cancer care ontario | action cancer ontario

November 2005, Volume 3, Number 9

## Ontario Cancer News

### Cancer Care Ontario recognized for information technology innovation

Cancer Care Ontario was recently designated a “Master of Innovation," winning the Gold Award for organizational transformation, not-for-profit, from the Canadian Innovation and Productivity Awards (CIPA) for the creation of Pathology Information Management System (PIMS). PIMS facilitates tracking of each patient’s entry and passage through the cancer system. The creation of this innovative tool makes Ontario the first large jurisdiction in North America to have an electronic pathology reporting system.

For more information about the project, read more about the award on the CIPA Web site or refer to the May 2005 issue of Ontario Cancer News.

### Innovative radiation therapy program offered in Hamilton

Cancer patients who need radiation therapy and students who want a career in providing that care are the beneficiaries of a unique program being offered by Mohawk College of Applied Arts and Technology, McMaster University and the Juravinski Cancer Centre at Hamilton Health Sciences.

The three institutions have joined together to offer students the radiation therapy stream of study in the collaborative medical radiation sciences program. Until now, the fully integrated diploma-degree program, the only one of its kind in Ontario, offered students specialization in either medical radiation technology (radiography) or ultrasonography.

The introduction of the radiation therapy stream offers students a combination of theoretical study with practical, experiential training with classes and labs held at the Mohawk-McMaster Institute for Applied Health Sciences and the Juravinski Cancer Centre.

Given that one in three Canadians will develop cancer and radiation treatment (the use of ionizing radiation to kill cancer cells) is needed for about half of all cancer patients as part of their care, demand for highly skilled radiation therapists will continue to increase.

The hope is that those who train in the community will stay in the community, alleviating a chronic shortage of radiation therapists in the region and the province and in turn reducing the time patients must wait for treatment.

For more information, go to the Mohawk College Web site at http://www.mohawkcollege.ca/pressrel/Archives/2005/1111Juravinski.html.

### Reporting on wait times

A critical part of the Ontario government's overall plan for health care is reducing wait times in five major areas: cancer surgery, cardiac procedures, cataract surgery, hip and knee replacements, and MRI and CT exams. The most lasting legacies of the wait time strategy from the perspective of cancer care are the creation of a system to track, measure and continually improve wait times, and the cultural changes within institutions and among health professionals involved in patient care.

For the first time ever, wait times for cancer surgery and the other priority procedures are being tracked and reported to the province on the government's wait times web site, launched last month. The site provides the most up-to-date information that has ever been available about cancer surgery wait times in Ontario. Patients and physicians alike will be able to use the site to compare waits at different hospitals. As it is updated, people will be able to see where wait times are getting better and where they need to improve.

Cancer system managers and planners need good information such as this to measure the performance of cancer services and to identify and solve wait time problems. And reporting wait times to the public will help health service providers put resources where they are needed so that Ontarians receive the cancer care they need in a timely way, close to home.

For the last few years, Cancer Care Ontario has been posting radiation and chemotherapy wait times on its web site. With the

addition of the government wait times site, people now have a fuller picture about access to cancer treatment in Ontario.

A critical partner with the ministry and hospitals on the wait time strategy, Cancer Care Ontario allocated $27-million of government funding to 37 hospitals to deliver 11% (or 4,187) more cancer surgeries. The organization established agreements requiring hospitals to provide information on wait times in order to assess, compare and report on wait times for each hospital and LHIN area. The agreements require them not only to deliver more cancer surgeries, but also to enhance the quality of care they provide. For example, last year, each hospital agreed to adopt a standard pathology reporting system to improve the completeness and accuracy of reports, which will ultimately improve treatment decisions.

"The cancer surgery agreements introduced the element of accountability," says Dr. Jack Kitts, president and CEO of The Ottawa Hospital. "The agreement with Cancer Care Ontario ensures that not only do you provide the service, you ensure that the service is provided in a quality way.

At the request of the Ministry of Health and Long-Term Care, Cancer Care Ontario's Cancer Surgery Expert Panel, led by Dr. Jonathan Irish, has submitted a report to the ministry's Health Results Team recommending wait time targets based on the urgency of the cancer. The government is considering this advice and has committed to announcing provincial targets in selected areas this year.

