Giving Purpose, Gaining Hope



A Cancer Care Ontario Partner

AT THE HEART OF OUR CANCER RESEARCH AND INNOVATION: OUR DONORS AND OUR STAFF.

Giving Purpose, Gaining Hope

AT THE CENTRE OF OUR CANCER RESEARCH AND INNOVATION: OUR PATIENTS. Schematic Of Typical Cell, Showing Subcellular Components.

ORGANELLES:

- (1) nucleolus
- 2) nucleus
- 3) ribosome
- (4) vesicle
- (5) rough endoplasmic reticulum (ER
- (6) Golgi apparatus
- 7) Cvtoskeleton
- (8) smooth ER
- (9) mitochondria
- (10) vacuole
- (11) cytoplasm
- (12) lysosome

5) rough end (13) centrioles

6) Golgi apparatus

× 2 7 6

Patients are at the centre of why we research and discover. Patients are at the heart of how we translate discoveries to deliver even better models of care through new treatments.

WELCOMING MESSAGES

Message from the Senior Leadership, Sunnybrook Health Sciences Centre



We are very proud of the teams of Sunnybrook's Odette Cancer Centre. Their significant contributions to advancing cancer research and the delivery of high quality patient care are helping individuals living with cancer to live longer and live better.

Our Odette Cancer Centre staff provide compassionate patient care and support for loved ones. Their work has helped build the Centre's role as North

America's sixth largest comprehensive cancer centre, ranked among a select group of world-class institutions who engage in intense research, community outreach and who provide the full spectrum of patient care.

In collaboration with the Sunnybrook Research Institute and others, they also conduct cancer research that is having a profound impact on cancer care in Canada and throughout the world.

For example, our researchers are pioneers in focused ultrasound in cancer treatment. Using high intensity MR (magnetic resonance)-guided focused ultrasound, they are destroying localized tumours in the breast, brain and prostate.

Our researchers have made advances in basic science, for example in the study of the glypican-3 gene that will inform the development of novel therapies for related breast, lung and ovarian cancers. Our researchers have developed a unique model to study gene regulation by miRNAs (micro ribonucleic acids) to better understand specific effects on tumour growth.

We lead research in 'Active Surveillance With Selective Delayed Intervention,' a treatment approach for favourable risk and intermediate risk prostate cancer, and lead in work to identify predictors of recurrent invasive disease to better tailor treatment for DCIS (ductal carcinoma in situ), a non-invasive early-stage breast cancer that can progress to invasive disease.

Amidst knowledge and discovery, our comprehensive Breast Centre, as part of

the M-Wing expansion, will launch in the coming years and will extend our leadership in breast cancer care and research. The much-needed expansions to the Chemotherapy Unit and Pharmacy in the Odette Cancer Centre building are also underway.

For their continued support in making successes possible, thank you to our community and government funding partners and to our healthcare partners including the University of Toronto and Cancer Care Ontario.

To the talented teams of Sunnybrook's Odette Cancer Centre, thank you for your compassionate patient care and your enduring work to improve quality of life.

David A. Leslie Chair, Board of Directors Barry A. McLellan President and CEO

Message from the Vice-President, Research



At Sunnybrook, our vision is to invent the future of health care. Research is the pathway by which we will achieve our vision. Working in partnership, our scientists and clinician-scientists at the Odette Cancer Centre and Sunnybrook Research Institute are steadfastly making this journey. They are a formidable group, and they are making progress.

Study by study, result by result, these

individuals and their teams are having impact. Take, for example, the work of Dr. Kullervo Hynynen, director of imaging at Sunnybrook Research Institute. Dr. Hynynen has invented a device that uses heat to destroy lesions in the body precisely and safely. This pioneering technology is in clinical testing, not just here at Sunnybrook, but at leading medical centres worldwide. Its promise is vast: it would do away with the need for surgery to remove tumours, for example. This

WELCOMING MESSAGES

is but one example. There are many more, all with a translational focus. They run from fundamental discoveries made in the lab about how cancer grows—and thus how it might be stopped—to clinical trials testing new devices to detect and treat cancer.

