



Chairman of the Board's Message

Dear PanCAN Friends,

We have exciting news to share! Due to your tremendous support, we were able to fund two additional Career Development Awards for pancreatic cancer research. Thus, in total, during PanCAN's fiscal year 2005–2006 we funded a half million dollars in research projects. You should all feel proud of your part in making this possible – thank you for your generosity!

PanCAN's staff and volunteers had a very busy springtime. We attended the American Society of Clinical Oncology (ASCO), the American Association for Cancer Research (AACR), the Oncology Nursing Society (ONS) and the Association of Oncology Social Work (AOSW). At each of these meetings, we had the opportunity to share with health professionals about PanCAN and the services we have to offer to their patients. We also learned about the latest advancements in pancreatic cancer patient care and new research underway. In June, we hosted our very first Pancreatic Cancer Symposium in New York. We are happy to have successfully provided three educational symposia in the past twelve months, and we look forward to growing this program over the next year.

In April, PanCAN volunteers attended One Voice Against Cancer (OVAC) in Washington, DC. We are proud to announce that PanCAN had more advocates in attendance than any other organization. Our volunteers have a passion that is truly contagious and energizing. At the same time, we launched our Grassroots Advocacy Program and trained the PanCAN Grassroots Advocacy Leaders. These leaders will help guide PanCAN volunteers across the country in our advocacy efforts for legislation to support research funding and raise awareness about pancreatic cancer with Congress.

It is hard to believe that November and Pancreatic Cancer Awareness Month is just around the corner. It is not too soon to start thinking about what you can do in your community to help raise awareness about pancreatic cancer. Check our website this fall for ways that you can help during November. As always, we are grateful for your continuing support!

Warm regards,

Tim Ennis
Chairman of the Board

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Raising Our Voices On Capitol Hill Through Grassroots Advocacy

As April came to a close, PanCAN's Grassroots Advocacy Program was off to a strong running start in the effort to raise awareness on Capitol Hill of the critical need for research funding for pancreatic cancer. All five of our newly selected Grassroots Advocacy Leaders (GALs) and four TeamHOPE Coordinators (THCs) - each of whom have been touched in some way by pancreatic cancer - joined us for OVAC (One Voice Against Cancer) Lobby Days in Washington D.C. April 25-26.

OVAC, a coalition of over thirty cancer advocacy organizations, works to increase funding for cancer research by focusing advocacy efforts on the annual congressional budget and appropriations process. Of the over 120 people who participated in OVAC Lobby Days, PanCAN had the largest representation, with 40 PanCAN members and staff taking part in the two-day event.

On April 25th, all attendees prepped for their meetings with Congressional Members by participating in a detailed training session and walkthrough of the lobbying process, and heard from long-time cancer research funding supporters Senator Tom Harkin (Democrat, Iowa) and Representative Mike Castle (Republican, Delaware). The following day, OVAC participants attended meetings with their Senators and House Representatives and/or staff and urged them to support cancer research funding.

Back at home, the GALs and THCs will work together to establish an advocacy component in each of the TeamHOPE affiliates across the country. Regionally, GALs will:

- Oversee and lead advocacy activities, including recruitment of additional supporters.
- Serve as point people for advocacy related questions and activities.
- Serve as an advisor for regional messaging as it relates to advocacy.

You can join this important effort by logging onto www.pancan.org to let your federal representatives know that you support cancer research funding. Simply "Click here to e-mail your Representative!", enter your name and address and our new Capwiz site will sign your name to a pre-set letter template which will automatically route your message to your elected officials. By raising our voices collectively, we can all make a difference!

On a Personal Note

"We have to be the voice that asks our representatives to help with the war against cancer. Through OVAC, myself and 120 other cancer advocates had the opportunity to raise our voices to our government leaders in Washington D.C. It is imperative that we don't give up, and continue to put our stories in front of the people we elect into office to represent us. It is our tax money that they are budgeting; they must support our war in protecting our loved ones, as well as their loved ones in the fight against cancer. Our voice will make a difference."

Paula Tobias,
Grassroots Advocacy Leader, Ohio

"I became involved with PanCAN following my husband's sudden death from pancreatic cancer in 2004. Through grassroots advocacy, I know that I can make a difference to increase awareness and influence political decision making. Telling Bill's story as part of my lobbying efforts to increase funding for cancer research was both cathartic for me and poignant when illustrating this dire need to our government leaders. My OVAC experience was a wonderful introduction to the process that takes place on Capitol Hill to get any bill passed."

Nancy J. Peterson Anderson
Grassroots Advocacy Leader, Minnesota

"My OVAC experience was incredible! Before attending OVAC Lobby Days I was very skeptical that my presence would make a difference, but I left each meeting with the Congressmen and/or their legislative aides feeling confident that I had been heard and that TOGETHER we can make a difference. I was deeply touched by everyone I met who is a part of PanCAN. We each had very different stories but stood on a common ground - we had all been touched in some way by pancreatic cancer. Although we had just met, we were a family united by a common goal... to make a difference!"

Janet Lee Adams
Grassroots Advocacy Leader, Arizona

"My OVAC experience was one of the best experiences that I have ever had. It was so invigorating to be surrounded by so many people who were committed to a single cause. Many of the survivors in our group were

so inspirational to me. I would have never considered going to Washington when I was undergoing chemo, yet I met several people who were currently undergoing not only chemo but radiation. Several felt so strongly about what they were doing that they had left their small children at home in the care of others while they pounded the streets. The energy in the Capitol was contagious!"

Michelle Hackbarth
Grassroots Advocacy Leader, California

"I learned very quickly after my husband's diagnosis that my most important job was to be his advocate. Since his death, my role as an advocate has changed. I now feel that I can be one voice for those who have not survived this horrific disease as well as a strong advocate for individuals fighting pancreatic cancer."

Having the opportunity to participate in OVAC for the past two years has been one of the most empowering experiences of my life. Being able to share a passionate cause with every Senate and Congressional Member from your state is quite incredible and an experience that most Americans will never have."

Wendy Walsh
TeamHOPE Coordinator, Arizona

"OVAC was an amazing experience for me. Sometimes I get caught up in my personal pancreatic cancer "crusade" and momentarily forget that cancer, in all its different forms, effects just about everyone. My OVAC experience helped to remind me that any advancement made in the fight against cancer will ultimately help the pancreatic cancer community. It was wonderful to meet representatives from other cancer organizations and join forces to ensure that cancer research funding continues to be a priority for the government. I was pleased to find that we have Senators and Representatives that support cancer research funding and that they were receptive to our message."

Jessica McSpadden
TeamHOPE Coordinator, Arkansas

2006 PanCAN Research Grants

More than \$500,000 Invested in 5 New Research Grants

PanCAN is pleased to present the recipients of the 2006 PanCAN Career Development and Young Investigator research grants. Special thanks and recognition go out to the families of Michael Landon and Samuel Stroum for investing in pancreatic cancer research. Additionally, our thanks extend to the power of our TeamHOPE Affiliates and many others who made three additional grants possible. These multi-year grants are administered through the American Association for Cancer Research (AACR) and the American Society of Clinical Oncology (ASCO). (Note: At this writing, only one of the three AACR recipients has been identified. We will introduce you to the other two grantees very soon.) We invite you to get to know the 2006 PanCAN grant recipients. We are thrilled to have them on the PanCAN team!

