

WELCOME!

While we are getting set up....

We would like to get to know our audience.



Please put your answer to the following questions in the chat.



Where are you joining us from today?

Which organization are you affiliated with?



Housekeeping

Please mute your line.

If you have a question, please type it in the Chat Box.

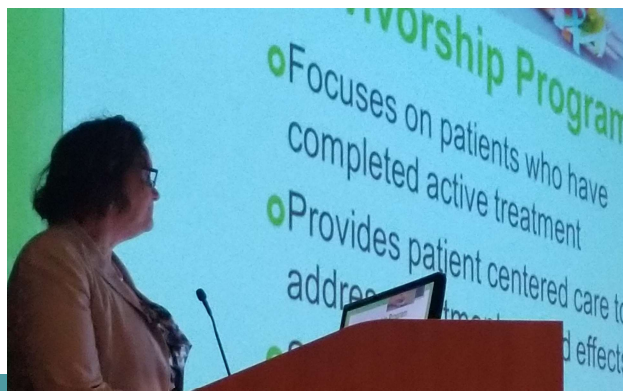
Questions will be answered after the panel discussion.

This meeting is being recorded.

A link to the recording will be e-mailed to everyone who registered.

About Us

We are New Yorkers from all walks of life who work together to reduce the burden of cancer.



Join Today!



- **Learn about state-wide cancer prevention efforts**
 - **Find resources to promote and implement Cancer Plan priorities and measure progress**
 - **Collaborate with other members to achieve Cancer Plan goals and objectives**
- Join an Action Team to implement Cancer Plan priorities



Colorectal Cancer



HPV Coalition



Skin Cancer



HEAL (Healthy Eating and Active Living)



Environmental Carcinogens



Lung Cancer



Survivorship



NYSCC Quarterly Meeting Series

Upcoming Meetings

The next Quarterly Member Meeting series will kick off in December.



Healthy Eating and Active Living (HEAL) Action Team Presents: Enhancing Wellness through Nutrition, Activity, and Policy for Cancer Patients and Survivors

June 20, 2024

| 11 AM – 12:30 PM



NYSCC QUARTERLY
MEETING SERIES



Pre-Webinar Poll

Please, rate your knowledge of healthy eating and active living as a cancer patient, survivor, or clinician.



Pre-Meeting Poll

Who is participating today? Are you a:

- Cancer patient
- Cancer Survivor
- Clinician
- Researcher
- Policy Advisor
- Other




HEAL Action Team



Host: Tania Weiss
Executive Director
Cancer Support Team



Agenda

- HEAL Action Team: Who we are.
 - Presentation: Healthy Eating for Cancer Survivors
 - Presentation: Active Living for Cancer Patients and Survivors
 - Panel Discussion: Food Insecurity and Health Policy
- 



Co-Leader of the HEAL Action Team



Dr. Erica Phillips



**Associate Director of the Office of
Community Outreach and Engagement**



**Meyer Cancer Center
Weill Cornell Medicine
New York-Presbyterian**

Presentation: Healthy Eating for Cancer Survivors



Speaker: Francesca Maglione, MPH, RDN, CDN, CSO

**Meyer Cancer Center
Weill Cornell Medicine
New York-Presbyterian**





Nutrition and Cancer Survivorship

Francesca Maglione, MPH, RDN, CDN, CSO



Learning Objectives

- Describe the population of cancer survivors.
- Understand the short- and long-term nutrition impact symptoms (NIS) from cancer treatment.
- Describe lifestyle interventions for cancer survivorship.
- Discuss nutrition recommendations for survivorship.

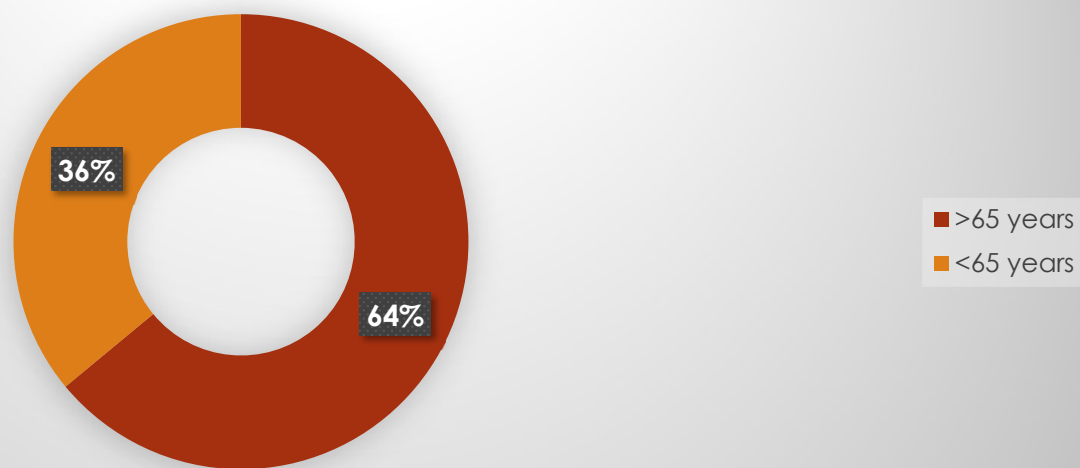


Who is a “cancer survivor”?

- 18.1 million American cancer survivors.
 - Individuals in active treatment, recovery, or living with advanced disease.
 - Primary focus on those living after initial treatment who are disease-free or living with stable disease.
- Survival rates have improved
 - 70% of survivors live beyond 5-year monitoring period
 - 24.4% increase in survivors by 2032
- 22 million Americans will be living with a history of cancer

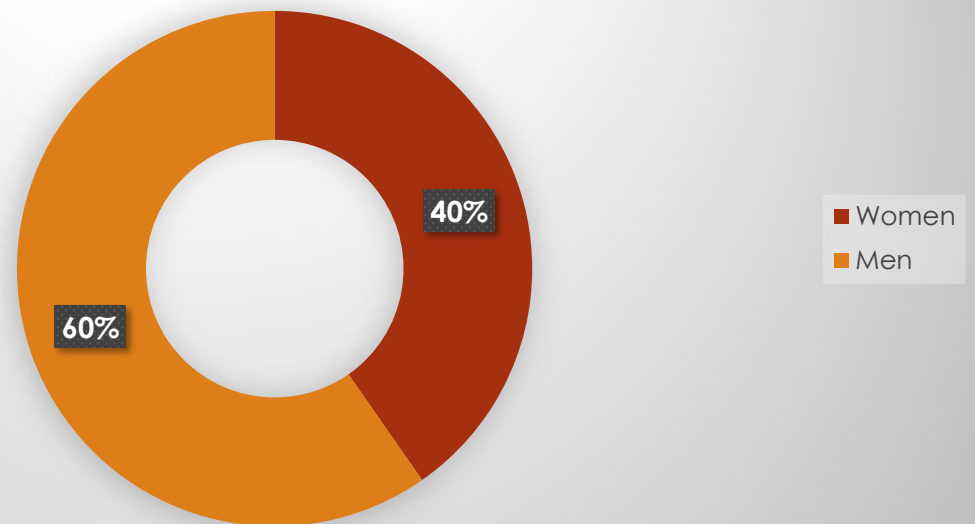
Who is a “cancer survivor”?