Much of this research will be spurred further once our Centre for Image-Guided Therapeutics, now under construction, is complete. The Centre will be unique in Canada, and perhaps the world. It will bring together into close and productive synergy researchers working on molecules and cells with those working on imaging devices and databases. These teams will apply their skills to solving the most difficult questions of medical science, including those related to understanding, treating and preventing cancer.

Also central to our success are our community partnerships. It is thanks to all of you that we can point with pride to our progress, and promise you that we will continue to move forward. Our vision is to invent the future of cancer care, and we are achieving it!

Dr. Michael Julius, Vice-President, Research

Message from the Chief, Sunnybrook's Odette Cancer Centre, and the Program Research Director, Cancer, Sunnybrook Health Sciences Centre



What continues to inspire us is the enduring courage of individuals living through cancer. This inspiration fuels our unwavering sense of purpose at Sunnybrook's Odette Cancer Centre to improve quality of life. We conduct research with the goal of translating to the clinic, novel ways to better detect cancer and to tailor treatment for the individual. We develop innovations in care delivery to ensure that our patients and their families receive optimal support.

Our annual report of research and innovation is a tribute to both the courageous individuals going through the cancer journey, and their families. The report is also in recognition of our dedicated teams in patient care and research whose significant contributions are helping to transform cancer care.

In collaboration with Sunnybrook Research Institute and other research partners, Sunnybrook's Odette Cancer Centre strives to lead in translational cancer research to connect breakthroughs to clinical care to benefit those at the centre of our work: our patients.

This year's report includes stories of purpose and hope related to our research in gastrointestinal cancer, our clinical trials to improve treatment of women with a newer breast cancer subtype known as triple negative, and our world-leading work in MR (magnetic resonance)-guided focused ultrasound with its potential for minimally invasive treatment for persons with brain tumours.

These advances, and more, in research and care delivery are made possible through the tremendous generosity of our funding partners at the federal and provincial levels and our donors in the community, supported by our foundational partnerships with the University of Toronto, Cancer Care Ontario and the Institute for Clinical Evaluative Sciences in Toronto.

We also acknowledge the Board of Directors and the Senior Leadership Team of Sunnybrook Health Sciences Centre whose invaluable support remains critical to our success.

Dr. Linda Rabeneck Chief, Odette Cancer Centre **Dr. Richard Wells** Program Research Director, Cancer

Vice President, Regional Cancer Services

Regional Vice President, Cancer Care Ontario Special acknowledgements to the staff of the Odette Cancer Centre Clinical Trials group. (Members Geetha Yogendran and Jeff Pham pictured below.)



Credits for Sunnybrook's Odette Cancer Centre Cancer Research & Innovation Report 2010

Special thanks to our patients who shared their stories for this report. **Project Coordinator:** Natalie Chung-Sayers **Writers:** Natalie Chung-Sayers, Megan Easton, Gillian Wansbrough **Photography:** Doug Nicholson, MediaSource **Printing:** TI Group **Art Direction and Design:** Say-Design

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RESEARCH TO TRANSFORM CANCER CARE

RESEARCH



At The Centre of Our Cancer Research and Innovation: Our Patients

From Best Practice Research to the Best Possible Care for Every Patient: Gastrointestinal Cancer Care Team Leads the Way in Ontario

The old-school approach to cancer treatment would have given Peter Duffy much less hope for the future. But at Sunnybrook's Odette Cancer Centre, he is a success story.

The Gastrointestinal Cancer Care team tackled Peter's advanced liver cancer with the newest research-based techniques available, and he has been well ever since his last surgery -- almost four years ago. "Every morning I get up and think it's a great day to be alive," says the 65-year-old retired technical trainer for Canadian Pacific Railway, who lives in Toronto with his wife Rita. "You sometimes hear about people falling through the cracks in the cancer system. Well, I definitely didn't."

