

# Here Comes the Sun: Be Aware in Primary Care!

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Summer is here, and the living is easy. Sunshine beckons us outdoors, but are we covering up in hats,

sunscreen and shades to protect ourselves? Skin cancer is the most common cancer, with a lifetime risk of 1:7. Melanoma incidence in Manitoba increased 12-fold between 1960 and 2009. Fortunately, despite the rising incidence, the mortality rate for melanoma has remained relatively stable, perhaps reflecting better screening, detection and therapy. A provocative German study showed a reduction in melanoma deaths for five years subsequent to a one-time skin screening of adults performed by FPs or dermatologists.

Where do we look? The backs and legs of white females and the backs of white males are the most common sites of melanoma. African Americans have more disease on palms, soles and mucous membranes. Five per cent of melanomas are "acral lentiginous" affecting the digits. Don't forget Hutchison's sign, which describes the ominous leak of pigment outside the nail bed with associated nail dystrophy.

How do we treat? Complete excisional biopsy of suspicious lesions is always advised, and wider lesions require wider borders. Full depth sampling is necessary, with biopsies extending into the dermal fat. Punch biopsies should be performed initially in

hard to access areas (i.e. periocular) or on extremely large lesions for which definitive skin grafting may be necessary. Mitotic counts (mitoses/ mm2), ulceration and Breslow depth are the most



are the most useful prognostic factors. Regional sentinel lymph node biopsies are recommended for tumours over 1 cm.

How do we follow up? The follow up schedule after treatment for melanoma is not standardized. The current recommendation is a total skin exam every 3 months for one year, then every 6 months for five years, followed by annual exams. No routine imaging or laboratory studies are recommended in asymptomatic people.

**But let's prevent it!** Ultraviolet (UV) radiation causes most skin cancers. Those with fair and freckled skin are most at risk. The US Preventative Task Force

issued a Grade B recommendation that all fair skinned children 10-24 years should be advised to limit UV exposure. However, it is estimated one third of teens use tanning beds. Tanning bed use is conclusively linked to onset of BCCs before age 40, especially on extremities, and

doubles the risk of melanoma. Pretanning for holidays provides only a SPF of 2-4. The bolus sunshine of tropical vacations is particularly likely to provoke SCC and melanomas. Similar to smoking cessation, physician advice to stop or decrease tanning bed use

## **Announcements**

#### Community Cancer Care 2012 Educational Conference:

The Changing Face of Cancer in Manitoba. October 18 & 19, 2012. Victoria Inn and Conference Centre, Winnipeg. For more information call Debra at 204-787-5159.

#### **Cancer Day for Primary Care**

was a huge success on January 27, 2012. If you missed the event, or if you would like to review the presentations, they are available on the CancerCare Manitoba website. Look for the Education and Training tab at: www.cancercare.mb.ca/home/

health\_care\_professionals/ UPCON (Uniting Primary Care and

# Oncology Network) wants you!

UPCON is a province wide supportive education and information program that connects primary care and oncology. "UPCON for me has been one of deepening relationships with colleagues (both family docs and cancer specialists), ongoing high-quality CME, and a growing sophistication in medical practice at the interface between oncology and family practice." Dr. Mark Kristjanson, Family Practice Physician, UPCON member.

For more information about UPCON please see our page under 'Health Care Professionals' at Cancercare.

#### **Editorial Team**

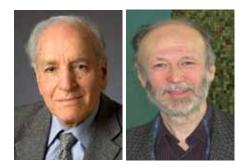
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# Congratulations

Congratulations to Dr. Majid Shojania, Hematology, and Dr. Keith Jones, Radiation Oncology, on their retirement from CancerCare Manitoba after 47 and 26 years respectively. We wish them well in their new adventures!



### Important Update! New Instructions for the ColonCheck FOBT (Hemoccult II Sensa)

ColonCheck no longer requires individuals to exclude red meat from their diet or stop taking NSAIDS. This is based on evidence that dietary and medication restrictions do not have a significant effect on the positivity of the guaiac FOBT. The Program will continue to instruct individuals to limit their Vitamin C intake to minimize the risk of false negatives.

