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Dana-Farber nurses deliver cancer care globally p. 3



Patient and wife write book about treatment p. 4



DFCCC recognized for patient-centered care

Four Dana-Farber Community Cancer Care (DFCCC) sites have become the first hematology/oncology physician practices in Massachusetts to receive formal recognition from the National Committee for Quality Assurance (NCQA) for the quality of their patient care services.

The announcement that the sites have been named Patient-Centered Specialty Practices (PCSP) caps a two-year effort in which staff across DFCCC examined virtually every aspect of patient care, with an eye toward measuring and, where possible, improving their quality. The recognition certifies that DFCCC locations in Weymouth, Stoneham, Lawrence, and Quincy excel at communicating with patients and referring physicians, working with other health care organizations, and providing access to care. (DFCCC includes seven practices; the sites in Milton and Dorchester weren't included because, as relatively small operations, they don't generate enough data to be eligible for PCSP designation. Data for the new site in Methuen will be submitted at a later date.)

"Achieving this designation sends an important message to patients, the public, and to ourselves about our commitment to providing a high standard of patient-centered cancer care, and to constantly working to improve that care," says Doreen Carlin-Grande, DFCCC community contracts manager, who led the effort with Emily Etienne, DFCCC clinical operations advisor; Donna Flynn, RN, OCN, DFCCC director of nursing; Michael Anderson, MD, executive medical director of DFCCC; and Darren Evanchuk, MD, the organization's physician advisor.

The NCQA was founded in 1990 with the goal of fostering improvements across the health care system. It provides accreditation, certification, and recognition programs to groups including accountable care organizations, health maintenance organizations, physician networks, medical groups, and health

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Program matches breast cancer patients with their SoulMates



Noel Peters, left, is Melissa Angiolillo's peer mentor in the new SoulMates program at Dana-Farber. The initiative matches active breast cancer patients with volunteer mentors who have completed treatment for the same, or similar, type and stage of disease.

A week after her mastectomy, Melissa Angiolillo learned the tumor removed from her breast was more than twice as large as expected. She suddenly needed to be with a close friend who understood her fears, and Noel Peters was the perfect choice – even though they had never met.

Peters is Angiolillo's peer mentor in the new SoulMates program at Dana-Farber. The initiative matches active breast cancer patients with volunteer mentors who have completed treatment for the same, or similar, type and stage of disease. The pairs meet when possible, stay in touch by phone and email, and have monthly dinners at DFCI with other SoulMates tandems to share their

experiences and learn from nutritionists, exercise physiologists, and other experts.

For Angiolillo, the program has been a revelation. "When I first heard about SoulMates, I said I would try it, but it was really important to me that they could find another young working mom with three kids and a stage III lobular tumor," she says. "That was Noel, who finished her treatment last year, and when we first spoke by phone before my mastectomy we spent an hour talking and laughing. She helped give me strength."

By the time of their initial face-to-face chat, just after Angiolillo learned the details about her tumor, she and Peters felt a special connection. This is the

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New intranet for Dana-Farber staff

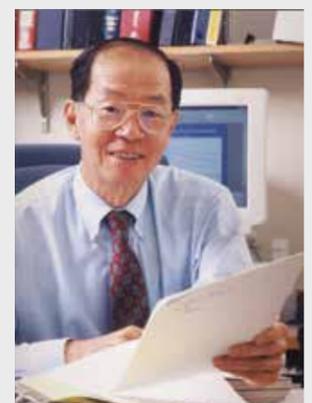
When staff logged on to DFCI Online on Friday, June 26, they were greeted with the long-awaited new look and exciting features of the redesigned DFCI Online. The launch of the new intranet was postponed until after the Epic implementation.

Remembering Fred Li

Colleagues, family members, students, and friends attended a memorial service for Frederick Pei Li, MD, on Saturday, June 27, in Houghton Chapel at Wellesley College.

Li, who died June 12 at age 75, was renowned for his work at the National Cancer Institute (NCI) and Dana-Farber that demonstrated a genetic predisposition to certain cancers can be passed from one generation to the next – research that helped reveal the fundamental link between genetic mutations and cancer. Li came to Dana-Farber in the early 1970s as a medical officer in the NCI's Epidemiology Branch and was one of the founders of the Friends of Dana-Farber Cancer Risk and Prevention Clinic.

