



Pancreatic Cancer Action Network

OUTREACH

A Publication of the Pancreatic Cancer Action Network

Research and Scientific Affairs

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Seven-year-old Zachary Siegel and his 11-year-old brother Jeremy (not pictured) of Cincinnati, Ohio were so good at 'raising their voices' that Sunkist Growers, Inc. contributed an additional \$1000 to the boys' fundraising effort for PanCAN this summer. Way to go, Jeremy and Zachary!

www.pancan.org

November is National Pancreatic Cancer Awareness Month!



Chairman of the Board's Message

Dear PanCAN Friends:

I have been honored to serve as PanCAN's Chair for the past two years. However, in November I will pass the role of Chairman to my fellow board member, Jason Kuhn. I will continue to serve on PanCAN's board, and I look forward to being a part of the organization's continued growth and successes. From PanCAN's early days I have watched it grow to be the number one source of information and hope for the pancreatic cancer community. It is my hope that we continue to grow through symposia around the country as we have done in Los Angeles, Chicago and New York. This spring we will go to Tampa, Florida for the first time. Thank you to the Board of Directors, Scientific Advisory Board, Medical Advisory Council, TeamHOPE members, volunteers and the entire staff for your dedication and hard work over the past two years.

It is with great enthusiasm that we approach Pancreatic Cancer Awareness Month in November. This year we want to focus on raising awareness in communities across the country. We want you to RAISE YOUR VOICE! Please read inside and also visit our website about how you can RAISE YOUR VOICE during the month of November. Remember that by passing on information about pancreatic cancer and the needs of the pancreatic cancer community to family, friends and colleagues, and they in turn pass it on to their family, friends and colleagues; you have exponentially raised awareness about the disease.

Please check our calendar of events for the many activities happening during the month of October and November in communities across the country. Mark your calendars for November 3 and 4 for our Weekend of Hope, which includes the Los Angeles Educational Symposium and our annual star-studded gala, *An Evening with the Stars Goes Hollywood*. It should prove to be an exciting time as we raise awareness and funds for the pancreatic cancer community.

We are looking forward to working with all of you this November because together, we are providing a stronger voice for patients and researchers. Thank you for being a part of our team!

Sincerely,

Tim Ennis
Chairman of the Board

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Thank You Tim!

All of us at PanCAN wish to express our heartfelt gratitude to Tim Ennis for his outstanding leadership as Chair of PanCAN's Board of Directors. Under Tim's watch, PanCAN experienced unprecedented growth. Our programs flourished and we reached out to more people than ever before. Thank you, Tim, for your devotion to the cause. You truly raised the bar.

Z GALLERIE

3rd Annual Shopping Extravaganza to Benefit PanCAN
is November 6 -12, 2006!

Don't miss it!

For a store near you, visit www.zgallerie.com.

A Heartfelt Thank You

to Our Friends at
Ralph Lauren Inc.
in Beverly Hills

for Your Continued
Support and Philanthropy!

Raise your Voice



**November is
National Pancreatic Cancer Awareness Month
Here's What YOU Can Do to Make A Difference!**

Just imagine - if each one of the more than 100,000 supporters in PanCAN's database called three friends, neighbors or coworkers, and told them how and why pancreatic cancer is important to them, and about PanCAN, we'd reach 300,000 people! And if just one of those new contacts happened to also tell a friend - that's 100,000 more potential allies for PanCAN - and before you know it, more than half a million Americans

would know where they could go for information and hope. To PanCAN!

That's the power of "raising your voice." It's one of four very simple action steps we're asking you to make during the month of November. If you don't have a computer, don't be afraid to pick up the phone or write a personal letter. Please, make your voice count any way that you can!

Four Simple Ways To Raise Awareness

Raise Your Voice and Tell a Friend - A conversation in the neighborhood grocery store, at work or your place of worship can help spread the word about PanCAN's mission and services. In four weeks, you'd be surprised how many people you can reach!

Write a Letter to the Editor - visit www.pancan.org, click on "Take Action Now" and select the media option. Enter your zip code, and the system will identify local newspapers with email capabilities in your area. We'll have a letter template ready for you to send as is, or you can add your own personal story. Select the papers you want and click send. That's all there is to it.

Write to Your Congressional Representative and Your Senator - visit www.pancan.org, click on "Take Action Now" and select the Elected Officials option. Enter your zip code, and the system will identify your elected Federal officials. Just like the media action described

above, we'll have a letter template available to send as is or customize. Then just click send - Washington will get your message! In this election year, they'll be especially attentive to what you have to say.

Create a Personal Fundraising Page - Raising funds for pancreatic cancer research is critically important. Let everyone know how important this is to you, and encourage them to make a donation on your website. To build your site, just go to www.pancan.org and follow the simple instructions. We'll have some great incentives for you as a reward for your efforts. And you'll have done a great service to the entire pancreatic cancer community!

Look for more ways you can RAISE YOUR VOICE about pancreatic cancer starting November 1, 2006 on www.pancan.org. Your voice will make a difference!

PanCAN Goes Global!

PanCAN Japan to Help Address Needs of Pancreatic Cancer Community

In Japan, each man and woman has a 50:50 chance of developing cancer in their lifetime, compared to an American's one in three odds. Pancreatic cancer, currently ranked as the fifth leading cause of cancer death for men in Japan (ranked sixth for women), will claim more than 22,000 Japanese lives this year. And just as in the U.S., thousands of concerned Japanese patients and family members earnestly seek information about the disease and its treatments, and where to go to get help. But unlike the U.S., until very recently there was nowhere for them to turn for patient information and clinical guidance, no leading resource for help and hope.

But when Yoshiyuki (Yoshi) Majima and PanCAN CEO Julie Fleshman met this past year and discussed the state of cancer research and care resources in Japan, both were inspired by the hope that a U.S.-Japanese scientific and educational collaboration could help change the care outcomes for pancreatic cancer patients and further accelerate the search for a cure. In late 2006, Majima signed PanCAN's first international affiliate agreement to open PanCAN Japan, an autonomous extension of PanCAN which will duplicate PanCAN's U.S. patient and professional education services, clinical trial database collection and grassroots advocacy efforts.

When Yoshi's sister was diagnosed with pancreatic cancer last year, he, like many other pancreatic cancer family members worldwide, immediately set out to identify the best doctor, the best hospital, the best treatment therapy, the best of everything and anything that would help his sister survive her diagnosis. What he discovered in Japan, however, was that there was very little information about pancreatic cancer available and very few doctors with a specialization in the disease. When Yoshi went to the internet to search for information, he found PanCAN. Recognizing the critical need in Japan for the services and

advocacy provided by PanCAN, he set out to meet with Julie in Los Angeles, CA.

Yoshi anticipates that by building a grassroots movement under the auspices of a non-profit organization like PanCAN in Japan, significant policy changes will take effect across the board regarding pancreatic cancer care and research. Though the death rates for cancer appear to be on the decline in North America and Western Europe, in Japan the situation is vastly different, and some experts project that in just ten years, the number of cancer deaths in Japan will be 1.5 times greater than today's. Though important deregulation reforms initiated by Japan's Koizumi Cabinet enabled the Ministry of Health, Welfare and Labor (MHWL) to take a critically important step towards modernization four years ago, there are still not enough certified oncologists in practice in Japan to meet the demand for patient care. Additionally, an ongoing delay in MHWL approval for at least 35 of the 111 standard anticancer drugs that are in use worldwide, including Tarceva, one of the drugs used to treat pancreatic cancer, has severely limited the medical care industry's ability to explore promising clinical trial outcomes using Tarceva and Gemzar, for example.

"In the United States, PanCAN is increasing awareness about pancreatic cancer so that it is no longer 'the silent disease'," says Julie. "We've found our voices, and since PanCAN was first founded in 1999, PanCAN volunteers and constituents have helped to bring about significant changes in the way the medical and political communities respond to our needs and demands. The same thing can and must happen in Japan and around the world so that a cure can be found."