US Cancer Survivors by Age

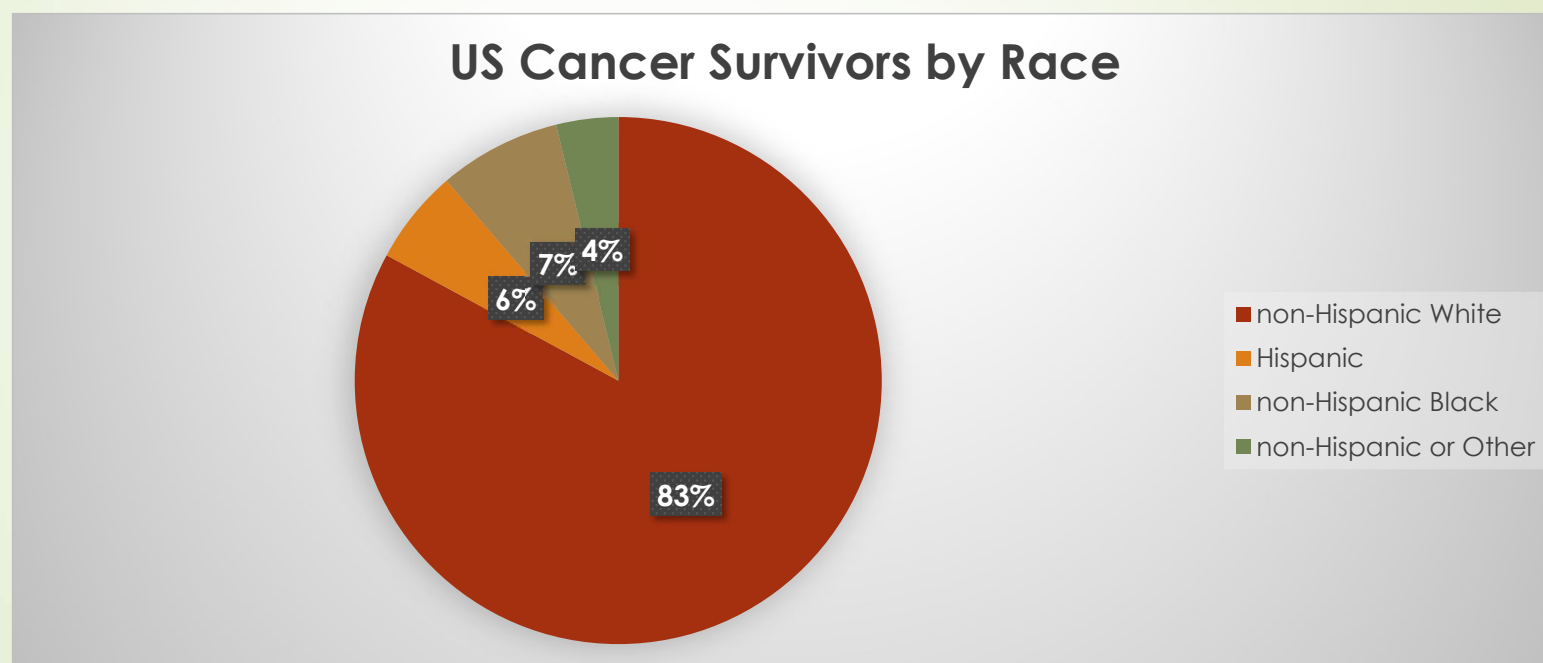


Who is a “cancer survivor”?

US Cancer Survivors by Sex



Who is a “cancer survivor”?



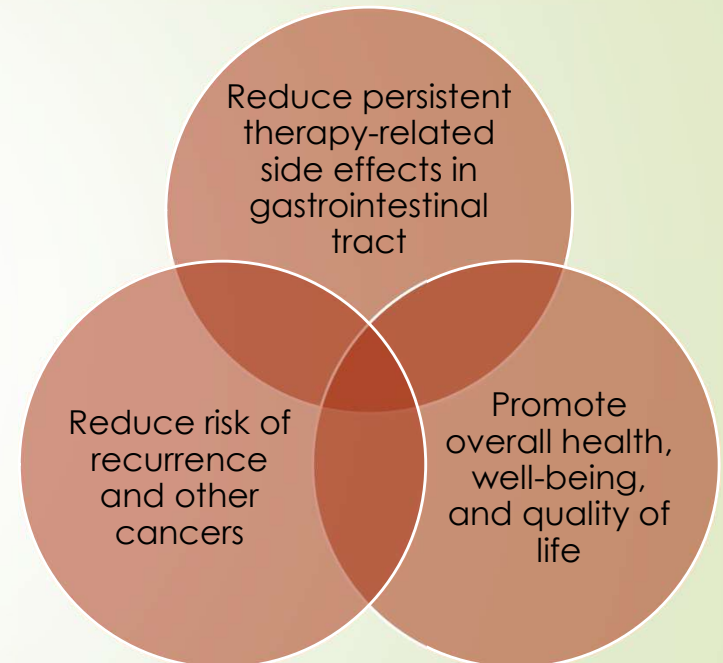


Lifestyle Interventions for Cancer Survivors

- Symptom Management
 - Diet
 - Weight
 - Physical activity
 - Stress
 - Sleep
- 

Manage post-treatment NIS

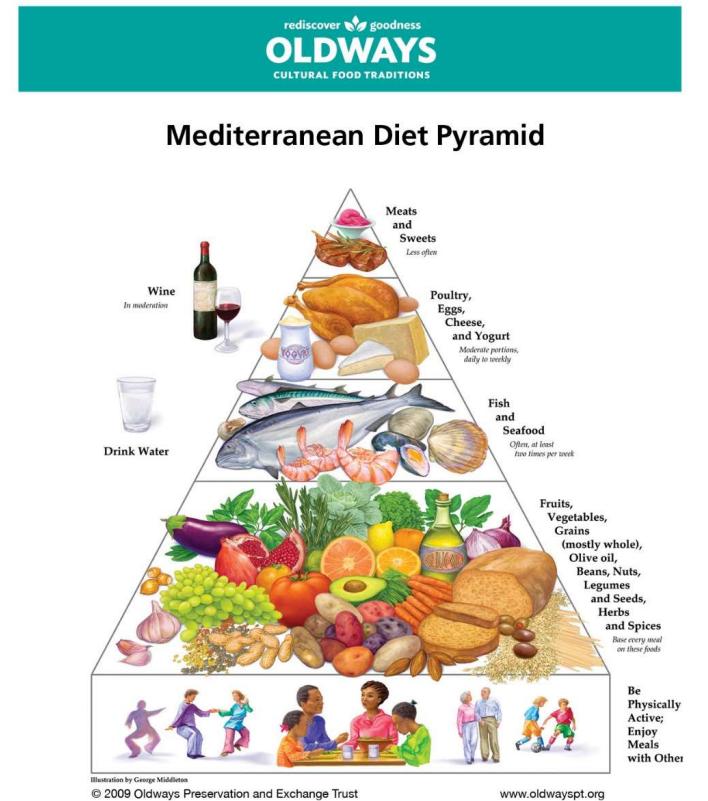
- Nausea/Vomiting
- Xerostomia (dry mouth)/Loss of salivary function
- Loss of dentition
- Dysphagia
- Constipation/Diarrhea
- Malabsorption
- Impaired bone health/Osteoporosis
- Radiation enteritis
- Thyroid issues
- Early menopause
- Lymphedema
- Weight changes/changes in body composition
- Metabolic syndrome - high blood pressure, high blood sugar, excess body fat around the waist, and abnormal cholesterol levels
- Increased risk for heart disease, type 2 diabetes mellitus, and stroke



Healthy Mediterranean-Style Diet

- Lower cardiovascular and all-cause mortality after a cancer diagnosis.