Read more about Li's life and work on the intranet by visiting <http://dfcionline.org/fredli>.



Frederick Pei Li



Daphne Haas-Kogan

New chair of Radiation Oncology

Daphne Haas-Kogan, MD, has been appointed chair of the Department of Radiation Oncology at Dana-Farber/Brigham and Women's Cancer Center (DF/BWCC) and professor at Harvard Medical School effective July 1. She will also be the Endowed Professor of Radiation Oncology at Brigham and Women's Health Care. In her new role, Haas-Kogan will direct the educational, research, and clinical activities of the department of Radiation Oncology.

Most recently, Haas-Kogan was program director and vice chair of the department of Radiation Oncology at University of California, San Francisco's (UCSF) Helen Diller Family Comprehensive Cancer Center and UCSF Benioff Children's Hospital. She was also professor of Radiation Oncology and Neurological Surgery at UCSF, and previously the residency program director and vice chair for Research and Education.

"Dr. Haas-Kogan brings extraordinary expertise and leadership that will greatly benefit our patients, faculty, staff, and learners," notes Edward J. Benz Jr., MD, president and CEO of Dana-Farber. "Her research interests fit well with our current efforts, and we are delighted that she will be joining us to lead such an important area of our joint cancer program."

Haas-Kogan earned a bachelor's degree in biochemistry and molecular biology from Harvard University and a medical degree from UCSF School of Medicine. She succeeds Jay Harris, MD, who for 15 years served as chair of the department of Radiation Oncology at Dana-Farber, Brigham and Women's Hospital, and Boston Children's Hospital. He will continue on the DF/BWCC staff as a clinician and researcher. [SEW](#)



Robert J. Mayer

Mayer named Giant of Cancer Care

Robert J. Mayer, MD, faculty vice president for Academic Affairs, was named to the 2015 Class of Giants of Cancer Care™ at the American Society of Clinical Oncology annual meeting for his work in gastrointestinal cancers. The program, sponsored by OncLive, recognizes physicians and researchers who have devoted their time, talent, and resources to improving cancer care for patients and their families.

Each year's class of Giants of Cancer Care consists of 16 honorees chosen by a committee of prominent oncologists. OncLive is the website of the Oncology Specialty Group, a publisher of print and online information and news for oncologists. [ITI](#)

DFCI, Lilly to pursue collaborative drug research

Dana-Farber and Eli Lilly and Co. announced a three-year agreement to collaborate on research and development of new cancer drugs.

Under the arrangement, Dana-Farber will provide research and development expertise for several Lilly oncology compounds in early stages of the drug development process. Scientists from DFCI and Lilly will work together on preclinical and clinical studies, molecular studies of patient samples, and the design and conduct of clinical trials.

The agreement also allows Dana-Farber scientists to carry out independent research on select Lilly compounds.

"Lilly's partnership with Dana-Farber demonstrates an open, collaborative research approach – uniting the expertise of the pharmaceutical industry with that of a leading academic cancer research institution," says Richard Gaynor, MD, senior vice president at Lilly.

Barrett Rollins, MD, PhD, Dana-Farber's chief scientific officer, calls the agreement "a new kind of collaboration between a comprehensive cancer center and a large pharmaceutical company."

"Under this agreement, Lilly can access the collective clinical and preclinical expertise within Dana-Farber to help it develop multiple preclinical and clinical compounds," Rollins says. "Together, we can bring compounds to clinical trials and Food and Drug Administration approval quickly and efficiently, and thus benefit our patient population." [RS](#)

Young physician-researchers honored at ASCO meeting

Nine Dana-Farber clinical researchers received Young Investigator Awards from the Conquer Cancer Foundation at the annual meeting of the American

Society of Clinical Oncology (ASCO) in Chicago May 29-June 2. The awards, given to promising physicians to encourage their careers as both physicians and researchers, include one-year grants of \$50,000 to fund specific research projects.

This year's Dana-Farber recipients are: **Mark Awad,**

MD, PhD; Pavan Bachireddy, MD; Melissa Burns, MD; Natalie Collins, MD, PhD; Loretta Li, MD; Mark Murakami, MD; Eirini Pectasides, MD; Elizabeth Stover, MD, PhD; and Zuzana Tothova, MD, PhD.

