

MDCSCO NEWS

MARYLAND/DISTRICT OF COLUMBIA SOCIETY OF CLINICAL ONCOLOGY

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Oncology Foundation of Maryland and the District of Columbia Takes Important First Steps

MDCSCO is officially off to a great start with news that the Oncology Foundation of Maryland and the District of Columbia has received its 501(c)3 tax-exempt status from the Internal Revenue Service. Its Board of Directors and Council of Advisors are already working on the Foundation's first projects, its mission and vision for the future.

It is well beyond the "beginning" stage as its members sprint to prepare for the Foundation's first official forum in March 2010.

The genesis of The Oncology Foundation of Maryland and the District of Columbia came during the critiques and discussions following MDCSCO's successful "Good News" forum, held in Anne Arundel County in April 2007. Over 100 members of the public attended the day-long event to learn the latest updates in cancer prevention diagnosis and treatment from Maryland-area oncologists, representatives of local hospitals and cancer support groups.

As MDCSCO, as well as the other 46 state ASCO Chapters, are organized as 501(c)6 corporations, donations to this group are not tax-deductible as donations to a 501(c)3 would be. The new Foundation will be able to accept donations that are tax-deductible to the donor and aid in expanding MDCSCO's outreach as a resource to those involved in providing oncology care—and those patients receiving it.

The Foundation's Board President is retired Realtor Susan Nolte. She has been married to retired food broker Charles E. Nolte for 53 years. The couple has two grown children and two grandchildren. Part of what spurred

Nolte to join the Foundation was the death of her own mother in January 2006 from second-hand lung cancer. "She never smoked, but my father did," she said. "It spread all over."

When Pat Troy asked her to work on the first Cancer Forum held at Chartwell Country Club two years ago, Nolte was interested. "It was open to the public at no charge and we had a light breakfast and a delicious lunch. The purpose of the meeting was to give people an opportunity to come and learn about the innovations in cancer treatments and to hear the 'good news' about what is being done in research and to help patients," she noted. "There were speakers from the medical community who spoke about four different types of cancer, and, after lunch, we heard an excellent speech by Miss Maryland, who told us about her battle with melanoma."

That interest then turned to action. Disappointed that MDCSCO was not able to accept donations from several corporations, she was eager to help establish the Foundation. Part of her efforts included writing the Foundation's bylaws.

Nolte said: "We have a wonderful group of people on our Board, both medical professionals and lay people. Some of the lay members are cancer survivors or have assisted family members who have had cancer, as I did with my mother. One of our members has an organization that has donated over \$700,000 to Hopkins and to Anne Arundel Medical Center for their cancer programs."

Plans for the Foundation, she said, also include an Advisory Board,

"which will include people who are not available to be Board members, but who will assist us with their wisdom and ideas."

Along with other board members, she is already planning another Cancer Forum in March 2010. "We hope it is at least as good as our first one, which was a great success." €

Diane Evans, who was elected to two terms on the Anne Arundel County Council, is a member of the Foundation's board. While on the Council, she formed a committee, which attempted to find out "why the cancer rate was so high in Anne Arundel County."

"We worked on it for many years," Evans said. "I noticed through the research that there were 'clusters of cancer' in areas of North and South County and the question was 'Why?' In the north, perhaps it was the proximity to Baltimore City and its industry, a greater prevalence of chemicals and asbestos exposure? Was there aquifer or ground water issues? In South County, there was more evidence of radon. It piqued the public's interest and mine as to what was going on in the county."

"We found no definitive answer, but we got people talking."

