



UPCON
Uniting Primary Care and Oncology

8th Annual

CANCER DAY FOR PRIMARY CARE



FRIDAY, JANUARY 27, 2012

CANCERCARE MANITOBA

Cancer Day for Primary Care

Friday, January 27, 2012

Arnold Greenberg Lecture Theatre (ON2134)
CancerCare Manitoba
675 McDermot Avenue

Morning Session

0830 Registration

0900 Welcome & Introductions
- Dhali Dhaliwal, ChB, MD (UK), FRCP
- Jeff Sisler, MD, MCISc, FCFP

0910 Getting to the Diagnosis
When a headache may be a brain tumor
- Marshall Pitz, MD, MHSc, FRCPC

When blood in the urine may be cancer
- Darrel Drachenberg, BSc, MD, FRCSC

0950 Discussion & Questions

1000 Young Adults with Cancer
*"We may be rare, but we are there:"
Challenges of young adults with cancer*
- Megan McLeod, MSW

Treatment induced menopause
- Janice Pan, MD, CCFP, FCFP
- Dedeshya Holowenko, MD, CCFP-EM

1040 Discussion & Questions

1050 Break

1120 *Palliative care in the last days: What the
primary care provider should know*
- Mike Harlos, MD, CCFP, FCFP

1140 *Health literacy: Strategies for
strengthening the patient-practitioner
relationship*
- Andrea Sz wajcer, MLIS, AHIP
- Kerry MacDonald, MLIS

1200 Discussion & Questions
Community Cancer Care Scholarship
Awards

1210 Lunch & Exhibits

Afternoon Session

1255 *Panel: Exploring the HPV-cancer
connection: What do we know? Will
immunization help?*
- Robert Lotocki, MD, FRCSC
- Alok Pathak, MD, FRCSC
- Dick Smith, MD

1330 *Punch biopsies made ridiculously simple
for office practice*
- Brent Kvern, MD, CCFP, FCFP

1350 Discussion & Questions

1400 Getting to the Diagnosis
*The approach to lymphadenopathy in
children: An oncologist's perspective*
- Rochelle Yanofsky, MD, FRCPC, MEd

When an ovarian mass may be cancer
- Shaundra Popowich, MD, FRCSC

1440 Discussion & Questions

1450 Concluding Remarks, Evaluations
and Prizes

Getting to the Diagnosis

When a Headache may be a Brain Tumour

Presenter: Marshall Pitz, MD, FRCPC

Learning Objectives:

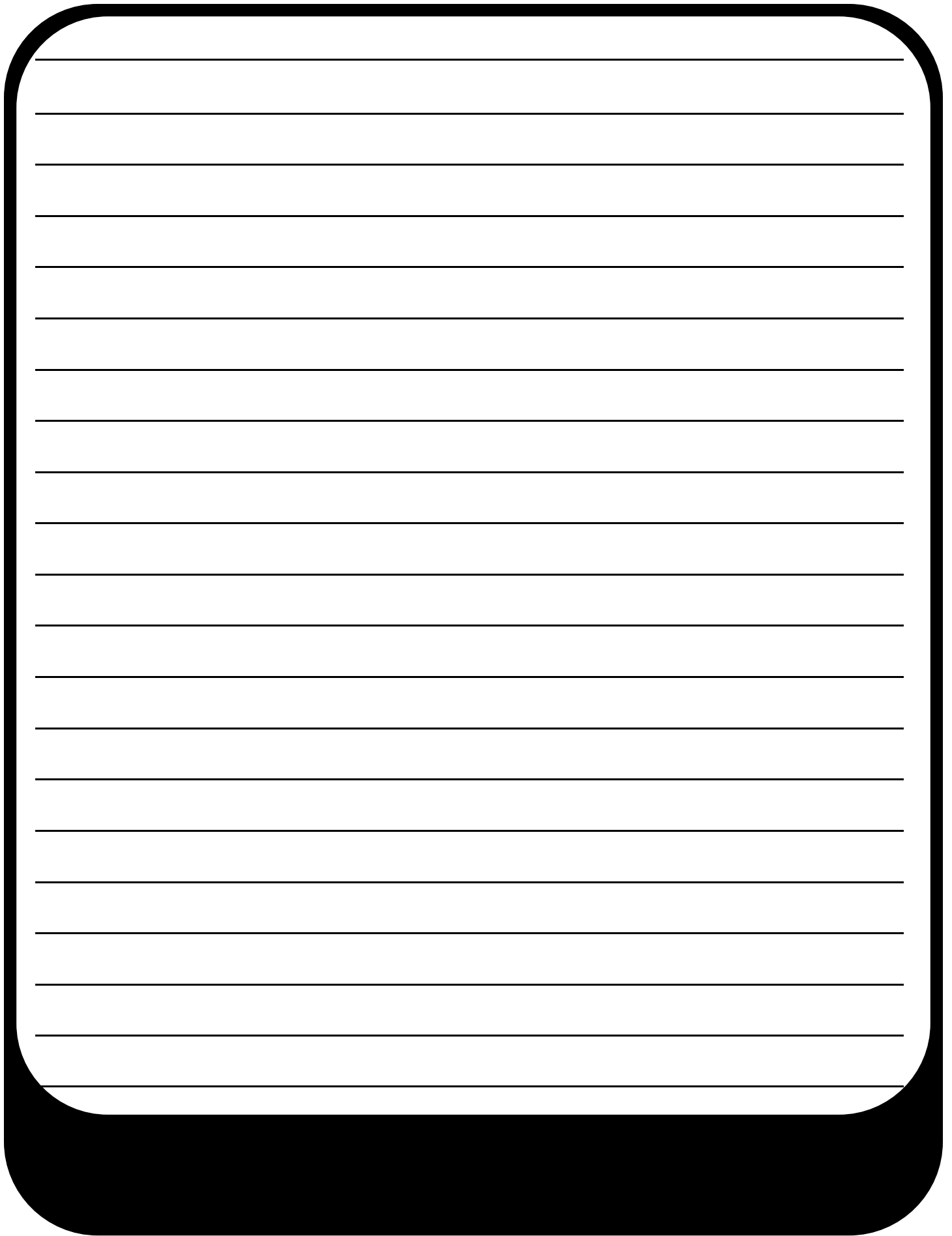
At the end of this session, participants will be able to:

1. Discuss appropriate evaluation (Hx/PE) of patient's complaints of headaches
2. Identify the need for appropriate investigations of headaches in a family practice setting
3. Outline signs that are suspicious of a brain tumour or serious pathology

Biographical Sketch:

Dr. Marshall Pitz is a medical oncologist and clinical investigator at CancerCare Manitoba. He holds appointments with the Section of Haematology/Medical Oncology, Department of Internal Medicine, Faculty of Medicine, University of Manitoba, and the Department of Medical Oncology, CancerCare Manitoba. Dr. Pitz's clinical areas of expertise include neuro-oncology and breast cancer, where he is actively involved in patient care.

