



**Francisco Conde,
RN, PhD, AOCN.
Hawaii
ONS President**

PRESIDENT'S MESSAGE FRANCISCO CONDE, RN, PhD, AOCN

Oncology nursing exemplifies the art and science of nursing at its highest. As an oncology nurse, you possess the scientific knowledge and clinical skills to provide quality cancer care for your patients and their families. You educate and conduct research or performance improvement projects. Most importantly, you listen and provide comfort and compassion to people who are going through one of the most difficult and challenging

times of their lives.

In appreciation for all you (and your family) do, we will be having our first chapter picnic. Beth Freitas, our current Mana'olana Award recipient, and Sharon Shigemasa are organizing this event. The picnic has been tentatively scheduled for Saturday, June 27, from 11AM to 3:00PM at the Ala Moana Beach Park. Please come and bring your family on this fun-filled picnic!

On another note, our

annual Chapter conference titled, "Following the Stars: Navigating the Course of Cancer Care," will be held on Friday, August 21, at the Hilton Hawaiian Village. The keynote speaker will be Bertie Adams Ford, MS, RN, AOCN, who will address her talks on health disparity with the integration of patient navigation, and fertility and the cancer patient. Other topics will include patient navigation local update cancer-related

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WHAT IS AN "AYA"????? JOYCE WONG, RNC, CPON, CHTP, LMT

You could call them the "Lost Tribe", "Gap Group", "fourth in line for death", or those with "stupid cancer"...

AYAs are adolescents and young adult between the ages of 15-39 with cancer. They suffer from a delay in diagnosis, have poor or no access to medical protocols, have insurance coverage problems, and poor outcomes. They are 4th in line to die after homicides, suicides and unintentional injury in industrialized societies.

We as pediatric and adult oncology nurses,

share these patients. At a combined Association of Pediatric Hematology & Oncology Nurses (APHON) and Children's Oncology Group (COG) conference I attended in March, the topic was AYAs: "Saving the MY SPACE Generation--- Why Age Matters".

The fact is, pediatric or adolescent oncology patients on COG protocols have been proven to have better outcomes just because they walked through the pediatric hospital door. They have the gold standard of care on protocols that are

offered without delay. The average delay for AYAs is 6.3 weeks. This is due to AYA feelings of invincibility, lack of primary care providers, providers not suspicious of cancer, and the fact that 29% of AYAs are uninsured or under insured. There are also five times more medical oncologists as pediatric oncologists. This "tribe of AYAs" frequently ends up in "no man's land. The AYA word is not common language in the adult arena but with knowledge, the medical oncologist could enroll these "lost AYAs" on

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PRESIDENT'S MESSAGE CONT

style, a pharmaceutical health disparity, and advanced care planning for end-of-life services.

To reach out to our members in the neighbor islands, our past chapter President, Jacqui Mitchell, is currently investigating video - teleconferencing technologies to determine cost and compatibility issues. It is our hope that all our members will have the opportunity to

access and participate in our meetings and educational programs.

There are five educational scholarships and one research grant available. The educational scholarships can be used to support nursing college education or attendance in an oncology-related conference. Each is worth \$400.00. Also, the Chapter offers its members a research get

grant to help fund research projects in nursing and is worth \$1500.00.

I hope to see and meet all of you at our Chapter picnic. All the best as you celebrate Oncology Nursing Month and have a wonderful and safe summer!

MY EXPERIENCE AT ONS CONGRESS CHRISTA BRAUN-INGIS, RN, MSN, OCN,



ONS congress was quite a different experience for me this time. First, I traveled there with my 5 month old son and husband (my babysitter), which made scheduling and satellite symposiums quite a challenge (I even missed the keynote address). Second, I was presenting, which made my trip a lot more nerve racking than usual. But hence everything came off very smoothly; however, I can't say I would do it again soon!

Highlights for me this year at congress were two lectures, one on circulating Vitamin D levels and the other was the ONS clinical lectureship on Glial tumors.

Did you know that many patients with cancer have low Vitamin D levels? And did you know that if you live above a 35-degree latitude, the majority of the population doesn't

enough Vitamin D? I didn't know either of these facts until I attended this great lecture. I also learned that there is data showing that adequate Vitamin D levels are associated with not only cancer prevention, but also with survival. For example, women with breast cancer who have inadequate Vitamin D levels are 94% more likely to develop metastases and 73% more likely to die than women with normal levels of vitamin D at diagnosis. Patients also need adequate vitamin D to absorb calcium for bisphosphonate therapies to be most effective in treating bone metastases. There are also clinical trials underway to see if bisphosphonate therapy will prevent bone metastasis. Supplemental calcium and vitamin D are required along with the therapy.

