# Clinical Trial Now Available For Patients With HPV-positive Oropharyngeal Squamous Cell Carcinoma

Posted on August 19, 2014 by Mount Sinai

A new therapeutic clinical trial is now available at Mount Sinai for patients with HPV-related oropharyngeal (tonsil and tongue base) cancer who are eligible to undergo robot-assisted surgery. This study tests a novel vaccine (ADXS11-001) that patients receive during a specific window prior to undergoing surgery.

"Instead of offering traditional surgery and radiation, we are offering a newer vaccine approach to try to fight the virus, which is the actual cause of the cancer, versus chasing it on the back side with radiation and surgery," says <u>Brett Miles, DDS, MD</u>, the surgical oncologist and coinvestigator on the trial.

The vaccine uses a novel principle to stimulate the immune system. Most of the available HPV vaccines to date have been preventive vaccines that do not treat patients who have already been affected with the virus. The vaccine in this trial uses a therapeutic approach, which can be used in patients who already have HPV-related cancer.

#### For more information:

- Watch a video about the trial
- Call 212-241-4282 or send an e-mail
- Visit <a href="http://clinicaltrials.gov/ct2/show/NCT02002182">http://clinicaltrials.gov/ct2/show/NCT02002182</a>

## **Ruttenberg Center Offers Array of Support** and Wellness Programs

Posted on April 29, 2014 by Mount Sinai



Mount Sinai's Derald H. Ruttenberg Treatment

<u>Center</u>, part of <u>The Tisch Cancer Institute</u>, is dedicated to providing comprehensive care to cancer patients – including offering support and wellness programs throughout cancer treatment.

Patient feedback plays a critical role in developing new resources for our patients and their families. Some of our most popular and latest support and wellness offerings include:

#### Artist-In-Residence

Patient and caregivers can work with a professional artist during treatment at the Ruttenberg Center to create their own artwork



Pet Assisted Therapy

Patients (upon medical clearance) can receive visits from a certified pet therapy dog

#### Therapeutic Massage

A professional massage therapist is available to provide massages to oncology patients during treatment

Mindfulness Meditation, Guided Imagery and Relaxation

A relaxation and meditation practice group open to patients, as well as Ruttenberg Center volunteers and staff

Look Good Feel Better

For women only, provides cosmetic guidance to women undergoing cancer treatment

Post-Allogeneic BMT Support Group

For patients who received an allogeneic (donor) bone marrow transplant

**CLIMB** 

For children ages 6-11 whose parent or caregiver has a diagnosis of cancer

Caring for the Caregiver

Support for caregivers of cancer patients

Post-treatment Networking and Support Group

A group for cancer survivors to discuss post-treatment concerns

Diagnosis-specific support groups

The Ruttenberg Center offers support groups for patients with:

- Head and Neck Cancer
- Lung Cancer
- Colorectal, Liver and Pancreatic Cancer Support Group (Open to patients with any type GI Cancer)
- Leukemia and Lymphoma
- Sickle Cell Disease

All programs are open to Ruttenberg Center patients and are offered free of charge.

For a complete list of programs for our oncology patients, including dates and times, please visit <a href="http://www.mountsinai.org/patient-care/service-areas/cancer/news">http://www.mountsinai.org/patient-care/service-areas/cancer/news</a> and click on "Calendar of Events" or contact Stephanie Eisenman Pelosi, LCSW, Program Coordinator of Social Work

Services for the Ruttenberg Treatment Center at 212.824.8762 or <a href="mailto:stephanie.pelosi@mountsinai.org">stephanie.pelosi@mountsinai.org</a>.

