



2007–2008  
*Cancer Annual Report*

## MESSAGE FROM THE SECRETARY OF HEALTH

The Pennsylvania Department of Health is pleased to present the 2007-2008 Cancer Annual Report to the Pennsylvania General Assembly as required by Act 33 of 2006. Cancer remains a major public health problem—one that profoundly affects the more than 70,000 people diagnosed each year in our state, as well as their families and friends. Cancer incidence rises with age; adults in mid-life or older are most affected. In Pennsylvania, as in the nation, the growing number of older adults will increase the number of people affected by cancer, thereby making present-day prevention and control efforts all the more imperative.

Cancer represents more than 100 distinct diseases characterized by uncontrolled reproduction of abnormal cells in the body. Cancer is the second leading cause of death in Pennsylvania and the United States, accounting for one of every four deaths. Every year, 550,000 Americans die from cancer—1,500 everyday, and one every minute. Yet, many cancers are preventable, and still more are successfully treated—even cured—if detected early enough. Up to 80 percent of all cancers can be prevented when people are armed with the right information, make healthy lifestyle choices, and seek preventive health care.

In 2007–2008, the Pennsylvania General Assembly appropriated \$2,058,000 for cancer control in the commonwealth. Half of those funds are used to support the Department’s HealthyWoman Program, which provides free breast and cervical cancer screening for low income, underinsured and uninsured women in the commonwealth. Currently, the HealthyWoman Program has enough funds to serve just 10 percent of the 110,817 women eligible for this program in Pennsylvania. The other signature program supported by state funds is the Pennsylvania Cancer Education Network, a public education program on prostate, skin, ovarian and colorectal cancers, which represent 30 percent of the cancer incidence burden in Pennsylvania. To learn more about all of our programs, please visit our web site at [www.health.state.pa.us](http://www.health.state.pa.us) (*Select Cancer under Health Promotion and Risk Reduction*).

I wish to extend my appreciation to all of our partners who have contributed their valuable time and energy to implement these programs, which reduce the burden of cancer in Pennsylvania. With your support and help, we remain determined to prevent cancer whenever possible, to detect it at its earliest stage, to treat it with the most appropriate and effective intervention, and to assure the best quality of life for cancer survivors.

Sincerely,

Everette James  
Secretary of Health

## SURVEILLANCE

### Pennsylvania Cancer Registry Achieves Gold Certification for the Eighth Year

The Department of Health's Cancer Registry received Gold Certification from the North American Association of Central Cancer Registries (NAACCR) for the eighth consecutive year. Gold Certification of the Pennsylvania Cancer Registry means the data are of the highest possible quality when measured against nationally recognized standards of excellence in completeness, quality and accuracy.

The Pennsylvania Cancer Registry, operated by the Department's Bureau of Health Statistics and Research, collects information about the occurrence of cancer, the types of cancer diagnosed, the extent of cancer at the time of diagnosis and the kinds of initial treatment patients receive. Approximately 76,000 newly diagnosed cancer cases are reported each year to the Registry. Cancer incidence data compiled from the Registry are available at [www.health.state.pa.us/stats](http://www.health.state.pa.us/stats). The data are used to answer public questions and concerns about cancer; to identify and follow trends in cancer rates; to help focus cancer education, screening and funding programs in areas where they are most needed; and to help to determine if cancer control efforts are making a difference in Pennsylvania.

The Department of Health received federal funding for the Pennsylvania Cancer Registry's participation in the CDC National Program of Cancer Registries (NPCR). The funding

is used to enhance the Registry by meeting national standards for completeness, timeliness and data quality. Enhancements to the Pennsylvania Cancer Registry, made as a result of this funding, include the establishment of additional reporting sources to enhance the completeness of case reporting, increased electronic transmission of data from reporting sources to improve timeliness of data availability and implementation of a new data system to enhance data quality and accessibility.