1. Ratjen I, Schafmayer C, Di Giuseppe R, et al. Postdiagnostic mediterranean and healthy nordic dietary patterns are inversely associated with all-cause mortality in long-term colorectal cancer survivors. The Journal of Nutrition. 2017;147(4):636-644. doi:10.3945/jn.116.244129





Nutrition Recommendations

- Fruit and vegetable intake may improve health of cancer survivors for noncancer outcomes and overall mortality.
 - 600g per day for total cancer
 - green-yellow vegetables and cruciferous vegetables
 - 800g per day for cardiovascular disease and all-cause mortality
 - apples/pears, citrus fruits, green leafy vegetables/salads and cruciferous vegetables

1. Aune D, Giovannucci E, Boffetta P, et al. Fruit and vegetable intake and the risk of cardiovascular disease, total cancer and all-cause mortality—a systematic review and dose-response meta-analysis of prospective studies. *Int J Epidemiol.* 2017;46(3):1029-1056. doi:10.1093/ije/dyw319
2. Hajishafiee M, Saneei P, Benisi-Kohansal S, Esmailzadeh A. Cereal fibre intake and risk of mortality from all causes, CVD, cancer and inflammatory diseases: a systematic review and meta-analysis of prospective cohort studies. *Br J Nutr.* 2016;116(2):343-352. doi:10.1017/S0007114516001938



Nutrition Recommendations

- High intake of fiber improved outcomes and mortality after cancer¹
- 25-30 g fiber per day
- 3-5 servings of fruit per day (1 serving = 1/2 cup fresh or juiced or 1/4 cup dried or cooked)
- 3-5 servings of non-starchy vegetables per day (1 serving = 1/2 cup cooked or 1 cup raw)
- 25-30 g fiber per day is a good goal

1. Aune D, Giovannucci E, Boffetta P, et al. Fruit and vegetable intake and the risk of cardiovascular disease, total cancer and all-cause mortality—a systematic review and dose-response meta-analysis of prospective studies. *Int J Epidemiol.* 2017;46(3):1029-1056. doi:10.1093/ije/dyw319

2. Hajishafiee M, Saneei P, Benisi-Kohansal S, Esmailzadeh A. Cereal fibre intake and risk of mortality from all causes, CVD, cancer and inflammatory diseases: a systematic review and meta-analysis of prospective cohort studies. *Br J Nutr.* 2016;116(2):343-352. doi:10.1017/S0007114516001938



Additional nutrition recommendations

- Protein intake 1.2g/kg/d¹
 - Reduced frailty in cancer survivors over 50
 - Postmenopausal women

- Limited evidence to support use of dietary supplements are protective against recurrence or mortality²
 - May be used to correct nutrient deficiencies

1. Beasley JM, Newcomb PA, Trentham-Dietz A, et al. Post-diagnosis dietary factors and survival after invasive breast cancer. *Breast Cancer Res Treat.* 2011;128(1):229-236. doi:10.1007/s10549-010-1323-z

2. Vernieri C, Nichetti F, Raimondi A, et al. Diet and supplements in cancer prevention and treatment: Clinical evidences and future perspectives. *Crit Rev Oncol Hematol.* 2018;123:57-73. doi:10.1016/j.critrevonc.2018.01.002



Conclusion

- Growing and aging population of cancer survivors
- Address post-treatment NIS and reduce risk of recurrence
- Focus on metabolic, cardiovascular and gut health to improve quality of life and overall well-being
- Mediterranean diet pattern may be helpful
- Maintain high intakes of fruits, vegetables, fiber, and protein
- Supplements may be helpful to correct nutrient deficiencies
- Focus on whole body health – nutrition is just one piece of the puzzle, stress, sleep, exercise, smoking, alcohol, and social determinants of health all play role in survivorship.

Presentation: Active Living for Cancer Patients and Survivors



Speaker: Dr. Neil M. Iyengar

Memorial Sloan Kettering Active Living Program





Memorial Sloan Kettering
Cancer Center

Mitigating Risk of Cancer Recurrence Through Lifestyle Modification

Neil M. Iyengar, MD

Associate Attending
Program Lead, MSK Healthy Living
Breast Medicine Service
Memorial Sloan Kettering Cancer Center
Associate Professor of Medicine
Weill Cornell Medicine
Associate Physician
Rockefeller University

