Project ECHO Session Four

Survivorship Lifestyle Behaviors

April 11, 2024

Recording: Project ECHO Session Four 4.11.24

SURVIVORSHIP PROJECT ECHO(Extension for Community Healthcare Outcomes)



Collaborators:

NYSDOH/NYSCCCP SUNY Upstate (The Upstate Foundation, Inc.) NYS Survivorship Action Team

Subject matter team leads:

Maureen Killackey M.D. Tessa Flores, M.D. Christina Crabtree-Ide, PhD, MPH

Funding: Centers for Disease Control and Prevention

HOUSEKEEPING ITEMS

Please type your name (first and last), health center or organization, and your email address into the Chat Box.

Please mute your line and remain on camera.

If you have a question, please type it in the Chat Box. Questions will be answered after the speakers' presentations.

This ECHO session is being recorded and a link will be e-mailed to attendees and posted on the NYS Cancer Consortium Website (nyscancerconsortium.org)

Do NOT share any personal information about any patient.

The Session PowerPoint and materials will be sent to attendees after each ECHO Session along with the CME survey.

INTRODUCTIONS



TIMOTHY P. KORYTKO, MD

Radiation Oncologist-in-Chief, Bassett Healthcare Network



Eileen Howe Bird

Executive Director, To Life! Inc.



Facilitator: Christina Crabtree-Ide, PhD, MPH

Epidemiologist and Health Services
Researcher and Implementation
Scientist at Roswell Park
Comprehensive Cancer Center

Eileen Howe Bird has no disclosures or conflicts to report. Dr. Korytoko reports disclosures with Astra Zeneca and Alpha Tau Medical. Crabtree-Ide reports funding support from Genentech, and stock ownership of Danaher, Fortive, Vontier, and Veralto Corps.

PARTICIPANT INTRODUCTIONS

Please type your name (first and last), health center or organization, and your email address into the Chat Box.

Welcome

Survivorship ECHO Series

Session 4
Survivorship Lifestyle Behaviors



Eileen Howe Bird Timothy P. Korytko, M.D.

Facilitator: Christina Crabtree-Ide, PhD, MPH



What is a Project ECHO?



- Collaborative, hub & spoke model of medical education and care management
- Goal is to form long-lasting partnerships between community-based provider teams and specialized providers to create bi-directional learning networks
- Increases workforce capacity to provide best-practice specialty care to patients wherever they may live; reduces health disparities

"Moving knowledge, not people"

Goals & Objectives ECHO Series



After participating in this ECHO Session, participants will be able to:

- 1. Understand the effect of a cancer diagnosis on mental health
- 2. Learn about recommended nutrition, physical activity, and lifestyle behaviors for cancer survivors
- 3. Identify available cancer survivorship guidelines and resources

Scheduled sessions and subject matter discussants

Session 1: Introduction and Survivorship 101		
January 11, 2024 12-1:00pm	Maureen Killackey, MD, FACS, FACOG Tessa Flores, MD Sylvia K. Wood PhD, DNP, ANP-BC, AOCNP Facilitator: Christina Crabtree-Ide, PhD, MPH	
Session 2: Survivorship Teams		
February 8, 2024 12-1:00pm	Tessa Flores, MD Gregory P. Rys, NP Maura Abbott, PhD, AOCNP, CPNP-PC, RN Facilitator: Maureen Killackey, M.D.	
Session 3: Medical Issues in Survivorship		
March 14, 2024 12-1:00pm	Craig D Hametz, MD, FACC, FASE, FASNC Tessa Flores, MD Facilitator: Maureen Killackey, M.D.	

Session 4: Survivorship Lifestyle Behaviors		
April 11, 2024 12-1:00pm	Eileen Bird Timothy Korytko, MD	
12-1.00pm	Facilitator: Christina Crabtree-Ide, PhD, MPH	
Session 5: Survivorship and Sexual Health		
May 9, 2024	Kristin Sobieraj, PA	
12-1:00pm	Lori Davis, DNP, FNP-C, ACNP-C, CSC, NCMP	
	Facilitator: Tessa Flores, M.D.	
Session 6: Supportive Care in Survivorship		
June 13, 2024	Anne Moyer, PhD	
12-1:00pm	Robin Eggeling	
	Facilitator: Christina Crabtree-Ide, PhD, MPH	

Lifestyle and Diet in Cancer Survivorship

Tim Korytko, MD
Chief of Radiation Oncology
Bassett Healthcare Network
Cooperstown, NY

Learning Objectives

- Identify guideline based dietary patterns for cancer patients
- Identify which foods should be avoided and why
- Understand other lifestyle factors which can impact cancer risk
- Observe the dose effect and synergy between cancer risk reduction and recommendations for other chronic diseases
- Understand the dose effect of lifestyle factors in health
- Identify more resources for further learning
- (all in 20 minutes!)