His research interests include outcomes research and clinical trials in neuro-oncology. Currently he is focusing his effort on the evaluation of expensive drugs in both breast cancer, with a population-based examination of trastuzumab use, and neuro-oncology, where he is currently examining the effectiveness of regimens commonly used in Manitoba.



Getting to the Diagnosis

When Blood in the Urine may be Cancer

Presenter: Darrel E. Drachenberg, MD, FRCSC

Learning Objectives:

At the end of this session, participants will be able to:

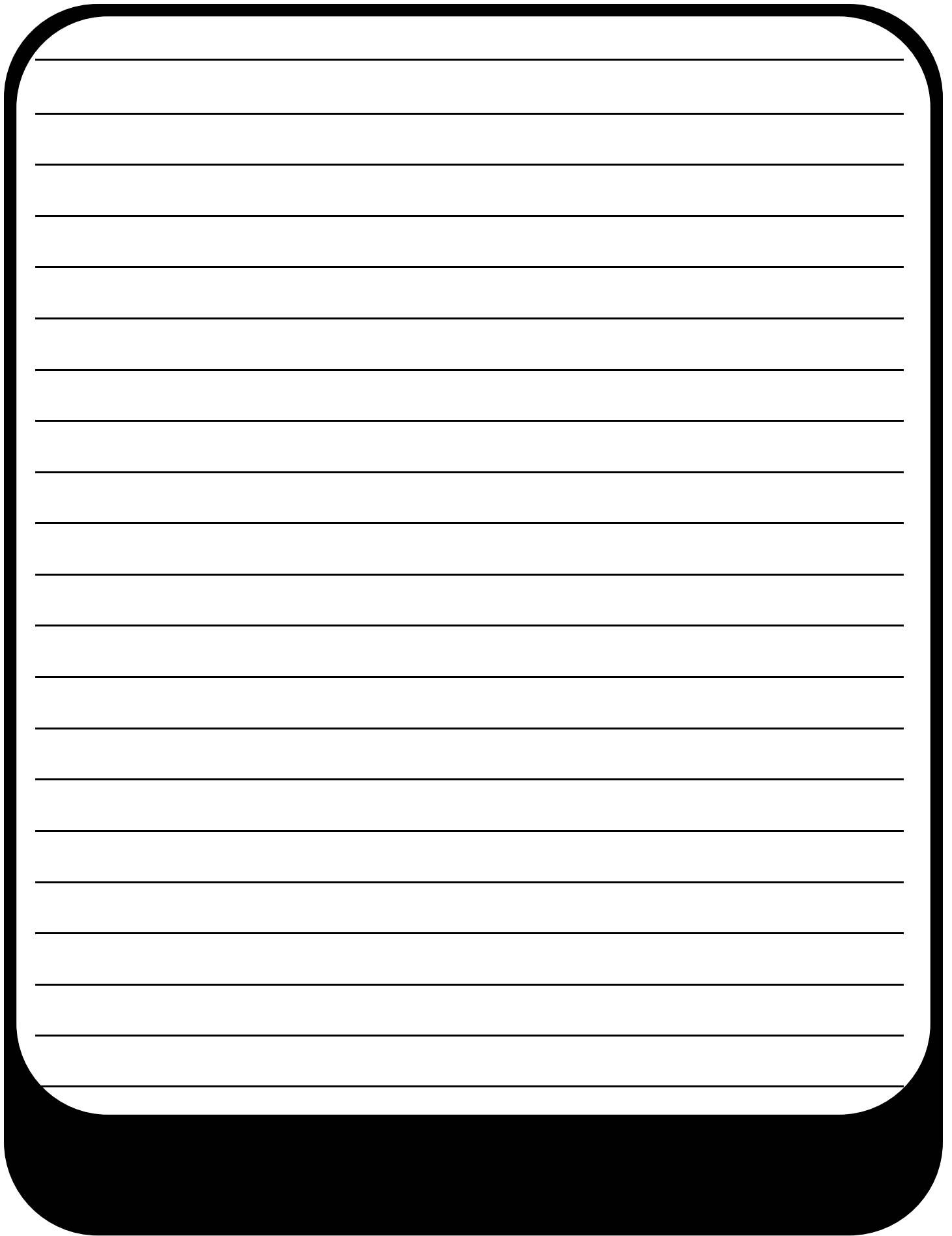
1. Discuss appropriate evaluation (Hx/PE) of hematuria
2. Identify the need for appropriate investigation of hematuria in a family practice setting
3. Outline signs that are suspicious of a urologic malignancy or serious pathology

Biographical Sketch:

Dr. Darrel Drachenberg attended medical school at the University of British Columbia and urology residency at Dalhousie University. He became an American Foundation of Urology Scholar and did fellowship training in urologic oncology at the National Cancer Institute in Bethesda, Maryland.

While in Maryland, he was immersed in basic science uro-oncology research including work in non-myeloablative stem cell transplantation in cytokine refractory metastatic renal cell carcinoma and hormone refractory prostate cancer. During this time he was also trained in the uses of laparoscopy in urology, laparoscopic oncology, prostate cancer brachytherapy, cryotherapy and high intensity focused ultrasound. He has brought his expertise in these areas to Manitoba and has started the laparoscopic urology program and prostate brachytherapy, cryotherapy, and HIFU programs in the University of Manitoba.