*Community-based cancer education is now available in all 67 counties of the Commonwealth.*

## THE PENNSYLVANIA CANCER EDUCATION NETWORK

The Pennsylvania Department of Health educated almost 20,000 Pennsylvanians during the third year of operation of the Pennsylvania Cancer Education Network (Network). The Network, a signature program of the Department, is a statewide cancer control initiative focusing on community-based cancer education designed to integrate public health and bioinformatics to reduce risk factors for cancer, adopt healthy lifestyles, increase recommended screenings for cancer prevention and reduce health disparities. The Network is designed to educate the public about colorectal, prostate, ovarian and skin cancers. These four cancers, combined, account for almost 30 percent of the cancer burden in the state. The ultimate goal of the Network is to reduce the number of people who are diagnosed with late stage cancer and to reduce the number of deaths from colorectal, prostate, ovarian and skin cancers in Pennsylvania.

Number of Cancer Cases

PROSTATE*		COLON AND RECTUM*		MELANOMA OF THE SKIN*		OVARY*	
Incidence	Mortality	Incidence	Mortality	Incidence	Mortality	Incidence	Mortality
7,815	1,340	7,400	2,690	2,740	460	1,090	820

\* Pennsylvania Department of Health, Bureau of Health Statistics and Research, "Cancer Facts and Figures Pennsylvania 2008"



*Pictured above (left to right) are staff of the Pennsylvania Department of Health, the PCEN Evaluation Team from Drexel University School of Public Health, and the Network Advisory Committee (NAC). Bottom Row 1: Zekarias Berhane, Achananuparp Palakorn, Kathleen Zitka, Jamiliyah Gilliam, Lonnie Fuller. Row 2: Susan George, Fredrika McKain, Linda Fleisher, Xiaodan Zhang. Row 3: Xiaohau Hu, Lee Rutledge-Falcione, Charlotte Greenawalt, Lisa Ulmer, Linda Rhodes. Back Row 4: Barry Wingard, Joseph Reilly, Phyllis Zitzer.*

The following Network representatives are available to bring the Pennsylvania Cancer Education Network to your community.

- Allegheny County Health Department
- Allentown Health Bureau
- Bethlehem Department of Health
- Chester County Health Department
- Erie County Health Department
- Family Health Council of Central Pennsylvania
- Fox Chase Cancer Center
- Montgomery County Health Department
- Northeast Regional Cancer Institute

- Pennsylvania Department of Health—  
Northeast District
- Pennsylvania Department of Health—  
South Central District
- Pennsylvania State University
- Philadelphia Health Department
- Wilkes-Barre City Health Department
- York City Health Department

Drexel University serves as Network Evaluator. Short term outcomes are measured at the conclusion of each educational session by comparing pre-test and post-test data to assess increase in knowledge, awareness and

improved attitudes. Intermediate outcomes measure the increase in screening of high risk individuals, based on follow-up surveys and data from the Behavioral Risk Factor Surveillance Survey (BRFSS). Long term outcomes measure reduced cancer incidence, mortality and disparity issues, based on BRFSS, Pennsylvania Cancer Registry and Vital Statistics data. These reflect both existing and new surveillance tools which have been developed for the Network.

The impact of PCEN education has been effectively measured to show a statistically significant increase in knowledge and improvement in attitude and increased intention to be screened for all four cancers (colorectal, ovarian, prostate and skin cancers).

## THE HEALTHYWOMAN PROGRAM

### A Breast and Cervical Cancer Early Detection Program

The Pennsylvania Department of Health is proud to participate in the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), which is funded by the Centers for Disease Control and Prevention and by state funds. The program, which was created in response to the Breast and Cervical Cancer Mortality Prevention Act passed by Congress in 1990, is both the first and, thus far, the only national cancer screening program in the United States.

The Pennsylvania HealthyWoman Program (HWP) is a comprehensive public health program that helps uninsured/underinsured women, ages 40–64, to gain access to screening services for the early detection of breast and cervical cancer. The Program provides clinical breast exams, pelvic exams, pap tests, mammograms, diagnostic mammograms and diagnostic services, such as colposcopy and breast biopsies on referral, as well as community-based public education and support services. The HealthyWoman Program is implemented through a network of more than 200 providers throughout Pennsylvania. The Centers for Disease Control and Prevention

estimates there are more than 110,817 women eligible for these services in Pennsylvania. In Fiscal Year 2007–2008, 11,344 women received free breast and cervical cancer screenings; 141 cases of breast cancer were detected, as well as 11 cases of invasive cervical cancer. To assist programs in providing treatment to women diagnosed with breast and/or cervical cancer, the 2000 Congress gave the states the option to provide medical assistance for treatment through Medicaid. When an uninsured woman under the age of 65 is diagnosed with breast and/or cervical cancer, she may be eligible to have her treatment costs paid through Medicaid.