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**Aboriginal Tobacco Strategy aims to reduce commercial tobacco use among youth**

Cancer Care Ontario's Aboriginal Tobacco Strategy, part of the organization's broader Aboriginal Cancer Strategy, has released its 2006 request for proposals for tobacco-wise community projects. A tobacco-wise community knows the difference between traditional tobacco and commercial tobacco and has the knowledge, commitment, resources and skills to mobilize and deploy strategies to promote and protect the well being of it's members.

Youth groups or youth-focused organizations can apply for funding for action-oriented projects that address the problem of commercial tobacco and the purpose of traditional tobacco in their communities. "The idea is to build capacity in Aboriginal communities so more youth take ownership of the tobacco-wise message," says Joey Fox, ATS Planning Officer. Funding for 8 to 10 tobacco-wise, youth-oriented projects will be awarded in December.

Urban Aboriginal youth are the target of a mass media campaign spearheaded by the Aboriginal Tobacco Strategy. With funding from Health Canada, and in partnership with the Ministry of Health and Long-Term Care, the Aboriginal Tobacco Strategy has developed a series of media products aimed at raising awareness about the difference between traditional tobacco and commercial tobacco. Materials include a display booth, posters, and small give-away items with the message "Be Tobacco Wise -- Keep it Sacred." Aboriginal youth from around the province participated in the planning of the campaign, which launches this weekend at the National Aboriginal Festival in Toronto. The posters will be disseminated broadly to Aboriginal communities and groups around the province.

Another joint Aboriginal Cancer Strategy initiative, in partnership with the Canadian Cancer Society, focuses on raising awareness among the broader Aboriginal population about cancer. The two groups are working together to develop and distribute a series of fact sheets on topics such as traditional tobacco, cancer incidence among Aboriginal populations, seven steps to health, and general facts about cancer and cancer prevention for men and women. The awareness campaign will be launched publicly in Sudbury next month. Fact sheets will be distributed to all Aboriginal populations around the province, and will be made available on-line.

For more information about Cancer Care Ontario's Aboriginal Tobacco Strategy or Aboriginal Cancer Strategy, go to http://www.cancercare.on.ca/index_AboriginalCancerStrategy.htm.

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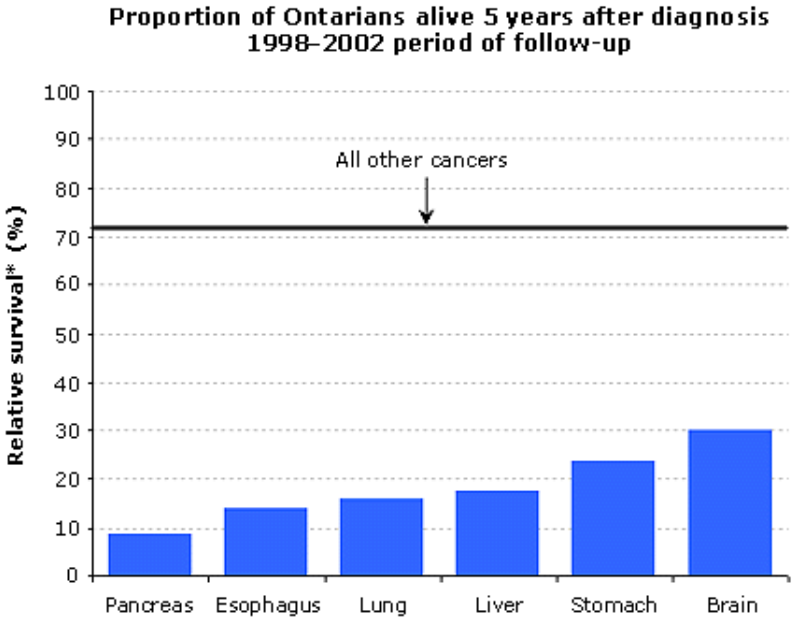
**Ontario Cancer Fact**

Pancreatic cancer is the most fatal cancer in Ontario, with a 5-year relative survival rate of 9%. All of the cancers shown in the graph, with the exception of lung cancer, occur infrequently, each with about 1,000 or fewer new cases diagnosed in Ontario per year. Lung cancer is one of the most common cancers and is also highly fatal, with a survival of only 16%.