After surgery for colorectal cancer in 2002, Peter developed liver cancer. "He presented with a case that many in the cancer community would have said, based on older data, had no possible treatment. They would not have seen where Peter is today, almost eight years later," says Dr. Calvin Law, an Odette Cancer Centre surgical oncologist.

Dr. Law headed the team that determined Peter was a candidate for a state-of-the-art treatment combining chemotherapy and surgical liver resection. "Peter was one of the very early patients where these methods

were a combined strategy," says Dr. Law, a University of Toronto associate professor of surgery.

The Odette Cancer Centre's patient-centred, multidisciplinary model of care -- which supported constant communication between Peter's medical oncologist and surgeon -- made the combined treatment approach possible. On the technical side, Dr. Law and his team used an innovative surgical procedure they were researching: a collagen-sealing device they found reduces blood loss in liver resection. When Peter required a second resection, they used the same method successfully. "We're always looking at the newest surgical techniques and how we can safely advance their use in our patients."

Dr. Law is also a leading health services researcher in gastrointestinal cancer, examining variations in treatment and outcomes across Ontario. The goal, he says, is to ensure every patient, like Peter, has access to the most appropriate and advanced care. "Our first step is always to create and apply best practices here so we can serve as a model, and then look at what is required to develop the model elsewhere."

Today, Peter's main reason to return to the Centre is for his annual delivery of gourmet gift baskets to the doctors, nurses and other staff members who helped him during his stay. Dr. Law reflects this gratitude right back to his patient. "As much as Peter needed us, we needed him," he says. "He's a living reminder that we need to keep working hard on our research because it can make an immediate difference in people's lives."



Targeting A Newer Breast Cancer Subtype

Lori McCrindle was 29 when she first noticed an uncomfortable lump in her armpit. An ultrasound was inconclusive and, because she was nursing her young son, the thinking was that it was inflammation linked to breastfeeding.

She was shocked, then, when a biopsy a few months later provided a diagnosis of locally advanced triple-negative breast cancer.

A newer breast cancer subtype, triple-negative breast cancer is characterized by its lack of "receptors" or proteins that live in or on cells and bind to something in the body to cause the cells to react. This type of cancer is estrogen receptor-negative, progesterone receptor-negative, and human epidermal growth factor receptor 2 (HER2) negative.

Treatments that target these receptors are not effective with triple-negative breast cancer. Instead, chemotherapy has proven to be the most effective treatment. Because these tumours may grow quickly, early-stage, aggressive treatment is also key.

Lori, a Toronto occupational therapist, was referred to Dr. Rebecca Dent, medical oncologist, Breast Cancer Care Team, Odette Cancer Centre, who specializes in triple-negative. "It's a more aggressive form of breast cancer. Of all cancers, it has the highest rate of relapse, but paradoxically it derives the most benefit from early stage treatment," says Dr. Dent, a University of Toronto assistant professor of medicine.

Dr. Dent is leading pivotal research to better understand the biology, behaviour, risk factors, and recurrence risk factors for triple-negative. At the Odette Cancer Centre she is involved in clinical trials specifically targeted to triple-negative. With colleagues she is exploring novel treatment approaches, such as chemotherapy and radiotherapy before surgery, as well as blood vessel-blocking drugs. "We're trying to find the Achilles' heel," she says. "There are likely problems in repairing DNA, so a lot of new targets are looking at targeting DNA."

Dr. Dent recommended Lori for aggressive treatment. She had months of chemotherapy, followed by surgery and radiation. As a participant in clinical trials, she received chemotherapy more frequently – every two weeks instead of every three – since data suggest greater frequency might be more effective. She also had more frequent biopsies and MRIs.

The treatment resulted in a complete clinical response. "You can't really ask for anything more...it was the right doctor, the right clinical trial, the right therapy, and my body agreed to all that," says Lori. "Sunnybrook has literally saved my life."

Now past the first three years when relapse is most likely for triple-negative cases, the data suggest Lori is less likely to have a recurrence in the future. Happily, the treatment also did not preclude having a second child –her son was born in February 2010.