Pancreatic Cancer in Japan

- In Japan, there were 22,260 deaths from pancreatic cancer in 2004 – accounting for almost 10% of all cancer deaths.
- Pancreatic cancer is the fifth leading cause of cancer death in Japan, led by lung cancer, stomach cancer, colon cancer and hepatic (liver) cancer.
- Every 30 minutes, a patient dies from pancreatic cancer in Japan.
- Japan's 2006 Anti-Cancer Program Budget, a landmark effort by the Ministry of Health, Welfare and Labor to improve cancer treatment in Japan, makes provisions for improvements in early detection, standardized treatment protocols and the promotion of cancer-related technology development, and calls for the establishment of a Cancer Treatment Information Center.



New PanCAN Store Items Coming in November!

Order Online at www.pancan.org/store or Call Toll-free (877) 272-6226.

Welcome Drs. Lewis and Chen to the PanCAN Family!

PanCAN is pleased to introduce you to the final two recipients of the 2006 PanCAN Career Development grants, Dr. Brian Lewis and Dr. Ru Chen. These multi-year grants are administered through the American Association for Cancer Research (AACR). We are thrilled to have them on the PanCAN team!

Dr. Brian Lewis

2006 PanCAN-AACR Career Development Award



Originally from Kingston, Jamaica, Dr. Brian Lewis received his PhD from Johns Hopkins University and conducted his post-doctoral studies at the NIH and Memorial Sloan Kettering. He is currently an Assistant Professor of Program and Gene

Function and Expression at the University of Massachusetts Medical School and resides in Worcester, Mass.

When Dr. Lewis began his postdoctoral training, he was interested in generating novel *in vivo* models for human cancers, and as pancreatic cancer was a malignancy without any good *in vivo* models, he concluded that this was a field in which he could make significant contributions.

"It has been very emotionally rewarding and inspiring to be involved with the pancreatic cancer community," says Dr. Lewis. "The impact of the disease is so devastating, yet I have drawn inspiration from the patients and family members that I have met. PanCAN has certainly raised the public profile of this disease and does a wonderful job of providing support to the many individuals diagnosed with this disease."

In the research project funded by PanCAN, Dr. Lewis proposes to identify the role of the notch signaling pathway in the development of pancreatic ductal adenocarcinoma. The notch signaling pathway is active in pancreas progenitor cells during the development of the organ, but is inactive in the mature organ. Activation of this signaling pathway has been recently identified in a significant fraction of pancreatic cancer cases, and this activation is frequently seen in precursor lesions. However, it remains unknown whether this pathway is involved in the initiation of the

disease, and if so, the mechanisms by which it contributes to tumor development.

Dr. Lewis's work will determine whether activation of this pathway alters the growth and survival properties of pancreatic duct cells, and whether activation of the pathway initiates tumor formation in an animal model. He will also determine whether loss of tumor suppressor genes commonly found in pancreatic cancer cooperate with notch signaling in tumor initiation and progression. By identifying the role of notch signaling in pancreatic tumorigenesis, Dr. Lewis hopes it will lead to the development of additional therapeutic strategies for this malignancy.

Dr. Lewis claims that he most enjoys simple outdoor pleasures such as hiking but having been raised in a former British colony, also admits that his favorite sports - soccer and cricket - are the sports he tends to follow most closely.

Dr. Ru Chen

2006 PanCAN-AACR Career Development Award



Dr. Ru Chen hails from Fujian, China, and received her doctoral degree (Ph.D.) from the Department of Pathology at University of Washington, and had post-doctoral training in the Division of Gastroenterology at the University of

Washington and Institute for Systems Biology. She is currently an instructor at the University of Washington, and is deeply involved in research aimed at improving the detection, diagnosis and treatment of pancreatic cancer.

Dr. Chen's doctoral training was in the molecular and genetics study of GI cancer. According to Dr. Chen, she recently shifted her focus to pancreatic cancer because of her mentor, Dr. Teresa Brentnall, who inspired her to research

better diagnostics and therapeutics, two of the areas of pancreatic cancer research that are in greatest need of advancement. Dr. Chen hopes that through her research projects, she will be part of a successful research community effort to eventually prevent and cure pancreatic cancer.

Dr. Chen's research grant from PanCAN will allow her to work on developing early biomarkers of pancreatic cancer to improve early detection while the cancer is still curable. Her group is applying proteomics technology to identify the proteins that are specific to pancreatic cancer and pre-cancer.

"We hope that our study can lead to new insights into how pancreatic cancer forms and allow us to develop a blood test for the early detection of pancreatic cancer," says Dr. Chen. "Such a blood test may not only allow for early detection of the disease while curable, but it may also prove

highly useful as a marker of disease remission in chemotherapy trials, and as a target for vaccine development."

"I admire PanCAN for its mission to increase national attention on the need to find a cure for pancreatic cancer. I am truly honored to receive the career award from PanCAN. This funding provides essential research support during my career transition from gastrointestinal cancer research and in particular, allows me to focus on finding those critically important biomarkers for the early detection of pancreatic cancer."

Dr. Chen says her life outside medicine is very simple. Though she takes pleasure in quieter pastimes such as reading and listening to music at home in Seattle, she thoroughly enjoys the travel involved in visiting her parents and friends in China.

Advocates Take Action and Create Change

This past year our PanCAN advocates proved once again that they really have the right stuff to raise the meaning of “take action” to new heights! In the spring, close to 40 people represented PanCAN at the OVAC (One Voice Against Cancer) Lobby Day in Washington, DC, which made PanCAN the largest advocacy bloc in attendance. In mid-July, 42 TeamHOPE Coordinators and the Grassroots Advocacy Leaders met in California to discuss strategies to increase advocacy activities in their local communities.

With deep cuts to fund cancer research at the National Cancer Institute still under consideration by the House, now, more than ever, action is needed. We want to stress that you do not need to be an expert in government affairs to be an advocate. Like all things, advocacy comes in all shapes and sizes. Sending an email through “Take Action Now” is advocacy, and setting up a district meeting with your U.S. Senators and/or Representative is advocacy.

PanCAN has compiled a list of suggested action items that would be particularly appropriate from November through February. We understand that all of you have hectic lives and busy schedules, so please take on what you can and remember that even the smallest action can make a difference.

Election Day is Tuesday, November 7, and all U.S. Representatives and one-third of the U.S. Senate are up for re-election. It is always good to try to get to know your newly elected officials early in their terms. We encourage you to use the post-election time period to reach out to both newly elected officials and returning officials and let them know why pancreatic

cancer and PanCAN are important. To find out information about the elections in your state, go to www.pancan.org and click “Take Action Now”, then scroll down to “Election & the Candidates” and enter your zip code.

On behalf of all of us at PanCAN, thanks again for all your energy, hard work and courage. It is rare to have the chance to work with such amazing people on such an important cause.

SUGGESTED MENU OF ADVOCACY IDEAS NOVEMBER TO EARLY 2007

Ways to build relationships with your U.S. Senators and/or U.S. Representatives

Introduce yourself to newly elected and returning Senators and Representatives by doing one of the following:

- Visit www.pancan.org and click “Take Action Now” to send an e-mail to your U.S. Representative and U.S. Senator to introduce yourself and to ask them to support more funding for cancer research. Recruit 10 family members or friends to do the same, even if they live out of state!
- Call the elected official’s local office to schedule a meeting with your Senator’s and/or Congressman’s field representatives and organize a group of affiliate members to go on the visit (instructions are in the Advocacy Manual). Please note that most Members of Congress will wait until the beginning of the year to schedule meetings.
- Organize a “drop-by.” Newly elected Representatives and Senators will be setting up their new offices in December

and January. Organize a group of affiliate members to drop by the new offices to welcome them and their staff. Get some purple balloons and ribbon, fill them up with helium (ask your local flower shop to help you) and tie together a small balloon bouquet. Attach a notecard to the ribbon that says “Welcome to the 110th Congress. Please help pancreatic cancer research take flight!” Take the balloons with you to the office as a welcome gift. (You can also organize this type of activity for returning Representatives and Senators.)

