

2006
ANNUAL REPORT
CANCER CENTER

SELF REGIONAL

HEALTHCARE

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CANCER COMMITTEE

Gregory Tarasidis, M.D.....	Otolaryngology, Chairman
John Funke, M.D.....	Cancer Liaison Physician/Radiation Oncology
Joanna Sadurski, M.D.....	Medical Oncology
James Boylston, M.D.	Pathology
F. Gregory Mappin, M.D.	Surgery
John Konsek, M.D.	Surgery
Christopher Knox, M.D.....	Radiology
Tammy Kitchens, M.D.....	Radiology
Suzanne Dixon, M.D.	OB/GYN
W. Preston Turner, III, M.D.....	Urology
Kathleen Jeffery, M.D.....	Surgery
Robert Lebel, M.D.	Medical Genetics
Sumeer Lal, M.D.	Neurosurgery
Dee McLane	Vice President of Professional Services
Linda Woods	Director of Radiation Therapy
Linda Phillips	Director of Medical Unit
Joyce Ludwa.....	Nurse Oncology Clinician
Janice McMahan.....	Director of Outpatient Surgery and Pain Medicine
Sissy Tennis.....	Medical Social Work
Leisa MaGill	Performance Improvement
Kendra Keeney*	Cancer Center Director
Terri Myers.....	Cancer Registry Coordinator
Paula Johnson	Nutrition
Doris Hancock and Elizabeth Still	Breast Coordinators
Kelly Hawthorne	Coordinator, Oncology Research
Hoyt Dorn.....	Cancer Society

* Kendra Keeney was named Cancer Center Director in 2007. John Pettett was director in 2006.

EXECUTIVE SUMMARY

The year 2006 was the beginning of a new era in cancer care in Greenwood and surrounding counties. For the first time, an in-house, dedicated medical oncology practice was established to care for patients rather than a contractual relationship with medical oncologists from other programs. Joanna Sadurski, M.D., serves as Medical Director for the medical oncology program and is joined in practice by Lena Vician, M.D. Both physicians are board certified in medical oncology and internal medicine.

We have a full-time registered nurse who serves as our Clinical Trials Coordinator and who works very closely with the physicians and staff to ensure that clinical trials are available and offered to appropriate patients. We also have a Certified Breast Health Navigator who works with our breast cancer patients, guiding them through each step of their diagnoses and treatments. Genetic counseling is available to patients by the Greenwood Genetic Center.

John Funke, III, M.D., continues to lead the radiation oncology area, which offers state-of-the-art treatment options and equipment. IMRT is available for breast cancer and is being well received by the medical community and our patients.

Two breast cancer screenings were offered to the community through the Breast Health Program and the Community Outreach department. These were free of charge to participants, and follow-up tests were covered for patients who qualified through funds from the Susan G. Komen grant.

The Self Regional Cancer Center continues to position itself as an outstanding regional cancer center by achieving and maintaining accreditation by the American College of Surgeons Commission on Cancer. We successfully completed a survey in May, receiving certification with three commendations. The certification is good for three years.

Kendra Keeney, RRT, BS
Director, Cancer Center

CHAIRMAN'S REPORT

During 2006, the Cancer Program at Self Regional Healthcare expanded to include two full-time medical oncologists when Lena Vician, M.D., joined Joanna Sadurski, M.D., in January. Our Radiation Oncology program is led by John Funke, M.D., and we are fortunate to have a range of board-certified surgical specialists also participating in the care of our cancer patients.

Doris Hancock, RN, began as our Breast Health Coordinator in October and jumped right in to hold a breast screening clinic and a community breast cancer awareness luncheon.

Kelly Hawthorne, RN, assumed the role of Clinical Trials Coordinator and will work with the physicians and patients to enroll eligible patients in clinical trials, bringing state-of-the-art treatment plans to the patients of the Lakelands region.

In May, we underwent a re-accreditation survey by the American College of Surgeons Commission on Cancer and were re-accredited for another three years. The survey went very smoothly thanks to the hard work and dedication of our staff and physicians. The program received three commendations from the commission, which is outstanding.