Daoyan Wei, MD

2006 PanCAN-AACR Michael Landon Career Development Award



Dr. Daoyan Wei was born in Hefei, People's Republic of China, received his medical degree from Anhui Medical University, and a Ph.D. degree from Shanghai Second Medical University,

PRC. He began postdoctoral training at the University of Michigan-Ann Arbor, and then moved to Houston to continue postdoctoral training at the University of Texas MD Anderson Cancer Center, where he is now an Instructor of Medical Oncology.

Shortly after Dr. Wei joined the MD Anderson Cancer Center, he became involved with a SPORE (Specialized Programs of Research Excellence) in Pancreatic Cancer. Through that first exposure, says Dr. Wei, he observed first-hand why pancreatic

carcinoma, particularly pancreatic ductal adenocarcinoma, has the worst prognosis of all the major malignancies.

Dr. Wei is particularly concerned about the impact pancreatic cancer will have on the baby boomer generation if effective diagnostic tools and additional treatment options are not developed in the near future. "As our population ages, pancreatic cancer will be a far more prevalent problem throughout the health care system because the incidence of pancreatic cancer increases with age, and our population is heavily weighted with the baby boomers. Over 70 percent of pancreatic cancer cases occur in people 60-80 years old, the age demographic which is the very heart of the boomer generation, so it is clear that a better understanding of the etiology and biology of pancreatic cancer is urgently needed to effectively diagnose, prevent, and treat this malignancy," he says.

Dr. Wei received the PanCAN-AACR Michael

Landon Career Development Award to study pancreatic ductal adenocarcinoma, a genetic disease which exhibits a plethora of molecular alterations that include mutations in the K-RAS, p53, p16, and Smad4 genes, and overexpression of multiple mitogenic growth factors and their tyrosine kinase receptors. According to Dr. Wei, "it is likely that yet unrecognized genetic alterations may also contribute to the carcinogenesis and progression of pancreatic cancer. My work will investigate the biological significance and molecular mechanism of KLF4 in pancreatic cancer biology. These studies will shed new light on our understanding of the molecular events that lead to the development and progression of pancreatic cancer, and may hold high potential to use KLF4 as a biomarker or therapeutic target for human pancreatic cancer."

PanCAN believes that Dr. Wei is a tremendous asset to the pancreatic cancer community, and we eagerly look forward to working with him.



Remember – November is National Pancreatic Cancer Awareness Month!

David Z. Chang, MD, PhD

2006 PanCAN-ASCO Career Development Award



A native of Jiangsu, China, Dr. David Chang attended Dartmouth Medical School and is currently Assistant Professor of Medicine at the University of Texas/MD Anderson Cancer Center.

“Treating pancreatic cancer is one of the most difficult challenges in medical oncology because the disease is very resistant to traditional chemotherapy and radiation therapy,” says Dr. Chang. “During my fellowship training at Sloan-Kettering Cancer Center, I saw many patients with pancreatic cancer. I hope to be able to contribute to the advancement of this field and to the care of such patients by developing novel treatment approaches.”

Enabled by PanCAN’s ASCO Career Development Grant, Dr. Chang plans to

test the effectiveness of cromolyn, an anti-asthma agent that has been used safely for over 30 years, as a treatment for pancreatic cancer. “While at M. D. Anderson Cancer Center, I have had the opportunity to work with Dr. Craig Logsdon, a world-renowned scientist in pancreatic cancer research. His laboratory has identified a novel mechanism of action of cromolyn, namely, the inhibition of the S100P interaction with RAGE and the resultant inhibition of cancer growth. In animal studies, cromolyn significantly inhibited pancreatic cancer growth and was synergistic with gemcitabine, a standard cytotoxic agent for pancreatic cancer. Therefore, I expect to show that cromolyn is a good treatment for pancreatic cancer in humans.”

According to Dr. Chang, the continued cuts of federal funding for research make the support from foundations/organizations such as PanCAN a critical component in keeping the pipeline of young researchers open. “I first learned about PanCAN during

my fellowship training and have been impressed ever since by its generous support for pancreatic research, which in itself has been very important in fostering the career development of junior faculty members. Sadly, I have seen many promising physician scientists leave the research field because of the suboptimal funding environment. The award I receive from PanCAN will help me carry out the initial clinical trial of cromolyn, which has the potential to be a treatment for pancreatic cancer. I am honored to be part of PanCAN and proud to serve the larger pancreatic cancer community.”

Dr. Chang is also a devoted husband and father of an eight-month-old daughter. He enjoys camping, fishing, skiing, and hiking and has won several martial arts championships over the past 30 years.

Jennifer F. Tseng, MD

2006 PanCAN-ASCO Samuel Stroum Young Investigator Award



Dr. Jennifer Tseng, who hails from Newton, Massachusetts, is the first female researcher to receive the Samuel Stroum Young Investigator Award.

Dr. Tseng received her medical degree from the University of California, San Francisco and was a resident at Massachusetts General Hospital. She conducted a research fellowship on pancreatic tumor vaccines at Children’s Hospital/Boston/Harvard Medical School, and received a Surgical Oncology Fellowship at the University of Texas MD Anderson Cancer Center. Currently, she is an Assistant Professor of Surgery specializing in pancreatic surgery at the University of Massachusetts Medical School and Memorial Medical Center.

Dr. Tseng says she first became fascinated with cancer research during a UCSF preclinical seminar, “The Molecular Biology of Cancer.” Her grandfather (a general and thoracic surgeon) had struggled with and ultimately passed away from cancer during her medical school years. “My grandfather’s illness showed me what it’s like to have to watch as a loved one struggles with cancer, and I made a vow then to somehow make a difference in the effort to find a cure. Pancreatic cancer became my main focus when, as a medical student, I took care of a patient who was scheduled for a Whipple procedure. Unfortunately, we discovered during laparoscopic surgery that he had peritoneal mets and had to stop the surgery. Seeing his disappointment, devastation, in the recovery room was a turning point in my career.”

The goal of the project for which Dr. Tseng has received the PanCAN grant is to generate

a risk score for pancreatic lesions, so that patients at greatest risk of pancreatic cancer can be identified early and undergo aggressive treatment for cure, while patients with benign lesions can be spared the risks of surgery and other interventions.

Dr. Tseng has also been honored by the Pancreatic Cancer Alliance, a grassroots organization in Worcester, Mass, as their Pancreatic Cancer Alliance Scholar, an honor that she says “means a great deal to me, because it comes from people who have dealt with pancreatic cancer first-hand. I believe that pancreatic cancer strikes the best, and the brightest. For that reason, I am determined to be part of the community that makes our way toward a cure for this disease.”

Dr. Tseng is married to Marc Sabatine, M.D., a cardiologist at Brigham and Women’s in Boston. They have a six-month old son, Matteo.

