


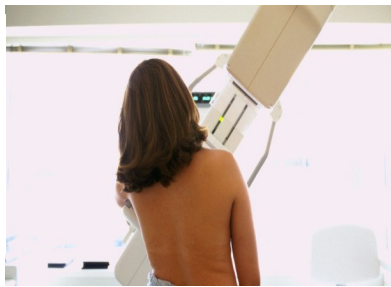


-  Breast
-  Cervical
-  Colorectal



A message from... Dr. Marla Ash



Dr. Marla Ash,
Regional Primary Care Lead -
Integrated Cancer Screening
Program, Central LHIN

As many of you may have read, a study conducted by Cancer Care Ontario and published in Radiology on May 14, 2013 found that digital direct radiography (DR) and screen film are significantly more effective than digital computed radiography (CR) at detecting breast cancer.

The study analyzed 816,232 screens from 688,418 women who were screened in Ontario from 2008 to 2009 and concluded that screening with CR could result in about 10 fewer cancers detected per 10,000 women screened (www.cancercare.on.ca).

What do your patients need to know?

Women can call the clinic where they were last screened to find out what type of mammography technology was used and to discuss their choices regarding their next screening appointment. A list of all Ontario Breast Screening Program (OBSP) clinics can be found at www.cancercare.on.ca/mammogram.

Reasons why your patients should be screened at an OBSP facility

All OBSP sites:

- ◆ Are accredited by the Canadian Association of Radiologists Mammography Accreditation Program (CAR-MAP).
- ◆ Schedule screening appointments, provide recall and result letters to women and coordinate follow-up services for women with suspicious results.
- ◆ Undergo ongoing quality assurance, program monitoring and evaluation to ensure that clients receive high-quality screening.
- ◆ Conduct clinical audits and provider reporting to ensure that all radiologists meet clinical practice standards.

(<https://www.cancercare.on.ca/pcs/screening/breastscreening/OBSP/>)

The chance of having an undiagnosed cancer in women who have been screened with CR radiography is extremely low.

Currently, 67% of women in Ontario aged 50 to 69 participate in regular screening through OBSP or other screening clinics.

In Ontario, 24% of mammography use is with CR technology. Facilities using CR technology will transition to DR technology.

DR	The image is captured and immediately electronically processed as a digital image.
CR	The image is captured within a cassette on an image plate and processed as a digital image. An external reading device is needed to generate the digital image.

Smoking Cessation and Cancer Care

**Improve your patients' quit rates;
talk to them about smoking cessation**

Tobacco use and exposure to second hand smoke is known to increase a number of chronic diseases, including cancer. Sufficient evidence exists showing that smoking causes cancer of the lung, bladder, kidney, liver, upper respiratory tract, stomach, colon, rectum, pancreas, bone marrow and oral cavity (IARC, 2009).

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OBSP High Risk Program—When to Refer Your Patient

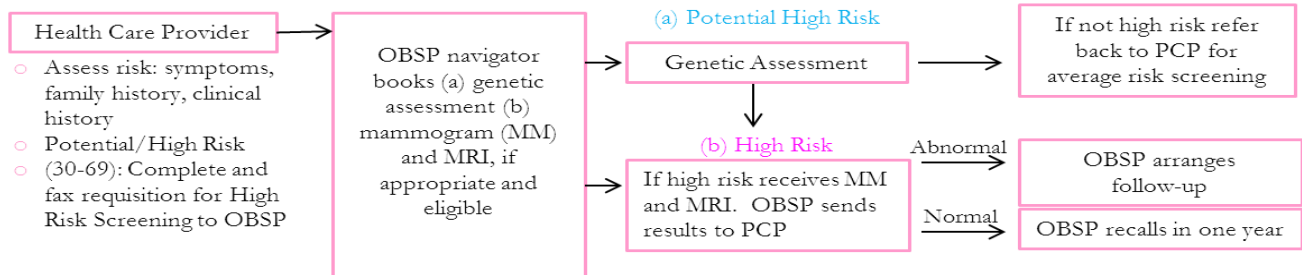
October is Breast Cancer Awareness Month! Stay tuned to hear about our Stylist Saves Lives Campaign in our October edition.