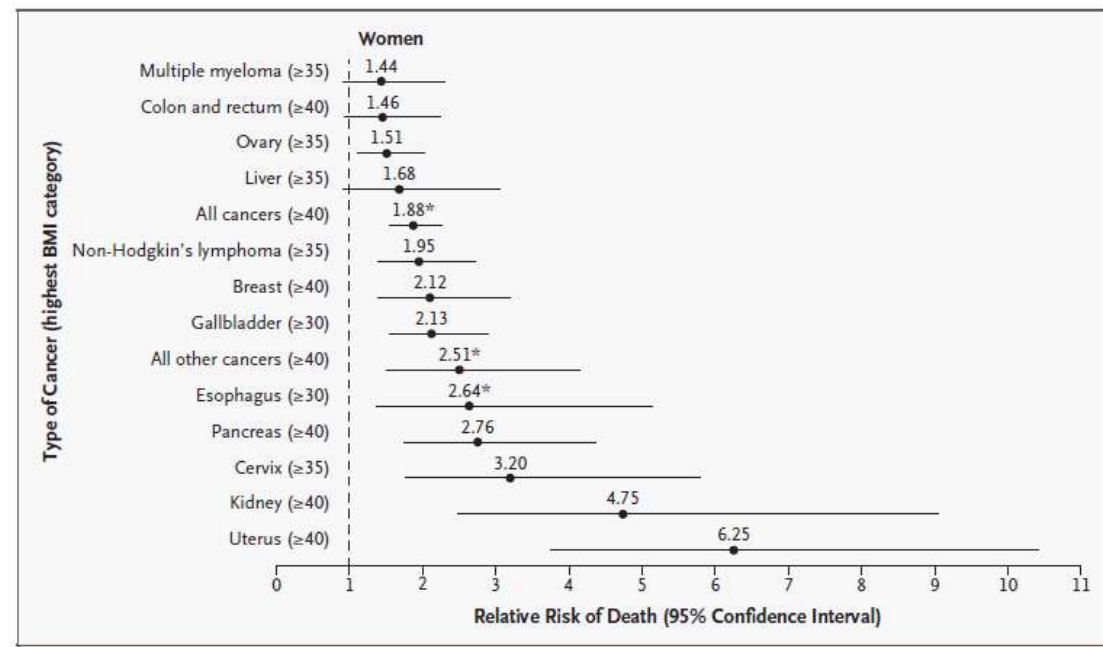
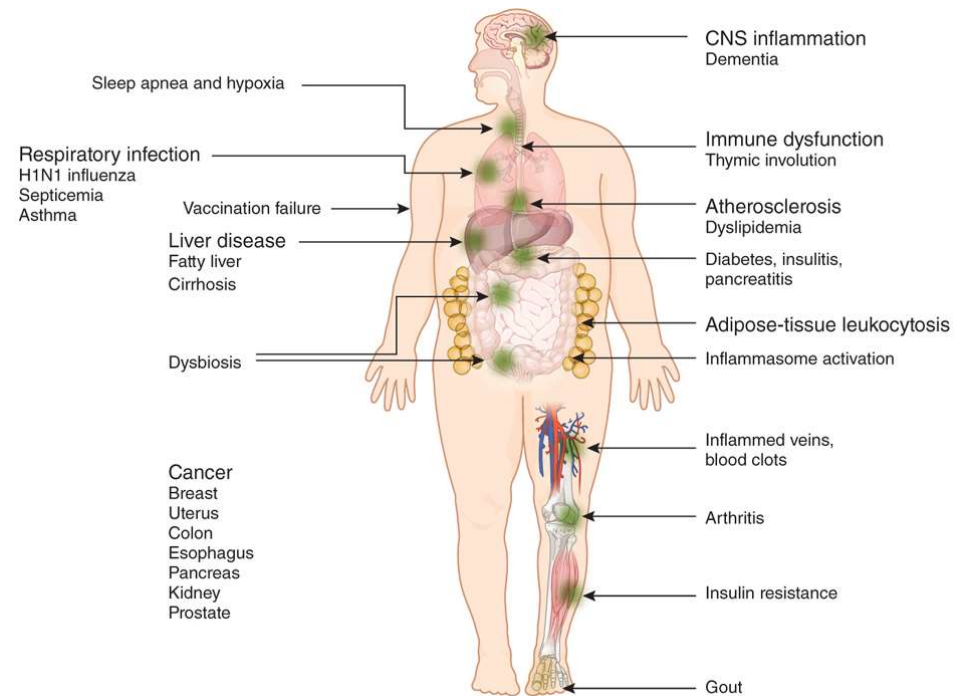
✉ iyengarn@mskcc.org

✉ @Neil_Iyengar

Disclosure Information

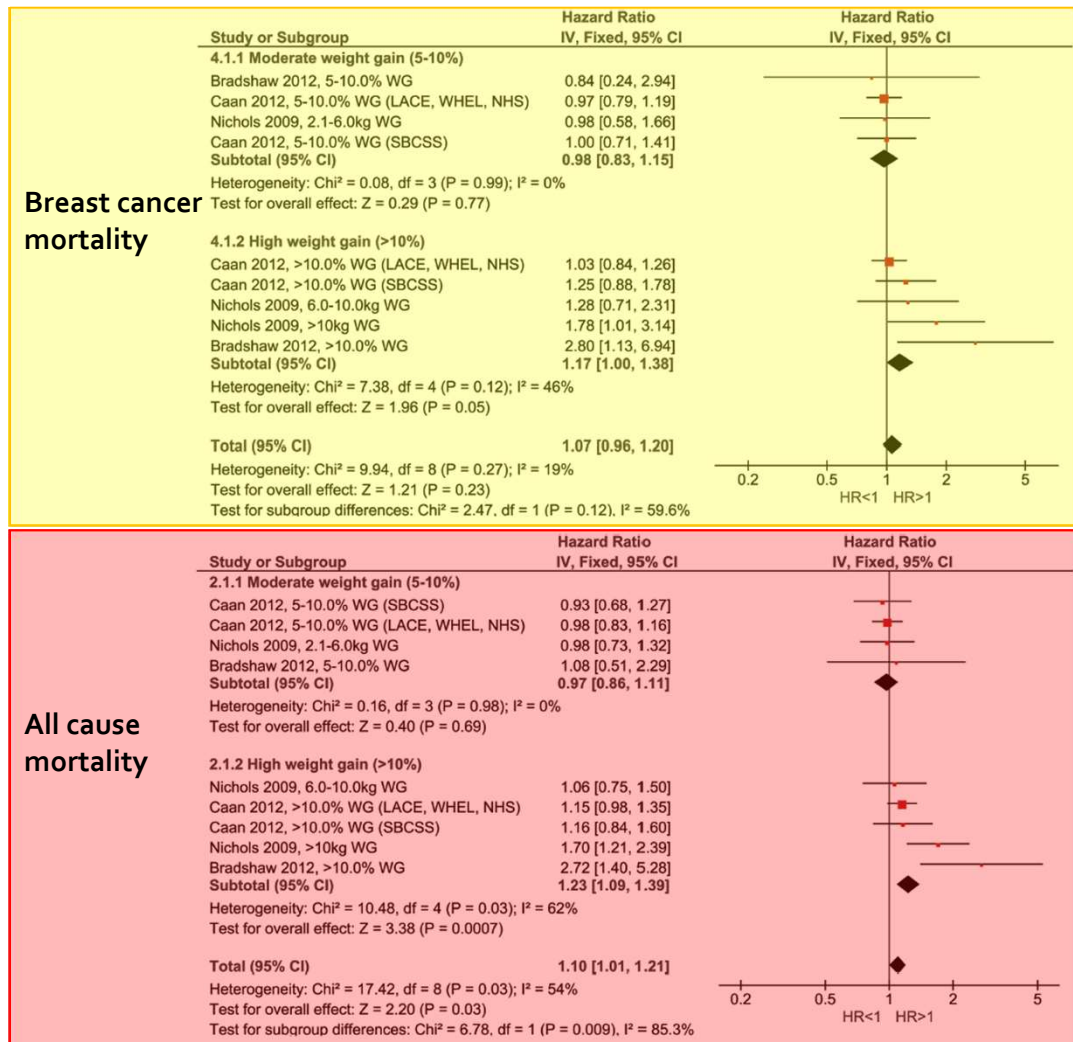
- I have the following financial relationships to disclose:
 - Consultant/Advisor: Pfizer, Novartis, Genentech/Roche, Seattle Genetics, AstraZeneca, Gilead, Menarini-Stemline, Daichii-Sankyo, TerSera Therapeutics, SynDevRx, BD Life Sciences, Puma
 - Speaker (Unbranded): MJH Life Sciences, OncLive, CurioScience, IntrinsiQ Health, Cardinal Health, DAVA Oncology
 - Editorial Positions: ONCOLOGY (Editor-in-Chief), npj Breast Cancer (Associate Editor)
 - Equity / Ownership: The Bettering Company, Complement Theory
 - Research Support (to institution): National Cancer Institute / National Institutes of Health, Breast Cancer Research Foundation, American Cancer Society, Conquer Cancer Foundation, Kat's Ribbon of Hope
 - Contracted Research (PI): Novartis, SynDevRx