Self Regional hosted the annual Fall Educational Conference for the South Carolina Cancer Registrar's Association in October. This event brought in cancer registry staffs from all over the state to provide important educational information on proper registry operations and reporting. We were proud to host the event.

A new Cancer Center brochure was developed and implemented. This piece can be used with patients and is mailed to all new patients to familiarize them with our center and physicians prior to their first visit. It is also used as a tool with referring physicians.

A bell was donated to the Cancer Center and installed in Radiation Oncology. Upon completion of treatment, patients will be invited to ring the bell in celebration.

A laboratory was opened on the first floor inside the Cancer Center to facilitate easier testing and quicker turnaround times for our patients and physicians. Nearly all routine lab work can now be run and processed in the Cancer Center, which will reduce turnaround times and wait times for patients.

In all, 2006 was a very busy year for the Cancer Center. Many positive initiatives were put into place, and we look forward to further expansion and growth. It continues to be a pleasure to serve as chairman of the Cancer Committee, and the dedication and commitment of the physicians and staff continues to impress me and make me glad to be a part of this center.

Gregory Tarasidis, M.D., FACS
Chairman, Cancer Committee

CANCER LIAISON REPORT

Self Regional Healthcare's Cancer Care Center has committed a multimillion plan to build an all-inclusive Cancer Care Center and Lena Vician, M.D., began her tenure in the Medical Oncology Department this year. We are proud to report Self's Registrar, Terri Myers, superiorly hosted the 2006 S.C. Registrar's Annual Meeting. This year PET scanning and thyroid isotope treatment have been established on campus through the hard work of our Radiology Department.

The cancer care of our patients is guided by the Cancer Committee, which is made up of dedicated personnel from hospital Administration, Cancer Registry, Social Services, Rehabilitative Services, Nursing Services, Surgical Oncology, Medical Oncology, and Radiation Oncology Departments of Self Regional Healthcare. Our American College of Surgeons Commission on Cancer approved program approaches the comprehensive care of our patients through a multi-disciplinary approach to prevention, diagnosis, and the treatment of their malignancies as well as the emotional, social and educational support of these families.

The 2006 activity of our Cancer Liaison Program is evidenced by its:

- Lecture to the S.C. Cancer Registrars on Cancer Care.
- Representation at the state government level with active membership on the Cancer Advisory Committee of SC DHEC.
- Conveyance of ACoS information to the Cancer Committee at their regular meetings.
- Assistance with the annual 10 percent case review for quality control.
- Work with cancer registry staff to coordinate internal quality improvement studies and assurance that our Cancer Program is approved by the ACoS.
- Promotion of the Cancer Program through the medical staff and through the public relations department.
- Representation of the Cancer Committee at the medical staff meetings, tumor boards and cancer conferences.
- Participating in the leadership subcommittee within the Cancer Program to address strategic plans for management and growth.

Self Regional Healthcare's Cancer Care Center continues its steps toward its mission of becoming the shelter our community turns to for hope in the battle against cancer.

John Funke, III, M.D.
Medical Director, Radiation Oncology

Self Regional Healthcare Cancer Center Annual Report Outpatient IV Treatment Center (data from 2006)

The Outpatient Intravenous Treatment Center opened in June 1987 to serve ambulatory patients of Greenwood and surrounding communities. Beginning in January 2005, the OITC area started providing care for all Self Regional Cancer Center patients, in addition to the other IV treatment patients we were already treating. In November 2005, space was opened on the first floor to accommodate all chemotherapy patients. Up to 12 patients can be accommodated at any one time in this area. All other IV treatments continue to be treated on the fourth floor.

Our staff consists of three nationally certified oncology nurses, three full-time nurses who have successfully completed the Chemo Bio course and several resource pool registered nurses for the two areas and a secretary for each unit. The nursing staff also served as a resource for inpatient chemotherapy, central venous care and indwelling venous access devices.