In May, media were buzzing with news of genetic testing for breast cancer and the impact of being a woman at high risk. Specific counseling and screening are offered to women who are 30-69 years old, are asymptomatic, may have a personal history of breast cancer, may have current breast implants and meet one of the following criteria:

- ◆ Confirmed carrier of gene mutation.
- ◆ First-degree relative of mutation carrier and refused genetic testing.
- ◆ ≥ 25% personal lifetime risk (IBIS, BOADICEA tools).
- ◆ Radiation therapy to chest more than eight years ago and before age 30.

For a list of OBSP High Risk screening sites in the Central LHIN, visit <http://bit.ly/136V6WT>.

The “Requisition for High Risk Screening” must be completed by healthcare providers. Visit www.cancercare.on.ca/pcresources.



Submitted by:
Joy Elkayam
Coordination Advisor
Regional ICS Program

York Region Cancer Screening Cards

Submitted by:
Karen Hoare R.N., BScN
York Region Public Health

Available now...contact York Region Pubic Health to order screening cards that!

- ◆ Help patients keep track of their cancer screening.
- ◆ Are like immunization records and have space to enter dates and results.
- ◆ Provide information on provincial screening guidelines for breast, cervical and colon cancer.
- ◆ Include tips on general cancer prevention.

To order cards for your office, please contact Sherry-Ann Nisula by phone at 905-830-4444 ext. 3052 or by email: sherry-ann.nisula@york.ca.



Cervical Cancer Screening—Tools to Help You!



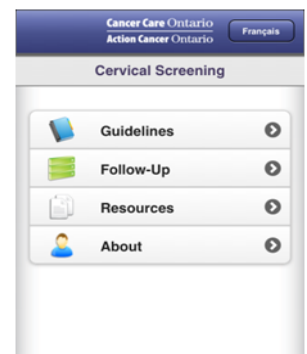
Scan for the app

In a follow-up to the release of the new evidence-based cervical screening guidelines in 2012, there are some helpful initiatives coming your way!

Smartphone/Tablet App—Available Now!

CCO has developed a cervical screening app that provides updated guidelines and educational materials and a feedback section to contact CCO. Visit www.cancercare.on.ca/applibrary or go to the App Store on an Apple device.

Cervical Screening Guidelines App



OCSP Recall Letters

The Ontario Cervical Screening Program (OCSP) will use a population-based registry to send test result letters and invitations to eligible women for cervical cancer screening. These letters will encourage women to talk to their healthcare providers. The registry will also allow OCSP to evaluate the opportunities for program improvement and maintain high quality-assurance standards. **Coming soon.**

Patient Screening Status

In the future, all Patient Enrollment Model providers will be able to view the screening status of enrolled patients, identify patients requiring follow-up, and compare present screening rates to peers through the **Screening Activity Report (SAR)**.

Submitted by:
Alisha Somji
Jr. Health Promoter
Regional ICS Program

National Cervical Cancer Awareness Week—October 20-26, 2013!

Smoking Cessation and Your Patient *Continued from page 1...*

Talk to your patients about smoking cessation. Even a brief intervention improves quit rates!

Research has shown that by conducting a brief contact intervention with your patient (less than three minutes), you can have a positive and significant effect on motivation to quit and cessation rates (CAN ADAPTT, 2011).

It is recommended that healthcare providers have the following:

- ◆ A referral relationship with smoking cessation services such as counselling, pharmacy and clinics.
- ◆ Nicotine replacement therapy and cessation medication prescription options.
- ◆ Access to self-help materials (patient and practitioner).

Members of family health teams, community health centres or addictions agencies, be sure to explore your team's involvement with the STOP Program funded by MOHLTC as part of the Smoke Free Ontario strategy.