Obesity and Cancer Outcomes

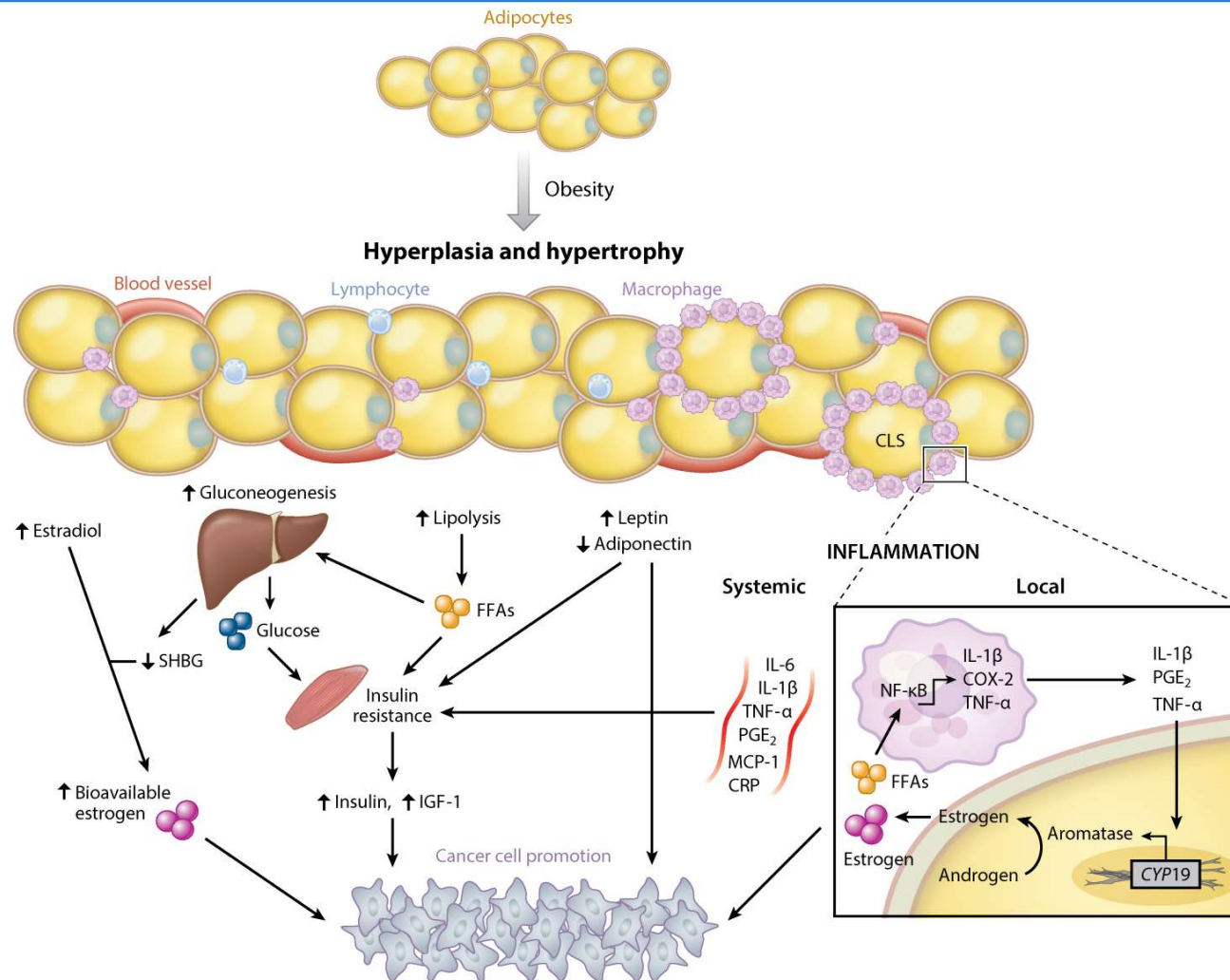


Weight Gain after Breast Cancer Diagnosis

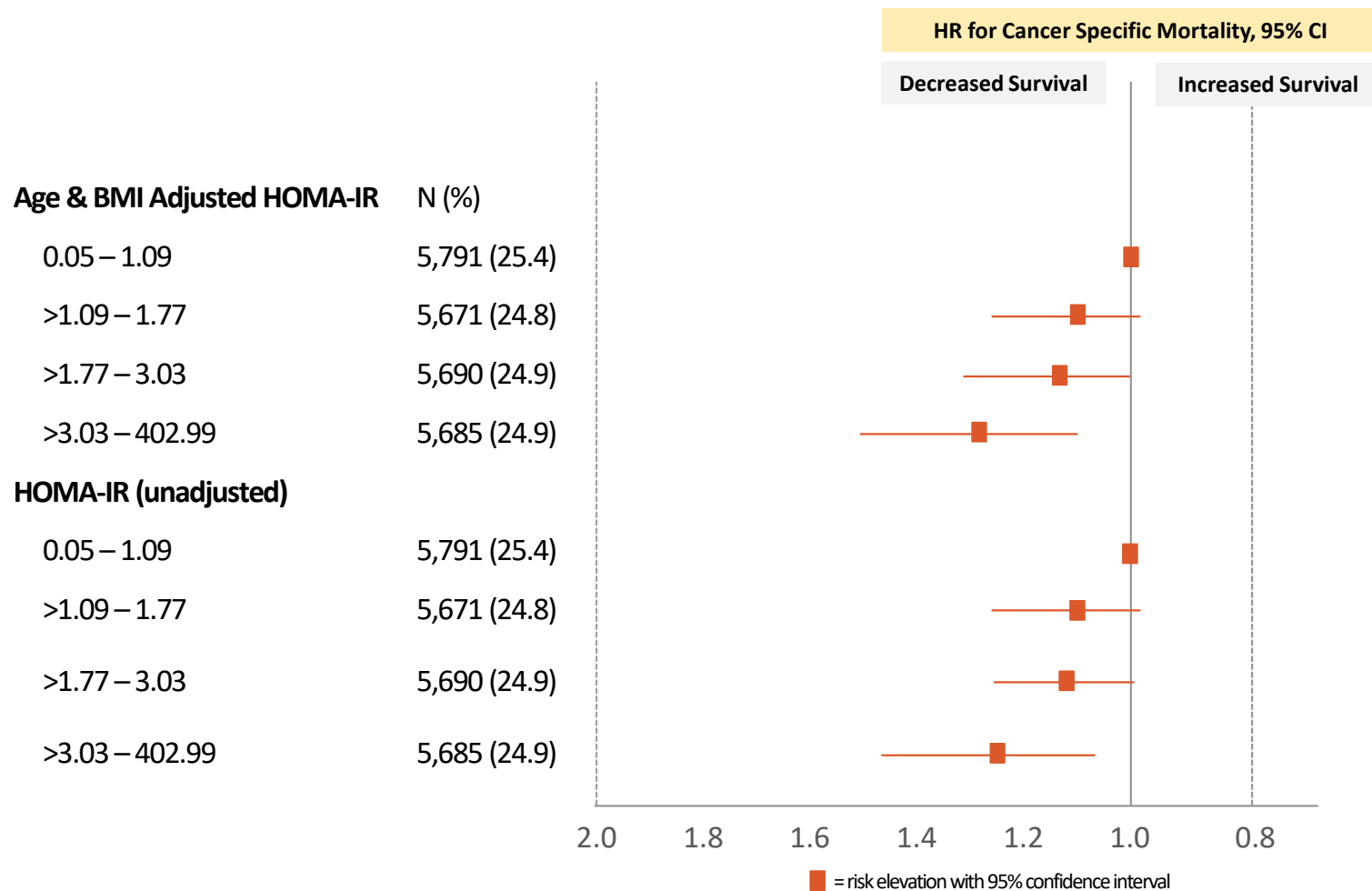
- Meta-analysis:
12 studies published
up to Dec 2014
- Weight gain after
diagnosis (over
average of 1.5 years)
is associated with
increased mortality