The nurses in OITC and Chemotherapy provide continuity of care between the patient/family and the physicians. The philosophy of the unit is to maintain patients' dignity, human values, independence and peace of mind at every stage of their illness.

The goal of OITC and Chemotherapy is to successfully meet the daily challenges and to provide quality care in a compassionate, convenient and economical manner to the patients/families whom we serve. We also aim to provide them with access to additional support services offered by the hospital and within the community.

We were also blessed by having three wonderful hospital Auxiliary volunteers to help care for our patients.

In 2006, we treated 7,650 patients.

Janice McMahan, R.N.C.
Nursing Director

SERVICES (continued)

Radiation Oncology

2006 Annual Report to the Cancer Committee

The Radiation Oncology Department of Self Regional Healthcare provides a wide spectrum of radiotherapy services for the seven counties of the Lakelands area. The professional staff includes a board-certified radiation oncologist. The clinical staff includes a director, a physicist, a dosimetrist, registered nurse, three therapists and two secretaries.

Our staff is devoted to the care of adult and geriatric patients with cancer and to the prevention and eradication of malignant disease. We strive to combine the activities of patient care, education and research to benefit not only the patients currently receiving care but also future generations. Our mission is to provide professional, state-of-the-art cancer therapy for the Lakelands area, with a conscientious and patient-oriented spirit.

The department is open from 7:30 a.m. to 5 p.m., Monday through Friday. Emergency consultation and treatment are also available. In the calendar year 2006, there were 283 consults, 598 follow-ups and 16,987 procedures performed.

The department is equipped with two MLC linear accelerators with record and verify systems and a superficial X-ray therapy unit. Low-dose-rate brachytherapy is available with cesium-137 for gynecological treatment and iodine-125 for prostate treatment. The prostate seed implant program has proven to be a great benefit to patients in our community. Breast IMRT treatment is available. A simulator and a three-dimensional treatment-planning computer with CT imaging are available for treatment planning.

Linda Woods, R.T. (R)(T)
Director of Radiation Oncology

Cancer Genetics

The Greenwood Genetic Center collaborates with the Cancer Program at Self Regional Healthcare by providing formal consultations for hereditary cancer risks, especially with patients affected by – or closely related to those affected by – breast, ovarian and colon cancers.

Risk assessment includes careful analysis of personal and family history, as well as medical records. It then moves on to in-depth genetics counseling, with explanation of the fundamentals of heredity, the delineation of cancer family syndromes, and numerical calculation of the likelihood that the person carries a genetic factor predisposing to cancer.

For those who then wish to pursue the matter, blood is drawn and sent to an appropriate reference laboratory. At a follow-up visit, results are disclosed and plans for further surveillance, preventive measures and treatment options are explored. Very few community hospitals in South Carolina have the opportunity to provide expert genetics consultation this way, and our program is proud to be among those few.

Drs. Robert Roger Lebel and Robert A. Saul, along with genetic counselor Bridgette L. Aufmuth, provide these services at the Genetic Center campus.

Community Health Information Center

Cancer Information

The Community Health Information Center (CHIC) continued to provide patient information on a variety of cancer topics to hospital patients, family members of patients and anyone in the community who approached us for assistance in finding information to better understand a cancer diagnosis.

In addition to information from printed sources, it was also possible to provide information found on the Internet, as we have access to many oncology-related medical databases and sites. Videos were also available to watch and pamphlets were available as handouts. These and other materials were either checked out, reviewed on site or photocopied.

Patrons who could not easily visit the center personally called in their requests. Information was faxed, mailed or sent by e-mail to them free of charge.

New items were regularly added to the printed and video cancer materials in the CHIC.

The CHIC also participated in the annual Senior Classic and Wellness Celebration events in Greenwood Mall. Apart from telling as many people as possible about our information service, we used the opportunity to provide brochures on a variety of health topics, including a variety of cancer topics.

In 2006, we filled 107 requests for information regarding various types of cancers.