- Invite Senators and/or Representatives to upcoming TeamHOPE events.

Ways to Increase Your Advocacy Numbers

- Send an e-mail to other affiliate members asking them to sign up on “Take Action Now.”
- Lead a demonstration of “Take Action Now” at your next meeting and have affiliate members use the program to send letters to their federal policy makers.
- Send information to your local schools and colleges (particularly the Political Science and health departments/majors/clubs) about joining PanCAN as an advocate
- Petition at events—give out purple ribbons (Events could be at work, church—any place you can think of!)
- Reach out to senior centers – many residents are still deeply interested in taking an active role to help a good cause!



PanCAN opens Washington, DC office!

PanCAN has opened a new government affairs office in Washington, DC which will be staffed by Megan Gordon Don, Director of Government Affairs.

Megan can be reached at:

mgdon@pancan.org
 PanCAN Government Affairs Office
 1001 Pennsylvania Avenue, NW, Suite 600 South
 Washington, DC 20004
 ph: 202-742-6776 • fax: 202-315-3264

Chicago Affiliate Breaks All Previous Walk Fundraising Records!



On August 6 in Evanston, Illinois, more than 800 PanCAN supporters raised close to \$200,000 at the Walk for HOPE Chicago, making it the most successful PanCAN fundraising walk ever! Thirty-eight teams representing corporate, community and family groups participated, with Mullin, a family team, raising \$15,000 – the highest team total ever raised for a PanCAN event.

This outstanding success was made possible through the combined efforts of the Illinois TeamHOPE Affiliate volunteers and community leaders. PanCAN extends its deep thanks and appreciation to Allison Payne, co-anchor of WGN TV News, who served as Emcee for the second year in a row; Dr. Mark Talamonti of the Robert H. Lurie Comprehensive Cancer Center at Northwestern, who worked tirelessly to rally support from the University and Hospital community; PanCAN board member and survivor Michael Sweig, who led the efforts to increase corporate sponsorship and community involvement in this event; and

Anne Maxfield of WSCR The Score Radio, who recruited the cooperation of her media colleagues by sharing her story of losing her mother to pancreatic cancer last May.

Event sponsors included Z Gallerie, WGN-TV, 101.9 The MIX Radio, Chicago Social Magazine, TAP Pharmaceutical Products, Inc., Jewel-Osco, Northwestern Memorial Foundation, Evanston Northwestern Healthcare and OSI Pharmaceuticals.

Bravo to Event Coordinators Valerie Powley, Kim Giovanni, Marlene Bartolata and their small, but mighty, band of volunteers including Dr. Paul Grippo, a pancreatic cancer researcher at Northwestern, for their extraordinary work. Their all-out effort included online fundraising, team recruitment, phone banking and poster and stand distribution throughout Chicago.

As always, one of the highlights of the event took place when 25 pancreatic cancer survivors gathered onstage for their annual Survivor Photo. Survivors Jolene Wagner and Ed Lack were two of the top fundraisers, and raised a combined total of \$8,000. A Memorial Wall designed and built by Dr. Grippo enabled participants and guests to write and post tributes to loved ones who have battled pancreatic cancer. These tributes will soon be on display at PanCAN's National Headquarters in California.

The PanCAN Chicago walk, which has become the premier pancreatic cancer fundraising event in the Midwest, will be moving from Evanston to Chicago in 2007.

A Ride to Raise Awareness



By competing in this year's Race Across America (RAAM), the world's longest endurance cycling event, Dave Kiser was out to beat more than just the other cyclists. Kiser, from Seabrook, TX., pushed himself and his three team members over grueling terrain for 3,052 miles between California and New Jersey to raise money and awareness for pancreatic cancer, which had claimed his beloved mother-in-law, Gloria Boes, in 2004.

Unlike other famous races like le Tour de France, RAAM has no stages. There is no drafting and the race is live to the very end. From the start to the finish, it is a single stage race, a battle against the vast environmental conditions encountered and the rider's own mental and physical capacities. The Race Across America is an event so staggering that merely to finish is the accomplishment of a lifetime.

On June 13 in Oceanside, CA, just minutes after Dave and his Team 4 Gone began their Race Across America, Dave was struck by another cyclist and crashed in a ravine.

Though he suffered cuts and bruises, his bicycle was not damaged and he continued the grueling course, cycling around a forest fire in Arizona, crossing the Rockies, and racing across the heartland only to face the challenge of the Appalachians. While cycling, David drew strength from thoughts of his mother-in-law and so many others who have bravely fought pancreatic cancer. Houston's popular TeamHOPE coordinator, Becky Evetts, who had directed the volunteer efforts for last year's successful 700 mile "Tour de Texas" was also on Dave's mind. Just one month before Dave's big cross-country race, Becky lost her battle with pancreatic cancer.

The team reached the finish line in Atlantic City, NJ on June 21, with a time of 7 days, 16 hours and 50 minutes, and an average speed of 16 mph.

Kiser addressed spectators and media at the finish line on the Atlantic City Boardwalk – "In the 7.5 days it has taken to cross the country on a bicycle, about 700 additional families have received a pancreatic cancer diagnosis – there is no early detection, no cure, and little funding to assist in researching this deadly disease. We must get the word out, and bring hope to those families in need."

TeamHOPE

PanCAN TeamHOPE Affiliates 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 us toll-free at (877) 272-6226. Please see the back page of this newsletter for a calendar of upcoming TeamHOPE events.

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 visiting www.pancan.org and clicking on "Join our Mailing List" at the bottom of any page.

TeamHOPE Events

CALIFORNIA

TeamHOPE California-Bay Area held its first fundraising event at the San Francisco Giants game on July 20. Bay Area volunteers sold just over 400 tickets for **PanCAN Night at the San Francisco Giants**, with \$9 of each ticket being donated to PanCAN. The event raised a total of \$3,681. A PanCAN banner marked two sections, attendees wore purple to show their support and PanCAN ribbons were passed around to all who attended. A big thank you to the ticket-selling volunteers and the San Francisco Giants for providing an expanded scoreboard message to help get the message out to the entire stadium!

TeamHOPE California-Napa Valley hosted the **4th annual Walk Through the Vineyards** on June 17th at St. Supery Winery. Over 200 event participants enjoyed the 3K walk through the grapevines and along the river as well as the delicious breakfast provided by Osprey Seafood, ABC Bakery, Noah's Bagels, Trader Joes, Peet's Coffee and Crystal Light. This year's event raised nearly \$25,000; over the past four years, this event has raised over \$100,000.



TeamHOPE California-San Diego held its **second Elizabeth I. Negos Walk** on Saturday, June 3rd at

beautiful Rohr Park in Bonita. Congressman Bob Filner opened the event with some words of encouragement, then kicked off the start of the walk. There were refreshments, a raffle, and a jumper for the kids. The event raised almost \$14,000 and attracted over 100 participants.

For the third consecutive year, TeamHOPE California-San Diego had an informational booth at the **San Diego County Fair**. Thanks to the wonderful volunteers who staffed the booth and provided interested passersby with information on pancreatic cancer and PanCAN.

CONNECTICUT



On June 24th, the Connecticut community came together for the **second annual PanCAN Summer Jam**. Raising over \$50,000, guests

enjoyed a beautiful waterfront evening which included live and silent auctions and live music. The planning committee thanks all volunteers, sponsors, advertisers and guests for their generous support and kindness and particularly their leading sponsor, **The Shirley French Lilac Foundation**, for their generous \$20,000 donation. The Sweitzer Family created The Shirley French Lilac Foundation in honor of their mother, Shirley French, and has graciously supported PanCAN Summer Jam as the leading sponsor for the past two years. Thank you to all who made this event a success. Planning has already begun for 2007; please contact mlewis@pancan.org or visit www.pancanjam.com.

