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ISSUE 9
WINTER 2012

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For our patients, staff and community

The Sydney West Cancer Network newsletter

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The Sydney West Cancer Network is a collaboration between cancer services in western Sydney, which aims to improve the range and quality of services available. It includes the Blacktown Oncology Centre, Mt Druitt Palliative Care Unit, Nepean Cancer Care Centre, The Crown Princess Mary Cancer Centre Westmead and the Westmead Institute for Cancer Research.

When a person is diagnosed with cancer, they often find that many friends and family become instant experts in what foods they should eat or avoid.

Helping cancer patients to sort this food fact from fiction is a major task for oncology dietitians in the Sydney West Cancer Network, such as Jacquie Hampton and Kellie Bilinski.

Ms Bilinski, Clinical Dietitian at the Breast Cancer Institute, says it is common for the women she sees to be confused about what they should or shouldn't eat.

"People will tell them all sorts of myths – that eating certain foods such as sugar, dairy foods and meat will make the cancer worse," she says.

The best option is to eat a variety of nutritious foods, including as many plant-based foods as possible, Ms Bilinski says.

"I encourage people to eat foods that are good to eat rather than getting fixated on food they shouldn't have. I place a big emphasis on plant foods, including lots of vegetables, as we know there are protective benefits in vegetables."

Ms Hampton, Senior Oncology Dietitian at Nepean Cancer Care Centre, says cancer patients often search the Internet for special diets or foods in the hope it might cure their cancer.

"The advice I give to cancer patients is to maintain a normal healthy diet as there is no scientific evidence that special foods or diets, or excluding particular food groups (like meat or dairy) is going to be of any health benefit," Ms Hampton says.

"However, good nutrition will boost your body's immune system, ensure adequate energy levels, prevent malnutrition and enhance tolerance to treatment, which will contribute to a overall good cancer treatment outcome."

● **Page 5: Good nutrition matters.**



Ms Jacquie Hampton: advises patients to enjoy a healthy diet

from the director

Putting research into action to save lives

By Professor Paul Harnett

Melanoma can be a devastating problem at any stage of life, but it is particularly upsetting when young people are affected. That's one of the reasons I am so delighted by the NSW Government's plans to ban solaria or sunbeds, which are a major cause of this serious skin cancer in young people.

I am also pleased by the decision because one of our researchers, Professor Graham Mann, has played a key role in showing the dangers of solaria.

Professor Mann, who is a leading melanoma researcher at the Westmead Millennium Institute for Medical Research, was the lead author on a landmark study showing that young people who use sunbeds are more likely to develop melanomas. His work, which has had an international impact, suggests sunbeds are responsible for three-quarters of melanomas affecting people under 30.

I join with Professor Mann and his colleagues in hoping that other governments, in Australia and further afield, will also act on these very important findings. It's a reminder of the wide-ranging benefits of health and medical research – for patients and the broader community.

- ***We have been delighted by the warm response to our recent souvenir edition, featuring The Crown Princess of Denmark and her visit to The Crown Princess Mary Cancer Centre Westmead. Read more about our Danish connections on page 7.***
- ***Professor Harnett is Director of the Sydney West Cancer Network and a medical oncologist at Westmead Hospital.***



Professor Paul Harnett

network news

Treatment with a view

Radiotherapy patients will benefit from the recent installation of this state-of-the-art linear accelerator at The Crown Princess Mary Cancer Centre Westmead.

The \$3.6 million machine, housed in a new purpose-built bunker, is a first for Australia, and is expected to enable more accurate treatment. The beams can be adjusted as the patient breathes or moves. Specialised computer and imaging software confirms the doses, to ensure the correct site is treated and to minimise potential damage to nearby normal structures.



The new linear accelerator

Its high output allows treatment to be given more quickly, which is especially important for children, as it makes their treatment shorter and less confronting.

The bunker's ceiling is covered by a stunning photograph of trees and sky, to help patients relax during treatment.

a patient's journey

Young patient kicks goals

When Daniel Berry was diagnosed five years ago with a brain tumour, just before his 16th birthday, he could never have imagined the sporting achievement that would follow.

Since having three operations, radiotherapy and chemotherapy, Daniel has notched up Australian records and high-level achievements in swimming, athletics and football.

