

Ontario Cancer News



Staying the course in cancer control: Cancer Care Ontario releases 2008-2009 Ontario Cancer Plan Progress Report

Cancer Care Ontario released the progress report that tracks achievements against the 2008-2011 Ontario Cancer Plan, the province's three-year blueprint for improving the entire cancer system. The report states that despite the current difficult economic climate, the province must stay the course and remain committed to the goals and priorities set out in the 2008-2011 Ontario Cancer Plan.

Key findings in the report revealed that:

- Approximately 83,220 Ontarians will be diagnosed with cancer by 2017, largely because of aging and population growth.
- This estimate is about 19,000 more cases than were predicted in 2008.
- Approximately 26,800 Ontarians died from cancer in 2008.
- Is it estimated that approximately 27,300 Ontarians are expected to die from cancer in 2009.

To read more on the Cancer Care Ontario Progress Report, please [visit the Cancer Care Ontario website](#).



CCO recognized internationally

Cancer Care Ontario's (CCO) efforts were recognized internationally in the latest European Observatory on Health Systems and Policies 'Managing Chronic Conditions: Experience in Eight Countries' published in October 2008. CCO was used as a leading example of how cancer can be managed as a chronic disease.

[Read the European Observatory on Health Systems and Policies.](#)



The winner of the Cancer Services Innovation Partnership is...

The Canadian Cancer Society's Ontario Division and Cancer Care Ontario are pleased to announce the winner of the Cancer Services Innovation Partnership (CSIP) Improving the Process of Diagnostics in the Cancer Patient Journey call for proposals.

The one time funds have been awarded to a collaborative project team from Toronto General Hospital, Mount Sinai, and Sunnybrook Health Sciences Centre, and will focus on the "Development of Synoptic MRI Reporting for Primary Rectal Cancer." Congratulations to the successful team. We look forward to hearing about the success of the project.

We extend our appreciation to all the teams who submitted proposals for consideration and acknowledge your efforts towards reducing the burden of cancer in Ontario, improving the patient journey and enhancing the ability of the cancer system to develop, test and foster innovation to the benefit of cancer patients.

In the News...



In January 2009 Cancer Care Ontario's (CCO) Molecular Oncology Task Force released its first report, which describes the current state of genetic testing in Ontario and also makes recommendations on improving access to and quality of genetic testing in Ontario to keep pace with advancing technologies in this field.

[Read the news release on CCO's website.](#)



Ontario researchers and screening experts publish the first integrated strategy to evaluate HPV immunization and cervical cancer screening

Cervical cancer is preventable. Yet, it is the second most common cancer among women world-wide and is the leading cause of female cancer deaths in developing countries.

Published in an upcoming special edition of the Preventive Medicine journal, "Defining a Strategy to Evaluate Cervical Cancer Prevention and Early Detection in the Era of HPV Vaccination" - researchers and screening experts at Cancer Care Ontario and the University of Toronto have defined the first integrated strategy to evaluate the effectiveness of HPV immunization and cervical cancer screening.

[Read the abstract.](#)

"Regular Pap tests and HPV vaccination together can prevent most cases of cervical cancer, but neither approach alone will eradicate cervical cancer unless we undertake targeted approaches to ensure that women who are seldom or never screened have access to both," said Dr. Robbi Howlett, lead author and Manager, Ontario Cervical Screening Program.

Other authors include Dr. Anthony Miller, University of Toronto and Dr. George Pasut, Vice President, Prevention and Screening and Dr. Verna Mai, Provincial Lead, Public Health at Cancer Care Ontario in Toronto, Ontario, Canada.

Ontario's goal is that by 2020, 95 per cent of eligible women will participate in cervical screening and receive HPV vaccine. This vaccine can prevent two high-risk types of HPV (types 16 and 18) and two low-risk types of HPV (types 6 and 11) and it is available to grade eight females as part of Ontario's voluntary school-based immunization program. Being vaccinated does not guarantee protection, as there are several other high-risk HPV types that can lead to cervical cancer.

Within the first three years of sexual activity, regular Pap tests are a woman's best defense against cervical cancer. Pap tests can detect changes in the cervix before a woman might notice any symptoms. Young women receiving HPV vaccine need to be educated on the fact to help them to become aware that cervical screening is still a very important part of their future regular health checkups. All women who are or have ever been sexually active need regular Pap tests.

[Read more about the Ontario Cervical Screening Program online.](#)



ColonCancerCheck wins a Cassie

ColonCancerCheck's advertising campaign received national recognition at the Canadian advertising industry's annual Cassies Awards. Winning a Cassie is an important achievement as these awards recognize creative excellence and campaign results. The creative for the campaign was a result of a partnership between the Communications Information Branch of the Ministry of Health and Long-Term Care and the agency BBDO, Toronto.

View the online commercials on [ColonCancerCheck website](#).

To view a case study on ColonCancerCheck [visit the Cassies website](#).

Mentoring Interprofessional Primary Health Care Teams in Collaborative Palliative Care Practice



Cancer Care Ontario (CCO) has received a third round of funding from HealthForceOntario and the 2008/09 Interprofessional Care Education Fund, for the project Mentoring Interprofessional Primary Health Care Teams in Collaborative Palliative Care Practice.

The goal of the project is to increase knowledge and skills in both collaborative practice and palliative care while improving efficiency and coordination in both areas.

The project builds on regional relationships established in Phase 1, "Mentoring Primary Health Care Nurse Practitioner Family Physician Dyads in Collaborative Palliative Care Practice" (Interprofessional Leadership, Mentorship, Preceptorship and Coaching Fund in 06/07); and Phase 2, "Mentoring Interprofessional Primary Health Care Teams in Collaborative Palliative Care Practice (Interprofessional Care/Education Fund 07/08).