Towards A New Treatment Option For Less Accessible Cancers

If someone has a brain tumour, deep in the brain where traditional surgery is too risky and radiation options are limited, there might there be another treatment.

The need for a viable non-invasive therapy for less accessible brain tumors that have been already radiated is the driving force behind focused ultrasound research at Sunnybrook's Odette Cancer Centre and Sunnybrook Research Institute. Dr. Kullervo Hynynen is conducting world-leading research in MR (magnetic resonance)-guided focused ultrasound in collaboration with Odette Cancer Centre oncologist, Dr. Arjun Sahgal.

Dr. Kullervo Hynynen, a senior scientist at Sunnybrook Research Institute, honed ultrasound and MR imaging technologies to operate like a 'thermal scalpel'. The 'scalpel' produces focused energy (or heat) to destroy tumour tissue beneath bone, like the human skull, while leaving it intact. MR imaging guides the energy to the target and monitors temperature levels to spare the surrounding healthy tissue. The energy used is high intensity ultrasound, instead of low intensity ultrasound used in imaging.

"Our goal is to offer a viable and minimally invasive alternative treatment option for individuals with recurrent primary brain tumors, or recurrent brain metastases, where current treatment options place the patient at significant risks from either a second operation or further radiation," says Dr. Arjun Sahgal, a radiation oncologist in the Central Nervous System Care Team, Odette Cancer Centre and a Department of Radiation Oncology assistant professor at the University of Toronto, who is also working with Dr. Todd Mainprize, a neurosurgeon of the Sunnybrook's Brain Sciences Program.

For Dr. Hynynen and his lab, it was no small feat to harness ultrasound and MR technology into an image-guided tool with the potential to treat brain cancer. Dr. Hynynen is one of the first in the world to show pre-clinically that focused ultrasound could pass through an intact skull. He is also the first to show in the lab that MR imaging could effectively monitor tissue death during ultrasound thermal activity.

To deliver the combined technologies in cancer treatment, Dr. Hynynen co-developed a unique, helmet-shaped device to house an array of ultrasound transducers that spread across the skull. The array, says Dr. Hynynen, is mathematically adjusted for individual skull shape and thickness to produce a sharply focused beam. Add MR imaging, and the thermal destruction of the tumour is focused and monitored in real time.

"We are one of only a few centres in the world with the expertise to develop focused ultrasound for this use," says Dr. Hynynen, director of Imaging at Sunnybrook Research Institute whose work is facilitated by the new research MRI in the Odette Cancer Centre. The researchers estimate the first study with patients will begin later in 2010.



Quick access to radiotherapy helps individuals with advanced illness

An innovative program that provides quick access to radiation therapy helps better manage pain and other symptoms, hence improving quality of life in patients with advanced cancer.

In the past, delays in accessing radiation therapy have been a challenge in Ontario and elsewhere in Canada, with wait times as long as seven weeks between referral to start of treatment.

The Rapid Response Radiotherapy Program (RRRP) was launched at Sunnybrook's Odette Cancer Centre in an effort to fast track treatment for patients with symptomatic metastases. Since the RRRP began in 1996, the average time for referral is now four days or less, and the majority of patients start treatment on the day of consultation.

In the past, having to travel significant distances by ambulance, waiting several hours at the hospital on a stretcher, and then needing to return on a separate visit for planning and treatment was onerous for patients. It could not only discourage them from seeking help but also aggravate symptoms. "Now patients are typically seen in the morning and treated in the afternoon", says Dr. Edward Chow, Professor of Radiation Oncology at the University of Toronto and Chair of the Rapid Response Radiotherapy Program and Bone Metastases Care Team at the Odette Cancer Centre.

Michael Goldstein and wife Karyn's sister Ava was 49 years old when she was diagnosed with advanced disease. Michael, Karyn and her brother Barry feel that the dedicated care Ava received through the Rapid Response Radiotherapy Program contributed to her living beyond the initial prognosis by two years, and that treatments added to her quality of life in the final months. "Ava felt better and stronger having people not give up on her," says Karyn. "Dr. Chow stayed constant with her care and helped her be with us that much longer."