ILLINOIS

On June 3 more than 170 dogs and their owners took to the streets of Nashville in the **5k Walk with the Dogs** in Memory of Jeanenne Thompson. \$7,000 was raised.

On June 17 in Lake Forest, the **Second Annual Fish for a Cure** in memory of Gerry Mahler raised more than \$5,000.

Also on June 17, at Tivoli Bowl in Grove, the **Do it for Donna** event raised \$2,000 for PanCAN.

INDIANA

On June 17 in Chesterton, the TeamHOPE Indiana – Northwest's **Walk to Make a Difference** raised \$5,000.

On June 24 in Indianapolis, Mary Jones hosted the **Cancer Awareness Health Fair** at Methodist Medical Plaza. Mary, a pancreatic cancer survivor, held the seminar for those interested in learning more about cancer treatment, insurance, and services available to lower income individuals.

KANSAS

Friday, June 2 was a perfect day for golf at Painted Hills Golf Course in Kansas City. This is where the **4th annual Rod Rogers Memorial Golf Tournament** benefiting PanCAN was held. TeamHOPE Kansas-East hosted the event. There were 144 golfers, 50 volunteers, friends, family and business associates, all coming together in memory of Rod Rogers, who passed away in December of 2002. Jennifer Rogers Vogel and Marylyn Rogers Owens would like to thank all who were involved to make it another big success. Over \$20,000 was raised to support PanCAN.

MARYLAND



On June 24th and 25th, Brian Bartell, Mike Thron, Chuck Franklin and six other riders

set out on a bike ride adventure down the 184.5 mile Chesapeake & Ohio Canal Tow Path from Cumberland, MD to Washington, DC to raise awareness and funds for the **Pedaling the C&O Canal** event. Brian, Mike and Chuck all lost their fathers to pancreatic cancer. Despite many potholes, puddles, mud and flash flood warnings, they successfully completed the ride and raised over \$6,000 for PanCAN (double their goal of \$3,000!). They would like to thank Paul Thorson, Steve Logan and Charles Cheek, as well as TeamHOPE National Capital Area and the many others who made this ride possible.

Combining fundraising efforts proved to be a huge success and a great way to meet others dedicated to raising awareness and funds for pancreatic cancer. When Cheryl Kaiser learned of the Pedaling the C & O Canal ride, she contacted Mike Thron to organize a music event before the canal ride. Mike and the other bikers were open to the idea, so they scheduled the **Countdown to Pedaling the C & O Canal** as a pre-ride event on June 11. Over eighty people attended the evening of music and song by Sookeey Jump at Mrs. O'Leary's Restaurant and Irish Pub in Gaithersburg, Maryland, raising \$1,400 dollars for PanCAN.

MICHIGAN

PanCAN's TeamHOPE Michigan-Southwest Affiliate hosted the **Home Run for Hope** as 150 PanCAN supporters attended a **Detroit Tigers** game on July 23rd. \$5 from every TeamHOPE ticket was donated to PanCAN at this Detroit Tigers vs. Oakland Athletics game.

MISSOURI



Nine-year-old Jim Jung held the **First Annual Grandpa Schwartz Memorial Bike-a-thon**

in Chesterfield. Jim lost his Grandpa, Ron Schwartz, to pancreatic cancer. Several months ago, Jim received a new bike and had an idea to hold a bike-a-thon for his grandpa. In his

TeamHOPE Events

own words, he wanted to "obliterate pancreatic cancer." He handed out flyers to family and friends, and asked grandmas, aunts, uncles and cousins to help on event day. His hard work paid off. 112 people attended and young Jim raised \$2,250.

NEW JERSEY



On Sunday, June 4, Ralph Baker participated in a **"Challenge Walk" along the Thames River** in England, just south of London. He

created a personal fundraising page at www.firstgiving.com/teamhope and challenged his friends and family to "stick it to him" by offering to match cumulative gifts up to \$1,000. If he exceeded his fundraising goal of \$2,500 he would complete a 26 mile walk (rather than his originally planned 13 mile walk). His friends did indeed "stick it to him" – Ralph raised over \$6,800 for PanCAN and completed the 26 miler on a beautiful day along the Thames in memory of his father.



On May 31 three generations of the Pinkerton-Steinbach Family competed in the **Ocean City Triathlon** in memory of

Russell John Pinkerton, their son, brother, and uncle who died of pancreatic cancer recently. They raised \$1,055 for PanCAN and look forward to planning more fundraisers in the future.

Lounsberry Hollow Middle School in Vernon supported the efforts of Megan Kleeschulte, who organized a fundraiser in memory of her grandmother, Carol McManus, raising \$250.



On June 24 the Rickenbrode family hosted its **First Annual Fishing for Hope** at the Belmar Marina in memory of Rodger L. Rickenbrode. Rodger passed away last July after battling pancreatic cancer for a year and a half, and his wish was to increase awareness

about this horrific disease. Despite the cloudy weather, the deep sea fishing event brought out over 100 expert fishermen and novices, all of whom enjoyed a fun-filled day of fishing and bonding with new friends. The event received an overwhelming amount of support from the community and exceeded all expectations, raising over \$10,000 for PanCAN. The family is grateful to all who made this day possible and is looking forward to hosting another event next year.

NORTH CAROLINA



Laurel Hillen, an 8th Grade Student at Daniels Middle School, and volunteer with TeamHOPE North Carolina-Central

initiated various fundraising efforts for PanCAN at her school. As a member of her Beta Club she organized the **Coin Wars** and a **school dance** to raise funds in memory of her father Ron Hillen, who passed away from pancreatic cancer in January. In addition, the 8th Grade Marlins held a bake sale to raise funds. As a result of her efforts, Laurel was awarded the Community Service Involvement Award from her school.

OHIO



TeamHOPE Ohio – Cleveland held the **Walk for HOPE** – Cleveland on June 24. The walk had more than 700 participants

and raised \$67,000. On the shores of Lake Erie, this event raised \$46,000 more than it did in 2005. Special thanks to Casey Coleman and his wife Mary. Casey, a Cleveland sportscaster and pancreatic cancer survivor, was an inspiration as he spoke to the crowd in Bay Village, Ohio.

TeamHOPE Ohio-Columbus took part in a fundraiser at the restaurant **Max & Erma's**. Members distributed flyers and when anyone brought in the flyer over the four days of May 22-25, 20% of their bill was donated to PanCAN. A total of \$312.84 was raised and this event will be repeated the first week of November.

TeamHOPE Ohio-Columbus had a space at the **Treasures on the Green** community garage sale on July 15 in the Columbus suburb of Worthington. TeamHOPE Columbus members gathered items from friends, family and co-workers, as well as bottles of water to sell on the hot day. They raised \$1,569.47 and introduced hundreds of people to PanCAN.

The **2nd Annual Mary Diaz and William Copeland Jr. Memorial Tennis Tournament** was held July 7-9, 2006 at Ohio State University's Varsity Courts. The tournament is named after Mary and William, tennis enthusiasts who passed away from pancreatic cancer. The Diaz family organized the event that drew approximately 67 tennis players from Ohio, Pennsylvania and Rhode Island and included a free tennis clinic for beginners. Over \$25,000 was raised.

TENNESSEE



TeamHOPE Tennessee-Northeast was at the finish line of the **2nd Annual**

Knoxville Covenant Health Marathon on March 26, to cheer on Charles Hagy, a pancreatic cancer survivor, who ran the 4-Man Relay with his son. Congratulations to Charles and thanks to the volunteers who participated.

TeamHOPE Tennessee-Northeast was also present at the **Cancer Survivor's Health Fair** on June 4, hosted by the University of Tennessee Medical Center in Knoxville. The affiliate would like to extend a special thanks to the University of Tennessee Cancer Institute for hosting the health fair.