Capitol Hill: Fiscal Year 2007 Appropriations Update

After several weeks of delay, the U.S. House of Representatives approved a Fiscal Year 2007 (FY 07) Budget Resolution on May 18th. With this spending blueprint approved, House appropriators can move forward and begin consideration of their ten FY 07 spending bills. The House Leadership seeks to bring all ten appropriations bills to the House floor for approval by June 30th, the beginning of the July 4th week-long recess. This is a very ambitious goal, but a tentative schedule has been put into place. Even if the House is successful in approving all ten appropriations bills by the end of June, it is highly unlikely that the Senate will move the majority of its appropriations – if any – by the end of July, before Congress breaks for a five-week summer recess. As has occurred in the past, we should expect to see some funding bills finalized in September, with others not being completed until the fall or early winter.

Of importance to PanCAN is the fact that the Senate directly allocated an additional \$7 billion and the House made a commitment to provide an additional \$7 billion in funding for health and education programs for FY 07. These additional funds are targeted to the Labor, Health and Human Services, and Education (Labor/HHS) Appropriations bill, the bill that provides funding for the National Institutes of Health (NIH) and the National Cancer Institute (NCI). The extra funds increase the likelihood but do not ensure that additional funding will be included for medical research at the NIH and the NCI when the respective Labor/HHS bills are considered in the House and Senate.

Democrats and moderate Republicans advocated early in the FY 07 Budget process to add critical funding to the Labor/HHS bill, and this additional \$7 billion will seek to

restore health and education programs to last year's funding level, plus an additional 2% for inflation. Patient groups, biomedical researchers and other health and education advocates joined forces to put pressure on moderate Republicans, asking that they join the Democrats in fighting for these essential funds.

Back in March, Senate Labor/HHS Chairman Arlen Specter (R-PA) and Ranking Member Tom Harkin (D-IA) saw overwhelming support for additional funds for their bill when the Senate approved an additional \$7 billion for health and education programs by a 73-27 vote. Efforts to replicate this amendment in the House failed when the House Budget Resolution was considered by the House Budget Committee. However, health and education advocates continued with their grassroots efforts as moderate Republicans were unrelenting in pushing for increased funding for these programs, thus delaying consideration of the Budget Resolution on the House floor. (PanCAN members should take pride in being part of this extended grassroots effort!) In the end, the House Leadership shifted over \$4 billion in funds from defense, foreign operations and other areas in order to provide increased funding for health and education programs without exceeding the President's proposed FY 07 budget cap of \$873 billion for domestic discretionary spending. In addition, the House Leadership made a commitment to provide an additional \$3 billion for health and education programs in the Labor/HHS (with offsets yet to be determined) later in the appropriations process.

NEXT STEPS:

PanCAN members should continue to contact their U.S. Senators and Representatives to seek a 5% increase in funding for the NIH and NCI in the FY 07 Labor/HHS Appropriations bills. These letters should be sent before each chamber moves to consider its respective Labor/HHS bill. Log onto www.pancan.org and select "Click here to e-mail your Representative" to make sure your voice is heard!

HOUSE: The House of Representatives is expected to consider its Labor/HHS funding bill in Subcommittee on June 7th and full Committee on June 13th, with the legislation currently scheduled to be considered on the House floor beginning on June 21st. PanCAN members should contact their U.S. Representatives by the first week in June to urge for a minimum funding increase of 5% for the NIH and NCI.

SENATE: In conversations with cancer representatives earlier this month, Senate Labor/HHS Appropriations staff indicated that the Senate Labor/HHS bill was likely to be one of the last bills to be considered by Congress this year. Further, staff indicated that the House-Senate conference negotiations would likely extend until the end of the session (Thanksgiving or later). PanCAN members should still contact U.S. Senators throughout the spring and summer to request that Senators support a minimum 5% funding increase for the NIH and NCI in FY 07 – even if the Senate does not consider its Labor/HHS bill until the late summer or fall.

2007 PanCAN Grants Available

New PanCAN grants for pancreatic cancer research will be available for funding in 2007.

Applications are due in November 2006 for funding beginning in July 2007.
For grant criteria and applications, visit www.pancan.org/Research/funding.html.

Surveillance Programs for Pancreatic Cancer

Family members of people diagnosed with pancreatic cancer are often concerned about the risk of others in the family developing the disease. Though the exact causes of pancreatic cancer are unknown, there are several known risk factors associated with the disease. One such risk factor is family history; approximately 10% of pancreatic cancer cases have a hereditary link. Due to this risk factor, many individuals are interested in methods for screening and early detection. Some institutions in the United States now offer surveillance programs for individuals in families affected by pancreatic cancer to be monitored regularly for early signs of the disease. The standard methods for cancer screening, including computed tomography (CT) scans and serum tumor markers, such as CA19-9 and CEA, are often ineffective at detecting smaller lesions, pre-cancers or early stage cancers. Due to the lack of sensitivity of these tests, many family members are left wondering what, if anything can help detect the earliest forms of pancreatic cancer.

Most surveillance programs are designed to follow families with two or more members diagnosed with pancreatic cancer or families with first-degree relatives (siblings, parents, or children) who developed pancreatic cancer before the age of 50. It is thought that the risk runs highest in families who have multiple incidents of pancreatic cancer. This risk is increased further in individuals who smoke. The age at which to begin screening is uncertain and complicated by the observation that up to one-third of family members may demonstrate genetic anticipation (an earlier onset of the disease with each succeeding generation). Many centers begin screening at 50 years of age, or 10 years before the earliest age of onset of pancreatic cancer in a family member, whichever is earlier. The screenings are usually repeated annually.

According to Dr. Teri Brentnall at the University of Washington, "endoscopic ultrasound (EUS) appears to be the most promising screening test

for identifying pancreatic dysplasia (abnormal cells) and early pancreatic cancer." During an EUS, a thin, lighted tube is passed through the patient's mouth, down through the stomach and into the first part of the small intestine. At the end of the endoscope is an ultrasound probe which creates detailed images of the pancreas and digestive tract. It should be noted however, that the endoscopic criteria used to diagnose pancreatic dysplasia are frequently present in patients with chronic pancreatitis or ongoing alcohol use, and EUS is unlikely to be useful in such patients. If abnormal findings can be seen and the patient does drink, the patient is asked not to consume alcohol for 6 months and the test is then repeated.

If abnormal EUS results are obtained, the next test likely to be performed is an endoscopic retrograde cholangiopancreatography (ERCP). This test also involves passing a flexible tube through the mouth and down to the area of the pancreas. Once the tube has reached the pancreas, a contrast liquid is injected into the pancreas and x-rays are taken of the pancreatic ducts, where cancer and pre-cancer typically grow.

In these particular surveillance programs, patients found to have abnormalities on both EUS and ERCP are referred for a surgical biopsy of the pancreas to confirm pancreatic pre-cancer or early cancer. If pre-cancer or early cancer is found, a discussion with the patient about how he/she would like to proceed is needed. Many patients who have a strong family history of pancreatic cancer and who have high-grade pre-cancer present in the pancreas choose to have a total pancreatectomy (the whole pancreas is surgically removed). Specialists recommend taking out the whole pancreas because pre-cancer forms throughout the entire organ and not just in one spot. However, every person and every case is different and decisions on how to treat these pancreatic abnormalities should be discussed with a specialist.

Patient and Liaison Services (PALS)

PanCAN's Pancreatic Cancer Symposium, an educational event for pancreatic cancer survivors and their families and friends, continues to expand with three locations in 2006.