Dinah Smith
Community Health Information Center Librarian

Medical Social Work

The medical social worker functions as part of a multidisciplinary team, providing a comprehensive, long-term support for cancer patients and their families. Patients are assessed and resources are coordinated to provide assistance as necessary, which may include financial and emotional needs. An ongoing goal has been to continually increase the overall number of patients reached, regardless of financial status, in an effort to provide outstanding care for the greatest number of cancer patients possible.

A long-standing support group, comprised of patients and their significant others, takes place at 6:30 p.m. on the first and third Tuesdays of each month in the Medical Social Work department. Information can be obtained by calling (864) 725-4680.

Sissy Tennis, M. Ed., LPC, LBSW
Medical Social Work Department

SERVICES (continued)

Lymphedema Treatment Program

The Occupational Therapy Department at the Optimum Life Center of Self Regional Healthcare provides a comprehensive lymphedema treatment program. Lymphedema evaluation and treatment are available with a physician referral to the licensed occupational therapist that specializes in the evaluation and treatment of lymphedema by contacting Dee Ann Woods at (864) 725-4183.

In 2006, there were 18 referrals for patients following breast cancer surgery with lymphedema. Of these patients, 10 have been in Stage 1 lymphedema and eight have been in Stage 2. There has been a continued trend for early stage lymphedema referrals, and repeat referrals for later stage patients with exacerbations.

Dee Ann Wood, OTR/L, CHT, CLT
Occupational Therapist

CANCER REGISTRY REPORT

Self Regional is an approved cancer program – by the American College of Surgeons Commission on Cancer – and must collect, maintain and analyze data on cancer patients diagnosed and/or treated at Self Regional. The information collected includes demographics, treatment and follow-up information. The patients entered into the database are followed for life, in accordance with the American College of Surgeons. This information is collected by the Cancer Registry Department at Self Regional Healthcare.

In 2006 the Cancer Registry accessioned 743 cases. Five hundred and fifty-three (553) of these were analytical cases. The Cancer Registry ensures the quality of our data by submitting to the South Carolina Central Cancer Registry and the National Cancer Data Base. The cases submitted go through edits (visual or computerized). The Cancer Registry staff reviews and resolves any discrepancies from the State Central Registry or National Cancer Data Base. The 2006 data submitted to the National Cancer Data Base was 100 percent quality data, with no edits or rejections. A physician monthly chart review is also conducted, comparing the medical record to information entered into the database.

We encourage the administration, medical staff and other departments to use the data maintained in the Cancer Registry database to provide better services to the community. In 2006, 14 requests for data were received from the State Registry, Self Regional Healthcare, the Commission on Cancer and other sources.

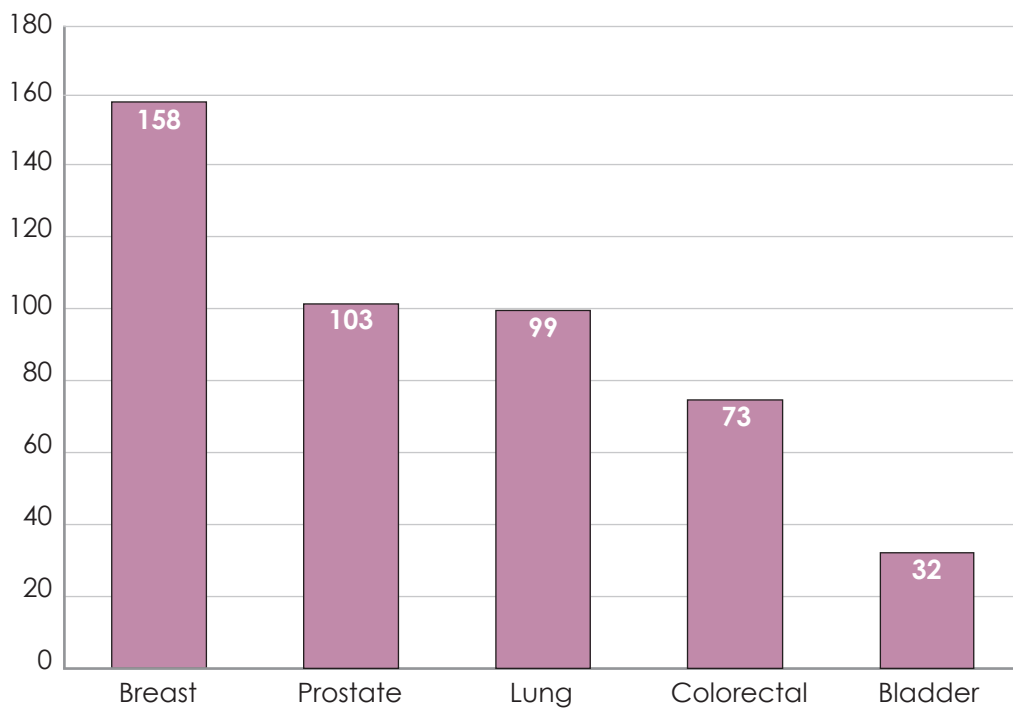
In 2006, the Cancer Registry participated in special studies assigned by the Commission on Cancer.