# Department of Radiation Oncology Now Offering Superficial Radiotherapy

Posted on January 13, 2014 by Mount Sinai



The Mount Sinai Department of Radiation

Oncology is now treating patients with superficial non-melanoma skin cancers such as squamous cell and basal cell carcinomas, and keloids, with a non-invasive and painless procedure, Superficial Radiotherapy. The procedure utilizes superficial x-rays that concentrate radiation dose on the skin surface. There are several advantages of using superficial radiation therapy to treat non-melanoma skin cancers and keloids, including:

- No incisions
- No anesthesia requirement
- Minimal to no scarring
- No post-operative infections or complications
- Virtually painless
- Quick treatment time
- Faster healing process
- Minimal side effects

Ideal patients are generally older individuals, individuals with medical problems that may impair wound healing after surgery, or individuals seeking non-surgical treatment options. Mount Sinai's results with superficial radiation therapy to the skin have been excellent. If you or a loved one has a non-melanoma skin cancer or keloids and would like to learn more about non-invasive treatment options, please contact Mount Sinai Department of Radiation Oncology Skin Treatment Program at 212-241-4855.

### **Specialized Metastasis Cancer Care Available at Mount Sinai**

Posted on December 12, 2013 by Mount Sinai



Cancer patients with metastatic cancer, whose disease has spread to another area of the body beyond the initial site of the disease, require specialized care. At our <u>Metastasis Center</u>, we offer a unique approach to treating patients with metastatic cancer.

The core of our program is the personalized, concierge-style service we provide to patients. With this approach, patients can schedule an appointment to come to Mount Sinai for one day, during which a team of experts can conduct tests, review the patient's treatment options, and provide consultation with the patient's off-site doctors if necessary. A Clinical Nurse Navigator will work with each patient to personally tailor his or her visit and schedule all necessary appointments and tests. Remote consultations are also available.



Each patient's full-day consultation is planned according to the needs of the individual. Our team includes medical oncologists, surgical oncologists, radiation oncologists, and other experts. We can provide testing (MRI or CT scans), and can offer services such as symptom management, nutrition, and social work. Each patient's team will be personalized based on the underlying cancer and where the cancer has spread; for example, a patient with kidney cancer that has spread to the lungs will have appointments with a medical oncologist specializing in urology and a surgical oncologist specializing in thoracic

procedures. Based on the full day visit, a detailed, individualized treatment plan will be developed and provided within 24 hours.

One example of our approach to treating patients with metastatic cancer is Stephanie Lee, the patient recently profiled in <a href="Esquire Magazine">Esquire Magazine</a>. Stephanie was initially diagnosed with colon cancer, which had metastasized to her liver. She was referred to Mount Sinai, where she was able to enroll in a novel study involving Drs. <a href="Eric Schadt">Eric Schadt</a>, <a href="Ross Cagan">Ross Cagan</a>, and <a href="Michael Donovan">Michael Donovan</a>; Dr. Schadt then introduced Stephanie to a team of doctors including Drs. <a href="Randall Holcombe">Randall Holcombe</a>, <a href="Daniel Labow">Daniel Labow</a>, and <a href="Kenneth Rosenzweig">Kenneth Rosenzweig</a>. She also had her case reviewed by a multidisciplinary tumor board. Stephanie received chemotherapy and successfully underwent surgery at another institution, but her Mount Sinai team was able to identify a genetic mutation she has, provide recommendations regarding her surgery, and will continue to monitor her case. We may be able to offer novel treatment approaches if standard therapies no longer continue to work.

For more information about the Metastasis Center, visit us <u>online</u>, call 212-241-6756 or e-mail <u>metastasis.center@mountsinai.org</u>.

### **Painting Cancer**

Posted on <u>December 12, 2013</u> by <u>Mount Sinai</u>

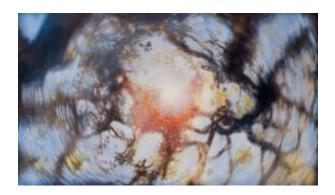


In 2011, painter Reinhold Schwenk was diagnosed with throat cancer. Although the side effects of treatment left Schwenk weak, his oncologist, <u>Dr. Krzysztof Misiukiewicz</u>, encouraged Schwenk to pursue painting as a creative outlet.

The seven resulting paintings are now on display on the third floor of the <u>Derald H. Ruttenberg</u> <u>Center</u> in the <u>Hess Center for Science and Medicine</u>. The paintings (titled Diagnosis, Surgery, Chemo, Radiation, Waiting, Clean, and Hope) represent the stages of the artist's cancer journey, from diagnosis to survival.