She is involved in the Foundation, because "I'm not a scientist, just an interested lay person who is trying to communicate to the public the good things happening in cancer research and care. I want to learn as much as possible about breast, prostate, colon and lung cancers and

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Meet Paul Celano MDCSCO's New President

MDCSCO's new president is Paul Celano, M.D., F.A.C.P. He is currently Chief, Division of Medical Oncology, at Greater Baltimore Medical Center in Towson. Since 1988, he's been an assistant professor of Oncology at the Johns Hopkins University School of Medicine, and since 2008, Celano has also been an assistant professor of Gynecology and Obstetrics at the school. Born in Philadelphia, Celano was raised in the Philadelphia area and earned his Bachelor's degree at the University of Pennsylvania. He graduated from Mount Sinai School of Medicine in New York with his M.D., and served his internship and residency at Thomas Jefferson University Hospital in Philadelphia. His postdoctoral fellowship at Johns Hopkins brought him to the Maryland area.

Now 54, he lives in Baltimore with his wife of 26 years, Shivaun Celano, who is an HIV specialty pharmacist at Johns Hopkins University Hospital. Their son, Paul, 24, recently graduated from the University of Maryland, College Park, and is working for a law firm while applying to law school.

Though the careers of the Celano couple have kept them in Maryland, they remain here, he says, "because we like the area. Plus, it's close to our family in Pennsylvania."

He has become president of MDCSCO at a time when the 206-member organization is at a crossroads. Celano pointed out that MDCSCO is one of 47 active state affiliates of ASCO, serving 49 states and the District of Columbia.

Celano noted the purpose of MDCSCO (and, by extension, ASCO) is "to enhance communications at the state, regional and national levels, to support legislative initiatives that will lead to improvements in cancer research and cancer care, and to address issues around the practice of cancer care as it relates to cancer research and quality of care for cancer patients."

One of the major goals during his term, Celano said, is to get all the members of MDCSCO more involved in the activities of the organization. By improving communications and creating additional events, large and small, on the MDCSCO calendar, he wants to identify the members' varied interests and find ways to attract and involve them. He highlighted several committees that will engage the membership as they improve "the practice of medicine as it relates to insurance issues, medical societies, Medicaid and Medicare."

One is the Practice Committee. Through direct contact, he hopes to find oncologists in D.C. and in districts throughout the state that would be

willing to serve as expert speakers before U.S. House and Senate committees and at the Maryland Statehouse. He pointed out that Alice Neily Mutch of Capital Consultants of Maryland is an excellent lobbyist, but MDCSCO's impact can be deepened by a letter to a state legislator from a concerned, involved MDCSCO member living in that representative's own district, or an offer to meet personally with that legislator or to testify before a sub-committee.

Via the Program Committee, Celano is hoping to create additional venues for the membership to gather at social, educational or business-oriented events. MDCSCO is currently planning a fall event focused on healthcare reform. As the highlight of the evening, a major official at the Federal level will address aspects of oncology and patient care. He's concerned about the shortage of oncology specialists as the need for all forms of cancer care is rising.

Through ASCO, the Maryland organization recently received a grant, which it is utilizing to more fully develop its online presence. "The objective is to foster communication among the state members. Through this interactive media, we want to be able to review and distribute information about what is happening at the medical schools in the area. We want to quickly let people know what is happening in D.C. and Maryland in terms of research and lectures that they can attend," said Celano. He envisions the Web site as a central "meeting place" for sharing information and ideas.

"A lot of people don't have a clue as to what's going on, who is doing what, or how to contact someone if they have a patient with a specific type of cancer. This Web site could facilitate a patient's admission into clinical trials, for example." He added: "There are many things that can be done as we expand the Web site. People will be able to share information about practice issues. We can provide linkage to other organizations like medical schools, cancer non-profits, medical societies, the American Cancer Society, other state ASCO chapters and more."

As part of his goal to expand membership, he sees MDCSCO opening up its membership rolls, events and lectures to others that serve oncology patients. Under the MDCSCO tent, he'd like to include not just medical oncologists, but radiation and surgical oncologists, plus practice managers, patient navigators and others. These are ambitious, far-reaching plans—and he needs the assistance of all MDCSCO members to make it a reality.

Article by Wendi Winters

CANCER OUTLOOK:
The Good News!

March 6, 2010 • 8:00 a.m. - 4:00 p.m.