Adiposity Impacts Multiple Cancer Growth Pathways

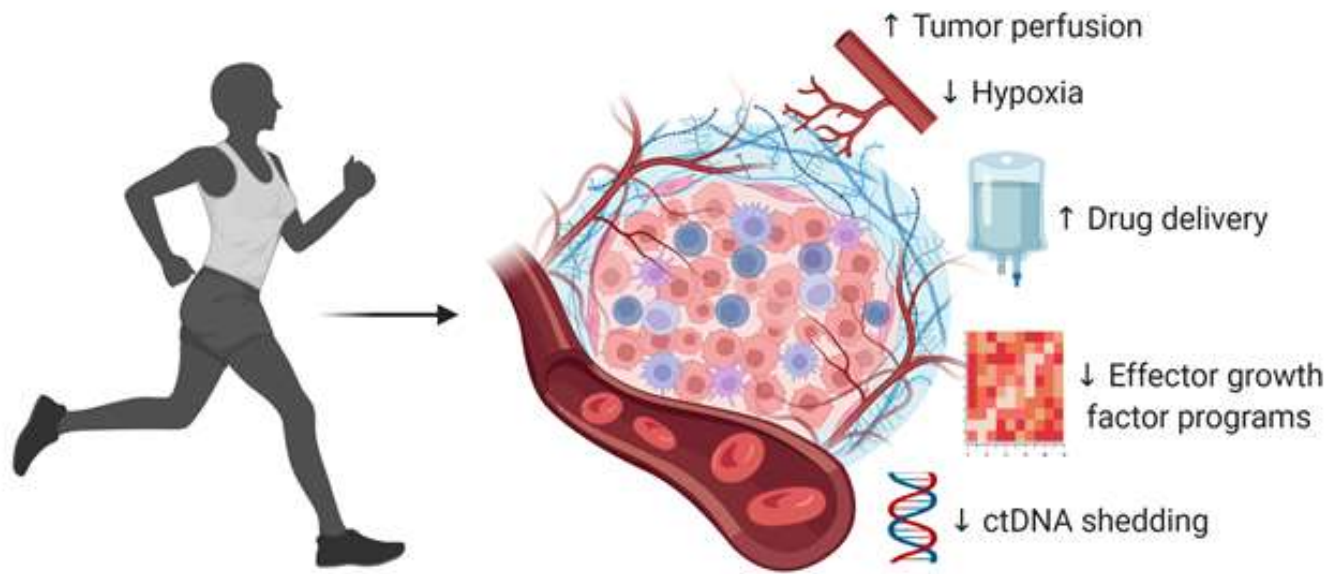


Insulin Resistance and Cancer-Specific Mortality

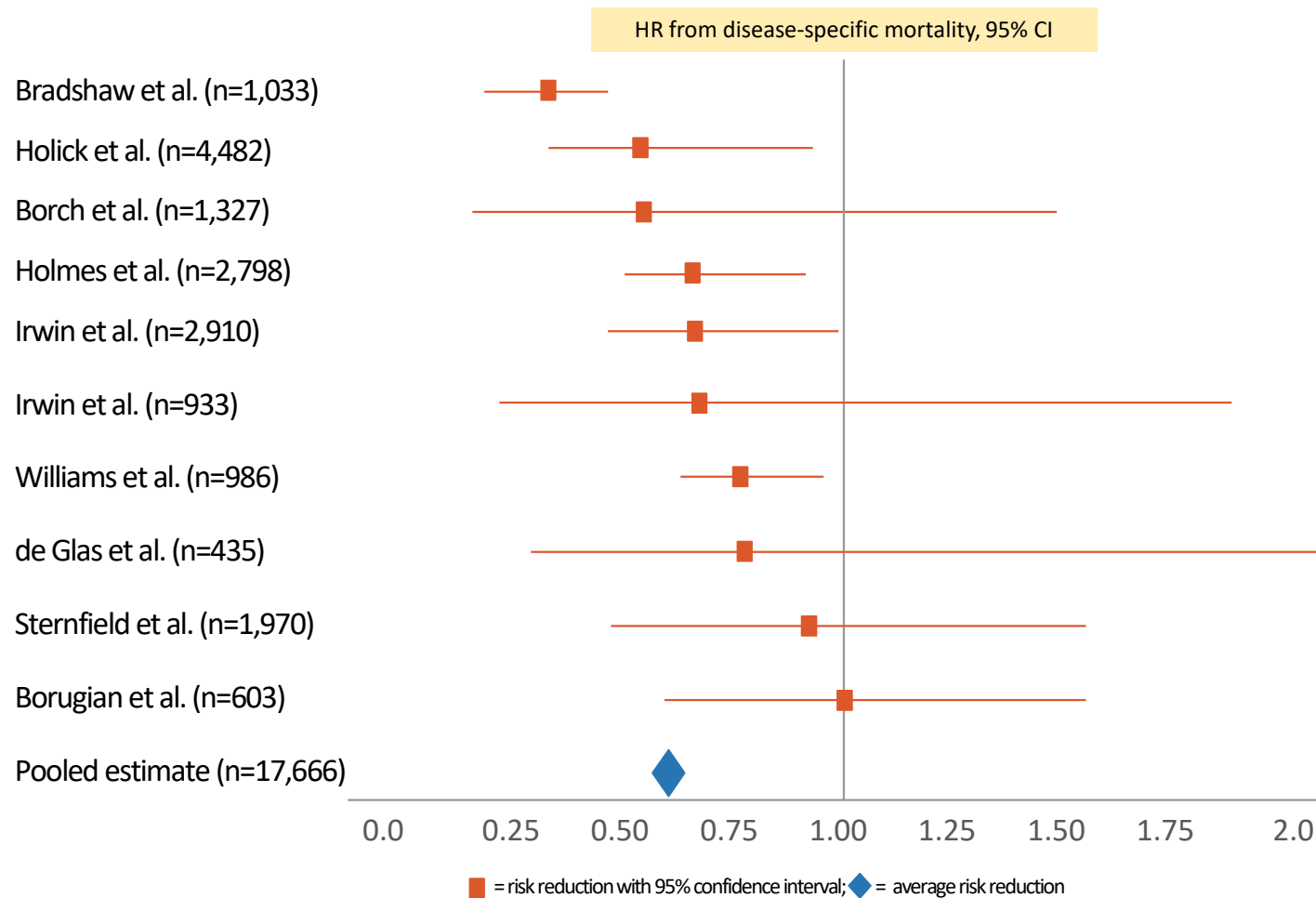


Adapted from Pan et al. JNCI 2020.