Dr. Drachenberg works at the University of Manitoba as assistant professor of surgery and director of research for the Manitoba Prostate Centre and Section of Urology and chair of the Genito-Urinary Disease Site Group at CancerCare Manitoba. He sits on the executive of the Canadian Urologic Association and the Canadian Urologic Oncology Group as well as the National Cancer Institute of Canada. He has published multiple peer-reviewed publications on prostate cancer and other genitor-urinary malignancies, has authored multiple text book chapters on prostate cancer, renal cancer, bladder cancer, and benign prostatic hyperplasia, and is on the editorial board of CME Prostate Health.com. Dr. Drachenberg is a reviewer for the *Journal of Urology*, *Urology*, *Journal of the Canadian Urologic Association*, *Canadian Journal of Urology* and the *Lancet Oncology*.



Young Adults with Cancer

“We may be rare, but we are there”

Challenges of Young Adults with Cancer

Presenter: Megan McLeod, MSW

Learning Objectives:

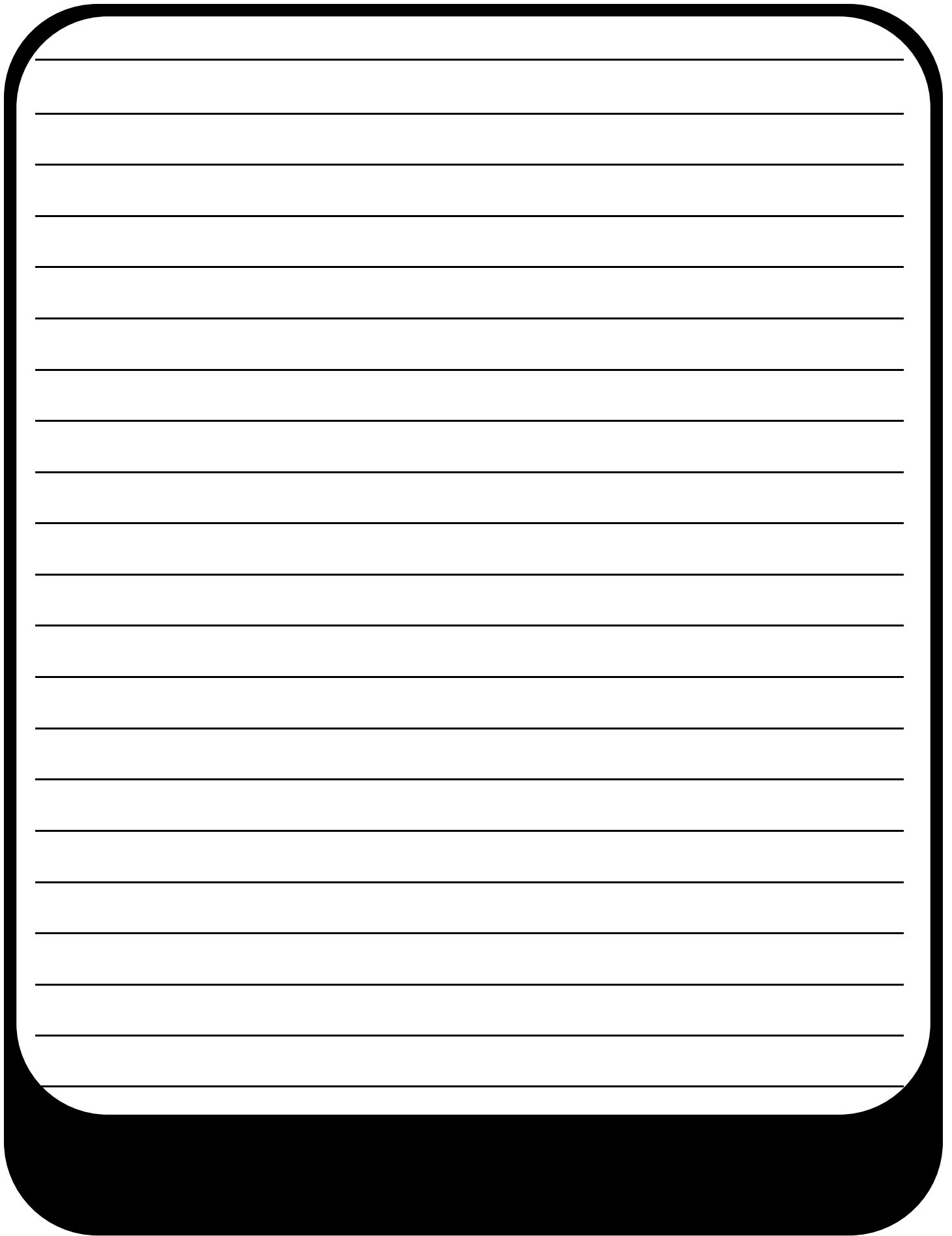
At the end of this session, participants will be able to:

1. Identify unique psychosocial issues of 15-29 year olds coping with cancer
2. Outline some of the challenges experience by primary care and cancer care, such as delayed diagnosis and survivorship/follow-up
3. List local and national supportive care resources for their AYA patients

Biographical Sketch:

Megan McLeod is the supportive care coordinator for Community Cancer Programs Network at CancerCare Manitoba, fostering the development and enhancement of supportive care resources close to home for rural Manitobans coping with cancer. She maintains a small clinical practice with Patient and Family Support Services, CancerCare Manitoba.

Megan has a special interest in young adult cancer and has had opportunities to facilitate young adult groups, retreats and conferences. Since 2008, she has been a member of the Canadian Partnership Against Cancer/C17's AYA Task Force.



Young Adults with Cancer

Treatment Induced Menopause

Presenters: Janice Pan, MD, CCFP, FCFP
Dedeshya Holowenko, MD, CCFP-EM

Learning Objectives:

At the end of this session, participants will be able to:

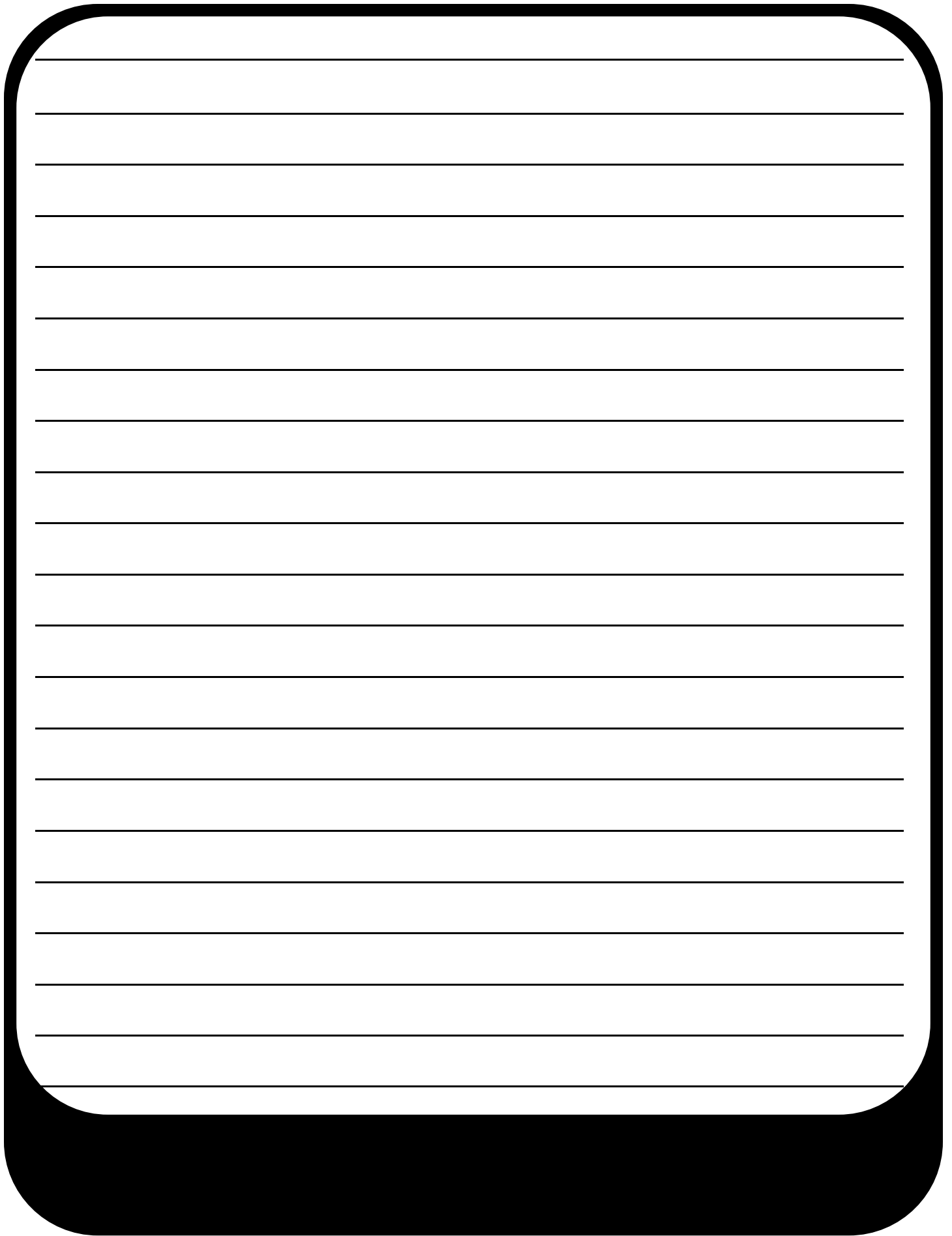
1. Define vulvovaginal atrophy
2. Discuss implications of estrogen deficiency on urogenital tissue
3. Describe diagnosis of vulvovaginal atrophy
4. Manage options in treatment-induced and in non-treatment induced vulvovaginal atrophy

Biographical Sketch:

Dr. Janice Pan is a family physician who received her BSc, BSc(Med) and MD at the University of Manitoba. She had a general practice in various community clinics, including the Aboriginal Health and Wellness Centre, Klinik Community Health Centre and Hope Centre between 2000 and 2008.

She is currently working as a family physician in the Teen Clinic at Youville Dakota Centre and Women's Health Clinic, as a medical advisor with the Workers' Compensation Board of Manitoba, and at the Menopause Clinic and Mature Women's Centre at the Victoria General Hospital.

Dr. Dedeshya Holowenko is a graduate of the University of Manitoba, Department of Family Medicine. She obtained the CCFP-EM designation and worked in emergency medicine for several years before returning to general family medicine. She was awarded a CCFP Women's Health Scholarship in 2005 which led to her introduction to the Mature Women's Centre. She presently works as a consultant at the Mature Women's Centre as well as continuing with a general family practice at the Tuxedo Family Medical Centre.



Palliative Care in the Last Days: What the Primary Care Provider Should Know

Presenter: Mike Harlos, MD, CCFP, FCFP

Abstract:

In the final days of progressive life-limiting illness such as cancer, issues of symptom management, functional decline, communication, and decision-making often come into increasing focus, at times precipitously. Many of the clinical issues that develop are sufficiently predictable that they can be prepared for, and many of the patient/family concerns that arise can be addressed preemptively through proactive communication. This presentation will review common symptoms and communication issues in the final days, and an approach to their management.