He narrowly missed out on selection to run the 800m for the Australian track and field team for the Paralympics in London in August, but now has his sights set on the next Paralympics in Rio De Janeiro in 2016.

“It gives me something to aim for and also keeps me fit and healthy as well.”

Before his diagnosis, Daniel had not excelled at sport, probably because of unknown muscle weakness from the tumour.

Surgery was unable to remove all of his tumour and he is on low doses of chemotherapy to keep it under control.

Daniel, 21, says his doctors at Westmead support his sporting endeavours and have adjusted treatment to allow him to train and compete, knowing how important it is to him.



Daniel Berry: achieving across many fields

“It helps me to focus away from the diagnosis and treatment,” Daniel says. “It gives me something to aim for and also keeps me fit and healthy as well.”

Daniel, who is studying a Bachelor in Sports Coaching and Administration, is also a Young Ambassador for the Make-a-Wish Foundation and has almost completed his Gold Duke of Edinburgh Award. He credits a positive attitude with helping him to cope with the challenges of his illness and competition.

His mother, Heather, says sports has given Daniel a goal. “He doesn’t have time to dwell on being sick,” she says.

practical tips

Dealing with nausea

Feeling sick, with or without vomiting, can be a side effect of cancer or its treatment. These tips might help with nausea:

- Eat small meals often. Not eating can make nausea worse.
- Try a small snack such as dry crackers or toast if you wake up feeling sick.
- Eat and drink slowly. Chew food well.
- Try sour or salty foods such as dry, savoury biscuits and potato crisps. Fizzy drinks are also good; try bitter lemon, dry ginger and cola drinks.
- Eat cold food, such as sandwiches, cold meat, salads and cold milk puddings, which are often easier to manage than fried, greasy and spicy foods.
- Avoid strong odours and cooking smells.
- Talk to your doctor about medication to relieve the nausea.

Source: *Food and Cancer*, Cancer Council NSW’s Understanding Cancer series. See page 8 for more information.

team focus: gastrointestinal cancers



Using state-of-the-art equipment to review and assess each case

Learning from each other

At 8am on Fridays, a special meeting gets underway at Westmead Hospital that brings together a “who’s who” in the treatment of gastrointestinal cancers.

The multidisciplinary team meeting often has at least 20 experts attending, including surgeons, radiation therapy and medical oncologists, nurses, stoma therapists, pathologists and nuclear physicians. Registrars and medical students are also involved.

The hour-long meeting enables a wide range of expertise to be brought to patients’ care, reviewing the management of colon, rectal, anal and other types of gastrointestinal cancers.

Dr Nicholas Wilcken, Director of Medical Oncology at The Crown Princess Mary Cancer Centre Westmead and a senior staff specialist at Nepean Hospital, says the meeting has a “very powerful influence on patient care”.

He says patients benefit from having input from far more experts than could ever be involved in one-on-one consultations.

“We use state-of-the-art equipment to review and assess each case,” he says. “Every patient gets second, third and fourth opinions.”

Dr Wilcken says he has watched clinicians from different areas learn from each other since the meetings began five years ago.

“There has been a substantial education in multiple directions,” he says.

“We, as the medical oncologists, have learnt a lot more about the surgical things that need to be taken into consideration, and the surgeons have learnt more about what we do.”

The meeting has also helped build the sense of teamwork that is vital for cancer care. He says: “I’m sure that most participants would agree that it’s been helpful for professional development.”

Listening to patients

Patients have given a big thumbs up to the gastrointestinal cancer team at The Crown Princess Mary Cancer Centre Westmead.

A survey of more than 40 patients found that most rated their care and support very highly. However, as other patient surveys have noted, parking can be a problem.

Patients wrote, “we can’t thank you enough for all the care, time and expertise”, and that they “could not fault the care and treatment”.

Another said: “The care and consideration given by all the staff that I’ve encountered was given with great concern for my welfare. Thank you!”

staff profile

Good nutrition matters

Like many people who work at Westmead Hospital, teamwork is a major draw card for dietitian Victoria Mitchell.

"I work with some really good teams," she says. "They are multidisciplinary, so everybody – doctors, nurses and allied health workers such as dietitians, speech pathologists and social workers – is involved with the care of the patients."