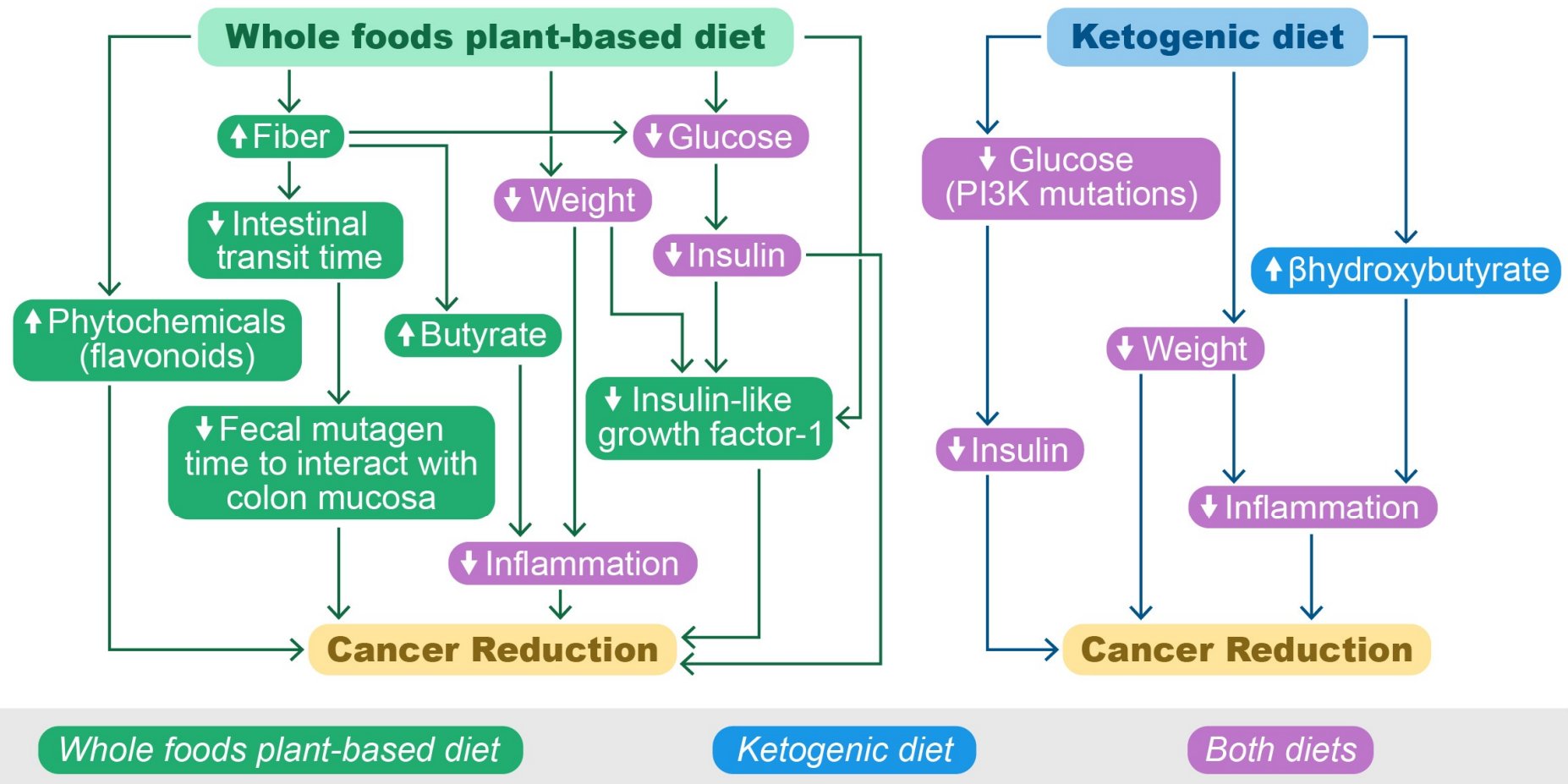
Lifestyle Interventions May Reduce Risk of Cancer Recurrence



Exercise & Breast Cancer-Specific Mortality



Plant-based versus Ketogenic Diet



Summary of Dietary Evidence



RECOMMENDATION

Eat a diet rich in wholegrains, vegetables, fruit and beans

Make wholegrains, vegetables, fruit, and pulses (legumes) such as beans and lentils a major part of your usual daily diet

- GOAL** Consume a diet that provides at least 30 grams per day of fibre¹ from food sources
- GOAL** Include in most meals foods containing wholegrains, non-starchy vegetables, fruit and pulses (legumes) such as beans and lentils
- GOAL** Eat a diet high in all types of plant foods including at least five portions or servings (at least 400 grams or 15 ounces in total) of a variety of non-starchy vegetables and fruit every day
- GOAL** If you eat starchy roots and tubers as staple foods, eat non-starchy vegetables, fruit and pulses (legumes) regularly too if possible

¹ Measured by the AOAC method.

Summary of Dietary Evidence



RECOMMENDATION

Limit consumption of red and processed meat

Eat no more than moderate amounts of red meat¹, such as beef, pork and lamb. Eat little, if any, processed meat²

GOAL If you eat red meat, limit consumption to no more than about three portions per week. Three portions is equivalent to about 350 to 500 grams (about 12 to 18 ounces) cooked weight of red meat.³ Consume very little, if any, processed meat

¹ The term 'red meat' refers to all types of mammalian muscle meat, such as beef, veal, pork, lamb, mutton, horse and goat.

² The term 'processed meat' refers to meat that has been transformed through salting, curing, fermentation, smoking or other processes to enhance flavour or improve preservation.

³ 500 grams of cooked red meat is roughly equivalent to 700–750 grams of raw meat, but the exact conversion depends on the cut of meat, the proportions of lean meat and fat, and the method and degree of cooking.