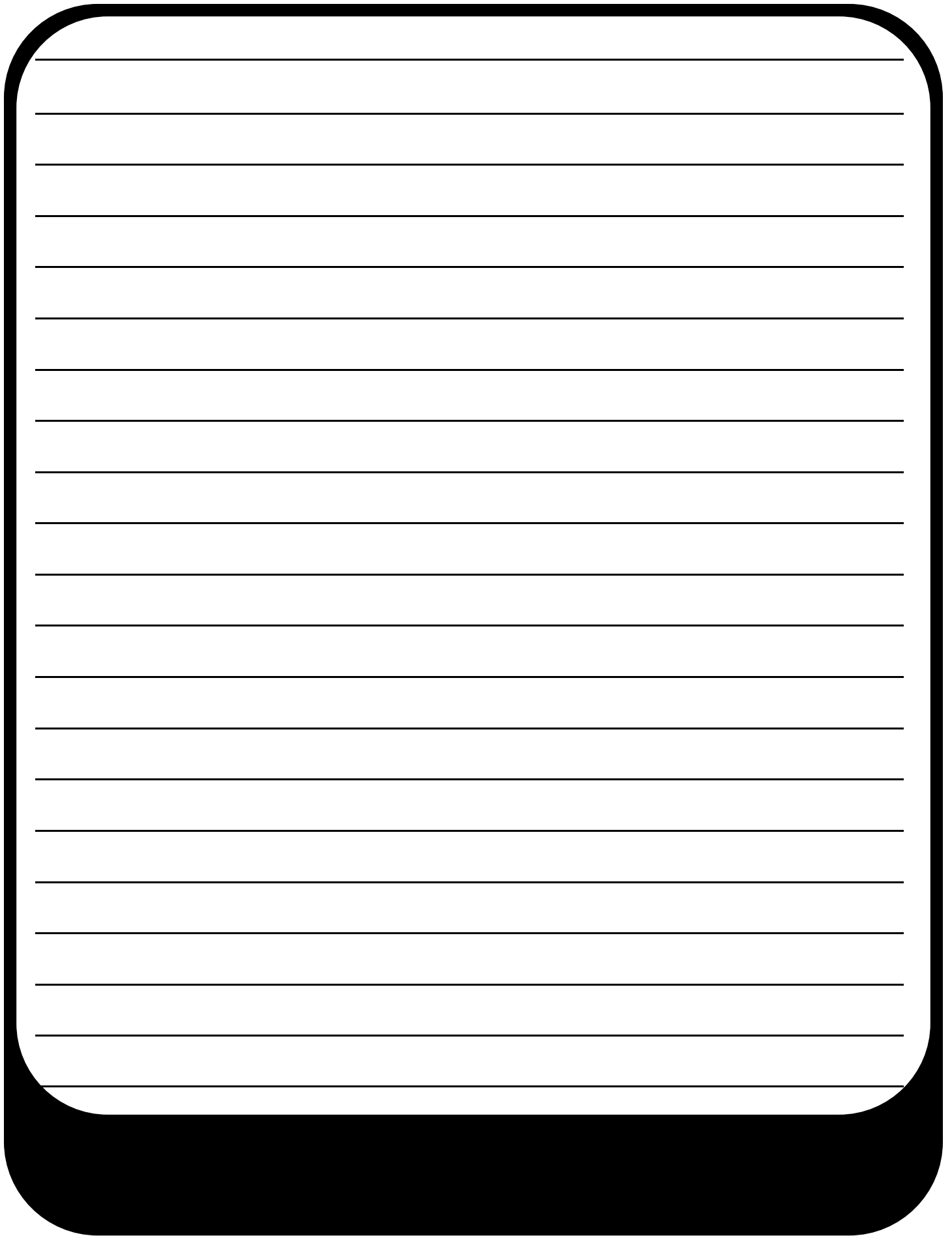
Learning Objectives:

At the end of this session, participants will be able to:

1. Describe/review common clinical challenges in the final days/hours of life
2. Explain an approach to preemptive planning and symptom management for supporting patients and families at end-of-life
3. Discuss common communication issues around patient and family concerns as death nears

Biographical Sketch:

Dr. Mike Harlos is medical director of Adult and Pediatric Palliative Care for the Winnipeg Regional Health Authority and is professor and section head of Palliative Medicine at the University of Manitoba. He has worked in palliative care for over 20 years, and has recently focused on pediatric palliative care. Dr. Harlos is a physician consultant for the Canadian Virtual Hospice, and has also developed and maintains the site <http://palliative.info>, a site for palliative care links and resource material.



Health Literacy: Strategies for Strengthening the Patient-Practitioner Relationship

Presenters: Kerry MacDonald, MLIS
Andrea Szwajcer, MLIS, AHIP

Abstract:

Health literacy has been definitively shown to have an impact on chronic disease outcomes. In this presentation, the importance and impact that health literacy has in the communication between practitioner and patient will be demonstrated. The method of “teach-back”, a top patient safety communication strategy, will be conveyed with a brief discussion of how a culture of inquiry can be promoted and managed within a visit’s time restraints. Finally, information management strategies will be stressed as part of a practical approach to applying health literacy principles in a practice.

Learning Objectives:

At the end of this session, participants will be able to:

1. Define Health Literacy (HL) and examine how health literacy impacts health determinants
2. List various communication strategies for the patient-physician encounter with an emphasis on the practical use of the teach-back method in the patient visit
3. Recognize the importance of the “culture of inquiry” as supported by the Safe to Ask framework and the AHRQ’s top 10 questions
4. Briefly explore the use of Web 2.0 technologies in sharing and compiling patient education resources

Biographical Sketch:

Kerry MacDonald is currently the head of the Seven Oaks General Hospital Library where she provides knowledge-based information services and programs to support the hospital staff, patients and families, as well as the faculty and students of the University of Manitoba. Further to delivering the health literacy sessions, she is currently working with her colleagues Andrea Szwajcer and Dr. Brent Kvern on a research project to evaluate the sessions’ impact on resident’s ability to communicate with and deliver health information to patients. Previous to her present position, she was Librarian at the Department of Fisheries and Ocean Library.

Andrea Szwajcer has served as clinical librarian for the Carolyn Sifton-Helens Fuld Library, St. Boniface Hospital and Research Centre since 2008. Since the inception of the health literacy first year resident education initiative in the spring of 2009, the sessions continue to change and grow with the collaborative energies of Dr. Brent Kvern, Kerry MacDonald and herself. In addition to supporting

Making the Case for HPV Immunization

Presenters: Robert Lotocki, MD, FRCSC

Alok Pathak, MS, Dip Nat Bd, MNAMS, FRCS(Glasg.), FRCSEd, FRCSC

Dick Smith, MB, BS, FCFP

Abstract:

Cervical Cancer is the second most frequent cancer seen world wide. Because of Pap test screening, cervical cancer incidence is the 11th most frequent cancer in Canada. However, the burden of disease in Canada includes cervical cancer and its precursors. Over 99.7% of cervical cancer is associated with high-risk Human Papilloma Virus. In addition, over 50% of vaginal and vulvar cancers are associated with high-risk HPV infections.

The World Health Organization considers high-grade Cervical Intraepithelial Neoplasia (CIN) as surrogate for cervical cancer in vaccine studies. Both vaccines have demonstrated efficacy in prevention CIN 2+. These vaccines suggest efficacy in women older populations.

In order to monitor impact and sustainability of the vaccines in cervical disease, linkage between vaccines with adequate evaluation tools such as HPV genotyping need to be instituted.

Although rare in the general population, the incidence of anal cancer is increasing by approximately 2% per year in men and women. It is especially common in men who have sex with men (MSM) and HIV infected men and women. The incidence of anal cancer in MSM prior to HIV was 35/100,000, quite comparable to cervical cancer incidence prior to pap screening (40-50/100,000). Anal cancer is estimated to be two times more common in HIV positive men than in uninfected MSM.