The Chicago Symposium held April 7-8 boasted 150 participants including 39 pancreatic cancer survivors and featured speakers from six Chicago hospitals. On June 17, PanCAN hosted its first-ever New York Symposium, in partnership with the Lustgarten Foundation, the RC Hayes Memorial Foundation, CancerCare and the Jay Monahan Center for Gastrointestinal Health. And on November 3-4, 2006, during Pancreatic Cancer Awareness Month, PanCAN will present the seventh annual Los Angeles Symposium in conjunction with the Evening with the Stars black-tie gala. Look for the Symposium in more cities during 2007, as PanCAN strives to bring quality education to communities across the U.S.

Information is always available through PanCAN's Patient and Liaison Services (PALS) program. Get connected one-on-one with a PALS Associate who will answer questions about pancreatic cancer, provide information about treatment options, perform a personalized clinical trials search and offer additional support resources and educational materials, all at no charge.

PALS Associates are available Monday through Friday from 9:00 am to 5:00 pm Pacific Time. Contact us toll-free at (877) 272-6226 or by e-mail at medinfo@pancan.org.

Survivor and Caregiver Network

There is nothing quite like talking to someone who's been through it. Share knowledge, ask questions and get support by talking to others with similar experiences through PanCAN's Survivor and Caregiver Network.

To get connected or to become a volunteer in the Network, contact Anitra Engebretson, PALS Associate, at (877) 272-6226 or aengebretson@pancan.org. We are in special need of volunteers currently caring for someone with pancreatic cancer to join the network.

Diet and Nutrition

Lactose Intolerance in Pancreatic Cancer



Julie Meddles, RD, LD



Maria Petzel, RD, LD, CNSD

Lactose intolerance is the body's inability to completely break down the primary sugar in dairy products, lactose. Lactase is the enzyme normally produced by the body that performs this function. Patients may develop lactose intolerance after pancreatic cancer surgery or antibiotic use. One study even shows that a certain type of chemotherapy may cause lactose intolerance. Symptoms may appear 30 minutes to two hours after eating or drinking foods that

contain lactose. Common symptoms include bloating, diarrhea, gas, abdominal pain, and cramping.

A doctor can use tests to diagnose lactose intolerance, but may first recommend eliminating lactose containing foods from the diet to see if the symptoms go away.

Treatment of Lactose Intolerance

Lactose intolerance is easy to treat. No treatment can improve the body's ability to produce lactase, but symptoms can be controlled through diet. The level of dietary control needed with lactose intolerance depends on how much lactose a person's body can handle. Some people may be able to manage ice cream and aged cheeses, such as cheddar and Swiss, but not other dairy products. Most adults do not have to avoid lactose completely. Some may tolerate lactose by having small amounts at one time. For example, one person may have symptoms after drinking a small glass of milk, while another can drink one glass but not two.

Pancreatic cancer patients need the protein and calories which are found in foods containing lactose. Therefore, rather than eliminating lactose from the diet, a lactase enzyme supplement or cultured dairy product may be beneficial. Lactase enzyme supplements are available in tablet and liquid form without a prescription. The tablets are typically taken with the first bite of dairy food or drops of the liquid are simply added to the food.

Dairy products with active cultures such as yogurt and buttermilk are better tolerated

because they contain beneficial bacteria that may produce lactase to aid in digestion. Over time, regular consumption of cultured dairy products may help the body become more tolerant of larger amounts of foods containing lactose.

There are also many products on the market that are lactose-reduced, including milk and specialty ice creams and cheeses. These products contain all of the nutrients found in the regular products and remain fresh for about the same length of time.

Ensuring Adequate Calcium:

Calcium is essential for the growth and repair of bones throughout life. Adults need to intake 1,000 to 1,500 mg of calcium daily. In the middle and later years, a shortage of calcium may lead to thin, fragile bones that break easily. This condition is called osteoporosis. Since dairy products are a major dietary source of calcium, a concern for persons with lactose intolerance is getting enough calcium when the diet includes little or no dairy products.

To help in planning a high-calcium, low-lactose diet, the table that follows lists the lactose

content of some common foods that are good sources of dietary calcium. Some vegetables that are high in calcium (Swiss chard, spinach, and rhubarb, for example) are not listed because they contain substances that inhibit calcium absorption.

Calcium is absorbed and used only when there is enough vitamin D in the body. A balanced diet should provide an adequate supply of vitamin D from sources such as eggs and liver. Sunlight also helps the body naturally synthesize vitamin D, and with enough exposure to the sun, food sources may not be necessary.

Consultation with a registered dietitian may be helpful in deciding which dietary changes to make and whether dietary supplements are needed. A dietitian can also help you choose foods that will provide the most nutrients with the least chance of causing discomfort.

For additional information please visit The National Institute of Diabetes and Digestive and Kidney Diseases at <http://digestive.niddk.nih.gov/ddiseases/pubs/lactoseintolerance/>.

CALCIUM AND LACTOSE IN COMMON FOODS

Common Foods	Calcium Content	Lactose Content
Soy milk, fortified, 1 cup	200-300 mg	0
Sardines, with edible bones, 3 oz.	270 mg	0
Salmon, canned, with edible bones, 3 oz.	205 mg	0
Broccoli, raw, 1 cup	90 mg	0
Orange, 1 medium	50 mg	0
Pinto beans, 1/2 cup	40 mg	0
Tuna, canned, 3 oz.	10 mg	0
Lettuce greens, 1/2 cup	10 mg	0

Dairy Products

Yogurt, plain, low-fat, 1 cup	415 mg	5 g
Milk, reduced fat, 1 cup	295 mg	11 g
Swiss cheese, 1 oz.	270 mg	1 g
Ice cream, 1/2 cup	85 mg	6 g
Cottage cheese, 1/2 cup	75 mg	2-3 g

Adapted from *Manual of Clinical Dietetics, 6th ed.* American Dietetic Association, 2000, and *Soy Dairy Alternatives*. Available at: www.soyfoods.org.

Family Registries

Most cases of pancreatic cancer appear to occur sporadically with no previous family history of the disease. However, approximately 5–10% of all pancreatic cancers are due to a positive family history, meaning at least one first degree relative (parent, sibling) was diagnosed with pancreatic cancer. Having a genetic susceptibility to pancreatic cancer does not mean that a person will develop the disease because risk is also affected by non-genetic factors including diet, lifestyle, and environment. Despite increasing research in the field of pancreatic cancer, understandings of the causes of this disease are still uncertain. Family registries have been established with the hope of discovering the causes of familial cancer. These family registries aim to uncover the unifying characteristics, genetic and otherwise, in families with multiple cases of pancreatic cancer.

A pancreatic cancer family registry is a repository of information obtained from patients and their family members (blood relatives) and from individuals with a strong family history of pancreatic cancer. Registries examine lifestyle, environmental and genetic factors, in addition to family history of pancreatic cancer, genetic syndromes and other cancers that are believed to be associated with pancreatic cancer. Participation in a family registry usually requires the completion of questionnaires about individual and family medical history, family history of cancer, exposure to environmental agents, and demographic information including age, ethnicity, education, and occupational history. In addition, participants may be asked to provide biological specimens such as a blood or tissue sample for genetic testing. Family registries are commonly managed by a physician investigator and a study

coordinator. All registries have been reviewed and approved by their respective Institutional Review Boards for enrolling participants and are required to protect the privacy of these individuals.