Cancer Care Ontario is working in partnership with Queen's University, l'Hôpital Régional de Sudbury – Sudbury Regional Hospital Cancer Program, London Regional Cancer Centre, Erie St. Clair Regional Cancer Program, Grand River Regional Cancer Centre and the Nurse Practitioners' Association of Ontario.

[Read more on CCO's website.](#)

Ontario Cancer Fact



Lung cancer is the most common cancer cause of death in both men and women, and the majority of lung cancers are caused by smoking tobacco. The impact of smoking rates on cancer mortality is evident by comparing mortality from all cancers combined with mortality excluding lung cancer (noting, however, that lung cancer is not the only cancer causally related to smoking and therefore this comparison underestimates the true impact of tobacco on cancer mortality).

Without lung cancer as a cause of death, cancer mortality rates would have been largely stable in men, with a gradual decline in more recent years resulting in rates seven per cent lower than those in 1950. In women, cancer mortality rates would have been declining steadily over the past 55 years, and would now be 28 per cent lower than in 1950 – a striking decline in cancer mortality masked by the upward trend in lung cancer deaths in women.

[Read January's Ontario Cancer Fact on Cancer Care Ontario's website.](#)

[Subscribe to Ontario Cancer Facts online.](#)

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 January issue of Cancer 2020 eScoop.](#)

People news



Dr. Padraig Warde has joined Cancer Care Ontario as the Provincial Head of the Radiation Treatment Program. Dr. Warde has been a radiation oncologist at Princess Margaret Hospital (PMH) since 1987, where his academic practice focused on genitourinary cancer.

Dr. Warde has also worked as an Associate Director and Deputy Head of the Radiation Medicine Program at PMH since 1999. Here, he led a comprehensive effort to improve processes within the program and advanced new roles for medical radiation therapists. Since April 2008 Dr. Warde has been the Interim Head of the Radiation Medicine Program at Southlake Regional Cancer Centre where he is building a state of the art radiation facility.

Dr. Warde will work with Dr. Whitton, the outgoing provincial head, over a three month period during which time he will increase his commitment to his CCO role.

Brendon Lalonde has joined Cancer Care Ontario as the Director, Clinical Programs and Disease Pathway Management Secretariat. He comes to CCO from the Boston Consulting Group, where he was a project leader focusing on strategy

initiatives in several industries including healthcare and biopharmaceuticals.

Brendon has a background in pharmacology and forensic toxicology. Brendon education includes an MSc from Queen's University and an MBA from the London School of Business.

Brendon will be directing CCO's emerging work in Disease Pathway Management. His portfolio will also include Nursing, Psychosocial Oncology, Patient Education and Palliative Care Programs and business sponsorship of the Ontario Cancer Symptom Management Collaborative.

Mitchell Toker has been appointed Vice-President of Public Affairs for Cancer Care Ontario effective February 17, 2009.

Prior to joining Cancer Care Ontario, Mitchell was a senior consultant at Campbell Strategies where he provided private and not-for-profit sector clients with strategic policy, political and communications advice on a range of issues, including healthcare.

Mitchell has an extensive background in law and public policy with over 15 years experience working in the Ontario Public Service as a senior executive. Prior to joining Campbell Strategies, Mitchell was a senior executive at the Ontario Ministry of Health and Long-Term Care, where he was Director of the Strategic Health Policy Branch. Mitchell also held senior executive and policy positions within the Ontario Public Service including, the Cabinet Office and ministries of transportation, labour and economic development.

Mitchell Toker is a graduate of the University of Toronto, Osgoode Hall Law School and the Queen's School of Business, Public Executive Program.

After seven years of great leadership, **Dr. Tony Whitton** is completing his final term as the Provincial Head of the Radiation Treatment Program at Cancer Care Ontario. Dr. Whitton is assuming a larger clinical role at the Juravinski Cancer Centre where he will specialize in the treatment of pediatric and brain tumours. Dr. Whitton will continue to work with the radiation treatment program on a variety of special projects.

Dr. Whitton played an important role in advancing the delivery of radiation services in Ontario. During his work at Cancer Care Ontario all the recommendations made by CCO to expand the radiation capacity was approved by the MOHLTC, and many of the new and expanded facilities are already operating at full capacity. Dr. Whitton's wise counsel has been instrumental in the development of these new programs. He has worked hard on improving access to radiation treatment, working to increase capacity and improve process efficiencies.

Most recently, Dr. Whitton advanced the province-wide introduction of intensity modulated radiation therapy and other state-of-the-art technologies.

Steve Hall, Director of Information Technology has accepted a position as Chief Information Officer at the William Osler Health Centre.

Steve has made many contributions to Cancer Care Ontario. Steve has been CCO's Director of IT since 2003, initially managing the IT integration for the Regional Cancer Centres. During his tenure, Steve grew the IT Department to the large group we have today, which is focused on provincial-level IT initiatives. Steve has been instrumental in a number of our programs including Computerized Physician Order Entry, Enterprise Data Warehouse, Interactive Symptom Assessment and Collection, and Access to Care.

In addition, Steve managed the initial development of the Wait Time Information System and in 2007 Steve expanded his leadership role, taking on the position of Chief Technology Officer.

Upcoming events



Toronto Myelodysplastic Syndromes Symposium 2009

- Date: May 21 – 22, 2009
- Location: The Sutton Place Hotel, Toronto ON

For more information on the program and registration [visit the event website](#).

Contact Us

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