Healthcare Professionals are the backbone of the HWP. Physicians, nurses, nurse practitioners and physician assistants provide life-saving screening, diagnostic services and competent care of Pennsylvania women. The HWP has a statewide network of screening and referral providers that includes more than 200 professionals. The Pennsylvania Department of Health extends their thanks to these dedicated staff.

### PENNSYLVANIA CANCER CONTROL CONSORTIUM (PAC<sup>3</sup>) CANCER ASSETS INVENTORY DATABASE

The PAC<sup>3</sup> Cancer Assets Inventory database, funded in part by the Pennsylvania Department of Health, provides a comprehensive and searchable database for cancer-related programs and resources in Pennsylvania. This unique statewide inventory, with resources directly linked to stated goals and objectives of the Pennsylvania Cancer Plan, is designed to increase access to information for health care professionals and the public and to illustrate how Pennsylvania organizations are implementing the Pennsylvania Cancer Plan. With more than 500 resources already posted in the online database, the PAC<sup>3</sup> Cancer Assets Inventory is a valuable tool that can report current implementation efforts, but also identify where gaps in programs and services exist. Interactive, real-time maps will be created and offered to users to better visualize where those programs exist. When this mapping technology



*Pictured above (left to right) are staff of the Pennsylvania Department of Health and staff of the Alliance of Pennsylvania Councils. Bottom Row 1: Zeenat Rahman, Joyce Albin, Dorothy Mann, Lou Ann Weil, Glenda Radical, and Susan George. Middle Row 2: Betty Saxton, Mary Pelka, Amanda Leach, Barbara Caboot, and Diane Ollivier. Back Row 3: Roslyn Rhodes, Genese Rannels, Rick Baird, Bonnie Delosier, Cindy Stewart, and John Boyle.*



#### Exemplary Implementation Award

*Pictured above (from left to right)—Board Members Aaron D. Bleznak, MD, Pennsylvania Department of Health Leslie A. Best, Board Chair Ronald E. Myers, PhD, former First Lady Barbara Bush, former President George H.W. Bush, PAC<sup>3</sup> Executive Director Kathy Stadler, and PAC<sup>3</sup> President Ronald B. Herberman, MD, accepted the award on behalf of the many PAC<sup>3</sup> members whose efforts made this award possible.*

is unveiled, members will be able to see types of cancer-related programs available across the state, organizations implementing these programs, how programs relate to the goals and objectives of the Pennsylvania Cancer Plan and how programs are classified across the cancer continuum (e.g., prevention programs, screening services, treatment programs, quality of life resources and more).

#### C-Change Award

In the fall of 2007, PAC<sup>3</sup> received an *Exemplary Implementation Award* from C-Change, a na-

tionwide collaborative organization comprised of cancer leaders from government, business and non-profit sectors. PAC<sup>3</sup> received this award for its success in forming partnerships with public, private and not-for-profit organizations across the state to implement goals and objectives from the Pennsylvania Cancer Plan, using evidence-based interventions that can have significant impact on reducing cancer in Pennsylvania. The award was presented by C-Change co-chairs, former President George H.W. Bush and former First Lady Barbara Bush, at the organization's annual meeting in

Washington, D.C. in October. PAC<sup>3</sup> brings members together to identify new synergies to accomplish cancer-related activities that otherwise would not happen. PAC<sup>3</sup> members are actively collaborating to implement specific priority goals and objectives across the cancer continuum and in the crosscutting areas of cancer-related information and dissemination, access, research and disparities.

### CERVICAL CANCER TASK FORCE

The Pennsylvania Cervical Cancer Task Force (Task Force) was established through Act 74 of 2006, the Cervical Cancer Education and Prevention Act. The Act authorized the Pennsylvania Department of Health (Department) to establish a Task Force to evaluate education about and prevention of cervical cancer, to develop a report that would provide recommendations to raise public awareness on the prevention, early screening and detection of cervical cancer and to reduce the occurrence of cervical cancer in women in this commonwealth. In November 2007, the Pennsylvania Department of Health submitted the Task Force Report to the Senate Public Health and Welfare Committee and the House of Representatives Health and Human Services Committee.