To ensure privacy, unique study identification numbers are assigned to all information obtained from registry participants. Additionally, registries are protected by a Certificate of Confidentiality from the National Institutes of Health, Department of Health and Human Services. This certificate protects the personal information provided by families and affords researchers legal protection from having to involuntarily release any information. With this certificate, physician investigators cannot be forced by court order to disclose any protected health information which may identify registry participants.

Family Registry Locations

PanCAN is aware of the following pancreatic cancer family registries in the United States and Canada. Some of these registries are part of a consortium of sites, collectively known as the Pancreatic Cancer Genetic Epidemiology (PACGENE) consortium, funded by the National Cancer Institute.

- ✘ Dana Farber Cancer Institute, Boston, MA
- ✘ Evanston Northwestern Healthcare, Evanston, IL
- ✘ Indiana University School of Medicine, Indianapolis, IN
- ✘ Johns Hopkins Hospital, Baltimore, MD
- ✘ Mayo Clinic, Rochester, MN
- ✘ Memorial-Sloan Kettering Cancer Center, New York, NY

- ✘ University of Nebraska Medical Center and Creighton University, Omaha, NE
- ✘ University of Oklahoma Health Sciences Center, Oklahoma City, OK
- ✘ University of Pittsburgh Medical Center, Pittsburgh, PA
- ✘ University of Texas – MD Anderson Cancer Center, Houston, TX
- ✘ University of Utah Huntsman Cancer Center, Salt Lake City, UT
- ✘ University of Washington Medical Center, Seattle, WA
- ✘ Wayne State University Karmanos Cancer Institute, Detroit, MI
- ✘ Mount Sinai Hospital, Toronto, Ontario, Canada

Please note that these registries are national and not limited to residents in the state of that particular registry; however, the family registry at Mount Sinai Hospital is limited to residents of Ontario, Canada.

Family registries are an important key to unlocking the genetic basis of pancreatic cancer. Registries offer unique opportunities for interdisciplinary studies with clinicians and researchers from a variety of fields including epidemiology, gastroenterology, pathology, oncology, genetics and surgery. This collaborative approach has led to great advances in the field of pancreatic cancer research, but much more needs to be done. The participation of patients and family members is vital to furthering the understanding of pancreatic cancer and the development of new methods to diagnose and treat pancreatic cancer.

For more information about family registries contact the PALS program at (877) 272-6226 or medinfo@pancan.org



Thirty-nine pancreatic cancer survivors participated in a day of education at the Pancreatic Cancer Symposium – Chicago.

Story of Hope and Inspiration

By Carol N., Plano, TX



Over a year ago, I attended a cancer survivor celebration at a local hospital. The speaker, for reasons I still don't understand, stated that "you will probably never meet a survivor of pancreatic cancer." What I now know is that one day past diagnosis, you are a survivor. And I can thank a whole community of people for getting me to twenty months after diagnosis – my husband Jeffrey, my two kids, my doctor and nurses, and all of the survivors and caregivers I have communicated with. When I was diagnosed, I started a journal. The first entry reads "I am not alone," and after over a year and a half, I really know how true that is.

I feel like I prepared my whole life for this battle. I have an undergraduate degree in zoology, a graduate degree involving research in immunology, and training as a medical librarian. Yet as soon as I had

children, I chose to stay home with them, never regretting my life as a stay-at-home mom. What was all that education for? At age 54, when I was diagnosed with metastatic pancreatic cancer, I was armed for the fight with knowledge of cell biology and medicine and how to gather and organize information. I also had been a runner for 30 years, and had practiced yoga and meditation for five. These skills, too, would be important in keeping me alive well beyond what statisticians would predict. I have also set goals that have kept me going: to see my daughter compete in a collegiate gymnastics meet – I did that this March. To finish wedding quilts for both of my children and baby quilts for six grandchildren-to-be. I've finished the wedding quilts, and am on crib quilt number five. Now I'm looking forward to seeing my son graduate from UCLA Law School and my daughter graduate from UNC, both next May. I think I just might make it.

The day after we got the biopsy report on samples taken from my liver, my oncologist told me about the most aggressive treatment he

had: GTX - gemcitabine (Gemzar[®]), docetaxel (Taxotere[®]), and capecitabine (Xeloda[®]). I knew that I would be able to do my part by exercising daily, continuing my yoga practice, and keeping an optimistic attitude. GTX worked like magic – my CA19-9 marker went from 50,000 to 93. There were some bad times, like when hand-foot syndrome from capecitabine ended my running. But I soon discovered that I could ride a bike no matter how sore my feet, and I've since gone on rides as long as 37 miles.

GTX stopped working at 8 months, and since then I have been on a variety of drug combinations, including gemcitabine, bevacizumab (Avastin[®]), and erlotinib (Tarceva[®]), and cisplatin (Platinol[®]) and docetaxel. I have attacked the tumor on the tail of my pancreas with Novalis Shaped Beam Radiosurgery, and was in a clinical trial for a new targeted therapy. A recent PET scan showed no active tumor on my pancreas, but four pesky liver mets. I am going after them with oxaliplatin (Eloxatin[®]) and capecitabine. So many drugs, so little time!

Financial and Insurance Issues

Navigating financial responsibilities following a pancreatic cancer diagnosis can be challenging. When someone is diagnosed with cancer, it is vitally important to discuss any financial concerns with the doctor, hospital social worker, or the business office of the hospital or clinic.

Cancer imposes heavy economic burdens on patients and their families. For many people, a portion of medical expenses is paid by their health insurance plans. But sometimes, it's not enough – patients often encounter treatment-related expenses that are not covered by insurance. There are resources available for individuals who need financial assistance to cover health care costs and for those who do not have health insurance.

In addition to direct treatment costs, travel to distant hospitals or cancer centers may be necessary and can add considerable financial burden. Furthermore, many people diagnosed with pancreatic cancer stop working and therefore experience a loss of income. Oftentimes, this means losing health insurance, too. For people without health insurance, financial assistance from both government and private organizations is available.

Just as patients and families must advocate for their best medical care, so must they advocate

for financial assistance. It is important to be organized and keep the following tips in mind:

- ✘ First, analyze your current insurance policy. Know ahead of time what the policy covers and what is the patient's responsibility. Your insurance company may list an in-network pancreatic cancer specialist or may review the specialist you have chosen.
- ✘ If you are denied coverage for a procedure, you may appeal the insurance company's decision.
- ✘ If you are uninsured, under insured or the percentage you are required to pay imposes a financial burden, there are programs to help.

The organizations and resources listed below may offer financial assistance for people with pancreatic cancer. For a comprehensive list of resources please contact the PALS program at (877) 272-6226 or medinfo@pancan.org.

Financial and insurance assistance:

- ✘ *American Cancer Society*, (800) ACS-2345, www.cancer.org
 - Assists cancer patients with treatment-related travel expenses including transportation, medicine and medical supplies.