**Diagnosis** 



#### Surgery



Chemo



Radiation



#### Waiting



Clean



Hope

"The exhibit documents my experience going through the arduous treatments and the subsequent healing process. I'm thrilled to be able to share with my doctors, nurses and caregivers, as well as fellow patients past and present," says Reinhold Schwenk. He continues to be involved with other patients by serving as a mentor for newly diagnosed head and neck cancer patients, and his paintings continue to foster conversation amongst patients, staff, and visitors. Pausing in front of a painting titled "Radiation," one patient commented, "Radiation was the most difficult part for me."

Batya Reckson, LCSW, a social worker who helped organize the exhibit, describes the work as a way of making meaning out of a challenging life experience. "It is rewarding to do something creative and life-affirming and have a patient be able to give back with gratitude," she says.

Dr. Misiukiewicz says, "What I like about this is that not only does it show you the sequence of the treatment but at the end there's hope - and for cancer patients, this is very important."

For an inside look at Reinhold's series by Blouin ARTINFO, click here.

### Mount Sinai Researchers Identify Mechanisms and Potential Biomarkers of Tumor Cell Dormancy

Posted on November 15, 2013 by Mount Sinai



Oncologists have long puzzled over the fact that after cancer treatment, disseminated tumor cells are quick to grow and form secondary tumors in certain organs, while in other organs they metastasize more slowly. Such is the case with head and neck squamous cell carcinoma (HNSCC) cells, which remain dormant when lodged in bone marrow but rapidly form tumors when they make their way into the lungs.

A study published by *Nature Cell Biology*, <u>TGF beta 2 dictates disseminated tumour cell fate in target organs through TGF-beta-RIII and p38 alpha/beta signalling by <u>Paloma Bragado</u>, <u>Yeriel Estrada</u>, <u>Falguni Parikh</u>, <u>Sarah Krause</u>, <u>Carla Capobianco</u>, <u>Hernan G. Farina</u>, <u>Denis M. Schewe</u>, and <u>Julio Aguirre-Ghiso</u>, reveals that bone marrow contains high levels of TGF beta 2, which activates the tumor suppressor gene p38 in tumor cells and triggers a cascade of events that renders tumor cells dormant and keeps HNSCC growth in check. In the lungs, where TGF beta 2 is in short supply, these cells rapidly form tumors.</u>



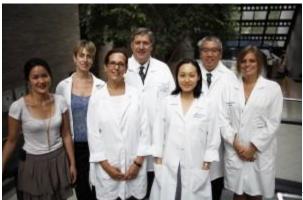
The research team, led by **Julio A. Aguirre-**

<u>Ghiso</u>, PhD, is the first to identify the role of TGF beta 2 in determining whether HNSCC cells will remain harmlessly dormant or behave aggressively in a given location. These findings may

have implications for estrogen-positive breast tumor cells, which have a similar genetic signature to that of dormant HNSCC cells. The study provides a clear molecular mechanism and confirms a century-old theory called the "seed and soil" theory of metastasis, which suggests that a tumor cell – the seed – either sleeps or thrives within the unique environment of each organ – the soil.

# GI Medical Oncology Practice Recognized by QOPI Certification Program

Posted on October 31, 2013 by Mount Sinai



Mount Sinai's <u>Gastrointestinal Medical Oncology</u> practice has been recognized by <u>the Quality Oncology Practice Initiative (QOPI®) Certification Program</u>, an affiliate of <u>the American Society of Clinical Oncology (ASCO)</u>. The QOPI® Certification Program provides a 3-year certification for outpatient hematology-oncology practices that meet the highest standards for quality cancer care.

QOPI certification signifies that an outpatient oncology practice has met core standards in a variety of areas that affect the quality of patient care, including staff training and education, chemotherapy orders and drug preparation, patient consent and education, safe chemotherapy administration, and monitoring and assessment of patient well-being. Mount Sinai is the first site in Manhattan to receive QOPI-certification.