WASHINGTON

Noelle Mestres of Bellingham raised awareness for PanCAN by participating in a local event, the **Chuckanut Foot Race**. Her father, Bob Rice, was an avid runner and had participated in countless runs around the country. After Mr. Rice was diagnosed with pancreatic cancer in the fall of 2005, his family decided to participate in his honor, as it was one of his favorite annual events. Noelle set up a website at www.firstgiving.com/teamhope to publicize her efforts and share her father's story. On the day of the race, volunteers helped distribute materials and ribbons to over 600 race participants. A big thank you goes out to Noelle and her family, who raised almost \$10,000 on behalf of PanCAN.

Patient and Liaison Services (PALS)

Raise your voice! Ask questions. Be informed about your diagnosis.

PanCAN's Patient and Liaison Services (PALS) program is here to help. PALS is a comprehensive patient services program designed to educate people with pancreatic cancer, their friends and families, and health professionals. Contact the PALS program by phone or email to connect one-on-one with a PALS Associate. A PALS Associate can help by providing detailed information about pancreatic cancer treatment options, clinical trials, diet and nutrition, symptom management and support resources.

After speaking with a PALS Associate, you will receive a customized pancreatic cancer educational packet. This packet contains booklets, fact sheets and other brochures with in-depth pancreatic cancer information. The PALS program and educational materials are provided at no charge.

PanCAN encourages patients and their friends and families to use PALS as many times as necessary to get the information needed throughout the diagnosis. Each time you contact PALS, you will be connected with the same PALS Associate for continuous case management.

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

Diagnostics and Tumor Measurement

Positron Emission Tomography (PET) Imaging

Positron Emission Tomography (PET) is a powerful imaging technique that holds promise in the accurate and timely diagnosis and monitoring of pancreatic cancer.

PET Differs from CT and MRI

PET imaging is a technology that examines the body's chemistry and gives information about the function of organs and cells. By providing information about the metabolic activity of the body, PET scans differ from other imaging techniques, such as Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) scans. CT and MRI images provide information about physical structures in the body, rather than function.

Because PET allows for the study of body function, it can help detect alterations in biochemical processes. These variations suggest disease before changes in anatomy are apparent with other imaging tests, such as CT or MRI. PET is sometimes able to detect extremely small cancerous masses. This allows physicians to treat these diseases earlier and more accurately.

With a single PET procedure, physicians can collect images of function throughout the entire body, uncovering abnormalities that might otherwise go undetected. A PET scan contributes to a more complete picture, making it easier for doctors to diagnose problems, determine the extent of the disease, prescribe treatment, and track progress.

Undergoing a PET Scan

When disease strikes, the biochemistry of tissues and cells within the body changes. PET works by providing a visual representation of this change. PET uses a small amount of a tracer chemically attached to glucose or other compounds. The tracer is injected into the patient and allowed time to distribute throughout the body (45 to 60 minutes). The most common tracer is called fluorodeoxyglucose (FDG). The PET scanner tracks and records the signals emitted by the FDG. Then a computer reconstructs the signals into whole body images. Although glucose is used by all cells, it is used at a higher rate by cells with increased metabolism. For example, cancer cells are highly metabolic and use more glucose than neighboring cells; therefore, they are easily seen on the PET scan. Areas that metabolize more FDG than others will show up as bright or highlighted areas on the resulting images.

PET is usually done on an outpatient basis. The medical care team will give the patient detailed instructions on how to prepare for the examination. Generally, a patient will be asked not to eat or drink anything for 4 hours prior to the appointment. A PET scan is completely painless, exposes the patient to very little radiation, and there are no known risks or side effects.

Timing of PET Scans

PET images are sometimes performed prior to treatment to assist the medical team in determining an appropriate treatment path. Additionally, PET scans are increasingly being used to assist in deciding whether a tumor is resectable (eligible for surgical removal). PET images are sometimes used following treatment to evaluate effectiveness.

Potential Limitations

PET can give false results if an individual's chemical balances are not normal. The inflammation associated with pancreatitis can lead to a larger glucose uptake. Other diseases, infections or surgeries can also affect the use of glucose. Specifically, test results of diabetic patients or patients who have eaten within a few hours prior to the examination can be adversely affected because of blood sugar or blood insulin levels. Diabetic patients should ask for specific diet guidelines to control glucose levels during the day of the test. The tracer drug and glucose that are used to perform a PET image have not been shown to be detrimental to diabetics.

Promise of PET

The value of a PET scan is enhanced when it is part of a larger diagnostic work-up. This often entails comparison of the PET scan with other imaging studies, such as CT or MRI. Most of the time, PET is used in addition to CT scans. A PET/CT combination joins the strength of two imaging modalities, CT for anatomy and PET for function, into a single imaging device.

There are some scientific studies that suggest PET has enhanced sensitivity to detect the presence of an abnormal mass and determine whether the mass is benign or malignant. Since there are currently several diagnostic tests used for pancreatic cancer, it is important that PET be used in conjunction with other imaging techniques to build a complete picture.

Further studies are needed in order to scientifically validate PET scans for widespread acceptance and use. Many medically necessary applications of PET are covered by insurance, and coverage continues to increase. Individual insurance companies may scrutinize PET or CT scans for medical necessity prior to payment. Insurance coverage is handled on a case-by-case basis with private insurers.

For more information about PET and other diagnostic tools contact the PALS program at (877) 272-6226 or medinfo@pancan.org.

Targeted Therapies for Pancreatic Cancer

In addition to traditional chemotherapy drugs like gemcitabine (Gemzar®) and 5-FU, which are systemic treatments, targeted therapies are available for use in pancreatic cancer. Traditional chemotherapy drugs circulate throughout the body and attack cancer by acting on cells that are rapidly growing and dividing. This means that traditional chemotherapy also kills other rapidly dividing non-cancerous cells, such as hair follicle cells. In contrast, targeted therapies work by acting on specific components of cancer cells and interfering with their growth. Because they target cancer cells more specifically, targeted therapies have side effects that tend to be different and possibly less severe than those of traditional chemotherapy drugs.

In November 2005, the U.S. Food and Drug Administration (FDA) approved a targeted therapy called erlotinib (Tarceva®) in combination with gemcitabine for the treatment of pancreatic cancer. Erlotinib is the first drug in a phase III clinical trial to have shown a statistically significant improvement in overall survival when added to gemcitabine chemotherapy.

Erlotinib is an oral tablet taken once daily. It is designed to work by interfering with the human epidermal growth factor receptor

(EGFR) pathway. The epidermal growth factor receptor is a protein receptor on the surface of some cells within the body. A protein known as an epidermal growth factor binds to the receptor on the cell's surface and triggers a signal for the cell to grow and divide. By interfering with the EGFR pathway and preventing the signal for cell growth and division, a targeted agent can help prevent growth of the cancer cells. Research shows that epidermal growth factor receptors are over-expressed or mutated in 60 to 90% of pancreatic cancer tumors, indicating that they are good targets for pancreatic cancer therapies.

In addition to erlotinib, two targeted therapies already FDA-approved for the treatment of other cancers are in clinical trials for pancreatic cancer. Bevacizumab (Avastin®) has been approved by the FDA for the treatment of colorectal cancer and cetuximab (Erbix®) has been FDA-approved for colorectal cancer and head and neck cancer. Both targeted therapies are often used in combination with traditional chemotherapy drugs.

Cetuximab also targets the EGFR pathway. The active component is a small protein that binds to receptors and inhibits cell growth and

replication. Cetuximab is given by intra-venous (IV) infusion.