Overall the lecture was very informative and thought provoking. If you are thinking about ordering any of the session recordings, I highly recommend this one.

The ONS clinical lectureship was truly a highlight this year. Terri Armstrong, RN, MS, APRN-BC did a wonderful job in giving an overview of brain tumors. I always struggle with understanding the clinical implications of this diagnosis, so this was very helpful for my practice. Gliomas are the most common type of primary brain tumor and are associated with significant morbidity and mortality. There have been major advances in the histological and molecular grading of tumors that have impacted the ability to predict treatment response and survival. Recently, studies have provided

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WHAT IS AN "AYA"????? CONT

COG protocols for an improved outcome that happens in a nurturing environment where treatment starts quickly.

What to do? Oncologists like Dr. Karen Albritton, who is the director of AYA Oncology at Dana-Farber are leading the way with

the development of a research, clinical, and training program at Farber Cancer Institute, Dana-Farber Clinics, Children's Hospital Boston, and Brigham & Women's Hospital. Clinical Trial Support Unit (CTSU) is a National Cancer Institute

(NCI) sponsored program to centralize access to cooperative group trials, regardless of affiliation of treating institution.

COG trials will be posted in spring. At Kapi'olani Medical Center for Women and Children, we have our first trial

patient, a 22 year old young man with osteosarcoma. He is registered on a COG protocol, and receiving chemotherapy at KMCWC with Dr. Wilkinson and surgery at Queens with Dr. Singer.

What can we do as Oncology Nurses?

- We want to help spread the work to attain better prognosis for AYAs. Use this spark of information as a start, and obtain more knowledge and use good communication with your oncologists to apply this knowledge.
- Be aware of this GAP GROUP and encourage trust in the pediatric experienced provider.
- Help to remove the barriers to accessing best evidenced based care with protocols.
- Follow the tools created to study the AYA population.
- Understand from your 15-39 year old patient's perspective and their pediatric-like tumor biology.
- Advocate for your AYA patients, bridging the GAP of care and improving prognosis.

The "stupid cancer" button is the most popular item purchased by AYAs, as created by AYA, Matthew Zachary, the founder of web site ImTooYoungForThis.org (empowering young adults affected by cancer). He is an AYA survivor and one of the best advocates. He is quoted as saying, "making sure the next 'you' doesn't have to go through the same crap I did". Yes, this population is quite frank and straightforward. It is an open way of communication that is effective. On his Stupid

Cancer 101, Matthew gives the following shocking data: 70,000 American between 15-40 years of age are diagnosed with cancer each year and 10,000 will not survive. Numbers are 7X greater than those in pediatrics. Unlike other age groups, these stats have not improved in 30 years. There has been no improvement in the 5 year survival of young adults since 1976. This is not OK.

Young adults also face unique issues that are not currently being met

by the current continuum of care including fertility, isolation, insurance, dating/sexuality, financial assistance, education, employment, and age-appropriate peer support such as social networking, both on and off line.

Matthew is making great strides. He has found support in NCI Challenge (2003), National Action Plan (2004), IOM Lost in Transition (2005), Year of the Lance (2005/2006), Closing the Gap (2006), and IOM Whole Patient (2007).

Matthew's group

observes the progress in meeting goals of the mission statement. There is increased visibility for the AYA cause, ending isolation. There is better detection and improved quality of life. He has provided the isolated AYA with a national voice. He knows to meet AYAs where they are at. He is part of the newly discovered social media integration. There are tie-ins to music (Matthew, himself, is a concert pianist) and arts. AYAs are having more meaningful survivorship.

"On Line" is where you will find more information. Look it up and be an advocate for your AYA patient. Matthew recommends 7 simple ways to help:

- Register with us on line. <http://stupidcancer.com>
- Subscribe to our Blog feed. <http://imtooyoungforthis.blogspot.com>
- Sign the Young Adult Cancer Patient Bill of Rights Petition. <http://seventyk.org>
- Connect with a local i[2]y Chapter. "<http://chapters.i2y.com>
- Join our facebook cause. <http://facebook.i2y.com>
- Join our Planet Cancer Group. <http://planetcancer.i2y.com>
- Become a leader. <http://leadership.i2y.com>

THE ANNUAL ONS CONGRESS IN SAN ANTONIO, TEXAS

APRIL 28-MAY 2, 2009

The Hawaii Chapter of ONS was well represented.
Three members were speakers.