The Hemoccult II Sensa, unlike other FOBTs, does not require diet restrictions for peroxidase containing vegetables. The analysis of ColonCheck tests is delayed to minimize the risk of false positives due to any peroxidases.

If you would like to distribute FOBTs in collaboration with ColonCheck, please call Linda Starodub at 788-8480.

# Tell us what you think about *CancerTalk* and win!

Complete a short survey that will give us feedback about what you think of this newsletter. You will be entered to win a Deluxe Bed & Breakfast from Inn at the Forks. The draw will take place July 15,

2012.

Your prize will include one night accommodation in a deluxe room and breakfast for two in The Current



Restaurant or Weekend Brunch Premiere A La Carte Menu (max. \$50)

http://www.surveymonkey.com/s/TTC7J2Q

# Oral Cancer Drugs Now Free for Patients

Venetia Bourrier B.Sc. Pharm., FCSHP Director, Provincial Oncology Drug Program

The Home Cancer Drug (HCD) Program allows access to eligible outpatient oral cancer and supportive drugs at no cost to the patient. Once cancer patients have registered with the HCD Program, these prescriptions can be filled at any Manitoba pharmacv at no cost. This includes common treatments for breast cancer. such as tamoxifen and aromatase inhibitors (anastrozole, exemestane and letrozole), as well as antinauseants. Some of the newer. expensive agents (e.g. everolimus, lenalidomide) may require special approval before they will be covered.

The program came into effect April 19, 2012 and only covers prescriptions for eligible drugs that are filled on or after that date.

Patients must be identified by CCMB as receiving eligible drugs, be registered with the Manitoba Pharmacare Program, eligible for Manitoba Health coverage, and not already covered by other provincial or federal programs (i.e. RCMP)

Enrolment is managed through CCMB, which is working with retail

pharmacies to identify and register patients. Family physicians/NPs who are following cancer patients can also initiate the application by faxing in the form included in this edition of *CancerTalk*. CCMB will ensure the form is complete and submit it to Manitoba Health.

Once the HCD application has been completed and the Pharmacare application is approved by Manitoba Health, prescriptions for eligible drugs can be generated by FPs/NPs and filled at no cost to the patient.

For general information about the HCD Program or to enrol a patient in the HCD Program, please call or direct patients to call: CancerCare Manitoba Pharmacy at (204) 787-4591 (Monday to Friday from 8 a.m. to 4 p.m.).

To find out if a patient is currently enrolled in the HCD Program and/or the Manitoba Pharmacare Program, please direct them to call: **Provincial Drug Programs at (204)** 786-7141 or toll free at 1-800-297-8099 (Monday to Friday from 8:30 a.m. to 4:30 p.m.).

### **Clinical Trials: Good for Patients**

CancerCare Manitoba (CCMB) has been involved with clinical trials since the 1960s.

As a result of clinical trials there have been improvements in treatment and outcomes for many types of cancer and benign hematological disorders including, improved symptom management, more oral drug regimens, new surgical techniques, shorter courses of radiation treatment, and better quality of life.

The vision of the Clinical Investigations Office at CCMB is that every patient has the opportunity to be screened, and if eligible, be offered a clinical trial as one of their treatment options.

For more information, please visit www.cancercare.mb.ca, look for the Research tab and click on Clinical Trials.

### Could it be Cancer?

#### Diagnosing Ovarian Cancer in Primary Care

#### Dr. Jeff Sisler MD, CM, CCFP, FCFP Medical Lead (Primary Care), CCMB

Ovarian cancer (Ov Ca) is the one we worry about missing: "the disease that whispers," with vague symptoms and a poor 5 year survival. What do we need to keep in mind as we evaluate our patients? What diagnostic errors are common, and to which symptoms should we pay the most attention?

First, a few facts:

- Most women with Ov Ca are postmenopausal
- Most symptoms are abdominal ones, not pelvic, and the GI investigations we often order (abdominal imaging, endoscopy) may not help
- IBS is the most common misdiagnosis, and would be an uncommon "new" diagnosis in an older woman!

While there are many symptoms of Ov Ca, research by Dr. Barbara Goff has clarified the four symptoms in primary care that are most predictive. It's easy to remember: Missing the **BUS** is a **PAIN**!