Anal Cancer is biologically similar to cervical cancer in being preceded by high grade intraepithelial neoplasia and is being as strongly causally associated with HPV-16 and HPV-18.

Prevention and treatment of high grade anal intraepithelial neoplasia (AIN) most likely reduces the incidence of anal cancer. The use of quadrivalent HPV vaccine has been shown to reduce the incidence of AIN in 16-26 year old HIV negative MSM. In the absence of an anal pap screening program, immunization could be a powerful preventive strategy.

Learning Objectives:

At the end of this session, participants will be able to address the following questions:

1. How big a deal is the cancer you're focusing on, nationally and globally?
2. How important is HPV in the etiology of the cancer?
3. How likely is immunization to be effective in prevention?
4. What research is under way that may shed further light on the "HPV Connection" and effectiveness of immunization or therapy?

Punch Biopsies Made Ridiculously Simple for Office Practice

Presenter: Brent Kvern, MD, CCFP, FCFP

Learning Objectives:

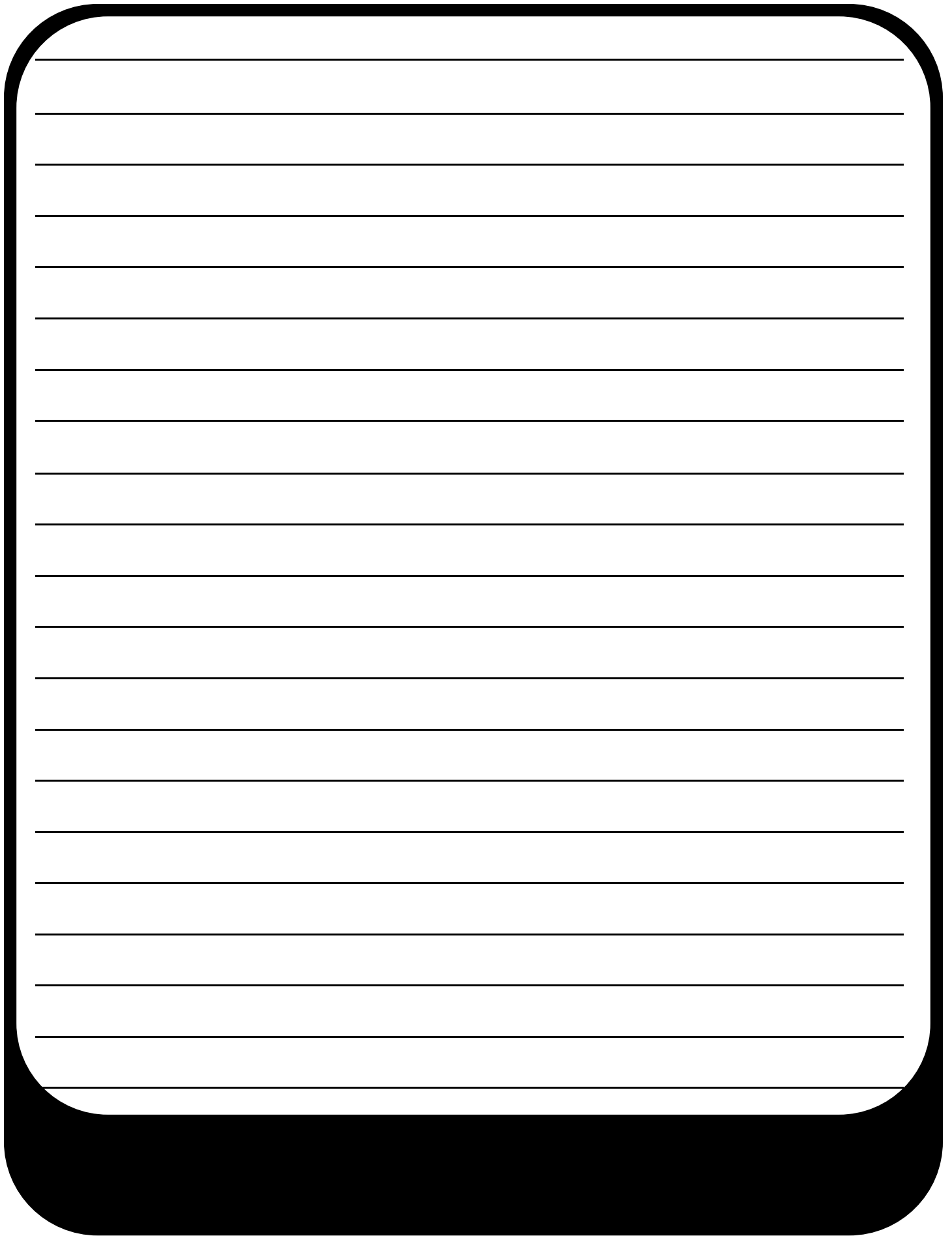
At the end of this session, participants will be able to:

1. Describe the indications for performing a punch biopsy in the office
2. Outline the risks, harms and benefits of performing a punch biopsy
3. List the equipment necessary to perform a punch biopsy in the office

Biographic Sketch:

Dr. Brent Kvern is a family physician who has been caring for patients in Winnipeg for close to 25 years. He is an associate professor in the Department of Family Medicine and is currently working on his Masters of Health Professions Education. He enjoys designing and delivering educational sessions to students, residents, and practicing physicians.

Dr. Kvern is a council member of the College of Physicians and Surgeons of Manitoba, the director of remediation for the Undergraduate Medical Education Program at the University of Manitoba, and the director of the Enhanced Skills Program within the Department of Family Medicine. Nationally, he works with the Medical Council of Canada, the Canadian Leadership Institute for Medical Education and the College of Family Physicians.



Getting to the Diagnosis

The Approach to Lymphadenopathy in Children: An Oncologist's Perspective

Presenter: Dr. Yanofsky, MD. FRCPC

Abstract:

Palpable lymph nodes are common in children. They may be a normal finding or a sign of serious disease.

In this talk, I will review: what is "normal"; the causes of lymphadenopathy in children; the approach to lymphadenopathy in children and helpful non-invasive tests in the evaluation of lymphadenopathy in children. As well, I will discuss when to be concerned about serious pathology and issues related to lymph node biopsy. Appropriate patient referrals will also be reviewed.