Joanne Itano, Christa Braun-Inglis, Connie Gazmen,
Sharon Morris-Pruitt, and Gail Smith



Christa Braun-Inglis

Joanne Itano
from the University of
Hawaii, spoke on

"Volunteer
Opportunities at ONS,"

which was an ONS Board
of Directors sponsored
session. Joanne is a
current director at large
for the national ONS.

Christa Braun-Inglis
who pioneered the role of
oncology nurse practitioner
at OncCare Hawaii, spoke
as part of a panel.

"From Novice to Expert:
Your Professional
Journey as an Oncology
Nurse Practitioner".

This session provided
valuable information for
nurse practitioners to
guide their practice, now
and what to negotiate in a
job offer, etc.

Connie Gazmen
long term University of
Hawaii at Manoa nursing
faculty, spoke in a
session.

"Preventing and Managing
Life-Threatening
Infections in Patients
with Neutropenia".

There was great interest
in this session with about
200 in attendance.

INFECTIONS IN PATIENTS WITH NEUTROPENIA CONNIE GAZMEN, RN, BSN, MS



The 34th annual ONS congress was held in San Antonio from April 30th to May 2nd and one of the highlights was the up-to-date information available on the newly recognized outbreak of H1N1 virus. Being that Texas borders Mexico, I wasn't surprised at the numbers of people wearing masks mostly at the airport or the fact that they had gallon sized germicidal hand gels strategically placed at the congress convention center where a little less than 4000 oncology nurses congregated.

This was my 7th congress since 1998 but probably the most

memorable one as I accepted a challenge from Dr. Joanne Itano, a member of our National ONS board of directors to be a co-presenter on the topic of Prevention and Treatment of Patients with Neutropenia. My co-presenters were Marlon Saria, oncology CNS, from the UCSD Medical Center and Zandra Rivera, a nurse practitioner at MD Anderson Cancer Center, Texas. I'd like to share a few sound bites from our presentation that may help or confirm your current evidence based practice.

The etiology of microbial infection in our

neutropenic cancer patients remain the same with the Gastrointestinal tract (oropharynx and periodontium) being the number one source of infection followed by the blood stream (bacteremia) and lastly the epidermis (catheter related infections). Certainly adherence to our oral care protocols and empowering our patients in meticulous oral care brings us back to fundamental nursing, as is strict asepsis with invasive and catheter related interventions. Remember when we were administering lots of GCSF's SQ on a daily basis on the units? Knowing your patients

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ONS CONGRESS CONT

evidence confirming the benefit of combining chemotherapy with radiation for the most common malignant brain tumor, glioblastoma.

This groundbreaking work has changed the standard of care and has created a renewed enthusiasm for exploring other therapies for brain tumors. New targeted therapies are currently being evaluated based on molecular characteristics of the tumor. And, just a few weeks ago, bevacizumab was approved for the treatment of Glioblastoma.

This lectureship not only addressed the clinical aspects of gliomas,

but also psychosocial aspects as well as end of life care on this subject. Ms. Armstrong truly gave an outstanding lecture demonstrating what a special oncology nurse she is.

Finally congress would not be complete without seeing others from Hawaii and friends from other places. This year the Hawaii crew included Joanne Itano, Connie Gazmen, Gail Smith, Jacqui Mitchell and myself. It was great catching up with everyone. It's funny that we have to go thousands of miles away to see each other sometimes!!

BTW-Connie Gazmen gave a great lecture on Neutropenia which truly showed her intellect and compassion. She made us all very proud!!!

Next year ONS Congress will be in San Diego. I highly recommend that you consider attending. This conference provides excellent lectures and is a ton of fun. Also, if you have an interesting topic, submissions are due at the beginning of July. I encourage all of you to submit a topic. ONS is always looking for new topics and speakers. It's always great to see Hawaii represented.

"New targeted therapies are currently being evaluated based on molecular characteristics of the tumor."

SAVE THE DATES...