Cancer Diagnosis is a potential time to intervene in general health

- A common question from patients after cancer diagnosis is "What could I have done to prevent this?" or "how can I prevent this from happening again?"
- There is significant overlap of guidelines based recommendations for cancer survivorship and guidelines based recommendations for reduction of disease burden of common conditions: DM, HTN, obesity, CAD
- I will review the guidelines in this talk and give some introductory sources to learn more information

How does lifestyle impact health?



The vast majority of cancers are not caused by heritable genetic mutations – they are caused by acquired stress to the genome



There are significant healthcare costs associated preventable illnesses.



Pillars of Lifestyle Medicine



Diet

Exercise

Sleep

Stress

Reduction in Harmful Substances

Social Connection

American Cancer Society Guideline for Diet and Physical Activity for Cancer Prevention

Cheryl L. Rock, PhD, RD¹; Cynthia Thomson, PhD, RD²; Ted Gansler, MD, MPH, MBA ¹ ³; Susan M. Gapstur, MPH, PhD⁴; Marjorie L. McCullough, ScD, RD⁴; Alpa V. Patel, PhD⁴; Kimberly S. Andrews, BA⁵; Elisa V. Bandera, MD, PhD⁶; Colleen K. Spees, PhD, MEd, RDN⁷; Kimberly Robien, PhD, RD⁸; Sheri Hartman, PhD⁹; Kristen Sullivan, MPH, MS⁵; Barbara L. Grant, MS, RD¹⁰; Kathryn K. Hamilton, MS, RD¹¹; Lawrence H. Kushi, ScD¹²; Bette J. Caan, DrPH¹²; Debra Kibbe, MS, PHR¹³; Jessica Donze Black, RD, MPH¹⁴; Tracy L. Wiedt, MPH⁵; Catherine McMahon, MPH¹⁵; Kirsten Sloan, BA¹⁵; Colleen Doyle, MS, RD⁵

- Main Sections of this paper
 - Follow a healthy eating pattern
 - Be Physically Active
 - Avoid Alcohol
 - Maintain Healthy Body Weight

Diet and Cancer – What do the ACS Guidelines say?

- A healthy eating pattern includes:
 - Foods that are high in nutrients in amounts that help achieve and maintain a healthy body weight;
 - A variety of vegetables—dark green, red, and orange, fiber-rich legumes (beans and peas), and others;
 - Fruits, especially whole fruits with a variety of colors; and
 - Whole grains.

- A healthy eating pattern limits or does not include:
 - Red and processed meats;
 - Sugar-sweetened beverages; or
 - Highly processed foods and refined grain products.

Whole Food Plant Based Diet

How does this diet impact health?

- High nutrient density, low calorie density → weight loss
- Fiber
 - helps remove bile acids
 - Improved gut microbiome
- Phytonutrients can help reduce inflammation
- Overlaps with recommendations for HTN, CAD, DM, etc



What foods to avoid and why?



Processed foods – added sugars and highly processed foods promote obesity and poor metabolic health



Processed meats are a known carcinogen and red meats are a probably carcinogen (WHO/IARC)

23% increased risk of CRC per 2 oz processed meat 22% increased risk of CRC per 3 oz red meat serving

red meat). In the absence of such knowledge, while recognizing that the magnitude of increased risk has some uncertainty, the ACS recommends choosing protein foods such as fish, poultry, and beans more so than red (unprocessed) meat, and, for individuals who consume processed meat products, to do so sparingly, if at all.

What about taking supplements?

It is better to eat the foods which contain the nutrients

The USPSTF recommends against the use of beta-carotene supplements, either alone or in combination, for the prevention of cancer or cardiovascular disease. **D recommendation**.