2018 WCRF/AICR Guidelines to Reduce Cancer Risk



Translating to Clinical Practice:

The MSK Healthy Living Program

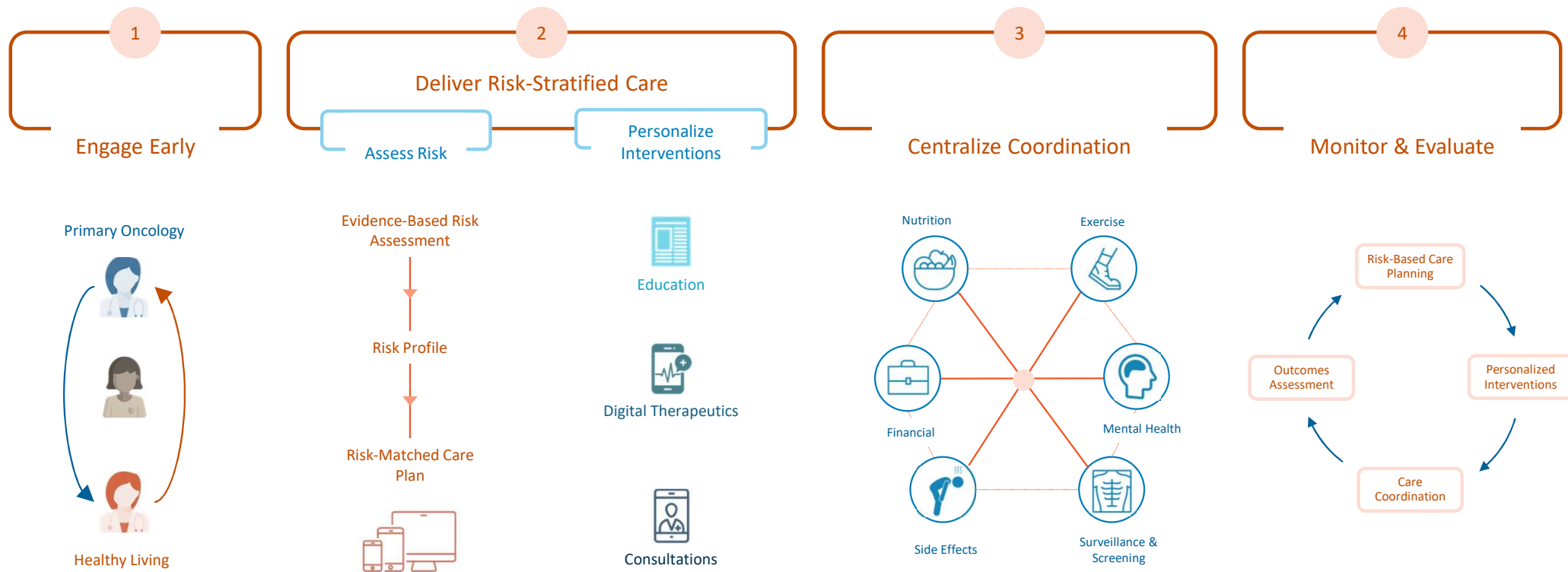


Marcia McFayden joined the MSK Healthy Living program soon after surgery for triple-negative breast cancer. She credits the program with helping her lose weight and rebuild strength through exercise and nutrition coaching and discovering valuable insights with other patients in support groups. "MSK Healthy Living is so enlightening and has made a big difference for my physical and emotional health," she says.

<https://www.mskcc.org/cancer-care/types/breast/msk-healthy-living>

THE HEALTHY LIVING PROGRAM MODEL: CORE COMPONENTS

A risk-based approach to assessment and management of a patient's lifestyle, behaviors, psychosocial context, and needs, delivered at the start of cancer care through a hybrid model.



Additional Resources

- Lifestyle Intervention Clinical Trials
- The Healthy Living Program at MSK
 - <https://www.mskcc.org/cancer-care/types/breast/msk-healthy-living>
- American Institute for Cancer Research Continuing Update Project
 - <https://www.aicr.org/>
- Diabetes Prevention Program at the YMCA
 - <https://ymcanyc.org/programs/health-fitness/weight-loss-wellness-programs>
- Digital Therapeutics
 - Smartphone Apps
- Comprehensive Weight Control Centers: role for weight loss drugs?
 - <https://www.mskcc.org/news/cancer-benefits-and-risks-from-ozempic-wegovy-and-other-weight-loss-drugs>

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Questions & Answers



**Panel Discussion:
Food Insecurity &
Health Policy**



**Co-Leader of the
HEAL Action Team
&
Panel Moderator**



Alexina Cather, MPH
Director of Policy and Special Projects
Wellness in the Schools

Panelists



Lucia Sanchez
Cancer Survivor &
Client of Feeding
Westchester



**Kathleen Nugent,
MSW, LCSW**
Senior Director of
Regional Programs
CancerCare



Natasha Pernicka, MPA
Executive Director
The Food Pantries for the
Capital District



Erika Hanson, JD
Clinical Instructor
Center for Health Law
and Policy Innovation
of Harvard Law
School



Michael Davoli, BA
Senior Director of
Government Relations –
New York,
American Cancer Society
Cancer Action Network

Questions & Answers



Join the HEAL Action Team!



Visit the New York State Cancer Consortium Website and become a member!

<https://www.nyscancerconsortium.org/teams/survivorship-lifestyle/>



Email us!

Muriel Pereira

mup7003@med.cornell.edu

Resources



HEAL Action Team Website: <https://sites.google.com/view/healactionteam>

If you would like to join HEAL, please contact Muriel Pereira at mup7003@med.cornell.edu or call 646.962.8793

New York State Cancer Consortium
NYSCC HEAL Action Team

Home Our Team Community Resources Publications & Clinical Guidelines Upcoming & Archived Agendas

New York State Cancer Consortium's
Healthy Eating and Active Living (HEAL) Action Team

Find food pantries in your area by visiting the Food Pantries Food Connect Map:
<http://map.thefoodpantries.org>

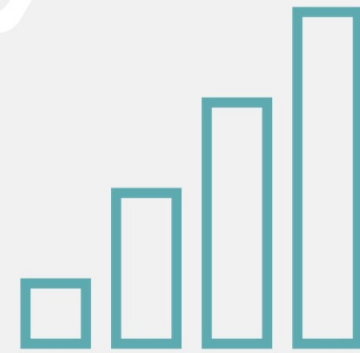
Food Connect Map, an initiative by The Food Pantries, is a repository of diverse community resources, spanning from food pantries, community and senior meals, summer feeding programs for children, and product access.

A map of the Northeast United States, including parts of Canada, showing the locations of food pantries marked with red dots. The map covers areas from Toronto and Montreal in the north down to Washington D.C. and Philadelphia in the south, and from the Atlantic coast west to the Great Lakes. Major cities like New York, Boston, and Philadelphia are labeled.

Email us!
Muriel Pereira: mup7003@med.cornell.edu

Post-Meeting Poll

- If you are a cancer patient or survivor, have you ever been asked about food insecurity?
- If you are a healthcare provider, do you regularly screen your cancer patients for food insecurity?



Post-Webinar Poll

- What is your opinion of the balance of lecture and interactivity in this course?



Join the Consortium and Attend Upcoming Meetings

- **Our next Quarterly Member Meeting Series will kick off in December.**
- **Visit our website to view past meetings.**



Thank you for Attending



cancerconsortium@health.ny.gov

New York State



Cancer Consortium