After Ava passed away Michael and Karyn have regularly donated funds to support Dr. Chow's palliative radiotherapy research. "I knew I was putting my funds in a place that was both important to me and others in helping to improve quality of life," says Michael.

The Rapid Response Radiotherapy Program, the first of its kind in Canada, has garnered international attention, and is one of only a few programs conducting palliative radiotherapy research. The group has also published a quarterly newsletter *Hot Spot* which has been very well received.

Dr. Chow also continues to mentor students. One of his students, Philiz Goh developed a booklet, *Bone Metastases: A Guide for Patients*, with Dr. Chow and Dr. Margaret Fitch, co-lead of the Odette Cancer Centre's Patient and Family Support Program.



Patients benefit from unexpected anticancer effects found in non-cancer drugs

"It was an opportunity to try something different – perhaps something that would make a difference," says Earl Orser. Four years ago, Earl participated in a clinical trial with a novel approach to drug therapy.

The novel approach involved re-purposing and re-combining existing drugs, one of which was not originally used in cancer treatment. Revealed through laboratory research, this non-cancer drug ketoconazole produces unexpected anti-cancer effects that can contribute to improved treatment response and more delayed progression of the disease. This trial gave Earl new hope.

He had undergone a radical prostatectomy for the treatment of prostate cancer. Over time his PSA (prostate specific antigen) levels began to rise again. To curb the cancer, oncologists recommended a castration procedure to reduce the level of male hormones, which are known to stimulate prostate cancer growth. "It was a difficult decision but if it meant prolonging my life, it was the right thing to do," says the 77-year old who lives in homes in Toronto and Georgian Bay with Primrose, his wife of 50 years. Not long after the procedure, his PSA began to rise again and he was diagnosed with so-called castration resistant prostate cancer.

The clinical trial designed by one of his oncologists, Dr. Yooj Ko, a medical oncologist in the Genitourinary Care Team at Sunnybrook's Odette Cancer Centre, combined hydrocortisone, dutasteride, and ketoconazole, an antifungal medication found to inhibit hormone synthesis. While dutasteride has been shown to be beneficial for the treatment of benign prostate hyperplasia (i.e., non-cancerous prostate gland growth commonly seen in elderly men), only the combination with ketoconazole appears to reveal the potential use of dutasteride for the treatment of prostate cancer.

"This novel approach achieves something different and innovative. If we can make better use of existing non-cancer and cancer drugs, the result may be an effective treatment not through a new molecular therapy but through a clever combination of what is readily available," says Dr. Urban Emmenegger, a medical oncologist colleague of Dr. Ko, in the Genitourinary Care Team at Sunnybrook's Odette Cancer Centre and a scientist in Molecular and Cellular Biology at Sunnybrook Research Institute looking at such phenomena.

Examples of other drugs with unexpected anti-cancer effects are metformin, a diabetes drug found to interfere with tumor cell metabolism, chloroquine, an anti-malaria drug being tested to enhance cancer cell death when combined with chemotherapy, and itraconazole, an antifungal medication found to block the cellular pathway called Hedgehog, which has a key role in regulating self-renewal of cancer stem cells.

"I feel great and I'm happy," says Earl, an avid gardener who is planning his garden in Georgian Bay to include a woodland area with trilliums. Earl credits his good health to the excellent team effort and open communication and caring of staff at the Odette Cancer Centre.



SUNNYBROOK ODE TTE CANCER CENTRE



Major Sources of External Funding 2008-2009: Cancer Program



\$34.5 Million

INNOVATION IN MODELS O CARE DELIVERY

INNOVATION

At The Centre of Our Cancer Research and Innovation: Our Patients

'Tumour Boards' Ensure Comprehensive Patient Care Plan

When someone is faced with a cancer diagnosis, knowing that the treatment plan is coordinated and based on expert input is very reassuring.