The U.S. Preventive Services Task Force (USPSTF) concludes that the evidence is insufficient to recommend for or against the use of supplements of vitamins A, C, or E; multivitamins with folic acid; or antioxidant combinations for the prevention of cancer or cardiovascular disease. **I recommendation**.

 Some studies on supplements as cancer prevention showed increased risk of cancer

Physical Activity

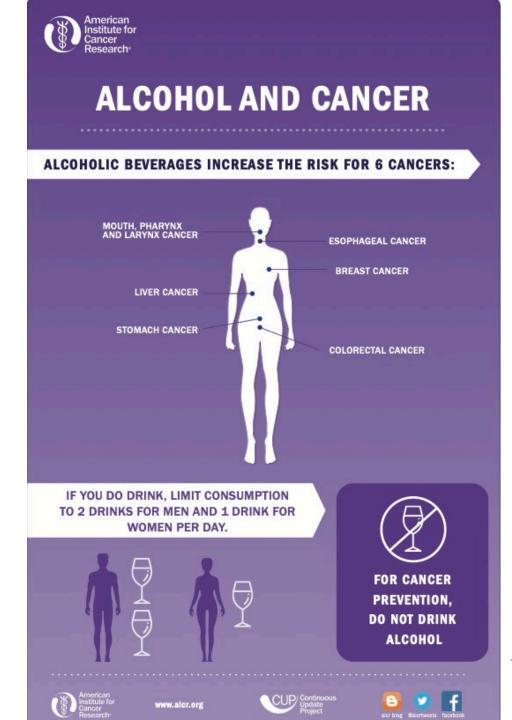
- 150-300 minutes per week
- Any amount matters and it adds up

ACTIVITY CAN HELP:

- Reduce symptoms of treatment-related side effects
- Elevate mood
- Reduce anxiety and depression
- Improve sleep
- Boost energy levels and reduce fatigue
- Maintain physical functioning
- Support bone health
- Improve quality of life



Avoid Alcohol



https://www.aicr.org/

Maintain a healthy body weight

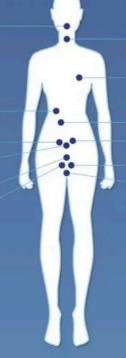
HAVING OVERWEIGHT AND OBESITY INCREASES RISK FOR 12 CANCERS

MOUTH, PHARYNX AND LARYNX CANCER

LIVER CANCER

KIDNEY CANCER STOMACH CANCER

COLORECTAL CANCER
ADVANCED PROSTATE
CANCER



ESOPHAGEAL CANCER

POST-MENOPAUSAL BREAST CANCER

GALLBLADDER CANCER PANCREATIC CANCER

OVARIAN CANCER

ENDOMETRIAL CANCER

PROTECT YOURSELF!

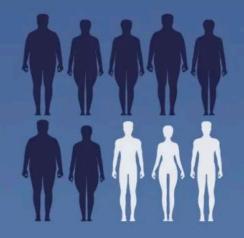
MOVE MORE

EAT SMART



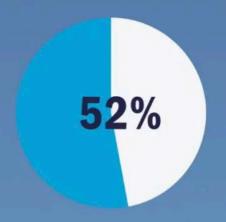


AND YET...



7 in 10 Americans currently have overweight or obesity.

AND...



Only about half of all Americans are even aware of the obesity-cancer link.

Lifestyle Dose Effect: The more intense the lifestyle intervention, the more benefit

Circulation

Volume 138, Issue 4, 24 July 2018; Pages 345-355 https://doi.org/10.1161/CIRCULATIONAHA.117.032047



ORIGINAL RESEARCH ARTICLE

Impact of Healthy Lifestyle Factors on Life Expectancies in the US Population

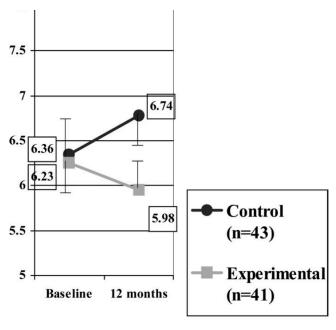
Yanping Li, MD, PhD*, An Pan, PhD*, Dong D. Wang, MD, ScD, Xiaoran Liu, PhD, Klodian Dhana, MD, PhD, Oscar H. Franco, MD, PhD, Stephen Kaptoge, PhD, Emanuele Di Angelantonio, MD, PhD, Meir Stampfer, MD, DrPH, Walter C. Willett, MD, DrPH, and Frank B. Hu, MD, PhD