Severna Park Elks Lodge • 160 Truckhouse Road • Severna Park, MD 21146

Hosted by The Oncology Foundation of Maryland
and the District of Columbia

Luncheon Speaker: Gary Jobson
Cancer Survivor, World-Renowned Sailor



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MDCSCO Goes Social

With a \$10,000 grant awarded by ASCO, MDCSCO is developing a social networking Web site to foster communication and collaboration within the MDCSCO community.

Social networking is sweeping the nation. Millions of people are connecting through social networking media vehicles, and the Maryland/District of Columbia Society of Clinical Oncology (MDCSCO) is no exception. Thanks to a \$10,000 grant awarded to MDCSCO by The American Society of Clinical Oncology (ASCO), MDCSCO is working to develop and launch a social media Web site to create a truly interactive community that unites its members through several social networking tools.

Assessing the need

After listening to discussions among MDCSCO physicians and attending an ASCO meeting

for state societies, it became clear to MDCSCO Executive Director Patricia Troy that social media could be very powerful in uniting the MDCSCO community.

“Features such as a public calendar for listing all oncology and cancer-related events, document sharing, a central posting place for pharmaceutical bulletins, and active discussion groups could add tremendous value to MDCSCO membership,” explains Troy. With Troy acting as a catalyst, a multidisciplinary team assembled to make it happen, from applying for the grant to determining what elements the social media site should contain.

“Social networking is very much the current mode of communication, and we’re finding that it’s proving to be an efficient way of informing both health care professionals and patients about what’s going on, where they can find information, and to whom they can direct questions,” says Louis Koschmeder, cancer survivor and community leader with the Oncology Foundation of Maryland and the District of Columbia. He is coordinating the Foundation’s section of the social media site.

The team has enlisted the help of SocialFish, a firm that specializes in social media strategy for associations and nonprofits, to develop and launch the site.

“SocialFish has a strong grasp of social media and how associations can use it effectively,” says Troy.

Swimming with SocialFish

With solid backgrounds working with and for associations and nonprofits, SocialFish firm principals Lindy Dreyer and Maddie Grant know how they work. And they’re applying their expertise to developing an effective social media strategy for MDCSCO.

SocialFish is creating a Ning site for MDCSCO, similar to the ASCO’s Electronic Health Records (EHR) social media site. Ning is an online platform for people to create social networks. Initially, the site will link to the ASCO and MDCSCO Web sites. In a later phase of rollout, the site will link to other outposts, such as LinkedIn, Facebook, and Twitter.

In addition to a master calendar, centralized file sharing, and discussion groups, the new site will incorporate clinical trials postings and special sections, such as one for residents and

early-career oncologists. The goal is to create a truly interactive community to increase visibility and participation.

“In the early phases, our goal is simply to identify the doctors and practice managers who will be the community champions, spreading the word to their peers about the resource,” Grant explains. “We’ll know we’ve found the right people based on activity—number of postings, comments, files uploaded, groups joined, and more. We’ll also know we’ve found the right people when the community starts seeing steady growth from word of mouth.”

She continues, “The broader goal is to connect hospital doctors and researchers with private practice doctors and their patients. To measure that, we’ll employ a combination of quantitative metrics and qualitative feedback from doctors who are using the site.”

Getting the word out

MDCSCO’s new president, Paul Celano, M.D., F.A.C.P., hopes to accomplish several goals with the social media site. Chief among them is facilitating patients’ access to clinical trials.

“Having a social media site will be a tremendous resource for getting the word out on what kinds of clinical trials are going on locally within our organization among our members, whether through private groups or academic groups,” says Celano. “I envision the site as being a useful mechanism to facilitate patients getting into these trials, to make sure our members know what trials are available, how to get involved, whom to contact, and so on.”

Celano is also looking forward to using the site to facilitate members’ use of the organization for things like meeting planning.

“By enlisting everyone in the organization to provide input through this new site, we’ll be able to determine what people are interested in much

more quickly and easily and ensure important topics get addressed in a timely fashion,” he explains.