This is the goal of multidisciplinary cancer conferences – regularly scheduled meetings where a cross-section of cancer care professionals come together to discuss their patients and make recommendations on best management.

Multidisciplinary cancer conferences, also referred to as "tumour boards," involve different disciplines such as pathology, radiology, surgical oncology, radiation oncology, medical oncology, nursing, and pharmacy. The confidential forum facilitates sharing of expertise and fulsome input into patient care decision-making.

"Cancer care has become increasingly multi-disciplinary and complex over the last 20 to 30 years. There are new chemotherapy regimes, advances in surgery and radiation therapy which necessitates increased collaboration across disciplines", says Dr. Frances Wright, surgical oncologist, Odette Cancer Centre, and associate scientist, Sunnybrook Research Institute.

"Multidisciplinary cancer conferences are an ideal tool to address needs and are particularly geared to more complex patient care issues, for instance, related to a patient who may need chemotherapy and radiation prior to surgery. These meetings allow for all the health care providers involved in the patient's care to discuss the complexities of the issues together -- to review the pathology and the imaging, and to pool expertise in a collaborative plan for that patient, so that they get the right care in the right order," says Dr. Wright, associate professor, Department of Surgery, University of Toronto.

Cancer Care Ontario invited Dr. Wright to chair an expert panel to produce provincial standards about how multidisciplinary cancer conferences should be run. Driven by a medical literature review and consultations with health care professionals, the panel identified key representation across disciplines, criteria to define complexity of cases, and supportive resources institutions would need to provide.

Multidisciplinary cancer conferences not only facilitate communication and learning for health professionals, they also can influence a patient plan for the better. Studies on multidisciplinary cancer conferences have shown that they also positively affect patient outcomes. "It's kind of a double check in the system," says Dr. Wright, who has led numerous research studies into challenges and enablers for multidisciplinary cancer conferences.

Dr. Wright continues to work with Cancer Care Ontario to implement the standards for the structure and function of multidisciplinary cancer conferences. The current focus is on increasing access to tumour boards for all cancer patients in Ontario regardless of geographic locale, by enabling physicians from community hospitals and specialists from regional cancer centres to connect via videoconferencing.



SUNNYBROOK ODE TTE CANCER CENTRE



INITIATIVES



At The Centre of Our Cancer Research and Innovation: Our Patients

From a Smoke-free Hospital to Smoke-free Lives: Helping Patients Quit for Good



The Odette Cancer Centre has launched an ambulatory care, outpatient-based Smoking Cessation Program to capitalize on the unique opportunity presented when individuals who smoke come in for treatment.

"When people experience a health crisis, they're often looking to make changes in their lives," says Shannon Furey, the program's coordinator and counsellor. "It's a teachable moment." "The Program is especially innovative in its interdisciplinary approach to smoking cessation," says Shannon. "Its patient-centred empathetic approach helps ensure individuals find a way to quit smoking when and how it is right for them."

The Program offers individualized cessation assistance to patients in a growing number of Odette Cancer Centre cancer care teams. Participants receive a combination of counselling, medication, information, community resources and follow-up support. While the program expands, patients across the Odette Cancer Centre can access the Canadian Cancer Society's Smokers' Helpline referral program, which allows health-care providers to refer patients for smoking cessation counselling.

A lot of individuals know tobacco addiction is among the top preventive health issues in combating cancer, says Furey. Smoking is responsible for an estimated 30 per cent of all cancer deaths and is related to 85 per cent of lung cancer cases in Canada. "Most would like to quit. I'm there to provide them with the evidence-based strategies they need to succeed."

To ensure that members of the patient care team play a role in the smoking cessation program, Furey coordinates educational sessions for pharmacists, nurses, social workers and physicians. With her supervisor, Dr. Andrea Eisen, she is also involved in research to promote smoke-free policies in hospitals across the Toronto region. "One of the biggest determinants of a successful smoking cessation program is the smoke-free culture that exists within a hospital."