**B** is for **BLOATING:** epigastric fullness, satiety ("I ate too much!")

U is for URINARY symptoms: frequency and urgency

**S** is for SWELLING of the abdomen: "My pants are too tight."

**PAIN** is for abdominal or pelvic pain

Pay particular attention when symptoms are more RECENT (over the last 6 months or less), more FREQUENT (half the days of the month, not just a few days or perimenstrual), more NUMEROUS, and more SEVERE. Your next step? A pelvic exam, a pelvic ultrasound, which will be done transvaginally, and a Ca-125 only if a mass is felt or seen later on ultrasound. If you're concerned, call a gyne-oncologist or fax them a referral to CCMB at 204-786-0621.

# Where to find us

### Smoking Cessation Program at CancerCare Manitoba

CancerCare Manitoba is pleased to provide a comprehensive smoking cessation program. The Quit Smoking Program is available to cancer patients and their family members, as well as CancerCare staff and their families.

The program provides individualized counselling and support, as well as free access to pharmacological smoking cessation aids such as nicotine replacement, buproprion and varenicline. The cessation plan is created with each individual, and close follow up and support are provided.

The Quit Smoking Program is provided by a multi-disciplinary team, including a nurse, nurse practitioner, pharmacist and social worker.

Self-referrals can be made, or a health care provider can refer by phoning (204)-787-1202 or tollfree 1-888-775-9899

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decreases the risky behaviour. And remember that sun/UV exposure is a potentially risky and unreliable method of vitamin D acquisition, unlike oral supplements.

This season, counsel patients, especially the young, to avoid sun between the hours of 11 a.m. and 4 p.m., use SPF 15 or greater, and seek other UV protection such as clothing, wide-brimmed hats, shade and sunglasses. And look closely for skin cancers in our day to day encounters with patients!

#### **CCMB Referral Centre**

(204) 787-2176 Fax: (204) 786-0621 <mark>M-F, 083</mark>0-1630, closed Stat Holidays

Emergency Referrals: HSC paging: (204) 787-2071 St Boniface paging: (204) 237-2053 http://www.cancercare.mb.ca

#### **CancerCare Manitoba**

Toll Free: 1-866-561-1026

Inquiry & Reception MacCharles Unit (HSC) (204) 787-2197 St. Boniface Unit (204) 237-2559

**Pharmacy:** (204) 787-1902

CCMB Helpline for Healthcare Professionals (204) 226-2262

#### **Breast Cancer Centre of Hope**

691 Wolseley Street (204) 788-8080 Winnipeg, Manitoba R3C 1C3 Toll Free: 1-888-660-4866

#### **CCMB Screening Programs**

25 Sherbrook Street, Unit #5 Winnipeg, Manitoba R3C 2B1

**BreastCheck** (204) 788-8000 Toll Free: 1-800-903-9290

CervixCheck (204) 788-8626 Toll Free: 1-866-616-8805

ColonCheck (204) 788-8635 Toll Free: 1-866-744-8961

Community Cancer Programs Network (CCPN) Office (204) 787-5159 Toll Free: 1-866-561-1026 **Manitoba Prostate Centre** (204) 787- 4461 Fax: (204) 786-0637

Patient and Family Information and Resource Centre (204) 787-4357 Toll Free: 1-866-561-1026

**Patient and Family Support Services** (204) 787-2109 Toll Free: 1-866-561-1026

**Patient Representative** (204) 787-2065 Pager: (204) 931-2579 Toll Free: 1-866-561-1026

Western Manitoba Cancer Centre 300 McTavish Ave. East Brandon, Manitoba R7A 2B3 (204) 578-2222 Fax: (204) 578-4991

#### **Other Numbers:**

**CancerCare Manitoba Foundation** Donations & Inquiries (204) 787-4143 Toll Free: 1-877-407-2223 Fax: (204) 786-0627

**Canadian Cancer Society** Volunteer Drivers 787-4121 Toll Free: 1-888-532-6982

Cancer Information Service Toll Free: 1-888-939-3333

WRHA Breast Health Centre (204) 235-3906 Toll Free: 1-888-501-5219

Info for Health Care Professionals on our web site at www.cancercare.mb.ca