Hawaii Chapter ONS Annual Conference presents:

Following the Stars:



Navigating the Course of Cancer Care

Friday, August 21, 2009
7:45am to 4:30pm
Hilton Hawaiian Village

Fee: current ONS members
(National and Local)
and students \$100
Non-members \$125

sponsored by:



Oncology On CanvasSM

Background: In 2005 nurses from the Hawaii Oncology Nurses Society (ONS) attended a national ONS Conference and learned about Eli Lilly's Oncology on Canvas Program that is done worldwide every two years. The nurses wanted to bring this opportunity to Hawaii. In 2007, their hope and dreams came true when they had over 100 people participate. Excitement over the initial success of the program grew to the most recent 2008 program, where over 250 artistic pieces were done in six different hospitals. This will be the third year for Hawaii Oncology on Canvas!

For information on the Art Workshops, contact one of the nurses below.

Hawaii Medical Center
Leigh Chang
Lchang@hawaiiimedcen.com

Kaiser Permanente
Brenda Hiromoto
brenda.hiromoto@kp.org

July 18

July 25 Queens Medical Center
Cheri Uehara
ueharaR007@hawaii.rr.com

Tripler
Pat Nishimoto
patricia.nishimoto@amedd.army.mil

July 24 & 25

Kapiolani
Adults: Suzanne Ditter
SuzanneN@kapiolani.org
Pediatrics: Joyce Wong
joycwong@aol.com

July 26

Kuakini
Jeanie Foster
jeanne57@hawaii.rr.com

To view the Gallery, visit: www.lillyoncologyoncanvas.com

INFECTIONS IN PATIENTS WITH NEUTROPENIA CONT

“the use of reverse isolation (protected environment) correlates with a reduction of infections”

risk of developing febrile neutropenia (>20% risk) for known chemotherapy regimens such as dose dense ACT for breast cancer or CHOP-R for NHL justifies the use of white blood cell growth factors (NCCN 2005 guidelines). Likewise, remember administering all the antibiotics, antifungals, antivirals ordered for the unit? Look to the 2008 NCCN practice guidelines for use of antimicrobials. In summary, the prophylactic use of antimicrobials is reserved for patients with anticipated intermediate to high risk neutropenia (>7-10 days of neutropenia). Conversely if a neutropenic patient becomes febrile (FN)

then expect to administer monotherapy anti-infectives such as Cefepime, Zosyn, and Ceftazidime to name a few.

Majority of the studies looking at the use of reverse isolation (protected environment) correlates it with a reduction of infections as well as a reduction in short term mortality. The use of HEPA or laminar airflow rooms reduced occurrence of serious infections in leukemics receiving high dose chemo and/or patients with allografts. The controversy on neutropenic diet continues and recent research found that comparing patients eating cooked or raw foods (153 sample size)

provided no statistically significant correlation to preventing major infections (bacteremia, fungicemia, pneumonia) or death.

If you have never been to the annual oncology congress or institutes in learning conferences, I would encourage you to make it a goal to attend one. You will be reminded of all the important and meaningful work that led you to be an oncology RN.

Happy Oncology Nurses Month!

ANNOUNCEMENTS

→ Donations needed for our Annual Conference 'Silent Auction'.

Please contact Suzzane Ditter for information. [<suzanneN@kapiolani.org>](mailto:suzanneN@kapiolani.org)

→ Kapiolani Medical Center for Women and Children is looking for a Palliative Care Nurse Practitioner.

If you or anyone you know with a background in oncology that may be interested in a position at the women's oncology unit, please contact Anne Jinbo [<akjinbo@hawaii.rr.com>](mailto:akjinbo@hawaii.rr.com)

→ "Traveling T-Shirt" First event is to be at Kahala Mall: July 19-25, 2009.

A set of T-shirts with an expression of the "Cancer Journey" as painted by teens and young adults during the annual American Cancer Society's, Hoo Me Ka Hoolu Ikiaka 2009 camp. The t-shirts are displayed along with brochures and posters, telling more about our 2009 camp. It is interesting, informing and inspiring. Come out, oncology nurses, and see the display by our patients at Kapiolani Medical Center for Women and Children.

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~currently vacant~

MESSAGE FROM THE EDITOR ANNA ZIMMERMAN, RN, BSN

Aloha, looking for courageous oncology nurses that want to share stories, experiences, and laughter with their fellow oncology nurses. Please feel free to submit articles, information to pass on, and most of all...suggestions for future newsletters.

Mahalo Joanne Itano for your support!

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