The smoking cessation program at the Odette Cancer Centre was introduced in 2009 as a pilot project in partnership with the Schulich Heart Centre, and is modeled on an initiative from the University of Ottawa Heart Institute's Ottawa Model for Smoking Cessation.

Working to improve cancer care and care delivery at the provincial level



Sunnybrook's Odette Cancer Centre and Sunnybrook Research Institute are proud to be part of continued efforts to improve cancer care and care delivery...

...at the provincial level through organizations such as the Ontario Institute for Cancer Research. "The Ontario Institute for Cancer Research (OICR) was launched in December 2005 by the Government of Ontario and is dedicated to research in the prevention, early detection, diagnosis and treatment of cancer. Dr. Craig Earle of Sunnybrook's Odette Cancer Centre and Dr. Martin Yaffe of the Sunnybrook Research Institute are members of a multi-disciplinary, multi-institutional collaborative of cancer researchers strategically brought together by the Ontario Institute for Cancer Research to help advance cancer research and the translation of findings into programs, technologies and therapies.

• Dr. Craig Earle is the Director of the Health Services Research Program of the Ontario Institute for Cancer Research, in partnership with Cancer Care Ontario. The Program is both evaluating the benefits, risks and costs of new diagnostic and therapeutic interventions, as well as studying current cancer services to improve how healthcare is delivered to cancer patients in Ontario.

Dr. Earle is a medical oncologist of the Gastrointestinal Cancer Care team at Sunnybrook's Odette Cancer Centre and is a Senior Scientist at the Institute for Clinical Evaluative Sciences (ICES).

• Dr. Martin Yaffe is the program leader for the One Millimetre Cancer Challenge Program of the Ontario Institute for Cancer Research. Researchers in the Program are developing advanced imaging and screening techniques that are targeted to the molecular "fingerprints" of tumours to provide earlier and more accurate detection of cancers. Earlier diagnosis promises to further improve outcomes while allowing less invasive therapies to be used. Dr. Yaffe is also co-director, with platform leader Dr. Aaron Fenster of the University of Western Ontario, of the Institute's Imaging Pipeline Platform which is dedicated to advancing the development and translation of powerful new imaging tools and techniques to facilitate cancer research as well as detection, diagnosis and treatment of cancer.

Dr. Yaffe is a senior scientist in Imaging at Sunnybrook Research Institute.

2009 Awards Highlights

Dr. Gregory Czarnota

American Society of Clinical Oncology, Young Investigator's Award: Dr. Stanley Liu

Canadian Cancer Society, Achievement in Community Service Award: John McKinnon

CANO/ACIO-Schering Plough Lectureship Award: Sherrol Palmer-Wickham, Kathy Beattie, Angela Boudreau, Marg Fitch

Education at Work Ontario, Co-op Student of the Year: Amanda Hird

National Cancer Institute of Canada: Terry Fox Foundation, Young Investigator's Award: Dr. Stanley Liu

Sunnybrook Health Sciences Centre, Bertin Award for Excellence in Customer Service: Tammy Lilien

Sunnybrook Health Sciences Centre, Department of Medicine Young Teacher Award: Dr. Sunil Verma

Sunnybrook Health Sciences Centre, Schulich Award for Nursing & Clinical Excellence: Tracey Das Gupta

University of Toronto, Department of Surgery, Bruce Tovee Teaching Award for Post Graduate Education: Dr. Calvin Law

University of Toronto, Department of Surgery, George-Armstrong Peters Prize: Dr. Robert Nam

University of Toronto, Lawrence S. Bloomberg Faculty of Nursing Award of Distinction: Mary Glavassevich

University of Toronto, Medical Oncology Training Program, Outstanding Teaching Award: Dr. Scott Berry

University of Toronto, Department of Radiation Oncology, Postgraduate Advocacy and Mentorship Award: Dr. Eileen Rakovitch

University of Toronto, Department of Radiation Oncology Outstanding Research Potential Award: Dr. Arjun Sahgal