- ✘ *CancerCare*, (800) 813-4673, www.cancercare.org
 - Provides limited grants for pancreatic cancer patients.
- ✘ *Hill-Burton Free Hospital Care*, (800) 638-0742, www.hrsa.gov
 - Provides select services at zero or reduced costs to persons who cannot otherwise afford them.
- ✘ *Social Security Administration, Supplemental Security Income, Social Security Disability Income (SSA, SSI, SSDI)*, Medicare, and Medicaid (800) 772-1213, www.ssa.gov
 - Provides eligible older and disabled persons with a monthly income and insurance.

Prescription drug programs:

- ✘ *Together Rx*, (800) 865-7211, www.together-rx.com
- ✘ *RxHope.com*, (877) 979-4673, www.rxhope.com
- ✘ *NeedyMeds.com*, (215) 625-9609, www.needymeds.com (web site preferred)

Join the TeamHOPE Marathon Team

San Diego, CA Sunday, August 20, 2006



It's not too late to join the TeamHOPE Marathon Team as we prepare for America's Finest City Half Marathon and 5K Run/Walk in spectacular San Diego, California, this August. But hurry, because this famous race is limited to only 6,000 participants! The half marathon begins at the historic Cabrillo Lighthouse on Harbor Island, then winds along the Embarcadero, home to the oldest wooden sailing ship in America – the Star of India, continues through downtown and ends in Balboa Park, home of the world-famous San Diego Zoo.

By committing to raise \$2,900, participants receive expert training from Club 26.2, half marathon registration, round trip airfare to San Diego, hotel accommodations at the Sheraton San Diego Hotel & Marina, fundraising assistance, a PanCAN running team shirt, and best of all... a chance to celebrate HOPE with fellow TeamHOPE members. So join us – even if you've never run before!

This is a USA Track and Field sanctioned and Certified course appropriate for all fitness levels. Visit www.pancan.org/afc for details and to register online.

Cleveland Browns and WJW-TV Fox 8 Team Up

to Support Sportscaster Casey Coleman and PanCAN



Legendary Sportscaster Casey Coleman hasn't let pancreatic cancer slow him down at all. Casey, who for the last 40 years has worked closely with both the Cleveland Browns and the Cleveland Indians, probably has as many fans as the two teams themselves. And since his diagnosis with

pancreatic cancer was made public, everyone whose life he's touched has wanted to give back in some way.

Casey continues to receive cards and e-mails every day from friends and fans with heartfelt well-wishes and support.

Last October, shortly after his diagnosis, Casey was honored with the Recovery Resources Bronze Key Award for his work in the field of addiction. Earlier this year Casey threw out the opening ball of the season for the Indians, was inducted into the Cleveland Association of Broadcasters Hall of Fame, and just recently

was named Outstanding Sportscaster in Ohio by the Associated Press. In June, for the second year in a row, Casey helped lead PanCAN's annual Cleveland Walk for Hope - an outstanding success due to yet another huge fan group of Casey's – the Cleveland Browns and the local Fox News television station, WJW-TV, who teamed up to produce two public service announcements for PanCAN.

Starting quarterback Charlie Frye joined Casey on the Brown's training field in Berea to tape the spots, one to promote the Walk and the second a general spot to run year round in the Cleveland and outlying markets. All production including camera, sound, editing and graphics was donated by WJW, who assigned their top news teams to tape and edit the spots.

PanCAN would like to extend its deepest thanks to the Cleveland Browns' Renee Harvey and QB Charlie Frye; to Ron Mounts, Tomi Toyama-Ambrose and Mike Renda at Fox 8; and to our good friend Casey Coleman for making this all possible.

TeamHOPE

PanCAN's TeamHOPE Affiliates help educate their communities and raise awareness about pancreatic cancer. Affiliates are volunteer-based and host activities and events to help PanCAN fulfill its mission. **If you are interested in events or volunteer opportunities, contact us at volunteer@pancan.org or call 877-272-6226.**

Please help TeamHOPE and PanCAN reach you more easily by making sure we have your most current contact information. Providing PanCAN with your e-mail address allows us to send you the latest news, announcements and event information postage-free! **You can update your profile by calling us or by going to www.pancan.org and clicking on "Join our Mailing List" at the bottom of any page.**

PanCAN welcomes our newest TeamHOPE Affiliate Coordinators!

TeamHOPE Alabama –
Birmingham: Roxie Holland

TeamHOPE Georgia – Atlanta:
Brittany Black

TeamHOPE Maine – South:
Brad Smith

TeamHOPE North Carolina –
Greensboro: Catherine Keener

Please see the back page of this newsletter for a calendar of upcoming TeamHOPE events.

TeamHOPE Events

CALIFORNIA

The Napa Holiday B&B Tour and Taste Event was a resounding success. Over 300 event participants toured eleven downtown Napa B&Bs. Each Inn was festively decorated and featured wine from at least one premium Napa winery. Many of the Inns also featured a local restaurant or chef with a food pairing for the wine. PanCAN was chosen as the recipient for a portion of the proceeds from the event because Sharon Fry, TeamHOPE California – Napa Valley runs the Napa Old World Inn. Look for this event again in 2006 – current plans are for the first Saturday in December. Details will be posted at www.historicinns.com

COLORADO

The Stakes Are High – Live Auction and Casino Night took place on April 28th and raised close to \$7,000. The event was held at the Hotel Boulderado, the use of which was donated to TeamHOPE Colorado – North by Karin Byrne in memory of her mother. The evening began with an animated live auction featuring sports memorabilia, spa treatments and other great items, then continued with exciting table games. Patty Murphy, a two-year pancreatic cancer survivor, was also on hand to share her story of hope. Special thanks to event organizers Melissa Beatty, Shawna Busby-Hirman, Karin Byrne, and Gretchen Guerra for putting together a wonderful evening.

CONNECTICUT

Joan Bossak from Bristol organized an **Angel Pins Jewelry Sale** with pins from Designs by Lucinda, raising \$423.

DELAWARE



On March 18, TeamHOPE Delaware held its **1st Annual Striking Out Cancer** bowling event in Wilmington

at the Pike Creek Bowling Alley. This event was truly a team effort. Thank you to all who participated – the event was a huge success. Over 275 people attended, raising over \$18,000. While some enjoyed bowling, others enjoyed socializing, bidding on the raffle items and enjoying the wonderful food donated by Eclipse Restaurant and Pat's Pizzeria.

IDAHO

The Northwest Classic Motorcycle Club organized a **ride and spaghetti feed** in honor of member Elisa Chapman, who is living with

pancreatic cancer. Approximately 100 people attended, despite the cold weather, and raised \$830. TeamHOPE Idaho-North volunteers were invited to distribute information about PanCAN and enjoy the festivities. A big thank you to everyone involved!

INDIANA

Erin Steben organized **A Cause for Fashion** fundraiser on March 23 in honor of her grandmother, Judy Thompson. The event was held at one of the dorms at Eastern Illinois University and raised \$600.

MARYLAND

As a Bar Mitzvah project, Brett Mazor organized a **letter writing campaign** in support of pancreatic cancer awareness, raising \$1,645. Brett's mother, Tina, said it was a wonderful learning experience for the whole family and they received an overwhelming amount of support.