"We are exceedingly proud to have attained QOPI certification," said <u>Randall F. Holcombe, MD</u>, Professor of Hematology and Medical Oncology at the <u>Icahn School of Medicine</u> and Director of Clinical Cancer Affairs at Mount Sinai. "The certification underscores our deep commitment to ensuring the best possible care and experience for all of our patients, and demonstrates ASCO's recognition of the high-quality of cancer care we provide." Dr. Holcombe also serves as Medical Director of the <u>Ruttenberg Treatment Center</u> at The Mount Sinai Hospital, Director of GI Medical Oncology and Deputy Director for <u>The Tisch Cancer Institute</u>.

The QOPI Certification Program (QCP) was launched in January 2010, with only 200 practices currently certified nationwide. Gastrointestinal Medical Oncology at Mount Sinai Medical Center is the first, and only, QOPI certified site in Manhattan. This certification for outpatient oncology practices is the first program of its kind for oncology in the United States.

"QOPI is designed by clinical experts in oncology to give practices the ability to continuously improve the quality of care they provide," said ASCO President Clifford A. Hudis, MD, FACP. "The QOPI Certification Program helps practices determine whether they are providing the best

possible treatment and care to their patients, and offers insight into their commitment to excellence and lifelong learning."

"Recognition by QOPI highlights the patient-centered and collaborative approach to care offered by physicians, nurses, and other staff members throughout The Tisch Cancer Institute," said Dr. Holcombe. "It represents a first step toward achieving this prestigious certification across all of our oncology practice areas."

### **Cancer Clinical Trials Video Now Online**

Posted on September 3, 2013 by Mount Sinai



Today's standard therapies for cancer exist because people have participated in clinical trials – yet choosing to participate in a cancer clinical trial is an important personal decision that can be intimidating for many patients. In order to better help patients understand cancer clinical trials, the reasons to participate in them, and clinical research at Mount Sinai, The Tisch Cancer Institute has released a new video, "Clinical Trials at Mount Sinai: Moving the Field Forward."



The video, which can be seen on Mount Sinai Hospital's <u>YouTube channel</u>, highlights the importance of cancer clinical trials and features several people who participated in clinical trials at The Tisch Cancer Institute. The 4-minute video also demonstrates the teamwork and dedication of the faculty and staff involved in clinical trials at Mount Sinai – including doctors, nurses, social workers, and regulatory staff.

"The role of clinical trials is to bring to patients the latest discoveries from the laboratory and try to provide them with new treatments," says <u>Steven J. Burakoff</u>, MD, Director of The Tisch Cancer Institute. "It's really about the physician and the patient working together to advance the field and get the best care possible," says Marshall Posner, MD, Director of the Cancer Clinical Trials Office.



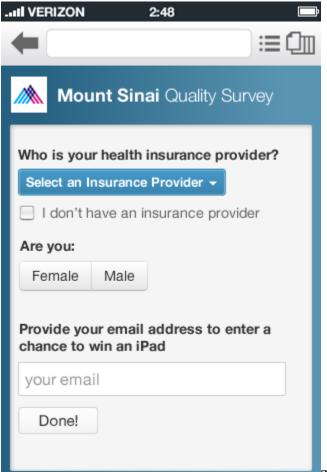
Clinical Trials at The Tisch Cancer Institute. Moving the Field ....

The patients featured in the video, who were treated at the <u>Dubin Breast Center</u> and the <u>Derald H. Ruttenberg Treatment Center</u>, also told their stories on the Mount Sinai website in order to better share their experiences and encourage others to consider enrolling in cancer clinical trials. These stories include a breast cancer patient who enrolled in two clinical trials; an oral cancer patient who enrolled in a clinical trial and had his spouse also participate in a research study; and a woman with head and neck cancer whose life was saved by Mount Sinai not just once, but twice.

For more information on cancer clinical trials at Mount Sinai, visit www.mountsinai.org/cancerclinicaltrials.