Bevacizumab works in a different way. It is an antiangiogenic agent, meaning that it blocks the process of angiogenesis. Angiogenesis is the formation of new blood vessels. In a healthy body, new blood vessels may grow in order to carry blood rich in oxygen and nutrients to tissues. However, when cancer is present, the formation of new blood vessels has a different purpose. Tumor cells grow rapidly and new blood vessels can provide the nutrients needed for this continued growth. It is thought that antiangiogenic agents help block the formation of new blood vessels that supply the tumor. Essentially, the tumor is starved of the oxygen and nutrients needed to survive. Bevacizumab is designed specifically to block vascular endothelial growth factor (VEGF), a protein within the body that helps stimulate the formation of new blood vessels. Bevacizumab is given by intra-venous (IV) infusion.

Cetuximab and bevacizumab are currently in clinical trials to determine whether they are effective against pancreatic cancer.

PanCAN has information on a number of targeted therapy clinical trials for pancreatic cancer. The following table lists a sample of trials using one or more targeted therapy agents for the treatment of pancreatic cancer. For more information about targeted therapies or other pancreatic cancer clinical trials please contact the PALS program at (877) 272-6226 or medinfo@pancan.org.

Trial Title	Location	Targeted Therapy Agent(s)
Phase II study of Avastin and Gemzar in combination with either Erbitux or Tarceva in patients with advanced adenocarcinoma of the pancreas	Numerous locations across the U.S.	Avastin, Tarceva, Erbitux
Phase II trial of Vatalanib (PTK787/ZK 222584) in patients with advanced or metastatic pancreatic adenocarcinoma who failed first-line Gemzar treatment	Numerous locations across the U.S.	Vatalanib
Phase II intergroup randomized study of Avastin or Erbitux in combination with Gemzar and in combination with chemoradiation (Xeloda and radiation) in patients with completely resected pancreatic carcinoma	Numerous locations across the U.S.	Avastin, Erbitux
Phase II study of Sorafenib (BAY 43-9006) in combination with Gemzar in metastatic pancreatic carcinoma	Numerous locations across the U.S.	Sorafenib
Phase II study of Sorafenib and Gemzar in patients with locally advanced or metastatic adenocarcinoma of the pancreas	Numerous locations across the U.S.	Sorafenib
Phase II study of Sorafenib in patients with progressive metastatic neuroendocrine tumors	Numerous locations across the U.S.	Sorafenib
Phase II open label, single-arm study of RAD001 in patients with advanced pancreatic neuroendocrine tumor after failure of cytotoxic chemotherapy	Numerous locations across the U.S.	RAD001

PanCAN does not endorse or recommend any specific trial.

Diet and Nutrition

Sugar, Diabetes and Pancreatic Cancer

By Julie Meddles, RD, LD



Julie Meddles, RD, LD

Individuals with pancreatic cancer are at risk for diabetes or glucose (sugar) intolerance. Glucose intolerance is defined as the inability of the body to use carbohydrates properly, and the result can be either increased or decreased levels of sugar in the blood. The proper balance of food, medicine, and nutritional supplementation is needed to improve blood glucose control, healing, weight maintenance, and quality of life.

Insulin, a hormone secreted by the pancreas, helps the body utilize glucose efficiently. Normally, insulin allows glucose to enter cells to be used for energy. In the case of diabetes, the body either does not produce enough insulin or the amount produced is not fully effective. Instead of entering cells, the glucose remains in the blood resulting in high blood glucose levels. High blood glucose (hyperglycemia) can lead to cell damage and long term complications. Low blood glucose (hypoglycemia) can be more life threatening. Some early signs of low blood sugar include shaking, fast heartbeat, sweating, and dizziness. However, an individual can have a positive influence on his or her blood glucose and overall health by choosing foods wisely.

The need to make changes in diet after a pancreatic cancer diagnosis is determined by the presence of symptoms and/or planned treatment. If glucose intolerance is present with a pancreatic tumor, the patient may benefit from restricting simple sugars in the diet. It may be necessary to avoid foods high in sugar if the patient has problems with elevated blood sugar levels or watery diarrhea after eating high sugar foods.

People with diabetes and pancreatic cancer have

special nutritional needs. By eating well-balanced meals in the correct amounts, individuals can keep their blood glucose level as close to normal (non-diabetes level) as possible. When the proper balance of food, medication, and nutritional supplementation is achieved, people can control their blood glucose levels, promote physical healing, maintain weight, and improve quality of life. No single food will supply all the nutrients a body needs, so good nutrition means eating a variety of foods.

It is important to eat foods from each group at every meal throughout the day. By doing so, the individual ensures that the body has a proper balance of all the nutrients it needs to function. Eating meals and snacks at regular times is crucial for controlling blood sugar levels. The main nutrients in food include carbohydrates, proteins, fats, vitamins, and minerals. Nutrients are vital for body function and provide energy for health and maintenance of body tissues.

Foods are divided into four main groups:

- 1) Fruits and vegetables (oranges, apples, bananas, carrots, spinach).
- 2) Whole grains, cereals, and bread (wheat, rice, oats, bran, and barley).
- 3) Dairy products (whole or skim milk, cream, and yogurt).
- 4) Proteins (meats, fish, poultry, eggs, dried beans, and nuts).

Foods high in simple sugars include rich desserts, ice cream, candy, sweetened drinks, and fruits packed in syrup. Choosing foods with complex carbohydrates (starch, soluble and insoluble fiber) may help in the control of blood glucose levels. Carbohydrate calories are best utilized by the body for energy. Eating high protein foods at each meal and snack may also help control blood sugar, as well as build lean body mass.

Healthy choices are: dried beans, peas, and lentils, lean meats and low-fat dairy products, whole grain breads, cereals, and crackers, and fruits and vegetables. Fiber, which comes from plants, may assist in lowering blood glucose and blood-fat levels. Foods high in fiber include bran cereals, cooked beans and peas, whole-grain bread, fruits, and vegetables.

Cutting out sugar in the patient's diet will not result in the death of cancer cells. Cancer cells cannot be starved of nutrients by removing certain foods or sugar from the diet. Even if some nutrients are eliminated from the diet, metabolic changes that may occur when cancer is present will break down body fat and lean body mass to make glucose for energy in both cancer and healthy cells. Sometimes these metabolic changes result in weight loss. Weight loss may be associated with treatment or from the cancer itself (tumor-induced weight loss). Tumor-induced weight loss, also known as cancer cachexia (pronounced kə-kēk'sē-ə), is a complex problem that affects the way calories and protein are used in the body.

If a patient has diabetes and/or glucose intolerance present with pancreatic cancer, the individual should consider consulting with a registered dietitian (RD). A registered dietitian who understands diabetes and cancer can teach the patient how food affects blood glucose level and how to coordinate diabetes medications and meal schedules. A registered dietitian can also assist with nutritional supplements for the patient experiencing weight loss related to cancer.

For more information about diabetes and pancreatic cancer contact the PALS program at (877) 272-6226 or medinfo@pancan.org.

Recipe: Basic Bread Stuffing with Variations

INGREDIENTS:

2 ½ cups low-fat, low-sodium chicken broth
3 medium onions, diced
6 cups diced whole-grain bread
1 tablespoon paprika
1 egg substitute
Fresh ground pepper and salt to taste

DIRECTIONS:

1. Heat 1/2 cup of the chicken broth in a skillet over medium-high heat. Add the onions and sauté for 10 minutes until the onions have softened.
2. In a bowl, combine the cooked onions,

remaining broth, bread, paprika, egg, pepper, and salt. Mix well.

3. Place inside the cavity of a 12-lb turkey or place in a casserole dish. If baking stuffing separately from the turkey, place stuffing in a preheated 350°F oven and bake for 45 minutes.

VARIATIONS:

Herb Stuffing: Add 1 tablespoon chopped fresh sage, rosemary, and parsley.

Fruit Stuffing: Add ½ cup diced tart apples, cranberries, or diced pears.

Dried Fruit Stuffing: Add 1 cup diced dried

apricots, apples, figs, cranberries, or cherries.

Sweet Stuffing: Add 1 teaspoon allspice, cinnamon, nutmeg, or ginger.