Dr. Gregory Czarnota is conducting research using ultrasound imaging to detect apoptosis (a form of programmed cancer cell death) that will help better monitor and tailor treatment for the individual. He is also developing anti-vascular ultrasound-enhanced radiation treatments that show promise in making tumours up to 40 times more sensitive to radiation therapy. Most recently. Dr. Czarnota was awarded a Canadian Institutes of Health Research/Terry Fox Program Project Grant. He has also been granted an Early Researcher Award from Ontario's Ministry of Research and Innovation, and a Cancer Care

Ontario Research Chair Award. Dr. Czarnota is a radiation oncologist clinician scientist at Sunnybrook's Odette Cancer Centre, a scientist in the discipline of Imaging at Sunnybrook Research Institute and an assistant professor in the departments of Radiation Oncology and Medical Biophysics at the University of Toronto.

THANK YOU

PHILANTHROPY

In appreciation of our donors' support in building an even better cancer centre for the many communities we serve.

SUNNYBROOK ODE TTE CANCER CENTRE



Amgen Canada Inc., a biotechnology and human therapeutics company, is supporting patient care programs and education at the Odette Cancer Centre. "The dedicated staff at the Odette Cancer Centre never lose sight of the patient," says Yves Zinggeler, Oncology Business Unit director at Amgen Canada. Yves adds, "Together, through our common purpose, we can fight cancer and improve care for Sunnybrook patients."

Odette Cancer Centre staff with members of Amgen Canada.

Cynthia Nagamatsu

"Being diagnosed with breast cancer is like being thrown on a treadmill where you're racing to keep up with everything," says Cynthia Nagamatsu.

Cynthia was 42 when she found a lump – she had just finished nursing her daughter.

In a Sunnybrook waiting room, Cynthia saw a flyer for Live to Tell, an event featuring **Sheryl Crow** that raised funds for Sunnybrook's Breast Centre. Inspired, she ended up raising more than \$13,000 – an incredible amount in an economic downturn.

"Every woman with breast cancer should get to be a Sunnybrook patient. It's so important to be in the right hands."

Cynthia Nagamatsu, Sheryl Crow and Jon Nagamatsu

SUNNYBROOK ODE TTE CANCER CENTRE

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Rethink

We love PYNK at the Odette Cancer Centre!" says **MJ De Coteau**, executive director of Rethink Breast Cancer. "It's innovative and supports young women who would otherwise feel isolated in hospital waiting rooms or support groups where everyone else is 60 or older."

MJ was 22 when breast cancer claimed her mother's life. Overwhelmed by the information printed on breast cancer pamphlets in her doctor's office, MJ knew there had to be a better way to alert other young women and men about breast cancer.

In 2001, she founded Rethink, which helps young people affected by breast cancer through innovative cancer education, research and support programs. Rethink is the lead donor for PYNK at the Odette Cancer Centre. The first of its kind in Canada, PYNK was created by Dr. Ellen Warner to support young women through their journey with breast cancer and generate new research to help treat this group of women, better.



Ellen Pun of Ellen's Food Group Inc.

"If everybody chips in a little, it adds up to a lot," says **Ellen Pun**, president and CEO of Ellen's Food Group Inc. "I hope to be an inspiration for others so that together we can help Sunnybrook create the innovations that will save people's lives."

A successful entrepreneur, Ellen Pun immigrated to Canada from Hong Kong in 1997. Since then she has devoted her time to meaningful causes and helping to create jobs in her community.

Ellen's generous contribution to the Odette Cancer Centre will support renovations for the Chemotherapy Suites and Pharmacy.

PUBLICATION HIGHLIGHT

SUCCESS

At The Centre of Our Cancer Research and Innovation:

V Z

Our Patients

PUBLICATION HIGHLIGHTS

A PARTIAL SUMMARY OF FULL PUBLICATIONS FROM JULY 2008 TO JUNE 2009

Abel GA, Friese CR, Magazu LS, Richardson LC, Fernandez ME, De Zengotita JJ, Earle CC. Delays in referral and diagnosis for chronic hematologic malignancies: a literature review. Leuk Lymphoma 2008;49(7):1352-9.

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