The registry has two full-time employees, one of whom is a Certified Tumor Registrar. The staff attends all state educational seminars and keeps current on the changes made by the American College of Surgeons and the Commission on Cancer.

STUDIES & STATISTICS

The American Cancer Society estimated that 1,399,790 people would be diagnosed with cancer in 2006. Estimates for South Carolina were 22,530. These estimates do not include carcinoma in situ (noninvasive cancer) of any site except urinary bladder, and do not include basal and squamous cell skin cancers. Cancer is the second leading cause of death in the United States, exceeded only by heart disease. In the U.S., cancer causes one of every four deaths.

Top Five Sites Diagnosed in 2006 at Self Regional Healthcare



2006 PRIMARY SITE DISTRIBUTION

Primary Site	Total	%	Gender		Class of Case		AJCC Stage/Analytic Only							
			Male	Female	Analytic	Non-Analytic	0	1	2	3	4	99	88	
Lip	6	0.8	3	3	2	4	0	0	0	0	0	2	0	
Tongue	9	1.2	7	2	7	2	0	0	0	0	4	3	0	
Salivary Glands	5	0.7	4	1	5	0	0	2	1	1	1	0	0	
Floor of Mouth	4	0.5	1	3	1	3	0	0	1	0	0	0	0	
Gum & Other Mouth	3	0.4	2	1	2	1	0	1	0	0	0	1	0	
Nasopharynx	2	0.3	1	1	2	0	0	1	0	1	0	0	0	
Tonsil	0	0	0	0	0	0	0	0	0	0	0	0	0	
Oropharynx	1	0.1	1	0	1	0	0	0	0	0	1	0	0	
Hypopharynx	2	0.3	2	0	2	0	0	1	0	1	0	0	0	
Other Oral Cav. & Pharynx	2	0.3	1	1	2	0	0	0	0	0	0	0	2	
Oral Cavity & Pharynx	34	4.6	22	12	24	10	0	5	2	3	6	6	2	
Esophagus	11	1.5	10	1	9	2	0	0	3	1	4	1	0	
Stomach	9	1.2	5	4	6	3	0	3	0	1	1	0	1	
Small Intestine	4	0.5	2	2	4	0	0	1	1	0	1	1	0	
Other Digestive System	24	3.2	17	7	19	5	0	4	4	2	6	2	1	
Cecum	11	1.5	2	9	8	3	1	2	2	3	0	0	0	
Appendix	0	0	0	0	0	0	0	0	0	0	0	0	0	
Ascending Colon	8	1.1	3	5	6	2	0	1	2	2	0	0	1	
Hepatic Flexure	3	0.4	3	0	3	0	0	0	1	2	0	0	0	
Transverse Colon	7	0.9	4	3	5	2	0	2	2	0	1	0	0	
Splenic Flexure	1	0.1	0	1	1	0	0	0	0	1	0	0	0	
Descending Colon	1	0.1	0	1	1	0	0	1	0	0	0	0	0	
Sigmoid Colon	6	0.8	5	1	5	1	0	1	1	2	1	0	0	
Large Intestine, NOS	7	0.9	4	3	2	5	0	0	1	1	0	0	0	
Colon, Excl Rectum	44	5.8	21	23	31	13	1	7	9	11	2	0	1	