The Conquer Cancer Foundation was established by ASCO to support research activities through its grants program, provide patient education through its website (Cancer.net), evaluate quality of cancer care through its CancerLink initiatives, and stimulate efforts in global oncology in resource-poor regions.

Robert J. Mayer, MD, Dana-Farber's faculty vice president for Academic Affairs, serves on the Conquer Cancer Foundation Board of Directors. [ITI](#)



Photo by (c) ASCO/Zach Boyden-Holmes 2015



Aldo Roccaro

Roccaro receives international cancer research award

Aldo Roccaro, MD, PhD, has received the 2015 "Francesco De Luca" International Prize for cancer research from the "Accademia dei Lincei," in a ceremony in Rome attended by the President of Italy, Sergio Mattarella.

Roccaro, a senior research scientist in the Medical Oncology laboratory of Irene Ghobrial, MD, was selected for the award, together with Giovanni Palladini, from the University of Pavia. The Accademia dei Lincei is one of the world's oldest scientific academies; Galileo Galilei was among the first scientists inducted as a member of the academy.

Chief Scientific Officer Barrett Rollins, MD, PhD, calls it "an impressive honor."

Roccaro was born in Bari, Italy, and received his medical and doctoral degrees from the University of Bari Medical School. The award was open to scientists of all nationalities. [RS](#)



Dan Landau

Landau receives prestigious career award

Dan Landau, MD, PhD, of Medical Oncology, received a Career Award for Medical Scientists, sponsored by the Burroughs Wellcome Fund. He is among 14 physician-scientists from the biomedical fields chosen for the award; each will receive \$700,000 in funding for five years.

Landau is a postdoctoral fellow in the laboratory of Catherine Wu, MD, focusing on how tumor cells evolve to become more aggressive and thwart the effectiveness of cancer drugs.

"As a physician-scientist, I am committed to developing better treatments for cancer patients," Landau says. "With the unique support the Burroughs Wellcome Fund can provide, I hope to launch an ambitious research program to tackle tumor evolution, one of the central obstacles to a cancer cure."

Last October, Landau's work was recognized with a \$900,000 training grant from a new National Institutes of Health initiative, Big Data to Knowledge (BD2K), to study epigenetic factors in the evolution of more aggressive, drug-resistant forms of chronic lymphocytic leukemia. [RS](#)

Reminder: Dana-Farber is a tobacco-free campus

Since February 2009, Dana-Farber has been a tobacco-free campus, both inside and out. This means tobacco products (i.e., cigarettes, cigars, snuff, chew, and pipes) cannot be used on any property owned, operated, and/or leased by Dana-Farber. Electronic smoking devices and vaporizers are also prohibited on all Dana-Farber property.

This policy applies to all staff, contract workers, students, volunteers, patients, and visitors. The policy also prohibits employees from tobacco use while representing Dana-Farber in public (i.e., wearing an identification badge or uniform).

Employees who violate this policy are subject to disciplinary action up to and including termination.



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Story ideas are welcome and can be sent to Naomi Funkhouser at 450 Brookline Ave., 05301, Boston, MA 02215. You can also call 617-632-5560 or email Naomi_Funkhouser@dfci.harvard.edu. Visit the Dana-Farber website at www.dana-farber.org or the intranet at www.dfcionline.org.

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Center for Immuno-Oncology grows in size, scope

When the Center for Immuno-Oncology (CIO) at Dana-Farber opened in early 2013, few might have predicted that its focus – harnessing the immune system to fight cancer – would soon become the talk of the cancer-research community for its promise in patient therapy.

The director of the center, F. Stephen Hodi, MD, and his colleagues were among those few. Basic laboratory research and early-stage clinical trials were showing that techniques for rousing an immune system attack on cancer could be exceptionally effective in some cases. Hodi envisioned the center as a hub for immunotherapy research across the Institute.

“Drugs were being developed and introduced on the basis of a greater understanding of the dynamic between cancer and the immune system,” says Hodi, who is also the director of the Melanoma Disease Center at Dana-Farber/Brigham and Women’s Cancer Center (DF/BWCC). “We wanted to create a platform for clinical trials geared to the unique nature of these agents.”