- 1. Don't Smoke
- 2. BMI 18.5-24.9
- 3. > 30 minutes of exercise/day
- 4. Moderate alcohol (<1/day)
- 5. Healthy Diet (more: fruits, vegetables, whole grains, beans; less: sugar sweetened beverage, trans fats, red meat, processed meat)

Best Quintile in Lifestyle Score -- Lifespan is 12 years higher in men, 14 years higher in women Best Quintile had substantial cancer risk reduction, cardiovascular risk reduction, and all cause mortality reduction (biggest reduction to cardiovascular risk)

INTENSIVE LIFESTYLE CHANGES MAY AFFECT THE PROGRESSION OF PROSTATE CANCER

DEAN ORNISH,**,† GERDI WEIDNER, WILLIAM R. FAIR, RUTH MARLIN, ELAINE B. PETTENGILL, CAREN J. RAISIN, STACEY DUNN-EMKE, LILA CRUTCHFIELD, F. NICHOLAS JACOBS, R. JAMES BARNARD, WILLIAM J. ARONSON, PATRICIA McCORMAC, DAMIEN J. McKNIGHT, JORDAN D. FEIN, ANN M. DNISTRIAN, JEANMAIRE WEINSTEIN, TUNG H. NGO, NANCY R. MENDELL AND PETER R. CARROLL‡



P = 0.016

FIG. 1. Mean changes \pm SEM in PSA in ng/ml between experimental and control groups after 1 year.

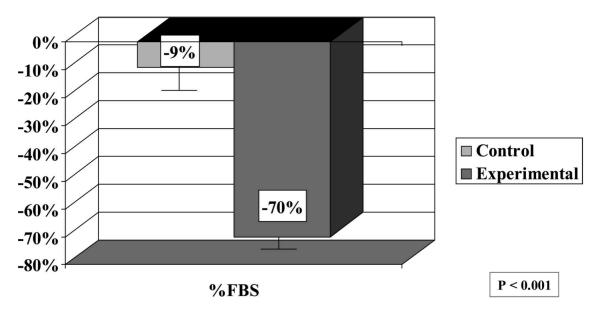


FIG. 2. Mean changes \pm SEM in percent serum stimulated LNCaP cell growth from baseline to 1 year in experimental and control groups.

Complementary or Alternative Medicine is not meant to be equivalent to oncology care

Ann Surg Oncol (2011) 18:912-916 DOI 10.1245/s10434-010-1487-0

Annals of

ORIGINAL ARTICLE - BREAST ONCOLOGY

Alternative Therapy Used as Primary Treatment for Breast Cancer Negatively Impacts Outcomes

Esther Han, MD¹, Nathalie Johnson, MD, FACS², Tammy DelaMelena, MD², Margaret Glissmeyer, PA-C², and Kari Steinbock, PA-S²

¹Oregon Health & Science University, Portland, OR; ²Legacy Health System, Cancer Services, Portland, OR

ABSTRACT

Background. The use of complementary and alternative medicine (CAM) has escalated over the past decade, despite the fact that clinical studies validating the efficacy of CAM remain sparse. Clinicians frequently encounter patients who reject standard treatment, but data on outcomes of patients choosing CAM as primary treatment for breast cancer are also lacking.

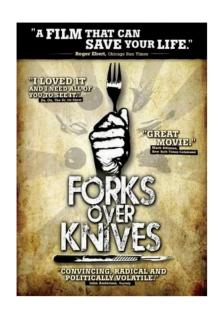
Conclusions. Iternative therapies used as primary treatment for breast cancer are associated with disease progression and increased risk of recurrence and death. Diminished outcomes are more profound in those delaying/ omitting surgery. Reviewing these results with our patients may help bridge the gap between CAM and standard treatments.