*To download a copy of the Cervical Cancer Task Force Report, please visit [www.health.state.pa.us](http://www.health.state.pa.us) and click on CANCER.*

## Task Force Recommendations

- *Cervical cancer can be prevented by raising public awareness and education about behaviors that lessen the risk of an individual for exposure to the Human Papillomavirus (HPV). Since HPV is acquired primarily through intimate sexual contact, public education concerning behaviors that lessen the risk of acquiring HPV should target the highest risk age groups (adolescents and young adults).*
- *Cervical cancer prevention can also be attained through educational campaigns informing women that the Pap test needs to be part of a woman's regular health check-up. Once the cervix has been exposed to HPV, Pap test screening is key to identifying precancerous lesions at their earliest stages, when they can be monitored for change or removed before they develop into cancer.*
- *A vaccine that can prevent precancerous lesions of the cervix in women has been licensed and is recommended by the major medical professional organizations for girls 9 to 26. However, it is important to note that the vaccine does not take the place of Pap tests or guard against sexually transmitted diseases. Women should keep following their health care provider's advice on getting Pap tests.*
- *Just as public health messages must be tailored to specific cultural groups, health care providers must be trained to discuss immunization, screening and behavioral change in a culturally sensitive and responsive manner that uses principles of health literacy.*
- *A significant layer of complexity resides in the inconsistencies that exist between insurance companies regarding reimbursement for immunization and Pap test screening.*
- *Significant barriers exist that must be addressed before we can effectively prevent all cervical cancer and pre-cancerous lesions. The Task Force acknowledges that there are at least two major issues that must be addressed in the future. First is the role of males as transmitters of HPV and the challenge of engaging them as partners in preventing its spread. Second is accessible preventive health care that establishes consent standards of care across geographic, economic and racial lines.*

## Key Recommendations

- **Public Education:** *Develop and implement a multi-media public education campaign to deliver cervical cancer prevention and screening information to women across the state, especially in underserved areas (rural and urban). This would include intensifying outreach to women who have rarely or never been screened for cervical cancer and ensuring that women know that a Pap test should be part of their regular health checkup.*
- **Health Provider Training:** *Ensure that health care providers have access to current training on cervical cancer and HPV to facilitate the successful education of and care for their patients.*
- **Legislation:** *Introduce legislation that facilitates the administration of the HPV vaccine to females age 9 through 26 through reimbursement by insurers.*
- **Funding:** *Secure funding for cervical cancer outreach efforts, maintain and expand existing screening programs and provide coverage of the HPV vaccine.*

The Pennsylvania Department of Health would like to thank the members  
of the Cervical Cancer Task Force for their dedication to this initiative.

**Joanne Corte Grossi, Chairperson**

Deputy Secretary for Health Promotion and Disease Prevention  
Pennsylvania Department of Health

**Leslie A. Best**

Director  
Bureau of Health Promotion and Risk Reduction  
Pennsylvania Department of Health

**Barbara Caboot**

Cancer Control Task Force Staff  
Division of Cancer Prevention and Control  
Pennsylvania Department of Health

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Graduate School of Public Health  
Department of Epidemiology  
University of Pittsburgh

**Donald Yearsley**

Director  
Bureau of Policy, Budget and Planning  
Office of Medical Assistance Programs  
Pennsylvania Department of Public Welfare

## PENNSYLVANIA'S INCOME TAX CHECK-OFF PROGRAM FOR BREAST AND CERVICAL CANCER RESEARCH

The income tax check-off for breast and cervical cancer research is one of five donation op-

tions available for state personal income tax refunds. In calendar year 2007, 32 percent of all refund donations went to the Breast & Cervical Cancer Research Fund, making it the most popular donation refund option. More than 19,000 Pennsylvania taxpayers contributed \$138,133.91 to the Fund in 2007 by designating

all or parts of their tax refunds as donations.

Since 1997, the personal income tax check-off option has generated more than \$2.2 million for breast and cervical cancer research. To date, 50 research grants have been awarded, and eight more researchers were selected to receive grants for the fiscal year 2007–2008. Every penny of the more than \$2 million that has been raised through the fund goes directly to fund breast and cervical cancer research.