The side effects of immunotherapy agents tested in phase 1 trials often differ from those associated with chemotherapy or targeted agents, as do the criteria for measuring the drugs’ effectiveness.

“The design of immunotherapy trials needs to reflect those differences,” Hodi remarks. “Our goal was to build a ‘track’ for such trials that allowed

Today, the center supports more than 20 clinical trials, almost one-third of which were initiated by a clinical investigator rather than a pharmaceutical company. Some 20 research papers have been published on the basis of trials associated with the CIO.

them to be run efficiently and was attractive to pharmaceutical companies with new agents to test.”

By all indications, Hodi and his team have succeeded. When the CIO was launched two and half years ago, three clinical trials had opened under its auspices. Today, the center supports more than 20, almost one-third of which were initiated by a clinical investigator rather than a pharmaceutical company. Some 20 research papers have been published on the basis of trials associated with the CIO.

The staff has grown as well. From an initial group of six, the team now numbers 28, including eight clinical research coordinators and three research nurses. Faculty representatives from every DF/BWCC treatment center have contributed to and

shown interest in CIO trials, Hodi says. Clinical and basic science faculty attend monthly meetings where the portfolio of CIO trials is reviewed, new translational concepts discussed, and educational lectures are presented.

The center includes a pathology assessment lab for analysis of tumor tissue and an immune assessment lab for studying the basic mechanism of immunotherapies and searching for biomarkers – substances in blood that indicate how well patients may respond to specific agents.

The clinical trials supported by the CIO involve two main types of immunotherapy: vaccines that spur the immune system to a more vigorous attack on tumors; and monoclonal antibodies that block so-called “checkpoint molecules” on cells, unleashing the body’s cancer-fighting T cells. Antibodies also can attach to certain proteins that cancer cells use to grow and spread. Another strategy uses antibodies to deliver cancer drugs directly to tumor cells.

“There’s strong evidence that immunotherapies may work best in combination with other treatments,” Hodi observes. “Many of our current trials involve such combinations. The future will go beyond combinations of two immunotherapies, possibly involving combining radiation therapy, chemotherapy agents, targeted drugs, and angiogenesis inhibitors.” [RL](#)

Dana-Farber nurses go global

Having long aided in cancer research and treatment breakthroughs at home, Dana-Farber nurses are now traveling thousands of miles to help underserved nations target a disease that has become a growing burden for their populations.

Through the Center for Global Cancer Medicine (CGCM) at Dana-Farber, established in 2012, nurses and other clinicians are spending time in Africa, the Caribbean, and other locales delivering cancer care and training their international colleagues in oncology care. And through the Pediatric Global Health Initiative, nurses from Dana-Farber/Boston Children’s Cancer and Blood Disorders Center educate nurses in settings such as Egypt and Mexico, through visits and Web-based training sessions. These caregivers are committed to making lasting change in countries where limited resources have previously made cancer care and early detection nearly impossible.

In the African nation of Rwanda, for example, the CGCM and Boston-based Partners In Health spearheaded the 2012 opening of the Butaro Cancer Center of Excellence – the country’s first dedicated cancer facility. Several Dana-Farber/Brigham and Women’s Cancer Center (DF/BWCC) nurses, including Stephanie Kennell-Heiling, BSN, RN, participated in three-month teaching rotations at the center from 2012-14, and this April, Kennell-Heiling returned to lead a staff of 28 adult and pediatric nurses there for an additional year. She is also serving as a preceptor at the country’s School of Nursing and Midwifery, supporting the launch of a new national master’s in nursing oncology program for Rwandan students that was co-developed by the school’s faculty and her Dana-Farber colleagues Lori Buswell, RN, CS, and Ludmila Svoboda, RN, BSN.

“At Dana-Farber, nurses are an integral piece of a patient’s plan of care, but in Rwanda they have traditionally not been deeply involved in treatment plans and patient education,” explains Kennell-Heiling. “Through our program, they are learning an entirely new dimension to their role; we are not only helping empower the country, but also individual lives.”

