**CORRECTION:**

The caption for the survivor photo for the Longmont Leap in Colorado in October’s newsletter was incorrect. The correct listing is Dianna Petersen, not Nancy Petersen.
AN EVENING WITH THE STARS

OVER 1.3 MILLION DOLLARS WERE RAISED THROUGH GENEROUS SPONSORSHIPS, TICKET SALES, TRIBUTE JOURNAL ADS AND FUND A CURE!

The Pancreatic Cancer Action Network hosted their 10th annual “An Evening with the Stars” gala on October 27th at the Beverly Hilton Hotel. There were over 600 attendees, including 50 survivors. The evening’s emcee was “Talk Soup” host, Joel McHale, who kept the audience laughing with his wit and charm.

Pancreatic cancer survivor, Laurie MacCaskill, was honored with the Spirit of Hope Award. A native of Southern California, she is involved with a variety of philanthropic organizations and currently works as a communications consultant. Laurie and her husband, Paul, received an outpouring of love and support from their generous friends and family who contributed greatly to the success of the event.

Paul and Laurie MacCaskill

Vestoria McConnell, Donald High, Delores McConnell and Rashana McConnell

Eva and Tyler Noesen

Laurie MacCaskill and Julie Fleshman

Host Joel McHale with Ellen Zeltmann

Dr. William Isacoff, Pam Acosta-Marquardt and Nancy Daly Riordan
SPECIAL OCCASION CAKE

This year celebrate your loved one’s birthday, anniversary or a simple “thinking of you”, by making a donation to the Pancreatic Cancer Action Network in their honor. Choose from one of three donation levels and we will send a beautiful Creative Cakery bundt cake with a custom purple bow and special acknowledgement to your loved one.

Your donation is 75% tax deductible and supports the Pancreatic Cancer Action Network’s programs. Please email development@pancan.org, or call 877-272-6226 for more information.

CRUISE FOR THE CAUSE!

Enjoy a wonderful cruise vacation with Royal Caribbean Cruise Lines and raise money for the Pancreatic Cancer Action Network while you sail away in luxury! We have partnered with Royal Caribbean and Worldview Travel to offer a selection of exciting cruise vacations. Fundraising amenity for the Pancreatic Cancer Action Network will be $50-$100 per cabin depending on the itinerary that you select. What a wonderful way to celebrate just about any occasion with friends & family!

THE FOLLOWING ITINERARIES ARE OFFERED FOR SUMMER & FALL 2008:

- 7 Night Mexican Riviera on Vision of the Seas Departing Los Angeles Jul 20, 2008
- 7 Night Western Caribbean on Freedom of the Seas Departing Miami Aug 31, 2008
- 3 Night Baja on Monarch of the Seas Departing Los Angeles Jun 13, 2008
- 3 Night Bahamas on Majesty of the Seas Departing Miami Aug 15, 2008

All travel must be booked directly with Worldview Travel no later than March 10, 2008. Please call 800-869-0674 to book your travel. For more information visit www.pancan.org.

FIND OUT WHAT OTHER GIVING OPPORTUNITIES ARE AVAILABLE

For more information on giving opportunities at the Pancreatic Cancer Action Network, including research naming opportunities, gift annuities and other planned gifts, or building a tribute fundraising page for your loved one, CALL 310-725-0025 OR E-MAIL PMARQUARDT@PANCAN.ORG.
### CALENDAR OF EVENTS

<table>
<thead>
<tr>
<th>DATE</th>
<th>EVENT NAME</th>
<th>CITY, STATE</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/24/08</td>
<td>5th Annual Walk for a Cure</td>
<td>Greendale, WI</td>
<td>Chris Spannraff <a href="mailto:teamhopewi@wi.rr.com">teamhopewi@wi.rr.com</a></td>
</tr>
<tr>
<td>3/1/08</td>
<td>2008 Pancreatic Cancer Symposium - Tampa</td>
<td>Tampa, FL</td>
<td>Mayra De Anda <a href="mailto:mdeanda@pancan.org">mdeanda@pancan.org</a></td>
</tr>
<tr>
<td>3/9-11/08</td>
<td>2nd Annual Pancreatic Cancer Advocacy Day</td>
<td>Washington, DC</td>
<td><a href="mailto:advocacy@pancan.org">advocacy@pancan.org</a></td>
</tr>
<tr>
<td>4/5/08</td>
<td>2008 Pancreatic Cancer Symposium - Philadelphia</td>
<td>Philadelphia, PA</td>
<td>Mayra De Anda <a href="mailto:mdeanda@pancan.org">mdeanda@pancan.org</a></td>
</tr>
<tr>
<td>5/08</td>
<td>PurpleStride Chicago 2008</td>
<td>Chicago, IL</td>
<td>Maureen Feck <a href="mailto:maureenfeck@comcast.net">maureenfeck@comcast.net</a></td>
</tr>
<tr>
<td>5/2/08</td>
<td>2008 Pancreatic Cancer Symposium - Seattle</td>
<td>Seattle, WA</td>
<td>Mayra De Anda <a href="mailto:mdeanda@pancan.org">mdeanda@pancan.org</a></td>
</tr>
<tr>
<td>5/3/08</td>
<td>2nd Annual Celebration of Hope Dinner and Auction</td>
<td>Seattle, WA</td>
<td>Mariellen Gunn <a href="mailto:maniegunn@comcast.net">maniegunn@comcast.net</a></td>
</tr>
<tr>
<td>5/4/08</td>
<td>Cincinnati Flying Pig Marathon</td>
<td>Cincinnati, OH</td>
<td>Natalie Radtke <a href="mailto:nnradtke@pancan.org">nnradtke@pancan.org</a></td>
</tr>
<tr>
<td>5/13/08</td>
<td>Cookin’ for a Cure</td>
<td>New York, NY</td>
<td>Lindsay Redmond <a href="mailto:lredmond@pancan.org">lredmond@pancan.org</a></td>
</tr>
<tr>
<td>6/21/08</td>
<td>PurpleStride Cleveland 2008</td>
<td>Bay Village, OH</td>
<td>Tricia Reed <a href="mailto:reedt@playhousesquare.org">reedt@playhousesquare.org</a></td>
</tr>
</tbody>
</table>

**SHOP FOR A CAUSE!**

It’s easy to raise awareness by purchasing the latest Pancreatic Cancer Action Network accessories: purple ribbon print necktie, new logo sweatshirts, bracelets, necklaces and earrings with authentic Swarovski crystals, and great home and office accents.

[WWW.PANCAN.ORG/STORE](http://WWW.PANCAN.ORG/STORE)