

Ontario Cancer News

Tackling Cancer Wait Times and Quality Challenges: Lessons and Legacies from Ontario

If you missed CCO's cancer session at this month's OHA HealthAchieve 2006 Conference, [go to the Cancer Care Ontario Web site](#) or click on the individual links below to download the presentations.



- [Target Setting and Performance Management to Improve Cancer Wait Times and Quality](#) (Terrence Sullivan)
- [Building Innovation into Cancer Care Ontario's Core Business to Improve Patient Care](#) (Helen Angus and Martha Wyatt)
- [Choosing and Using Provincial and Regional Performance Indicators and Targets](#) (Michael Sherar and Jonathan Irish)
- [Computerized Physician Order Entry \(CPOE\), OPIS 2005, Knowledge Transfer in Action](#) (Sarah Kramer and Glen Kearns)

Ontario's patient registry largest in Canada

Ontario is now one step closer to delivering an electronic health record with the implementation of the province's Enterprise Master Patient Index (EMPI), a patient information and linking system used to uniquely identify individuals. And, with more than 43 million records, the provincial EMPI is now the largest client registry in Canada.



In addition to being Canada's largest client registry, the provincial EMPI is unique in that it has been introduced concurrently with a province-wide information system, the Wait Times Information System, which provides surgeons, administrators and health systems managers with information to better monitor and manage wait lists. (Read more about the WTIS in the [June 2006](#) and [October 2006](#) issues of **Ontario Cancer News**).

The EMPI links patient information using unique identifiers such as health card number, medical record number, date of birth and other demographic information.

Developed under Cancer Care Ontario's leadership on behalf of the provincial government, the EMPI is the cornerstone of the development of a standardized electronic health record for all people in Ontario. In future, other provincial systems will eventually be linked to the EMPI to provide long-term, broader benefits for both practitioners and patients.

The EMPI contains information from almost 50 sources -- the largest number of sources in the country -- which include more than 70 hospitals and other health care organizations such as the Ministry of Health and Long-Term Care's (MOHLTC) Registered Persons Database (also known as the OHIP database), the Champlain Regional EMPI and the WTIS. MOHLTC's Registered Persons Database has contributed the largest number of records to the provincial EMPI -- more than 15 million records.

More than 100,000 records are updated or added to the provincial EMPI every day.

The successful implementation of the provincial EMPI has provided the opportunity for improved connectivity between hospitals and other health care providers to increase patient access to care.

For more information about the EMPI or the WTIS, contact the WTIS-EMPI Provincial Project Team at wtisempiprojectcommunications@cancercare.on.ca or 416-217-1235.

Cancer 2020 eScoop



Cancer 2020 e-Scoop is a monthly bulletin from Cancer Care Ontario's Division of Preventive Oncology, consisting of regional and provincial news, initiatives, events and resources relevant to those working in cancer prevention and screening.

- [Read the December issue of Cancer 2020 eScoop](#)

Research update

CCO study suggests that foods consumed during adolescence may reduce breast cancer risk later in life



A new study published in the December 2006 issue of *Cancer Causes and Control* suggests that foods containing phytoestrogens, if consumed during adolescence, may help to reduce the risk of breast cancer later in life.

Researchers at Cancer Care Ontario recruited 6,444 Ontario women – 3,024 of whom had been recently diagnosed with breast cancer – to participate in the population-based, case-control study, the aim of which was to evaluate the intake of foods containing phytoestrogens during adolescent years and the possible association with adult breast cancer risk. Increased phytoestrogen intake from foods eaten during adolescence was associated with a reduction in breast cancer risk.

“These findings may provide important clues about the timing of dietary phytoestrogen intake and how this may relate to breast cancer prevention, as adolescence is a time when breast tissue is rapidly developing and may be particularly sensitive to environmental factors,” said Dr. Michelle Cotterchio, scientist within the division of preventive oncology at Cancer Care Ontario, associate professor at University of Toronto and the principal investigator of the study.

Phytoestrogens are compounds produced naturally in plants and present in many commonly consumed foods. The study focused on the two main classes of phytoestrogens: isoflavones, found in soybeans (and soy products such as tofu); and lignans, found in flaxseeds, grains/breads, sesame seeds, nuts, beans, tea, coffee, and certain fruits and vegetables. Food questionnaires were used to gather information about participants' intake of these phytoestrogen containing foods during adolescence and to assess other factors that might affect their breast cancer risk.

This is the first study to evaluate the association between dietary phytoestrogen intake during adolescence and breast cancer risk among non-Asian women and the first study to evaluate adolescent lignan intake, an important phytoestrogen in North American diets where the consumption of soy foods (isoflavone) is low and foods containing lignans are common.

“Additional studies are necessary to further investigate the possible association between adolescent diet and breast cancer risk,” says Cotterchio. “If replicated, these findings may have important implications for breast cancer prevention. However, many organizations, including CCO, currently recommend consuming five to ten servings of fruit and vegetables daily to reduce the risk of cancer and other chronic diseases.”

The study was funded by the Canadian Breast Cancer Research Alliance with the special funding support of the Canadian Breast Cancer Foundation - Ontario Chapter.

For more information, send e-mail to fiona.taylor@cancercare.on.ca.

Canadian Cancer Society withdraws support for education awards



After conducting a review of all funding requests and reassessing the current programs against the direction defined in the new Strategic Plan, the Canadian Cancer Society (Ontario Division) made the difficult decision to no longer support the Oncology Nursing Awards, Radiation Therapy Student Awards, Oncology Fellowships and a significant portion of the Ivan Smith Studentships. CCS believes that the Division's resources will be better invested in other areas of research.