Kennell-Heiling says her experiences in Rwanda have made her appreciate aspects of health care often taken for granted in Boston. Getting medicine and other supplies up the ruddy, mountainous roads to Butaro is a challenge, and most patients must travel for hours to their appointments. Because cancer care is a new service in Rwanda, and the growing (but still limited) awareness of cancer as treatable, many people arrive at the hospital with late-stage, incurable disease.



Ludmila Svoboda, center, is pictured in Rwanda with Vedaste Hategekimana (left) and Clemence Muhayimana.

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goal of SoulMates, managed by Dana-Farber social worker and breast cancer survivor Nancy Poorvu, PhD, LICSW. Treated here in 2002, she designed the initiative with the help of Julie Lonardo, program coordinator for the Young and Strong program for breast cancer survivors started here by Adult Survivorship Director Anne Partridge, MD, in DFCI’s Susan F. Smith Center for Women’s Cancers. Poorvu’s hope was to improve upon similar efforts across the country.

“Most programs I studied were criticized for not providing enough mentor training and not following up with mentors,” Poorvu explains. “We have a day-long training for our mentors and follow-up sessions at the dinners each month. While the active patients are asking questions of the experts, the mentors are discussing what’s going right, what’s giving them challenges, and how we might fix it.”

In these sessions, Poorvu encourages mentors to follow the lead of their patient peers, understanding that their

mood and outlook can change at different stages of the cancer journey. Since the program’s launch last November, Poorvu and her project assistant, Katie Infantine, have formed 30 mentor-peer pairings. Participants range in age from their 20s to 50s, and moving stories abound – such as the mentor who brought a Thanksgiving turkey to her peer patient, or the group that rallied around a patient peer when her daughter also was diagnosed with cancer.

“We do a lot of role-playing with Nancy, scenarios detailing how you get over the nervousness of calling someone during this type of crisis, and how to help make them comfortable as well,” Peters says of the training. “I meet Melissa every two weeks at her chemotherapy infusions, and it’s like we’ve known each other forever.”

Their friendship sealed, the pair look forward to getting their families together more in the future.

Once Angiolillo’s treatment is finished, she plans to become a mentor as well. [SW](#)

Despite these challenges, says Svoboda, programs like those established by the CGCM in Rwanda and at the University Hospital of Mirebalais in Haiti are making a difference. A pathology laboratory at the Butaro Cancer Center (established in partnership with DF/BWCC), for instance, allows biopsies taken there to be evaluated electronically by pathologists in Boston days later – greatly reducing the time from diagnosis to treatment. Since many patients wait a year after first noticing symptoms to start treatment, Rwanda health workers and nurses are learning a breast awareness curriculum from their Boston colleagues that they have already started teaching in rural communities.

“A big factor in our success there is how welcoming our international colleagues are to our intervention,” says Svoboda. “When I went to Rwanda, I was met with an incredible level of kindness, hospitality, and graciousness. With the master’s in nursing program that we are helping develop, people at the university are so excited for this collaboration and for the future. They know this is a profound step we are taking together toward empowering the local nursing workforce and educating future Rwandan nurse experts in oncology.” [SW](#)

Patient and wife author book on DFCl experience

Most people would not refer to 15 years of chronic lymphocytic leukemia (CLL) treatment and a stem cell transplant as a “love story,” but that’s one descriptor Judith K. White uses for her forthcoming book, written with her husband, Allen, about his Dana-Farber experiences.

Autumns of Our Joy – A Memoir of Romance, Stem Cells, and Rebirth, due out this fall, chronicles how the couple and their three children faced the challenges of his disease and the bond they have formed with his stem cell donor’s family.

“We’re both storytellers, and this is a story with much drama,” says Judith, already the author of two published historical novels plus the “Phrase-a-Day” series for Children in French, Spanish, and English. Allen, a scientist and social entrepreneur focused on corporate sustainability, has co-authored

dozens of articles and a book in that field. Still, the decision to write the memoir came unexpectedly for the Brookline couple.

“Cancer treatment is a complex process, fraught with uncertainties and anxieties, which led me to constant notetaking,” Judith explains. “Once the decision was made to undergo a stem cell transplant, Allen and I began posting diary entries on the Caring Bridge website. We used anecdotes and metaphors to communicate with a wide network of loving, supportive family and friends. As our correspondence grew to hundreds of posts, we realized there was ample material for a bigger project that could bring understanding and solace to those facing a similar crisis.”