In 2007–2008, the following Breast and Cervical Cancer Research grants were awarded:

**Susan Lanza-Jacoby, Ph.D.**, Thomas Jefferson University  
*Interaction of EGFR and COX-2 Signaling in Breast Cancer*

**Andrea Manni, M.D.**, Hershey Medical Center  
*Polyamine Involvement in Breast Cancer Metastasis*

**Gail L. Matters, Ph.D.**, Pennsylvania State University  
*A Pre-Clinical Trial of Combined Anti-polyamine and Protease Inhibitor Therapy for Metastatic Breast Cancer*

**Craig Meyers, Ph.D.**, Pennsylvania State University  
*Towards Development of Therapeutic Targeting Proliferation/Apoptosis in Breast Cancer Using the Tumor Suppressive Adeno-Associated Virus Gene Products*

**Andrew Quong, Ph.D.**, Thomas Jefferson University  
*The Role of Cyclin D1 in Breast Cancer: A Systems Biology Study*

**Judy Quong, Ph.D.**, Thomas Jefferson University  
*Systems Biology Framework for Combined Breast Cancer Treatment Strategies*

**Marius Sudol, Ph.D.**, Geisinger Health Systems  
*Mechanism by which ERBB4 and YAP Inhibit Growth of Breast Cancer Cells*

**Michael Verderame, Ph.D.**, Hershey Medical Center  
*Biological Role of the SRC Kinase in Human Breast Cancer*

**Jong Yun, Ph.D.**, Hershey Medical Center  
*Regulation of Sphingosine Kinase Type 1 in Human Breast Cancer Cells*

## REMOVING BARRIERS TO CANCER CARE WITH PATIENT NAVIGATION

Many patients, especially the poor and older Pennsylvanians, have trouble getting adequate cancer care because of barriers such as social support or transportation. These barriers may cause a patient to delay cancer treatment or miss follow-up appointments until they are very sick. It is vital that patients receive continuous care from screening through diagnosis and treatment to ensure the best quality outcomes. The Department contracted with Fox Chase Cancer Center to pilot a three-year patient navigator system in selected areas in Pennsylvania to guide cancer patients and help ensure timely treatment of their cancers. The system was designed to identify and eliminate barriers to care and to make sure that patients get to appointments, are aware of and can access needed services. Fox Chase recruited almost 100 cancer patients for the study. They implemented a case management system to track the patient navigation services, conducted

follow-up interviews on patients enrolled in the study, conducted focus groups and interviews with professionals to highlight the challenges and opportunities to expand patient navigation into other chronic diseases and sponsored a regional workshop attended by more than 80 professionals focused on implementing patient navigation programs.

The Navigating Pennsylvania Cancer Patients (NPCP) Program at Fox Chase Cancer Center created the linkages between existing resources and services to assist patients as they make their way through the maze of tests, appointments, decisions and treatment, ultimately improving the quality and timeliness of cancer care. The pilot project ended June 30, 2008. The key findings from the pilot revealed:

- Patients in the program generally had lower incomes and educational levels, but the program attracted patients from varied demographic backgrounds.
- The lay person or community navigator was cost-effective and complemented the organizations' clinical approaches.
- Barriers to care most often identified at the urban site included transportation and insurance issues, while the patients at the rural site identified barriers as insurance, housing and lack of caregiver support.
- Addressing language issues through bilingual navigators and using Spanish language materials were important for follow-up and telephone calls.

- Stable retention rates of patients were noted, since patients were willing to complete surveys and participate in telephone follow-ups after being recruited into the program.
- Each organization's procedures and regulatory requirements required coordination of referrals from different physician practice types (hospital practice and free-standing medical oncology practices).
- More outreach and external advertisement was needed in the rural setting to inform and provide navigation services to cancer patients who were treated in private, outpatient physician offices.

As a result of this Department of Health pilot program, Temple University Medical Center and Mount Nittany Medical Center have recognized the value of such a program and have continued funding to support the Patient Navigator Program within their respective organizations.

### MORE THAN 100,000 EDUCATED ABOUT THE IMPACT OF BREAST CANCER ON PENNSYLVANIA FAMILIES

"67 Women, 67 Counties: Facing Breast Cancer in Pennsylvania," funded by the Pennsylvania Department of Health, features women from each of Pennsylvania's 67 counties, along with a message about how breast cancer has touched their lives. The women reflect the diversity of Pennsylvania, and their stories reflect the impact of breast cancer on

themselves, their families and their communities. The exhibit encourages women to learn about early detection and celebrates the lives, courage, hope and dignity of women and families who have battled breast cancer.