Mushroom Stuffing: Add 1 cup sliced mushrooms (white or wild). Sauté with the onions. Cook until mushrooms are soft.

Cornbread Stuffing: Replace 3 cups of the whole-grain bread with 3 cups cornbread.

Chestnut Stuffing: Add 1 cup roasted chestnuts, peeled. Buy chestnuts in jars packed in water; this saves roasting time. Chestnuts are low in fat!

This recipe is published by the American Diabetes Association in the Flavorful Seasons Cookbook.

Story of Hope and Inspiration

Jeffrey Ross, Laguna Beach, CA



Jeffrey and his wife, Sally

I am both honored and blessed to share my story with the survivors, caregivers, and everyone at PanCAN. My wonderfully supportive wife and I recently celebrated my three-year survival anniversary on July 1.

My story is not unlike many who have shared their stories in this column. It all began with excessive heartburn in April 2003 at age 54. An annual physical produced blood work results with elevated liver functions and cholesterol levels uncommon to my medical history. Immediate visits to a new and caring GI specialist, emergency ultrasound, and CT scans showed no signs of

the suspected gallstones. After sudden jaundice appeared, an ERCP with needle biopsies did not produce a formal diagnosis; however, an acute attack of pancreatitis proved that the scar tissue on my pancreas was the culprit. Whipple surgery was recommended regardless of the malignant or benign source of my malady.

After twelve hours of resection, the prognosis was less than positive, as surgical biopsies proved malignant. My then life partner and I went on a quest to interview as many oncologists and radiologists as possible. We took a positive stand in my treatment, and after searching, found aggressive physicians with attitudes akin to ours.

Three weeks post-surgery I began the first of 35 daily radiation treatments and weekly gemcitabine (Gemzar®) and cisplatin (Platinol®) chemo infusions, followed by three additional infusion treatments post-radiation.

By November 2003, I had gone from 180 to 135 pounds. The good news was that my entire community turned out in support of my treatments and my partner asked me to marry her (which I did). In December 2003, my first

post-treatment CT scans were clean of lesions, my CA19-9 was down to 14, and I showed no signs of disease. Since then, my routine GI and oncology checkups which began at 3, then 4, and now 6-month intervals, have all remained clear of disease. Of course, I have dealt with the aftermath of the aggressive radiation treatments and the Whipple resection. In October 2005, I underwent a gastrojejunostomy to correct digestive challenges. And today? My weight is back to 180, I married the woman of my dreams, and life is wonderful.

Life is a series of challenges, but every day is a blessing. My advice to everyone is to take an active role in your therapy. Be open to all disciplines. Let those around you, whether they be family, friends or strangers, help you. Seek strength from your peers, your higher power, and most of all, yourself. Don't be afraid to ask questions and demand answers.

PanCAN and PALS are here for all of us ~ please, never be afraid to ask for help.



**Kick off PanCAN's Weekend of Hope
at the annual Los Angeles Educational Symposium!**

November 3 and 4, 2006

**at the Renaissance Hollywood Hotel
Hollywood, CA**

Featured Speakers:

Doug Evans, MD –
MD Anderson Cancer Center
Heinz-Josef Lenz, MD –
University of Southern California
Gloria Petersen, PhD – Mayo Clinic
Maria Petzel, RD, LD, CNSD –
MD Anderson Cancer Center
Mark Pochapin, MD – Jay Monahan Center
for Gastrointestinal Health

Shirley Otis-Green, LCSW –
City of Hope National Medical Center
Mark Talamonti, MD –
Northwestern University
Virginia Sun, RN, MSN –
City of Hope National Medical Center
Barbara Ullman Schwerin, Esq. –
Cancer Legal Resource Center

Space is limited. Register early online at www.pancan.org.

HOLLYWOOD

An Evening with the Stars Goes Hollywood.

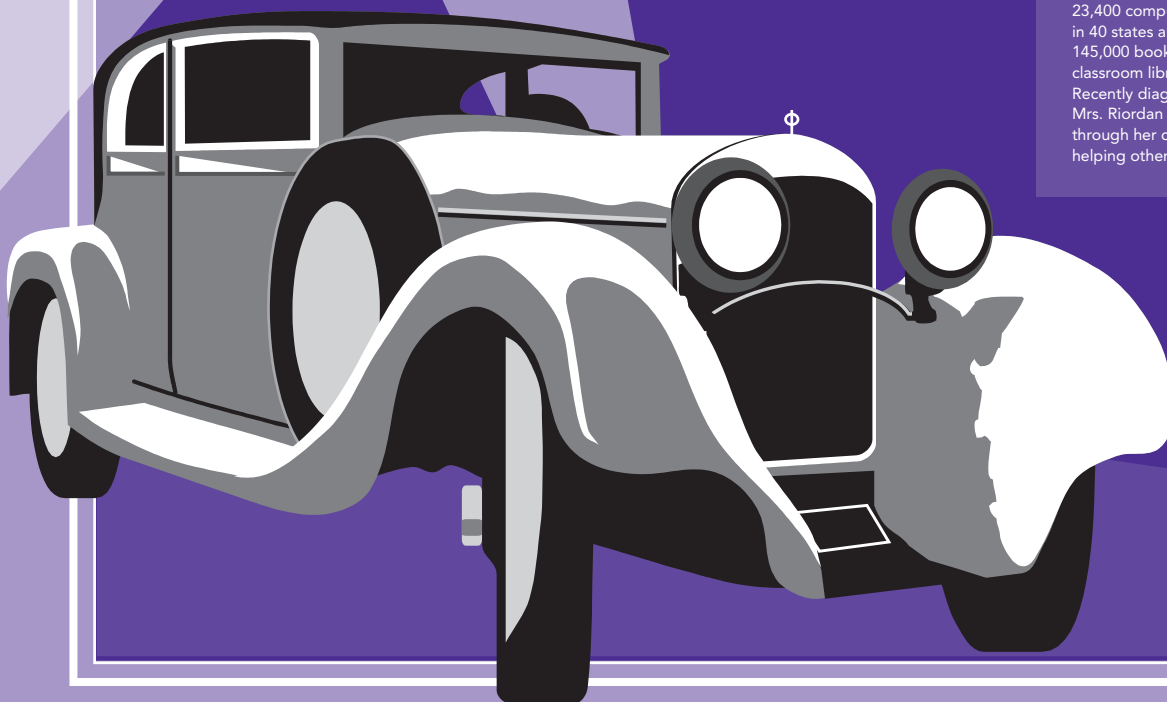
2006 Honorees

Ralph H. Hruban, M.D. *Medical Visionary Award*

Ralph H. Hruban, M.D. is a Professor of Pathology and Oncology at The Johns Hopkins University School of Medicine. In 1998, Dr. Hruban established the online chat page for pancreatic patients and families within the larger Johns Hopkins website. On this chat page, PanCAN's co-founders and many of the founding volunteers met, and thus, PanCAN was born. For this reason and for the incredible guidance he has given our Scientific Advisory Board since our founding, we consider him our PanCAN Godfather. Dr. Hruban currently practices surgical pathology with a subspecialty interest in pancreas pathology. He established the National Familial Tumor Registry in 1994.

Nancy Daly Riordan *Emily Couric Public Service Award*

Nancy Daly Riordan's exemplary philanthropic service to America's children, youth and families spans more than three decades. Mrs. Riordan is co-founder of the Children's Action Network and former chair of the Getty House Foundation. Appointed to the President's Commission on Children in 1989, Mrs. Riordan's work with this commission resulted in the passage of more than fourteen Congressional bills and the reauthorization of the federal Safe and Stable Families Act. With her husband, former L.A. Mayor Richard Riordan, Nancy Daly Riordan oversees the Riordan Foundation, which has distributed over 23,400 computers to over 2,110 schools in 40 states and provided funds for over 145,000 books purchased for elementary classroom libraries since its founding in 1981. Recently diagnosed with pancreatic cancer, Mrs. Riordan continues to set an example through her courage and her commitment to helping others.