* Relative survival compares how long people live after their diagnosis to how long people of the same age in the general population are expected to live. It is estimated here for people followed up in the 1998-2002 period.

Source: Cancer Care Ontario (Ontario Cancer Registry, 2005)

An important reason for the poor survival from many of these cancers is that few of them are found early. Symptoms of several cancers (especially pancreatic, esophageal, lung, liver and stomach cancers) often do not appear until after the cancers have reached an advanced stage. Because of the anatomic location of the pancreas (behind the stomach and deep inside the upper abdomen) tumours can grow quite large and remain undetected. Despite the widespread use of diagnostic tests such as endoscopy for stomach and esophageal cancer, the outcome for these cancers has remained grim.

The effect of treatment on the course of these cancers is limited because most are diagnosed at an incurable stage and because advances in treatment have been small for most of them. Lung cancer, the most common of all fatal cancers with no known effective screening procedures and limited treatment options, causes more deaths than any other cancer. Prevention through reduction in tobacco smoking is still the most realistic strategy to control this disease.

For more information, talk to your health care provider or call Cancer Information Service (1 888 939-3333).

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## People news

**Dr. Linda Rabeneck** has been appointed regional vice president and program chief for the Sunnybrook & Women's Cancer Program effective October 31, 2005. Dr. Rabeneck is a professor of Medicine and professor in the Department of Health Policy, Management and Evaluation at the University of Toronto. She is the former director of the Division of Gastroenterology at the University of Toronto and former head of the Division of Gastroenterology at Sunnybrook and Women's. She holds a medical degree from the University of British Columbia, and a Masters in Public Health from Yale University.

Dr. Rabeneck is a senior investigator with the Cancer Quality Council of Ontario, as well as at the Institute for Clinical Evaluative Sciences (ICES) where she is also head of the Cancer Theme Group. She serves as coordinator of the Patterns of Cancer Care Network for Cancer Care Ontario, and is a member of the Steering Committee of the Ontario FOBT Pilot Study. Dr. Rabeneck is actively involved in health policy discussions related to establishing a province-wide colorectal cancer screening program in Ontario. In 2004 Chatelaine magazine awarded her one of eight national "Women's Health Hero" Awards for her work on colorectal cancer screening.

**John Garcia**, senior consultant, Knowledge Exchange, has been awarded the Non-Smoker of the Year Award by the Non-Smokers' Rights Association for consistently providing the qualities of leadership, dedication, commitment and principled decision-taking in Ontario that have led to major public health achievements.

*Pictured from left to right are Lorraine Fry, General Manager of the Non-Smokers' Rights Association and the Smoking and Health Action Foundation, John Garcia, and Garfield Mahood, Executive Director of the Non-Smokers' Rights Association.*

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## Upcoming events

***Canadian Bioinformatics Workshop, Toronto, February 13–25, 2006***

The Canadian Bioinformatics Workshop Series kicks off its 8th year with a new curriculum for its flagship Bioinformatics Workshop. Presented by the Canadian Genetics Diseases Network, February 13 to 25, 2006, at the MaRS complex in Toronto, this intense, two-week workshop is the starting point for hands-on instruction in the use of software tools for computational biology research. Apply on-line until December 12 at http://www.bioinformatics.ca/apply.php.

For more information, go to http://bioinformatics.ca/course_work/workshops/, send e-mail to course_info@bioinformatics.ca, or contact Shum Sidhu at ssidhu@cgdn.ca or (604) 224-0581.

***Ontario Prevention Clearinghouse 20th Anniversary conference, Toronto, February 21–22, 2006***

The Ontario Prevention Clearinghouse hosts "Moving Upstream Together: Partnering for Ontario's future health and well-being," a conference and 20th Anniversary celebration, next February 21-22 at 89 Chestnut (formerly the Colony Hotel), Toronto.

A working conference intended to generate real change, the event will be of interest to those involved in health promotion, social services, child development, community or public health, poverty, housing, disease prevention, inclusion, policy, research and social advocacy.

For details on the conference program and speakers, go to: http://www.opc.on.ca.

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