Learning Objectives:

At the end of this session, participants will be able to identify:

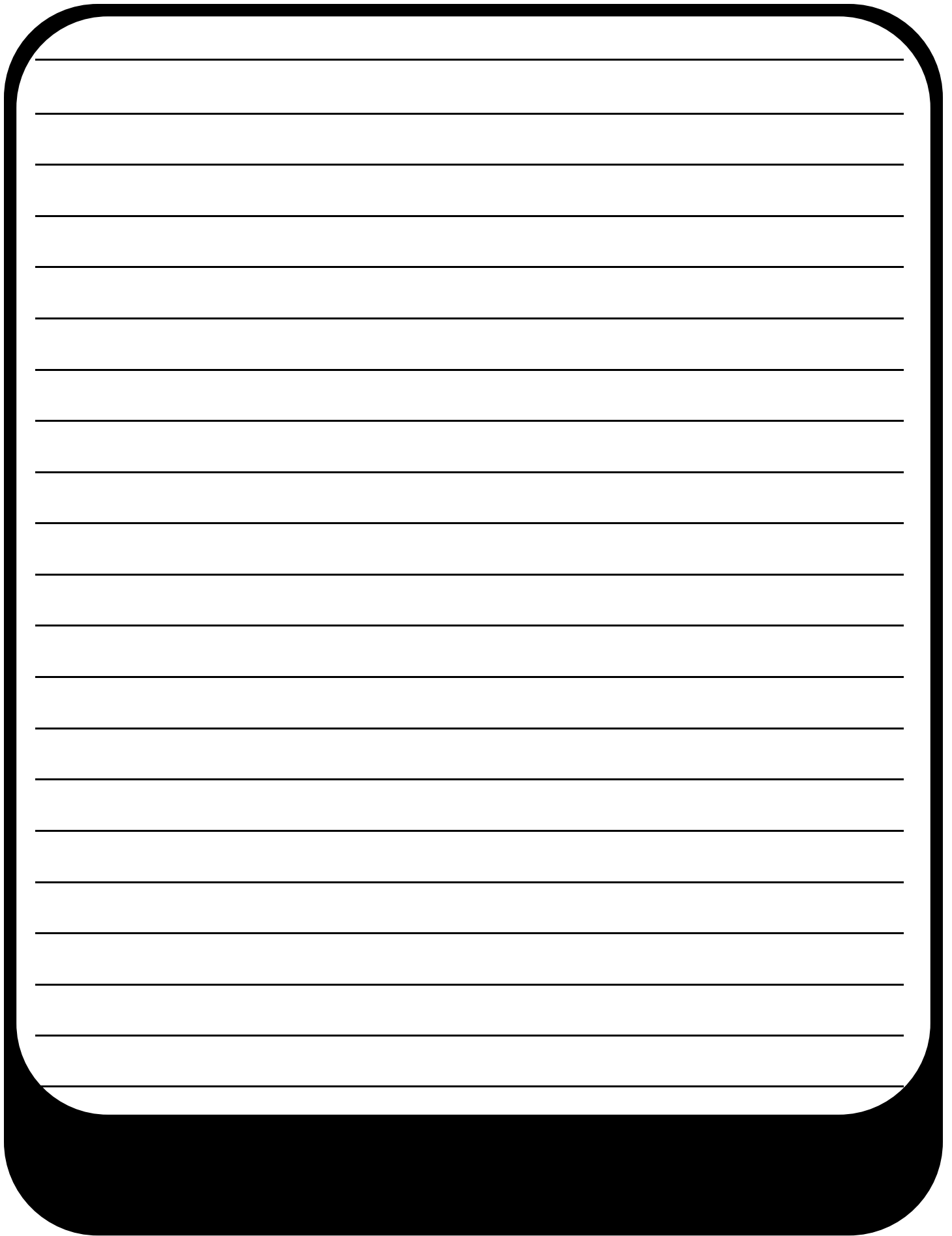
1. What is a "normal" cervical lymph node
2. The causes of lymphadenopathy in children
3. The approach to lymphadenopathy in children
4. Helpful non-invasive tests in the evaluation of lymphadenopathy in children
5. When to be concerned about serious pathology
6. Lymph node biopsy and patient referral issues

Biographical Sketch:

Dr. Rochelle Yanofsky is a pediatric hematologist/oncologist at CancerCare Manitoba and at Health Sciences Centre. She is the medical director of the Clinical Investigation Office, and the chair of the Disease Site Group for Pediatric Oncology at CancerCare Manitoba. She has an appointment as associate professor of Pediatrics & Child Health at University of Manitoba, and is the assistant medical officer at the Canadian Blood Services.

Dr. Yanofsky did her M.D. training and her pediatric residency at University of Manitoba, and a fellowship in hematology/oncology in University of Colorado Health Sciences Centre. She also holds a Masters of Education in Counseling from the University of Alberta.

Her areas of research include childhood acute lymphoblastic leukemia and her care relationships.



Getting to the Diagnosis

When an Ovarian Mass may be Cancer

Presenter: Shaundra Popowich, MD, FRCSC

Abstract:

Ovarian cancer is relatively rare; full time general practitioners encounter an individual with the diagnosis only once every five years on average. Ovarian cancer is the second most frequent gynecologic cancer with a significant mortality rate, and the diagnosis is made almost entirely as a result of women reporting symptoms to primary care practitioners. Awareness of the signs and symptoms with appropriate, timely investigation and specialist referral have an essential role in the management of this disease.