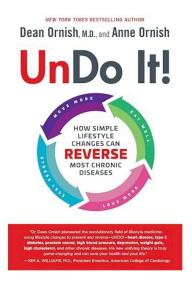
Lifestyle and Diet in Cancer Survivorship

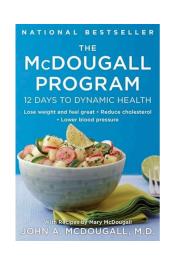
- Key Take Home Messages
 - A Cancer Prevention/Survivorship diet should increase consumption of plant-based food
 - A Cancer Prevention/Survivorship should reduce processed foods, red meat and consider completely omitting processed meats.
 - There is significant synergy between a cancer risk reduction diet and lifestyle recommendations to reduce other chronic diseases
 - Exercise, reducing alcohol, not smoking, and maintaining healthy weight can impact cancer and cardiac risks in addition to diet
 - The more lifestyle recommendations are followed, or more intensely followed, the better the potential outcome.

More places to learn more about diet and lifestyle







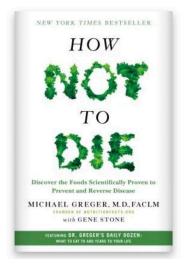












Community Based Support for Breast Cancer Survivors



OUR STORY



- To Life! is a non-profit located in Delmar, NY with satellite wig and mastectomy product boutiques in Saratoga and Amsterdam.
- Since 1998, To Life! has been serving the Capital Region and surrounding 10 counties providing education, support, programs and services to breast cancer patients, families and caregivers.



TO LIFE! OFFERINGS



- Support Groups & Peer Mentoring
- Women's Health and Wellness Programs
- Resources
- Boutique Fitting Services
- Breast Health Education

Boutique locations:

Delmar, Saratoga and Amsterdam

Boutiques visits by appointment for privacy and personalized service



CANCER SURVIVORSHIP

- An individual is considered a cancer survivor from the time of diagnosis through the rest of life. As a result, what being a survivor means to you may change over time.
- As early detection methods and cancer treatments have gotten better, the number of people who have had cancer has gone up greatly over the last 50 years in the United States. In 1971, there were 3 million people with cancer. According to the latest figures (2022), there were 18 million people living with a history of cancer in the United States.¹

¹Cancer.net/survivorship



STATISTICS:

- 12.4 % of women (1 in 8) will be diagnosed with breast cancer in their lifetime (1 in 833 men).
- 81% of breast cancer is diagnosed in women aged 50+.
- In 2021, Breast cancer became the most diagnosed cancer in US women overall, and the most common cancer globally. It is the second leading cause of death among US women.
- In women under age 45, breast cancer is more common in Black women than white women in the US, and Black women are 40% more likely to die of breast cancer.
- White and Asian/Pacific Islander women are more likely to be diagnosed with localized breast cancer than Black, Hispanic, and American Indian/Alaska Native women.



RISKS FOR BREAST CANCER

- Assigned sex at birth is female
- Aging
- Previous breast cancer as well as atypical ductal hyperplasia and atypical lobular hyperplasia (ADH, ALH)
- Breast density
- Family history and first-degree relative
- Genetics
- Early menstruation onset <12 /late menopause >55
- Environmental, chemical and pesticide exposure
- Radiation exposure due to cancer treatment to chest under age 20 (i.e. Hodgkin diseases)



MORE ABOUT RISK

- Lifestyle:
 - Poor Diet
 - Obesity
 - Lack of Exercise
 - Smoking/Vaping
 - Alcohol
- Later Pregnancy/No Pregnancy
- Not Breastfeeding
- Hormone Replacement Therapy



19,160

New cases of breast cancer in women estimated to be diagnosed in New York State in 2024*

New Yorkers hearing "You have breast cancer."

1,597 368 52 2 per month per week per day per hour

*American Cancer Society 2024 Cancer Statistics Center



PSYCHOLOGICAL IMPACT

- Fear of talking
- Terror, trauma
- Anger
- Losing intimates

- Depression
- Anxiety
- Distancing
- Cancer phobia

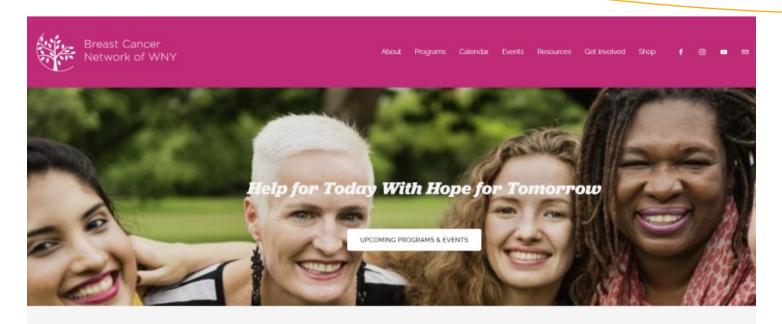


INNER SIDE OF BREAST CANCER

- Feminine identity
 - Sexuality
 - Body image
 - Hair loss
 - Fertility
- Physical disability
 - Aftereffects
 - Lymphedema