Effective Amount of Contact Time	
Total Contact Time	Estimated Abstinence Rates
None	11.0%
1-3 minutes	14.4%
4-30 minutes	18.8%
31-90 minutes	26.5%
90-300 minutes	28.4%
>300 minutes	25.5%

Smoking Cessation Resources for You:

Canadian Cancer Society	http://www.cancer.ca/en/prevention-and-screening/live-well/smoking-and-tobacco/?region=on
Cancer Care Ontario	www.cancercare.on.ca/pcs/prevention/tobacco
Smoker's Helpline	http://quit.smokershelpline.ca/refer/
CAMH	http://knowledgex.camh.net/primary_care/toolkits/addiction_toolkit/smoking/Pages/default.aspx
York Region Public Health	www.york.ca/Tobacco.htm

Smoking Cessation Resources for Your Patients:

QUIT Pharmacy Locator	http://locator.mediresource.com
Cancer Care Ontario	www.cancercare.on.ca/pcs/prevention/tobacco
Smoker's Helpline Quit Program	www.smokershelpline.ca
CAMH	https://www.nicotinedependenceclinic.com/English/teach/Pages/Smoking-Fact-Sheets.aspx

Evidence shows that those with a recent cancer diagnosis can benefit from quitting smoking as it relates to treatment and healing (National Cancer Institute, 2013). Smoking during cancer care has the potential to:

- ◆ Reduce the effectiveness of treatments.
- ◆ Increase the severity and frequency of side effects associated with treatment.
- ◆ Increase likelihood of a second malignancy at the same or another site.
- ◆ Impede healing from surgical procedures.

Submitted by:
Matt George
Smoking Cessation Advisor
Regional ICS Program

OBSP Day/OBSP Preventative Screening Bonus

First Annual OBSP Day – October 10th 2013

The Regional ICS Program will host the first annual OBSP Education Day in October bringing together all sites from the Central LHIN. If you have any OBSP related comments or questions that you would like us to explore at this event, please contact Stephanie Callaghan at scallaghan@southlakeregional.org or by phone at 905-895-4521 ext. 6562.

OBSP Preventative Screening Bonus

CCO has received permission from the Information Privacy Commissioner's Office to print the OBSP Physician Reports – Preventative Screening Bonus. Starting at the end of July, physicians can request a list of their screened patients for the purpose of claiming their preventative screening bonus.

Please contact individual OBSP clinics directly and they can prepare the information and transfer it securely.

Physicians' Corner / Sun Safety 101

Physicians' Corner—Early Bird Special Campaign Wrap-up

Thank you to everyone who supported the CCO Early Bird Special, ColonCancerCheck campaign this spring. The campaign reached over 116,000 people through media and one-on-one outreach. A key message spread throughout the campaign was for people to speak to their primary care providers about colorectal cancer screening. Visit www.ontario.ca/ColonCancerCheck for the most up to date colon cancer screening information.

Sun Safety 101

According to CCO, on a typical summer day one quarter of adults in Ontario spend at least two hours in the sun. As skin cancer accounts for 1/3 of all cancers diagnosed in the province, here are some helpful tips to pass along to your patients:

- ◆ Plan outdoor activities before 11 a.m. or after 2 p.m. when the exposure to UV radiation is less intense.
- ◆ Look for shaded areas to sit or create your own shade with an umbrella.
- ◆ Wear a wide brimmed hat and loose-fitting clothes made of tightly woven material.
- ◆ Apply a broad-spectrum (UVA & UVB protection) sunscreen with a minimum SPF of 30 or higher to exposed skin and lips.
- ◆ Never use tanning equipment.

(<https://www.cancercare.on.ca/cms/one.aspx?portalID=1377&pageId=99509>)

A Call for Patient Experiences

The Regional ICS Program would like to invite patients to share their screening experiences for breast, cervical or colorectal cancer. At their convenience, our team will ask specific questions and allow patients the opportunity to talk about their unique experiences. Their stories may be featured in a video or in print and will encourage others who may be unsure, scared or unaware, to learn more about routine screening and their risks for cancer.



If you would like to help with this project, or if you have a patient who may be interested in sharing their story, please contact the Regional ICS program at 905-895-4521, extension 6065 or email at ICSRegional@southlakeregional.org.

Stay tuned...

The October issue will feature:

- 1) Stylist Save Lives Campaign.
- 2) Staff Screening Initiatives in the Central LHIN.
- 3) October is Breast Cancer Awareness Month—Events in our LHIN.

Newsletter Submissions

The Quarterly newsletter is published by the Regional Integrated Cancer Screening Program for primary care providers within the Central LHIN. Story ideas and feedback are welcome. Please forward your ideas or submissions to ICSRegional@southlakeregional.org

E-mail List

If you would like to be added to the ICS e-mail list for future issues of The Quarterly as well as ICS updates please e-mail ICSRegional@southlakeregional.org.



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