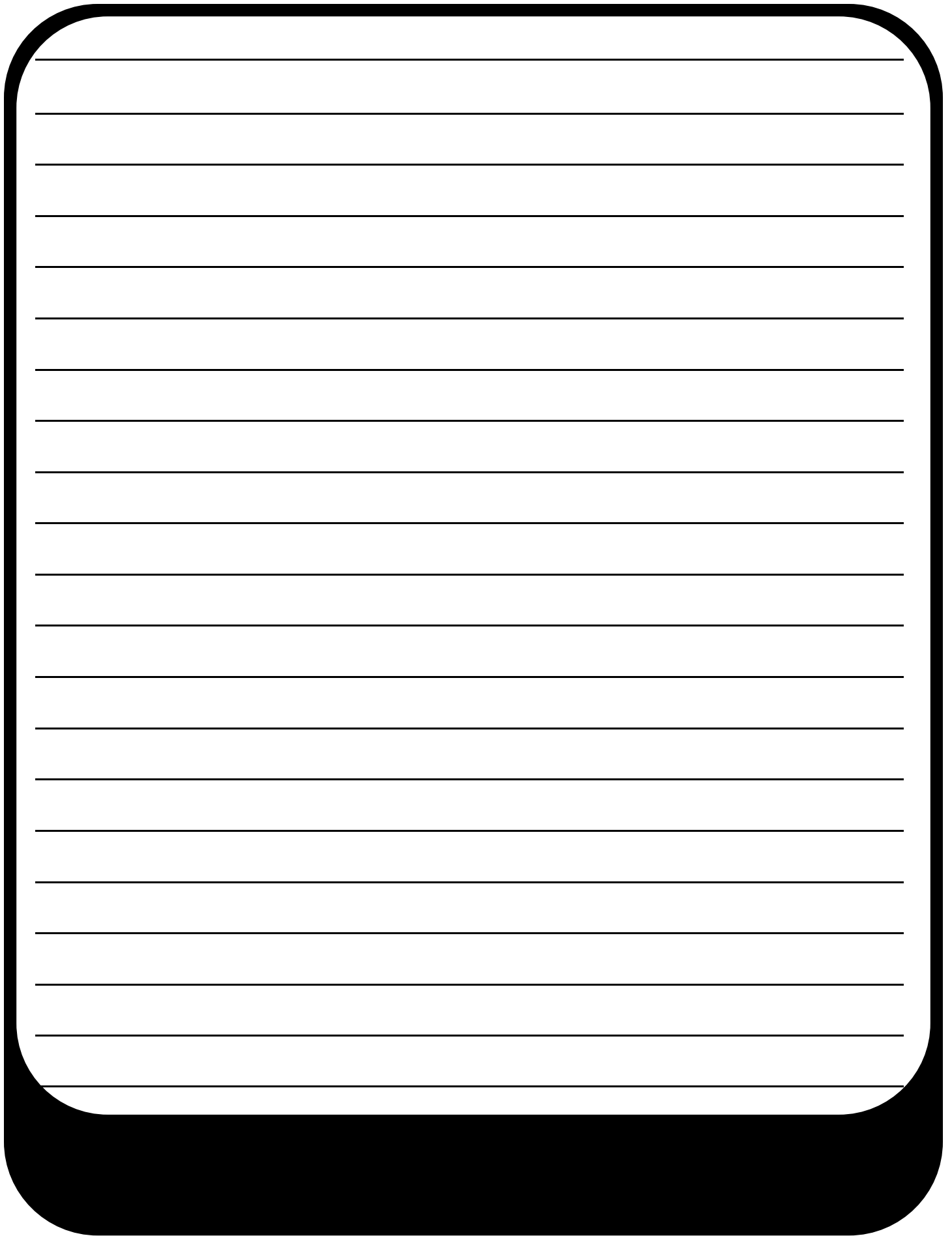
Learning Objectives:

At the end of this session, participants will be able to:

1. Define who is at greatest risk of ovarian cancer
2. Discuss the most appropriate investigations of an individual who may have ovarian cancer
3. Describe tools that help determine whether an adnexal mass is malignant and identify those patients that require an urgent specialist referral

Biographical Sketch:

Dr. Shaundra Popowich completed a gynecologic oncology fellowship in 2004 following an obstetrics and gynecology residency at the University of Manitoba. She has worked at CancerCare Manitoba since completing a palliative care fellowship in 2005 and is currently an assistant professor with the Department of Obstetrics and Gynecology.



2012 / 2013 Scholarships in Community Cancer Care

An opportunity to pursue one to two weeks of individualized study / training related to the cancer care continuum and blood disorders or you may apply for funding for an oncology course.

For more detailed information, please contact:

Evelyn Leferink
Professional Development Coordinator
UPCON Uniting Primary Care with Oncology
CancerCare Manitoba
2nd Floor 675 McDermot Avenue
Winnipeg MB R3E 0V9
Email: evelyn.leferink@cancercare.mb.ca
Phone: 204-787-4355 Fax: 204-786-0715





Be a LEADER in Primary Care Oncology

~UPCON~

Uniting Primary Care and Oncology Network

Goals of the UPCON Network

- Better integrated care for patients by:
 - Supporting FPs / NPs in their care of cancer patients
 - Offering high quality cancer CME
 - Promoting role of primary care within CCMB

Our Partner Clinics

- View cancer as an important part of their practices
- Interested in playing an active role in the care of their cancer patients
- Willing to support their Lead FP/NP in their liaison role and in attending CME

Benefits for UPCON Network Clinics

- Access to the CCMB e-chart from your primary care desk top
- UPCON Lead is paid for orientation & small group educational activities for first year
- Free small group Mainpro-C sessions
- Free "Cancer Day for Primary Care" registration (annual UPCON Conference) for professionals in the clinic
- Delivery of *UPWords*, the Network newsletter
- Use of the UPCON Physicians FAX form
- Easy and direct access to UPCON program staff

Role of the UPCON Lead FP/NP

- Attends a "CancerPro..." session
- Interest in cancer / palliative care
- Helps colleagues with questions that arise in the care of cancer patients
- Acts as a "point person" for CCMB in the primary care setting
- Attends small group Mainpro-C CME 4 x annually & invites colleagues and distributes and discusses Learning Pearls with clinic following each session
- Invitations to accept cancer patients in your community with no FP
- Invitations to participate in CCMB task groups where the FP perspective is needed such as: Bridging General and Specialist Care; Colorectal Cancer Screening; Small Cell Lung Guidelines Group; Patient Navigation Program

Call Shelley at (204) 787-1225 for more info





This certifies that

has attended the

8th Annual

Cancer Day for Primary Care

Friday, January 27, 2012
CancerCare Manitoba
675 McDermot Avenue
Winnipeg, MB

Presented by
Uniting Primary Care & ONcology (UPCON)

Sponsored by
CancerCare Manitoba Foundation



Jeff Sisk

Director, Primary Care Oncology

January 27, 2012

Date

This activity has been accredited by The College of Family Physicians of Canada and the Manitoba Chapter for up to 4.25 credits. Each attendee should claim only those hours of credit that he or she actually spent in the educational activity.



*CancerCare Manitoba
acknowledges and sincerely
thanks the
**CancerCare Manitoba
Foundation**
for their continuing support
of this educational
conference.*