- Guilt
 - What did I do wrong?
 - Genetic implications for daughters
 - Role performance,
 - home and work
- Fear of dying
 - Abandonment





Supporting the well being of all Western New Yorkers impacted by breast cancer

Buffalo-Breast Cancer Network of WNY https://www.bcnwny.org/

Breast Cancer Support and Education

Roswell Park Comprehensive Cancer Center

- Group for patients under 50 years old: Third Tuesday of every month, 5:30-7 p.m. <u>Learn more</u>
 Group for patients over 50 years old: Fourth Thursday of every month, 5:30-7 p.m. <u>Learn more</u>
 Metastatic Group: Second Wednesday of every month, 5-7 p.m. <u>Learn more</u>
- Location: The 11 Day Power Play Cancer Resource Center
 *Virtual option is available for the Metastatic Support Group.





Breast Cancer Coalition of Rochester

https://bccr.org/



Syracuse

UPSTATE- https://www.upstate.edu/cancer/cancer-care/programs/bcp/bcp-support-group.php

- Pink Champions Support Group
- Pink Champions is a breast cancer support group for men and women, regardless of diagnosis, stage or where you had your care. Join us for free, monthly meetings that include networking, support, education, advocacy, awareness and fun. Caregivers and loved ones are welcome, too!

CROUSE- https://www.crouse.org/breast-cancer-support/

Pink Therapy Breast Cancer Support Group





Kingston Breast Cancer Options-

https://breastcanceroptions.org/home_page0.aspx





New York City
SHARE-

https://www.sharecancersupport.org/



Long Island

- Bayshore- Breast Cancer Help, Inc. <u>http://www.breastcancerhelpinc.org/</u>
- Maurer Foundationhttps://www.maurerfoundation.org/
- North Fork Breast Cancer Coalitionhttps://www.northforkbreasthealth.org/
- Adelphi Breast Cancer Hotline and Supporthttps://breast-cancer.adelphi.edu/







70 Life!

www.tolife.org

518-439-5975

info@tolife.org

Main Office: 410 Kenwood Avenue, Delmar, NY 12054

110 Spring Street, Saratoga Springs, NY 12866

1700 Riverfront Center, Amsterdam, NY 10210





Scheduled sessions and subject matter discussants

Session 1: Introduction and Survivorship 101		
January 11, 2024 12-1:00pm	Maureen Killackey, MD, FACS, FACOG Tessa Flores, MD Sylvia K. Wood PhD, DNP, ANP-BC, AOCNP Facilitator: Christina Crabtree-Ide, PhD, MPH	
Session 2: Survivorship Teams		
February 8, 2024 12-1:00pm	Tessa Flores, MD Gregory P. Rys, NP Maura Abbott, PhD, AOCNP, CPNP-PC, RN Facilitator: Maureen Killackey, M.D.	
Session 3: Medical Issues in Survivorship		
March 14, 2024 12-1:00pm	Craig D Hametz, MD, FACC, FASE, FASNC Tessa Flores, MD Facilitator: Maureen Killackey, M.D.	

Session 4: Survivorship Lifestyle Behaviors		
April 11, 2024 12-1:00pm	Eileen Bird Timothy Korytko, MD Facilitator: Christina Crabtree-Ide, PhD, MPH	
Session 5: Survivorship and Sexual Health		
May 9, 2024 12-1:00pm	Kristin Sobieraj, PA Lori Davis, DNP, FNP-C, ACNP-C, CSC, NCMP Facilitator: Tessa Flores, M.D.	
Session 6: Supportive Care in Survivorship		
June 13, 2024 12-1:00pm	Anne Moyer, PhD Robin Eggeling Facilitator: Christina Crabtree-Ide, PhD, MPH	