In support of two family members diagnosed with pancreatic cancer in February, Dana Thompson

organized a two-day, 112 mile bike ride on April 22 and 23. The ride was called **"Pedaling for Pat and Aunt Mary Helen."**

Joining Dana on the first day were Bobby Davis and Tim Thompson. The riders' focused determination drove them to complete the first day of the ride, despite incredibly harsh weather conditions! Rider Mike Niner joined Dana and Bobby on the second day. The entire ride was followed by Carmella Thompson in her car. The event started with a wonderfully organized send-off rally and ended at the University of Maryland, where riders were welcomed by TeamHOPE volunteers. Over \$4,200 was raised.

MASSACHUSETTS



The **1st Annual Pancreatic Cancer Awareness Walk for Andy, Luke, and Liz**

was held On April 30 in Hopkinton. On a gloriously sunny day, floods of people came to Hopkinton State Park in support of PanCAN, Andy Welzel, Luke Kimball, and

Liz Hatch. Every aspect of the day exceeded

expectations with nearly 1,000 walkers and over \$20,000 in funds raised. A heartfelt and humble THANK YOU to all who made this inaugural walk an unbelievable success.

NATIONAL CAPITAL AREA

TeamHOPE National Capital Area organized **outreach efforts at health fairs** held at the U.S. Department of Interior, U.S. Government Printing Office, and U.S. General Services Administration in Washington, D.C. In addition, PanCAN members were invited to attend the Public Forum of the American Association for Cancer Research, as well as a chemotherapy education program at the Washington Hospital Center.

TeamHOPE National Capital Area participated in the **Calvert County Health Fair** in Prince Frederick. Kary Lawrence also held a **Pampered Chef Fundraiser** in her home in Rockville, raising \$122.

NEW MEXICO

The **Pancreatic Cancer Research Golf Tournament** was held in Truth or Consequences by Loretta Delamere in memory of her husband, Charles Delamere, and others in Sierra County who have been affected by pancreatic cancer. The turnout and proceeds were bigger than expected. After expenses, a check for \$3,912 was mailed to PanCAN. Truth or Consequences and neighboring town Elephant Butte have small populations, but the people can be counted on to come out and help worthy causes. The tournament was a four-person scramble, had a \$5,000 hole-in-one and other hole-in-one prizes on every par 3. It included prizes for two closest to the pin holes and longest accurate drive, and paid first and second place teams. A delicious lunch was served and the tournament was enjoyed by all players.

NEW YORK

On April 28, Daiwa Securities America, Inc. of New York City, hosted a **denim dress down charity day** raising \$1,400, of which \$500 was a direct donation from Daiwa. The employees also wore purple cloth ribbons in support of pancreatic cancer awareness.

Continues on Next Page

TeamHOPE Events



TeamHOPE New York - Capital District has been busy this spring holding various fundraisers and staffing many awareness

tables. The affiliate has recently formed an alliance with the local **Cold Stone Creamery** stores, and so far has raised \$1,500 selling Cold Stone ice cream cakes. Special thanks to Sheryl Maralit, Fundraising Coordinator and Asst. Manager of the Cold Stone Creamery in Saratoga, as well as Stu Davis, Regional Marketing Director, for their wonderful support in making this fundraiser a great success. Special thanks to all the Team volunteers who participated in selling Cold Stone ice cream cakes, Avon, Home Interiors, Silpada Design Jewelry, Great Escape tickets and Current products. Lastly, thank you to Sheila Mattice who arranged a **PanCAN Day at the local Chicago Grill/Pizzeria Uno**.

NORTH CAROLINA



TeamHOPE North Carolina Central Coordinator Carol Birney recently took part in two health fairs. The first was a **woman's health fair** in

conjunction with the gymnastics Tar Heel Invitational meet at the University of North Carolina (UNC) in Chapel Hill. One of the

gymnasts' mothers, a pancreatic cancer patient, made bears dressed in purple gymnast outfits that were raffled off in PanCAN's name. The second health fair was held at the **Cary Senior Center**. Both health fairs were very well attended.

Allison Johnson, a volunteer with TeamHOPE North Carolina-Central and a sophomore at Green Hope High School in Cary was given a class assignment to **research and report on a non-profit organization**. She chose to do her presentation on PanCAN. After her presentation she gave out purple ribbons and information sheets to the entire class.

OHIO

TeamHOPE Ohio-Trumbull County held the **1st annual "Bowling for a Cure"** bowl-a-thon on April 23. Almost 90 people attended, including 3 survivors! A 50/50 raffle and Chinese auction helped us raise approximately \$4,000. Everyone had a great time. One person asked the Event Coordinator if they could do it again the next week!

Michelle Miles of Carrollton organized a **Dress Down Day** among 50 local businesses. This was truly a community effort, as \$1,100 was raised by charging only \$2 per participant.

PENNSYLVANIA



On the weekend of April 22 and 23, nine TeamHOPE Pennsylvania - Philadelphia & Northeast members volunteered at

a PanCAN awareness booth at the **NBC Fitfest in the PA Convention Center**. During the weekend, the team was very busy handing out PanCAN and pancreatic cancer information along with purple awareness ribbons to the MANY interested participants. Thousands of people attend the yearly event, and TeamHOPE Pennsylvania was proud to represent PanCAN for the second year.

TEXAS



Virginia Griffin, Coordinator for TeamHOPE Texas - Fort Worth, represented PanCAN at **NBC 5's HealthFit**

Expo. Virginia and her volunteers manned a booth for the duration of the expo, distributing materials and information to those attending and raising awareness of pancreatic cancer.

Julie Butler and students at Palmer High School organized the **2nd Annual 3-mile Walk for the Cure** on April 15th in memory of Judy Miller, who lost her battle to pancreatic cancer in October of 2005. Thank you to event organizers and the 45 participants who raised almost \$2,500 to benefit PanCAN!

We Need 29 More Votes From Congress to Declare November Pancreatic Cancer Awareness Month!



Did you know that it takes 50 members of Congress to dedicate a month to a specific cause, and that it must be renewed every year? House Resolution 745, which would declare November 2006 National Pancreatic Cancer Awareness Month, currently has the support of 21 members of congress. We need everyone's help to get to 50 and make sure our voices are heard!

To urge your representative to support this resolution, please visit <http://www.pancan.org/Public/take.html>. Using our advocacy tools, you can find out who your elected representatives are and how to reach them, and with a few clicks you can send them an e-mail asking them to sign House Resolution 745. Help us take this important step to spread the word about pancreatic cancer!

“Hope Candle” Just One of Many New Store Items



A purchase from the PanCANstore is a great way to show your support for the cause! Just by wearing a

PanCAN t-shirt or baseball cap while at the gym or running errands, you help raise awareness of pancreatic cancer. Recently, we've added a variety of new items to the store's product line to help you share PanCAN's message with friends and family. A perfect example is the new Hope Candle (pictured) which makes a great gift for yourself or others. The message card enclosed reads:

*Fragrant lavender to soothe your senses.
Glowing light to illuminate your spirit.
Heartfelt warmth to reassure you that you are not alone.
And a message of hope to cheer and inspire you on your journey through today.*

Other new store items include two license plate holders with either purple or white frames, women's workout ankle socks with a purple awareness ribbon on the side and an elegant silver-finish logo keychain that flips open to reveal a picture frame! With more than twenty items now in stock, we know you'll find something that strikes your fancy. There are more new items coming, so check the website frequently.