# **New Patient Satisfaction Tool Launches at Ruttenberg Treatment Center**

Posted on August 2, 2013 by Mount Sinai



The Derald H. Ruttenberg Treatment Center of

The Tisch Cancer Institute launched a new tool on July 15<sup>th</sup> to measure and improve patient satisfaction. RateMyHospital® is a patient-feedback survey tool that allows patients receiving treatment in the Ruttenberg Center to easily provide feedback on their care. In only a few weeks, dozens of patients have already provided feedback using the new technology.

Traditional patient-satisfaction scores are based on paper surveys that are sent to patients after they have left the facility. RateMyHospital helps health care providers get real-time patient feedback – essential in assessing and improving patient care – because patients can fill out the online survey immediately, even before stepping through Mount Sinai's doors.



"As patients fill out their paperwork at the Ruttenberg Treatment Center, we ask them to provide us with a cell phone number," said Randall F. Holcombe, MD, the center's Medical Director. "From there, we send them a text message asking them to fill out a brief survey on their smartphone. So far, the response has been outstanding. We get more responses than with traditional paper-based mail surveys."

Patients answer twelve questions with a 5-star rating system, with 5 being the best value. Questions inquire about the patient's ability to get an appointment, office wait times, physician or office staff availability by phone, and cleanliness of the facility.



RateMyHospital will be rolled out all clinical areas at Mount Sinai in the future. "This is just one tool to help establish a direct line to patients in our ongoing efforts to provide exceptional medical care," said Dr. Holcombe. "This tool is simple and easy for patients to use and it provides us with immediate feedback so that we can continue to improve the patient experience."

### **New Myelofibrosis Drug Holds Promise**

Posted on March 21, 2013 by Mount Sinai



In a phase I clinical trial,

physicians at The Mount Sinai Medical Center have identified the first drug that appears to stop the progression of myelofibrosis, a life-threatening blood cancer. The investigators found that, at low-doses, panobinostat (LBH589) successfully halted and reversed damage to the blood and bone marrow in several of the forty patients enrolled in the trial. Panobinostat, manufactured by Novartis, is a histone deacetylase inhibitor that affects the chromatin structure of malignant cells.

The study, led by Ronald Hoffman, MD, Albert A. and Vera G. List Professor of Medicine, and Director of the Myeloproliferative Disorders Research Program, and John O. Mascarenhas, MD, Assistant Professor of Medicine (Hematology and Medical Oncology), was published online in the January 21, 2013, issue of the British Journal of Haematology.

Myelofibrosis is commonly diagnosed in people between the ages of 60 and 70, and affects approximately one-to-two out of every 100,000 people in the United States annually. The disorder is characterized by anemia, fatigue, bone or joint pain, and an enlarged liver and spleen. Survival usually is between five and seven years, but some patients develop acute leukemia, which can limit survival to three-to-five months.

According to Drs. Hoffman and Mascarenhas, who designed and ran the trial, persistence and ingenuity paved the way for their findings. Signs of significant improvement appeared a year after patients were started on an oral regimen of low-dose panobinostat. "We have patients who are doing well after two-to-three years, and whose survival was predicted to be on the order of months," says Dr. Mascarenhas.

The key to success was maintaining a low dosage. Interestingly, too high a dosage of panobinostat would have produced toxicity forcing patients to drop out of the trial before positive results could be seen, says Dr. Mascarenhas.

"Persistence led us to finally see signals of activity," Dr. Mascarenhas recalls. "One of our patients came in for a checkup and her blood smear looked normal. I gave it to Dr. Hoffman to look at and asked him what he thought was wrong with the patient. He said, 'Nothing. It's normal.' Then I told him it was one of our patients in the trial."

To date, the only potentially curative treatment approved for people with myelofibrosis is a bone marrow transplant. But elderly patients or those with comorbidities are not eligible for transplants, and a suitable bone marrow donor is not always available.

Drs. Hoffman and Mascarenhas have now initiated a new phase I clinical trial that will combine lower doses of panobinostat with ruxolitinib, a drug manufactured by Incyte Pharmaceuticals that has been approved by the U.S. Food and Drug Administration to treat the symptoms of myelofibrosis.

This article was first published in **Inside Mount Sinai**.