Cancer Care Ontario recognizes the volume of requests for funding CCS receives from external organizations and supports the decision. We would like to thank the Canadian Cancer Society for supporting clinical education fellowships and contributing to the education of new learners in the specialty of cancer for the past five years.

For 2007/2008, CCO is committed to continuing to support the Harold Johns Studentships and the organization's contribution to the Ivan Smith Studentships. We are also pursuing other opportunities and mechanisms to fund clinical education.

- [Go to the CCO web site for more information about training programs/fellowships/studentships supported by Cancer Care Ontario](#)

Ontario Cancer Fact

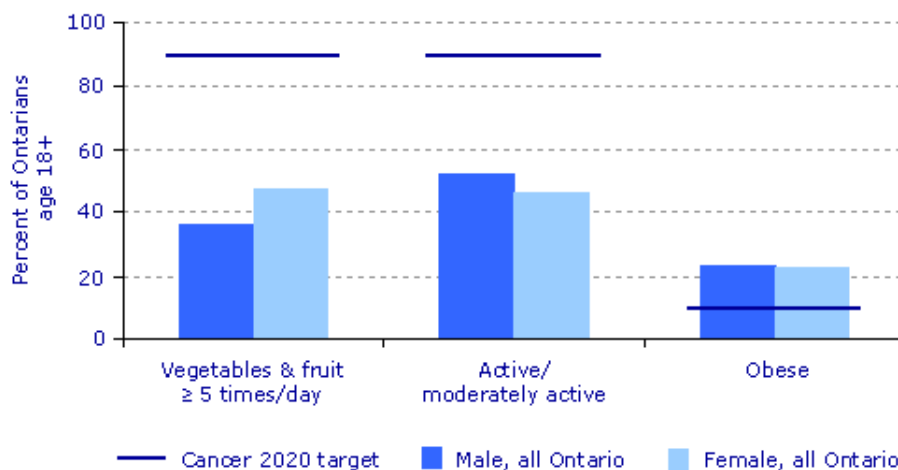


Unhealthy eating, physical inactivity and obesity may contribute to about 30% of cancer deaths in developed countries. According to a report recently released by Cancer Care Ontario and the Canadian Cancer Society, Ontario Division (*Report on Cancer 2020: A Call for Renewed Action on Cancer Prevention and Detection in Ontario*), an intensive, sustained, collective strategy involving government and multi-sectoral stakeholders is required to address unhealthy eating, physical inactivity and obesity in Ontario.

The first Cancer 2020 report (*Cancer 2020 Action Plan*) was published in 2003 and set out ambitious targets to lower the incidence of and mortality from cancer. The current report indicates that there is much work to be done in the area of nutrition, physical activity and obesity.

Less than half of Ontario men (36%) and women (48%) consume vegetables and fruit 5 or more times a day. The target set in the *Cancer 2020 Action Plan* is 90%. Only about half of Ontarians (53% of men and 46% of women) participate in moderate to vigorous leisure time physical activity on most days of the week, compared with a 90% target. The percentage of men (23%) and women (22%) in Ontario who are obese is more than double the 10% target set in the *Cancer 2020 Action Plan*.

2003 levels of vegetable and fruit intake, physical activity and obesity, and Cancer 2020 Targets



Source: Statistics Canada (Canadian Community Health Survey 2003, 2004)

In June 2006, the Ontario government launched Ontario's Action Plan for Healthy Eating and Active Living (HEAL). The \$10-million plan consists of strategies to improve the health of children and youth, build healthy communities, champion healthy public policy, and promote public awareness and engagement. These goals align with Cancer Care Ontario's prevention activities, particularly those that focus on increasing intake of fruits and vegetables. The *Report on Cancer 2020* recommends that this strategy be sustained and funded at the same level as provincial tobacco control initiatives.

For more information about key provincial initiatives related to nutrition, physical activity and obesity, as well as other cancer prevention and screening information, please consult the full *Report on Cancer 2020: A Call for Renewed Action on Cancer Prevention and Detection in Ontario*.

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If you have questions about this Cancer Fact, contact cancerfacts@cancercare.on.ca.

People news



Judy Burns has joined Cancer Care Ontario as director, regional cancer program development and performance management. Judy comes to CCO from the Hospital for Sick Children, where she was child health services director, critical care, and director, psychiatry and adolescent medicine. Judy has extensive experience with quality improvement and performance initiatives at HSC. In addition, she has developed and coordinated regional programs through her consulting work and through her previous position as program director at Queen Elizabeth Hospital.

Judy will be responsible for support for regional cancer programs as well as performance and contract management.

ACCU participates in Canadian Aboriginal Festival

Cancer Care Ontario's Aboriginal Cancer Care Unit (ACCU) participated in the Canadian Aboriginal Festival on November 25th and 26th at the Rogers Centre in Toronto with a health promotion booth.



This year the ACCU booth included:

- **Seven Steps to Health**, a health guide specially adapted for Aboriginal people;
- Opportunities for visitors to check out, learn about and give feedback on the newly redesigned ACCU newsletter;
- A section of the booth dedicated to the ACCU's Aboriginal Tobacco Strategy "Youth for Tobacco Wise Communities" mass media campaign. The Youth for Tobacco Wise Communities mass media campaign addresses the need for culturally relevant commercial tobacco use prevention messages for Aboriginal youth while informing young people on the role of traditional tobacco in Aboriginal communities.

This year, just over 2,500 people visited the ACCU/ATS booth, and almost 3,700 educational pamphlets and brochures were handed out.

The Canadian Aboriginal Festival is attended by Aboriginal peoples from across Ontario and North America. Included in the festival program are youth education days with demonstrations of traditional Aboriginal dancing and drumming and information booths focused on Aboriginal outreach programs.

For more information on the festival visit the Canadian Aboriginal Festival's website at: <http://www.canab.com/>.

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