The book opens on the day in 1966 when Allen and Judith met, and traces much of their life together before the moment in 1999 that Allen – then 52 – learned of his elevated white blood cells during a routine checkup. The couple was called in for a meeting, and a trip to Dana-Farber confirmed Allen’s CLL diagnosis.

“I felt readers could better relate to

our situation if they had a sense of our life together prior to his diagnosis,” explains Judith. “I want them to love Allen as much as I do.”

Allen refers to his first decade of treatment as “a very low-key dance with CLL, which always loomed in the shadows.” He felt fine, and had his blood levels tested every three months in such far-flung places as San Francisco, Paris, and Amsterdam, where he traveled for work.



Judith and Allen White (left and center) in New York with Allen’s stem cell donor, Eli Sklarin.

“Allen was a very positive person, pressing forward without complaint,” says David Fisher, MD, his Dana-Farber oncologist. “He was a pleasure to be with, and displayed a lot of humor along the way.”

This is reflected in the book, which includes joke-filled banter between the Whites and their caregivers. The major crisis comes in 2009, when Allen’s white blood counts became dangerously elevated. He endures the extensive chemotherapy protocol and a stem cell transplant, overseen by Philippe Armand, MD, PhD, and his team, in August 2011.

“Allen is amazingly strong and intelligent,” says Armand. “He weathered a number of significant complications from his treatment and from his transplant, but emerged always with humor and courage.”

After a year-long waiting period, Allen and his donor – 20-year-old college student Eli Sklarin from New Jersey – finally met and clicked instantly.

Today, Allen has quarterly checkups at Dana-Farber, and five years post-transplant will be considered in full remission.

For the White family, it’s a happy ending. SW

DFCCC, continued from page 1



information publishers. It launched the PCSP recognition program in 2013, modeled on a similar program for primary care settings.

The process of applying for and gaining PCSP recognition begins with a rigorous internal review of an organization’s patient services. The program sets standards in six broad areas, including physician referrals, communication with staff and patients, management

and patient care, and measuring and improving performance. Each area contains goals and “factors” used in determining whether those goals are met. The factors, which number nearly 150, can be as specific as, “Fifty percent of patients/families/caregivers have online access to their health information within four business days of when the information is available to the practice.” There also are detailed requirements for documenting that an organization has achieved these goals. The complete set of standards, goals, factors, and documentation guidelines is more than 60 pages.

“The project required that we take a long, hard look at our patient-related services and consider where they can be improved,” Carlin-Grande remarks. In many areas, it also required that they find ways to measure the quality of services.

For example, practices are required to be sensitive to the cultural and linguistic characteristics of their patients. To gauge whether DFCCC sites are indeed providing such care, the staff developed a report that assessed the linguistic needs of patients seen at each practice.

In many areas, data from such measurements confirmed that the practices were performing well. In a few areas, “it taught us where we need to do better,” says Donna Flynn. “It gave us the opportunity to ask if we’re taking the right approach, and why.”

The PCSP designation runs for three years. The process of continual improvement spurred by the PCSP process will serve the practices well at renewal time and when the Massachusetts Health Policy commission implements its patient-centered criteria, Carlin-Grande says. RL



On June 19, there were buoys, lobsters, anchors, and stripes as staff on Yawkey 7 hosted Nautical Day.



Two-Star Pacesetter and Team Captain Janice Russell (second from left) walks with friends and family members on The Roadrunner Russells team.

Boston Marathon® Jimmy Fund Walk

Register to walk or volunteer with the Boston Marathon Jimmy Fund Walk presented by Hyundai on Sunday, September 27. Join your colleagues, family, and friends to take vital steps to conquer cancer.

Learn more at the next info session:

Wednesday, July 15, noon

Yawkey Conference Center, room 308

Patients, family, and friends are welcome to attend.

Refreshments will be served.

Use discount code DFCl to receive \$10 off your registration fee.

For more information, visit www.JimmyFundWalk.org or contact Crystal Caron at Crystal_Caron@dfci.harvard.edu or 617-632-5029.