Leading by example

But MDCSCO members and the extended community won’t be the only ones to benefit from the site. Ultimately, MDCSCO intends for its site to be a model program that can be adopted by other groups and adapted to their needs. As a test site, its successes and failures will be closely monitored and reported, so others may learn from MDCSCO’s experiences.

“This is a great project to see how the use of social media can improve and increase engagement on the local level,” says ASCO’s Hamlin. “The lessons the MDCSCO learns will benefit other ASCO affiliates in their efforts.

“MDCSCO has a proven track record of completing successful projects,” affirms Hamlin. “They have dedicated physician leadership and an executive director with the talent to support such an effort.”

And Hamlin has great confidence in MDCSCO. ASCO awarded the grant to the MDCSCO on the basis of its previous successes. “MDCSCO has a proven track record of completing successful projects,” affirms Hamlin. “They have dedicated physician leadership and an executive director with the talent to support such an effort.”

Article by Michelle Ervin

■ Winning the Grant

The ASCO State Affiliate Grant Program is designed to enable state and regional affiliates to engage in activities that will have an overall benefit to their members, ASCO members, other state societies, and the oncology community at large. Its purpose is to provide financial support to affiliates to assist them in implementing specific activities. The program demonstrates ASCO’s commitment to strengthening state societies.

The ASCO State Affiliate Working Group awards state affiliate grants. The Working Group is a subgroup of the Clinical Practice Committee made up of 15 physician leaders and executive directors with varying degrees of state society experience.

According to ASCO’s Terry Hamlin, senior manager, State Affiliate Program, Cancer Policy & Clinical Affairs Department, “In the past few years, ASCO has begun to delve into the world of Web 2.0, social networking, and the Working Group thought this project would serve as an ideal pilot for other state societies.”

“The broader goal is to connect hospital doctors and researchers with private practice doctors and their patients.”

...Maddie Grant, principal of Social Fish





Peter Robert Graze Looks Back on Five Terms as President of MDCSCO

As the successful five-year term of Dr. Peter Graze comes to an end, the members of MDCSCO and the public offer oncologist Peter Robert Graze a hearty thank you for his dedicated efforts to improve the organization and the health of the patients served by MDCSCO members.

Graze was born in Washington, D.C., and grew up in Jamaica, Queens. In New York City, Graze attended a public high school bulging with 10,000 students. He earned his undergraduate degree at Tufts University in Medford, Massachusetts, and his medical degree at Harvard Medical School. There was a two-year tour with the U.S. Navy at Bethesda Hospital before he headed to California and, then, Nevada, for two decades.

"When I moved West almost 40 years ago, I never thought I'd move East again," he mused. He returned when his then wife, a microbiologist, accepted a position at the National Institute of Health.

Credited with helping to create Nathan Adelson Hospice, Nevada's first hospice, and serving as its chief of staff for five years, he has served as co-director of Hospice of the Chesapeake since 1997.

He is currently a physician and partner in Annapolis Oncology Center, LLC, in Annapolis, a practice with seven doctors. Later this year, the practice will merge with Anne Arundel Health Services, becoming a division of AAHS. "It's the first time in 30 years I'll be an employee again. Anne Arundel Medical Center has a cancer program ripe for expansion. We hope to be an essential part

of the administration. The administration and clinical research will occupy more of my attention."

He first became involved in MDCSCO when it was still MSCO—Maryland Society of Clinical Oncology. "We thought we could serve the District of Columbia, which had no organization, and changed the name in 2000. But, few in D.C. are interested. Most of our activity is still in Maryland."

Graze's terms as president spanned from 1997 to 2002, and from 2003 to 2009. Though he'd like to see more involvement with D.C. oncologists, he did succeed in making MDCSCO a more collegial group. "My idea was to have MDCSCO become an eating and drinking club, to get to know my colleagues. We'd hold quarterly meetings in nice restaurants. That turned out to have been a good idea. I've made some good friends and become more familiar with a large number of oncologists around the state."