Ms Mitchell is a Senior Clinical Dietitian in oncology services at Westmead Hospital, working particularly with the haematology/bone marrow transplant unit and the radiation oncology outpatients unit. Her role is to help patients to eat well to ensure they have all the nutrients they need to cope with treatment.

Ms Mitchell says cancer and its treatment, such as chemotherapy and radiation therapy, may cause problems that affect a patient's appetite and ability to eat. These include nausea, diarrhoea, inflammation of the lining of the mouth and the throat, and problems with chewing and swallowing, digestion and the absorption of food. Many patients ask what to eat to reduce the likelihood of their cancer coming back after treatment.

Her advice is: "What we currently know is that no special diet can cure or stop cancer coming back, but that good nutrition can put you in the best position to tolerate the treatment, by improving your general health, immune function and your ability to fight infection."



Ms Victoria Mitchell: helping patients to eat well

“...good nutrition can put you in the best position to tolerate the treatment...”

question corner

Q I am being treated for breast cancer and have gained weight. Don't most cancer patients lose weight during treatment?

A Clinical Dietitian at the Breast Cancer Institute, Kellie Bilinski, says weight gain is the most common reason that women with breast cancer come to her for nutrition advice. She says chemotherapy used for breast cancer doesn't cause the nausea-related weight loss associated with the more aggressive chemotherapy that is often used for other solid tumours.

"I'm not sure why weight gain is common with breast cancer," says Ms Bilinski, who is also an accredited practising dietitian. "It could be due to medication or chemotherapy, or it could be that women expect to lose a lot of weight, so they might overeat."

While cancer patients who lose weight during treatment often need a high-energy, high-protein diet, Ms Bilinski finds that most women with breast cancer just need a healthy, balanced diet and she refers them to the Australian Dietary Guidelines (www.nhmrc.gov.au/_files_nhmrc/publications/attachments/n29.pdf).

news & views

Public support credited for bowel cancer campaign's success

Cancer groups have thanked community members for supporting the successful campaign to extend the national bowel cancer screening program.

The Federal Government recently announced the program would include Australians turning 60 from next year, and 70 year olds from 2015. It will progressively introduce two-yearly screening for all Australians aged 50 to 74 from 2017.

Professor Ian Olver, CEO of Cancer Council Australia, said the public's support in sending more than 24,000 letters to MPs had been crucial.

"Your actions have been instrumental in the expansion of a program that will ensure thousands of Australians and their families are spared the tragedy of bowel cancer," he said.

Cancer Council launched the Get Behind Bowel Screening campaign in June 2009 to push for wider access to bowel cancer screening.

New referral site to help cancer patients

A new website has been launched to give cancer patients and general practitioners in NSW access to a more co-ordinated approach to cancer treatment.

The Canrefer website, an initiative of the Cancer Institute NSW, allows GPs and people diagnosed with cancer and their families to search for healthcare teams specialising in the treatment and care of specific cancers.

The site also provides information about radiation oncology, chemotherapy, palliative care and cancer genetics units closest to where they live.

Research shows well co-ordinated care from a range of health disciplines greatly improves outcomes for people with cancer.

The website also offers practical information including maps, opening hours, parking facilities and contact details for cancer care co-ordinators.

<http://www.canrefer.org.au>

Social and psychological care matters

Many patients, carers and family members can benefit from access to care addressing the psychological and social effects of cancer diagnosis and treatment.

This is the theme of a recent special edition of the *Journal of Clinical Oncology* that focuses on the science of psychosocial care. The articles note that attention to the psychological and social needs of patients is particularly important after treatment has finished.

"Patients' psychosocial concerns are likely to be heightened during this period because of perceptions that they have lost the safety net of active treatment and because of challenges faced in resuming or altering former occupational and social roles," says an overview of the series.

The series also says that caring for people with cancer can take a psychological toll on both health professionals and carers.

Better support for country patients

Improvements are being made to the scheme that provides financial support for patients who have to travel long distances for treatment.

Cancer groups have welcomed a NSW Government decision to overhaul the complex administration of the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS).

Under the reforms, there will be a new online claiming system, where patients can complete and claim their subsidy online, a simpler, shorter application form and reduced paperwork.