The exhibit travels to several select Pennsylvania communities each year and has visited more than 90 communities since its launch more than 10 years ago.

There are three components to this exhibit:

- **Education**—geared toward personal and political action
- **Empowerment**—to provide information to alleviate fear
- **Motivation**—to provide action to find a cause and a cure for breast cancer

In the past year the exhibit reached more than 107,000 individuals with the message that the early detection of breast cancer saves lives. During the period of July 1, 2007 – June 30, 2008 the exhibit was displayed at:

- The Indiana Mall, Indiana County
- DuBois Regional Medical Center, Clearfield County
- Giant Food Store, Camp Hill, Cumberland County
- The Bryce Jordan Center, Centre County
- Western Pocono Community Library, Monroe County
- The Coventry Mall, Chester County

This year featured two firsts—the first time the exhibit was displayed in a grocery store (Camp Hill Giant, Cumberland County) and the first time the exhibit was displayed in a major arena (Bryce Jordan Center, State College, Centre County). The display continues to be in demand, and a large number of sites are waiting in the wings to host the display in their community.

**Department of Health, Pennsylvania Breast Cancer Coalition, and the Lady Lions “THINK PINK”**

The Pennsylvania Breast Cancer Coalition kicked-off the “67 Women, 67 Counties: Facing Breast Cancer in Pennsylvania” traveling photo exhibit in Centre County on Sunday, February 10 at the Bryce Jordan Center in coordination with Penn State University “Think Pink” women’s basketball game. “Think Pink” is an initiative of the women’s Basketball Coaches Association to raise breast cancer awareness in women’s basketball, on campuses and in communities. In 2007, more than 120 schools across the country unified for this effort and helped make the inaugural year a success.

This unique venue provided a great opportunity for the PBCC to reach out to the students of the university and members of the community. With built-in visibility and guaranteed traffic throughout the Bryce Jordan Center from various daily events, the photo exhibit was viewed by a wide audience, spreading awareness and information to all who visited throughout the week.



“67 Women, 67 Counties: Facing Breast Cancer in Pennsylvania”

## 2007–2008 DIVISION OF CANCER PREVENTION AND CONTROL FUNDING

### *State Funds*

Operating Expenses and 300 Level Contracts	\$ 689,700
Special Initiatives	\$ 2,600,000
Contracts and Grants	\$ 3,609,750
Breast and Cervical Cancer Research	\$ 314,892

### *Federal Funds*

Breast & Cervical Cancer Early Detection Program*	\$ 2,376,000
Comprehensive Cancer*	\$ 255,000
Ovarian Cancer	\$ 150,000
Prostate Cancer	\$ 250,000
Preventive Health & Health Services Block Grant	\$ 352,000

\* Note: These amounts include Personnel and Operating Expenses.

### **Fiscal Year 2007–2008 Contracts**

Allegheny County Health Department	\$ 36,323
Allentown Health Bureau	\$ 24,900
Alliance of Pennsylvania Councils	\$ 4,040,490
Bethlehem Health Bureau	\$ 29,900
Chester County Health Department	\$ 29,900
Drexel University	\$ 350,752
Erie County Health Department	\$ 29,900
Family Health Council of Central Pennsylvania	\$ 166,375
Fox Chase Cancer Center	\$ 499,123
Geisinger Clinic	\$ 235,000
Indus Consultancy Services	\$ 115,996
Marlborough Holding, LLC	\$ 48,465

Montgomery County Health Department	\$ 25,050
Northeast Regional Cancer Institute	\$ 766,374
Pennsylvania Breast Cancer Coalition	\$ 82,173
Pennsylvania Cancer Control Consortium	\$ 207,827
Pennsylvania State University	\$ 987,982
Philadelphia Department of Public Health	\$ 125,843
The Trustees of the University of Pennsylvania	\$ 600,000
Thomas Jefferson University	\$ 105,000
University of Pittsburgh	\$ 600,000
Wilkes-Barre City Health Department	\$ 20,000
York City Bureau of Health	\$ 29,900

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PREVENTION AND RESEARCH  
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