The list of MDCSCO accomplishments during his tenure as president includes several items. Graze noted MDCSCO "negotiated successfully with CareFirst to reestablish reimbursement for E&M services provided on the same day as chemotherapy."

"We sat down and talked with them," he said simply.

"MDCSCO successfully petitioned Trailblazers (the CMS contractor at the time) to allow reimbursement for several diagnostic and therapeutic initiatives in cancer care," Graze stated. "The organization helped to create the (now

inactive) Maryland Off Label Use of Drugs panel to assure access to anticancer drugs. MDCSCO worked with Anne Arundel County Health Officer Fran Phillips to preserve the Maryland Breast and Cervical Cancer program, serving uninsured women in Maryland."

"The state had run out of money. We couldn't walk away from women with abnormal test results," he said. "We were able to expand the program and coax the state into funding money for it and including treatment where necessary."

In addition, MDCSCO members successfully presented the case for the Maryland Clinical Trials bill to the Maryland Legislature to assure its passage. MDCSCO was one of the first State Affiliates to successfully compete for a grant from the American Society of Clinical Oncology. MDCSCO subsequently won two additional grants from ASCO.

As a public service, MDCSCO presented Anne Arundel County's first Cancer Forum, an educational program. More recently, in a special ceremony, the group presented Senator Benjamin Cardin (D-MD) with an award recognizing the politician for his work on behalf of cancer care, and "his support and progress in treating folks with cancer in this state."

Said Graze: "The most important concept regarding MDCSCO that I would like to present is that the organization is comprised of, and represents, medical oncologists in Maryland. The organization can offer objective expertise regarding cancer prevention and treatment that could and should be useful



Lobbyist Alice Neily Mutch

to the State Legislature considering legislation impacting cancer care in Maryland."

"Working with Capital Consultants' Alice Neily Mutch, our lobbyist, I have endeavored to position MDCSCO as a resource to the state government," he noted.

Over the past few years, Graze has invested countless volunteer hours in MDCSCO. "It's a difficult job to do well," he said. He might not serve again as president but he's not walking away. "I want to be sure it remains a vibrant organization." What will Graze do with his new spare time? "I want to play tennis and five-string banjo," he said quickly. Not necessarily at the same time, though both involve stringed instruments.

"I was once on the verge of being a semi-professional musician. The five-stringed banjo is an essential part of bluegrass music," he said.

Famed bluegrass musicians Flatt & Scruggs better watch out! "Doc" Graze might be gaining on them.

Article by Wendi Winters

Oncology Foundation of Maryland and the District of Columbia Takes Important First Steps (Continued from page 1.)

spread the word there is hope and that many organizations are working on cancer cures and better care. I felt I could add something to the committee.”

Caring Collection's Bobbie Burnett is no stranger in area hospitals. Over the years, the beautiful stained glass angels she and more than six dozen volunteers create in her Annapolis art studio have raised thousands of dollars to benefit patients at The Johns Hopkins Oncology Center in Baltimore and the Anne Arundel Oncology Center in Annapolis.

“The Foundation has a cross-section of people involved who are doctors and people who've had cancer, like myself. My role is a supporting role, on behalf of the patient. To make sure the patient is treated as a whole person, a total person, not just as a sickness,” said Burnett. “There's a lot of emotion when cancer is diagnosed. Every aspect is devastating for the individual.”

Last year, Burnett discovered she had breast cancer and had a lumpectomy. “I was diagnosed with equipment that Caring Collection had bought for the Breast Cancer Center. I hadn't expected that. I've been giving money to help others and suddenly I was ‘the other.’”

In creating a new angel she hopes can be used to raise funds for the Foundation, Burnett said: “This one is called Eternal Hope. Hope is very important for people who are cancer care providers and for those who have cancer. The emphasis needs to be not only getting over cancer, but in providing the best care so people can learn to live with cancer and have a good quality of life.”