Thank you for your continued support of the PanCAN store. Wear and display your purple with pride!

PanCAN Awarded Four-star Rating and “Best in America”

When you give to PanCAN, you can be sure that your donation is making a difference. PanCAN works hard to get the most out of every charitable contribution it receives.

Last year, we directed nearly 90 cents of every dollar raised to support the signature programs that have made us a national leader in the quest to defeat pancreatic cancer. These include our patient and caregiver services for people who have been diagnosed with the disease; our education and public policy efforts that spotlight the need for a cure; and our Career Development Awards that fund innovative pancreatic cancer research by talented young scientists.

Few charitable organizations are as effective at fulfilling their missions. Charity Navigator recently awarded PanCAN its highest four-star rating for

the second year in a row, and The Independent Charities of America (ICA), gave PanCAN its “Best in America” Seal of Approval. The ICA bestows this honor on organizations that have “been able to certify, document, and demonstrate on an annual basis that they meet the highest standards of public accountability, program effectiveness, and cost effectiveness.” Fewer than 2,000 of the 1,000,000 charities currently operating in the United States earned the ICA “Best” designation this year.

PanCAN is proud to belong to such a select group. And we are thankful to you, our supporters and advocates, for helping us accomplish so much.

For more information on how PanCAN allocates its charitable income, please visit our website at www.pancan.org/Donate/how.html and www.pancan.org/Donate/index.html.

PanCAN Celebrates National Volunteer Week

PanCAN volunteers – no matter where they live – are the most caring, giving and compassionate people around. We want to say a very special THANK YOU to all of you special folks who generously give their time to PanCAN and the pancreatic cancer community. Thanks to the generosity of the Pachanga and the Daily Grill restaurants, Corner Bakery and Ralphs Supermarket, during National Volunteer Recognition Week in April PanCAN's National Office threw a festive party for the tireless volunteers who keep coming back, week after week, to help us with administrative tasks here at headquarters and at PanCAN's annual *Evening With The Stars* gala.

Pictured from left to right are:

Back row: Tony Cruciani, Elizabeth Flynn (PanCAN Communications Manager), Rebecca French, Linda Skaggs, Sheri French

First row: Kathy Haller, Jennifer Reeves, Nickolas Williamson, Susan Dennis (PanCAN Volunteer Coordinator), Carrie Bie, Allisen Patel, Joe Borg.

Other volunteers who attended but are not present in photo include: Judy Stein (PanCAN Board Member), Robin Miller, Melissa Goldsmith, Glen Goldsmith, Yvonne Fisher.



*Join us
in Hollywood...*

*An Evening
with the
Stars*



...End up in paradise.

Saturday November 4, 2006
Grand Ballroom at Hollywood & Highland
Hollywood, CA

This year's featured raffle:
7 day cruise on Norwegian Cruise Lines.
Includes oceanview cabin with all meals and
entertainment on board. Excludes airfare &
taxes.



Gala Tickets start at \$350.
Tribute Journal ads start at \$300.
Raffle tickets: \$20.00

Winner Need Not Be Present To Win.

For further information, contact
Silvia Williamson
310.725.0025 x110
swilliamson@pancan.org



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 Fax: (310) 725-0029
 www.pancan.org

To remove your name from future mailings, or make changes to your contact information, please cut and paste your address label from below and return it to:
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*Complementary Educational Event
 for Patients and Families*

Online Registration Available August 2006

Calendar

Start Date	Event Name	City	State	Contact
7/8/06	Fairhaven Runners Chuckanut Foot Race	Bellingham	Washington	Noelle Mestres at www.imrunningforbob.com
7/15/06	2nd Annual Gene Thieme & Ron Gutmann Bowl	Leo	Indiana	Aubrey Burns at alburns@indiana.edu
7/20/06	PanCAN Night at the San Francisco Giants	San Francisco	California	Michelle Monhart at mmonhart@pancan.org
7/23/06	Home Run for HOPE	Nazareth	Michigan	Jason Hall at jason@jasonhall.com
8/6/06	Chicago Walk for HOPE	Evanston	Illinois	Valerie Powley at vpowley@pancan.org
8/19/06	Bowling for HOPE	Cary	North Carolina	Peggy Brescia at peggybrescia@nc.rr.com
8/19/06	Run for HOPE - 5K Run & Walk	Buffalo	New York	Sal Teresi at cmtsjt@msn.com
8/19/06	Golden Gallop	Golden	Colorado	Gretchen Guerra at donandgretch@comcast.net
8/20/06	Greens FORE a Cure	Churchville	New York	Kris Murphy at kmurphy@pancan.org
8/20/06	America's Finest City Half Marathon	San Diego	California	John O'Hara at johara@pancan.org
8/25/06	Shirley Hobbs Martin Memorial Golf Tournament	Lake Bluff	Illinois	Laura Martin at LMartin419@sbcglobal.net
8/26/06	Movin and Groovin for PanCAN - 5K Run/2 Mile Walk	Richmond	Virginia	Rene Hypes at volunteerva@pancan.org
8/27/06	3rd Annual Pick up the Pace for PanCAN - 5K Walk	Pittsburgh	Pennsylvania	Theresa Dukovich at tdukovich@pancan.org
8/27/06	4th Annual Brandon 2 - Person Scramble	Brandon	South Dakota	Peggy Kessler at pkessler@pancan.org
9/9/06	Pancreatic Cancer Awareness Walk	Portland	Maine	Rachel Kilbride at volunteeme@pancan.org
9/10/06	The Susan Novick Race to Make a Difference	Vineland	New Jersey	Amie Novick-Lidke at anovick1@comcast.net
9/16/06	Pancakes for PanCAN	Savannah	Georgia	Joann Bishop at jbishop@pancan.org
9/16/06	3rd Annual People and Pooches 5K Walk for PanCAN	Wilmington	Delaware	Lara Perrault at lperrault@pancan.org
9/17/06	Purple Ride	Bloomington	Minnesota	Richard Ansel at anselr@stifel.com
9/17/06	4th Annual Tom Grosser Memorial Golf Tournament	Solon Springs	Wisconsin	Theresa Grosser at tgrosser@pancan.org
9/23/06	Hustle for HOPE	Nashville	Tennessee	Jamie Darden at jdarden@pancan.org
9/24/06	3rd Annual Jimi Lee Memory Walk for PanCAN	Holtsville	New York	Debbie Lee at dlee@pancan.org
9/25/06	The Steve Whiteley Drive for Hope	Fort Wayne	Indiana	Elizabeth Whiteley at ewhiteley@pancan.org
9/30/06	Walk for HOPE - Stamford	Stamford	New York	Sheila Mattice at beads@nycap.rr.com
9/30/06	4th Annual Trail Run/Walk for Pancreatic Cancer	Morristown	Tennessee	Leslie Frantom at lfrantom@pancan.org
10/1/06	Redwood Trails Auburn Marathon	Cool	California	Tracy South at www.firstgiving.com/TracyS
10/9/06	Michael Praplaski Memorial Golf Outing	Malvern	Pennsylvania	Mark Praplaski at mpraplaski@aol.com