Leaving a Legacy of Hope



Shay (Lerner) Schwartz became a PanCAN supporter last fall when she made a donation to the 2nd Annual Walk for Survival in West Palm Beach/Fort Lauderdale, Florida. She recently had been diagnosed with pancreatic cancer and was grateful for the patient information packet she received from PanCAN through the PALS program.

Shay's gesture was consistent with a life spent helping others. A resident of South Florida, she was active in numerous community organizations and charities. She served on the board of the 1000+ Club of the American Cancer Society, and was a member of the Royal Dames for Cancer Research, the Humane Society, the Florida Philharmonic, the Symphony of the Americas, and many other organizations. In 2002, she was named as Woman of the Year for South Florida for her generosity and good work.

As her friend Mike Pollock notes, Shay was the kind of person "who would give you the blouse off her back."

Sadly, Shay lost her battle with pancreatic cancer earlier this year. But not before deciding to make her commitment to PanCAN permanent. With her lawyer's help, she crafted a Last Will and Testament in which she bequeathed a significant portion of her estate to PanCAN to create a medical research endowment. The "Dr. Michael & Shay Schwartz Fund" will underwrite scientific discovery that could extend and ultimately save lives. It is Shay Schwartz's legacy of hope to the pancreatic cancer community.

Shay Schwartz will be missed by many people – by her loving mother, Bert Lerner, her sister Ellanna, her brother Alan, and by all the others whose lives she touched so deeply. We share their sense of loss but are comforted in knowing that Shay's memory will live on in the important work she has made possible.

How You Can Leave a Legacy of Hope

Every year in the United States, thousands of individuals designate a portion of their assets by bequest to benefit charitable organizations. Such "legacy" donations have become an important part of the American philanthropic tradition because they enable individuals to give at a level they may not have been able to achieve during their lifetime. These kinds of gifts can also be used to satisfy long-term financial, tax, and estate planning goals.

You can leave a legacy gift to PanCAN by naming us as a beneficiary of your Will or Living Trust, Insurance Policy or IRA/Retirement Plan. Of course, everyone's financial circumstances are unique, so we strongly encourage you to seek legal advice when considering these types of donations. We also hope you will contact PanCAN before making your final decision. We will be happy to work with your legal advisor to ensure that your gift intention is fulfilled and that it will have the maximum impact.

If you would like to know more, please call PanCAN's Director of Development, Edward Anthony, at (877) 272-6226.

PanCAN Launches Annual Appeal

PanCAN gives you many ways to support the fight against pancreatic cancer. This fall, we expand our range of gift options by launching a special fundraising appeal to coincide with National Pancreatic Cancer Awareness Month. Any day now you will be receiving a letter from our President and CEO, Julie Fleshman, telling you about our progress and asking for your help so that we can do even more. Your generosity is crucial to our ability to make a difference in people's lives. So we hope you will consider adding your voice to the growing chorus of hope that sustains our quest to bring an end to pancreatic cancer. To find out more, please visit the PanCAN website at www.pancan.org or call PanCAN at (877) 272-6226.

Master Networker Roger Magowitz Shares The Secret of His Success

The Seena Magowitz Annual Golf Classic in Phoenix, AZ has become a popular tradition for PanCAN supporters, and its ongoing success and growth provides "a perfect example of how to make the best possible use of your personal and professional contacts", says organizer Roger Magowitz, who promotes the event to benefit PanCAN in memory of his mother, Seena.

"Executives do a ton of business on the golf course," says Roger. "And almost everyone wants to help a good cause, so when you can combine a sunny day on the links surrounded by friends, peers, colleagues - and even competitors - with an opportunity to support a very worthwhile charity like PanCAN, it's a win-win situation all around."

How does Roger manage to sign up as many as 140 golfers and gross \$175,000 for this

stellar event? "It's all in who you know, and who your people know," he claims. "You just have to get out there and shake the pots and pans. Every year, I approach my suppliers, vendors, manufacturers, retailers, absolutely anyone I do business with, and I tell them how important this cause is. Not just to me because of my mother, but how important it is to the entire pancreatic cancer community! I also tell my friends and neighbors and encourage them to tell everyone they know about it as well. Once you start talking about pancreatic cancer, people discover someone they know has also been affected by this disease, and that really brings it home to them."

Roger tends to stick to marketing his tournament to his own industry - the bedding and furniture industry - because, he says, "that way, the industry will work for you. Everyone knows everyone, or wants to, so playing a friendly game of golf is a first-

class opportunity to talk shop, meet new potential clients, entertain existing ones, and just meet up with old friends. When you narrow your focus to one industry, you have the potential to get support and sponsorships from corporate advertisers who want their name out there in front of their target market - your participants. And the best part is, charity is very important to corporate donors, and they're happy to support a cause that obviously has so much meaning to their peers."

And does Roger have a last marketing tip that might work for you too? "Timing, and location. It sure doesn't hurt that our tournament takes place in December in beautiful, sunny Phoenix. There's a whole lot of people who want to get away from the cold and snow by that time of year!"

Join the TeamHOPE Marathon Team for the

ING Miami Marathon and Half Marathon

January 28, 2007

**By committing to raise \$2,900 for
PanCAN, each team member receives:**

- Race entry
- Round trip airfare to Miami
- Hotel accommodations*
- "Virtual" or in-person coaching
by Club 26.2
- A team celebration and more.

Don't miss out!

Register online at
www.pancan.org/miamimarathon

* based on double occupancy



National Headquarters:
2141 Rosecrans Avenue, Suite 7000
El Segundo, CA 90245
Toll Free: (877) 272-6226
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:

Mailing List, PanCAN, 2141 Rosecrans Avenue, Suite 7000, El Segundo, CA, 90245.
We appreciate your help!

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Calendar

Date	Event Name	City	State	Contact
10/8/06	TeamHOPE Walk - Maryland 2006	Bel Air	Maryland	Ken Cunuzeman at kencunuzeman@jonesjunction.com
10/9/06	Mike Praplaski Memorial Golf Outing	Malvern	Pennsylvania	Mark Praplaski at mpraplaski@aol.com
10/14/06	4th Annual Golf Outing for Pancreatic Cancer	Etters	Pennsylvania	Bob Hammen at bhammen@pancan.org
10/14/06	Dave Thiele Memorial Golf Tournament	Scottsdale	Arizona	Christine Thiele at cthiele@msn.com
10/21/06	Barbara Ennis Gala - Celebration of Life fundraiser	Lockport	New York	Tim Ennis at tennis9289@aol.com
10/28/06	Second Annual Stride For Hope	Wichita	Kansas	Michelle McWhorter at mmcwhorter@pancan.org
10/28/06	TeamHOPE Walk - Cape Cod 2006	South Yarmouth	Massachusetts	Julie Police at jpolice@pancan.org
10/28/06	Ol' Country's Boot Scootin' for PanCAN 2006	Fort Worth	Texas	Virginia Griffin at vgriffin@pancan.org
11/3/06	Pancreatic Cancer Symposium - Los Angeles	Los Angeles	California	Leah Burnette at lburnette@pancan.org
11/4/06	<i>An Evening with the Stars</i>	Los Angeles	California	Silvia Williamson at swilliamson@pancan.org
11/4/06	Cabaret HOPE	Cohoes	New York	Sue Paepke at spaepke@pancan.org
11/18/06	"Open Mike" Night for PanCAN	Ludlow	Massachusetts	Ann Matthews at amatthews@pancan.org
12/2/06	4th Annual Seena Magowitz Golf Classic	Phoenix	Arizona	Roger Magowitz at roger@bedbiz.com
1/28/06	TeamHOPE Marathon Team: ING Miami Marathon	Miami	Florida	John O'Hara at johara@pancan.org
3/11/07	3rd Annual TeamHOPE Walk - Indoor Mall Walk	Albany	New York	Susan Paepke at spaepke@pancan.org