Board member Louis “Lou” Koschmeder, a federal government retiree living near Gambrills, is also a cancer survivor—he was

diagnosed in September 2002 with acute lymphoblastic leukemia. Last year, he and Charlotte, his wife of 49 years, formed a cancer support group at their church, Grace Baptist Church of Bowie, to reach out to other church members with cancer.

Responsible for developing the social media aspect of the Foundation's Web site, which will be launched soon, Koschmeder said, “I'm hoping we, the Foundation, can reach out, encourage people, and point them to valuable treatment, physicians and resources that would help them. I feel incredibly blessed and want to pass on a little bit of it as I am able to.”

“After the 2006 forum, the presenters and the people who attended wanted MDCSCO to keep it up,” said Pat Troy, Executive Director of the Oncology Foundation of Maryland and the District of Columbia. “Our intent is to have these forums all over the state of Maryland and in D.C. We don't know how many we can manage to do in a year, maybe three or four that we rotate throughout the state. The plan is to build an infrastructure throughout the state.”

Her vision for the Foundation is to continue to build on relationships MDCSCO established with area hospitals, the Anne Arundel County Health Department, and chapters of the American Cancer Society and the National Coalition for Cancer Survivorship in a quest to expand efforts to educate the public about the positive things happening in cancer research and care.

Together, the Foundation's board and council are already preparing for the next forum. Mark your calendars: it is set for March 2010 at the Severna Park Elks Lodge, 160 Truck House Road in Severna Park.

Article by Wendi Winters

Want to Make a Difference?

MDCSCO is seeking committee volunteers for committee and leadership positions. Areas needed are:

- Membership
- Programs
- Practice
- Advocacy/Policy
- Social Media



MDCSCO Memberships Now Expire **One Full Year**

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So, Join Today!

HOT NEWS!

On August 3, the new Oncology Foundation of Maryland and the District of Columbia has been granted 501(c)3 status by the Internal Revenue Service. This means that donations to the Foundation are now tax deductible. MDCSCO is the first state society within ASCO to establish an allied 501(c)3 foundation.

MDCSCO Retreat Focuses on Key Issues and Opportunities

MDCSCO hosted a retreat for board members and members in April of 2009. The event, a first for MDCSCO, was designed to focus on key issues impacting the Society, and build relationships and information exchange among attendees. Attendees represented all the basic membership constituencies, including long-time board leaders, newer board members, members who have not been involved in the working of MDCSCO, practice managers, our legislative consultant, pharmaceutical representatives and MDCSCO staff.

MDCSCO President, Dr. Paul Celano, gave an overview of the Society's status and accomplishments, which included a briefing on MDCSCO's role as a State Affiliate of ASCO.

At the retreat, Dr. Celano announced the creation of a new committee structure for MDCSCO, with goal of launching the committees in fall of 2009. The new

committees are Membership, Program, Practice, Advocacy/Policy, and Special Projects. There is also a new Social Media Task Force to provide input for that implementation of the ASCO social media grant.

MDCSCO legislative consultant, Alice Neily Mutch, gave an overview of the current legislative environment and encouraged members to get to know their legislators. As important issues involving access to care come before legislature, it is important for members to make direct contact with their own representatives. MDCSCO is working to be more proactive in matching its members and their concerns with specific legislators.

In fall of 2009, with the help of our Capital Consultants, MDCSCO will focus on finding out what bills are in the works and formulating improved strategies for taking informed positions on hot issues.

Calendar

10/28/2009
Membership Dinner
Elkridge Furnace Inn
Elkridge, Maryland

1/27/2010
Legislative Dinner
Annapolis Yacht Club
Annapolis, Maryland

3/6/2010
Anne Arundel Cancer Forum
Severna Park Elks
Severna Park, Maryland
(full day event with luncheon)

4/10/2010
Hot Topics Forum
Location TBD
(full day event with luncheon)

MDCSCO

550M Ritchie Hwy., #271
Severna Park, MD 21146