Cancer Council NSW CEO Dr Andrew Penman said he was delighted by the announcement. "Cancer Council NSW has long called for the IPTAAS administration process to be simplified," he said. "No patients should be out of pocket or have to forego vital cancer treatment."

guest appearances

Sharing the learning

By Dr Frede Donskov



Dr Frede Donskov

Six years ago, I left my home in Denmark to work with Professor Paul Harnett and his colleagues at Westmead Hospital as part of my training in cancer medicine.

My year at Westmead was a real eye opener. Cancer patients in NSW have excellent survival rates by world

standards, and I learnt a lot that I took home to improve cancer care in Denmark.

I am delighted that the Danish-Westmead connection continues to grow. Recently my hospital had the pleasure of hosting two Westmead specialists, Professor Phillip Yuile and Dr Ken Tiver, who are interested in our work in radiation therapy.

The University Hospital in Aarhus is a world leader in stereotactic body radiotherapy, which delivers very high-dose radiation to small sites deep within the body with very high accuracy. This enables control of cancer with limited toxicity.

During my time at Westmead, I was also very impressed by Australians' attitude to health, and your awareness about the harms of smoking, drinking and overweight. This is something I would like to see more of in Denmark.

I am looking forward to continuing our collaborations in research and training, and am sure that our mutual connection with Crown Princess Mary will be of tremendous help. I hope that more of our staff will have the opportunity to visit The Crown Princess Mary Cancer Centre Westmead for some "brain training" to learn about the Australian way of doing health and cancer care.

I'm looking forward to my next visit to Westmead Hospital later this year. We will have much to talk about – how we can work to improve the care and support for patients and their families in both of our countries.

- **Dr Donskov is a clinical oncologist at Aarhus University Hospital.**

connections

A Danish perspective

By Ms Birthe Anderson

I usually work at one of the biggest hospitals in Denmark, the Aarhus University Hospital.

But for three happy weeks earlier this year, I had the opportunity to work at The Crown Princess Mary Cancer Centre at Westmead Hospital.

I was visiting as part of what is expected to become a regular exchange of staff between our two hospitals. The thinking is that we can learn from each other, getting new ideas about how to improve the care of our patients.

I certainly learnt a lot during my visit – about the importance of the multidisciplinary team meetings and the important role that nurse care co-ordinators play in helping patients.

I noticed how the multidisciplinary team meetings and care co-ordinators for the different tumour groups work differently, according to the varying

needs and experiences of their patients.

Now that I am back in Denmark, I am working to try to implement some of the approaches that I saw working at Westmead. I am also recommending the exchange to colleagues.

I have been a nurse for 30 years, but my time in Sydney was a reminder that there is always more to learn. I was also glad to have the chance to learn something about the tourist attractions in Sydney. You have a beautiful country and I enjoyed seeing some of your great outdoors.



Ms Birthe Anderson

- **Ms Anderson is a cancer nurse at Aarhus University Hospital.**

useful resources

Food and Cancer: a free book available online and in print

This book is packed with useful advice for patients and carers. It includes recipes and answers to questions that patients and families often ask. For a free copy of the booklet, call the Cancer Council Helpline on 13 11 20, or download it.

www.cancercouncil.com.au/publications/understanding-cancer-book

Nutrition Rainbow

This poster, which can be freely downloaded, shows the cancer-fighting and protective properties of a variety of plant-based foods.

www.cancerproject.org/resources/pdfs/2009RainbowPoster.pdf

Drink Tank

A new online forum, from the Foundation for Alcohol Research and Education, Drink Tank lets community members and others share views and concerns about the use and abuse of alcohol in Australia.

<http://drinktank.org.au>

We welcome your comments on the newsletter and suggestions for stories.

SWCN@swahs.health.nsw.gov.au

help support our work

Please help us continue to treat and support cancer patients in our community. Your donation, made out to Westmead Medical Research Foundation, will go directly to the Sydney West Cancer Network, and will benefit patients across western Sydney.

To donate you can:

- **Donate online:** www.wmrf.org.au/donate (option 'Westmead Cancer Care')
- **Donate by phone:** 1800 639 037
- **Donate by post:**

C/ The Crown Princess Mary Cancer Centre Westmead
Westmead Medical Research Foundation
PO Box 74 Westmead NSW 2145

contact details



| | |
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This newsletter is produced by Melissa Sweet and Marge Overs and designed by Rock Lily Design & Consulting. ISSN 1838-1529