Rectosigmoid Junction	8	1.1	3	5	6	2	0	1	1	3	1	0	0	
Rectum	21	2.8	11	10	16	5	0	4	2	6	2	2	0	
Rectum & Rectosigmoid	29	3.9	14	15	22	7	0	5	3	9	3	2	0	
Anus, Anal Canal, Anorectal	3	0.4	1	2	2	1	0	0	0	0	0	2	0	
Liver	4	0.5	1	3	3	1	0	1	0	0	0	2	0	
Intrahepatic Bile Duct	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gallbladder	2	0.3	1	1	2	0	0	0	2	0	0	0	0	
Other Biliary	0	0	0	0	0	0	0	0	0	0	0	0	0	
Pancreas	13	1.7	4	9	12	1	0	1	0	0	9	2	0	
Retroperitoneum	0	0	0	0	0	0	0	0	0	0	0	0	0	
Peritoneum, Omentum, Mese	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other Digestive Organs	0	0	0	0	0	0	0	0	0	0	0	0	0	
Digestive System	119	16	59	60	91	28	1	18	18	22	20	10	2	
Nose, Nasal Cav & Middle	0	0	0	0	0	0	0	0	0	0	0	0	0	
Larynx	10	1.3	9	1	9	1	0	2	1	2	4	0	0	
Lung & Bronchus	99	13	61	38	87	12	0	14	4	19	40	9	1	
Pleura	0	0	0	0	0	0	0	0	0	0	0	0	0	
Trachea & Mediastinum	0	0	0	0	0	0	0	0	0	0	0	0	0	
Respiratory System	109	15	70	39	96	13	0	16	5	21	44	9	1	
Bone & Joints	0	0	0	0	0	0	0	0	0	0	0	0	0	
Soft Tissue - Inc. Heart	0	0	0	0	0	0	0	0	0	0	0	0	0	

Primary Site	Total	%	Gender		Class of Case		AJCC Stage/Analytic Only							
			Male	Female	Analytic	Non-Analytic	0	1	2	3	4	99	88	
Melanomas - Skin	28	3.8	16	12	6	22	1	2	0	1	0	2	0	
Other Non-Epith Skin	3	0.4	2	1	2	1	0	0	0	0	0	1	1	
Skin excl Basal & Squamous	31	4.2	18	13	8	23	1	2	0	1	0	3	1	
Breast	158	21	1	157	126	32	24	53	24	16	4	5	0	
Cervix Uteri	5	0.7	0	5	4	1	0	0	1	0	1	2	0	
Corpus Uteri	7	0.9	0	7	6	1	0	2	1	1	1	0	1	
Uterus, NOS	0	0	0	0	0	0	0	0	0	0	0	0	0	
Ovary	2	0.3	0	2	2	0	0	0	0	0	0	2	0	
Vagina	0	0	0	0	0	0	0	0	0	0	0	0	0	
Vulva	4	0.5	0	4	0	4	0	0	0	0	0	0	0	
Other Female Genital Organs	0	0	0	0	0	0	0	0	0	0	0	0	0	
Female Genital System	18	2.4	0	18	12	6	0	2	2	1	2	4	1	
Prostate	103	14	103	0	63	40	0	0	43	4	3	13	0	
Testis	2	0.3	2	0	1	1	0	1	0	0	0	0	0	
Penis	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other Male Genital Organs	0	0	0	0	0	0	0	0	0	0	0	0	0	
Male Genital System	105	14	105	0	64	41	0	1	43	4	3	13	0	
Urinary Bladder	32	4.3	23	9	26	6	14	4	2	1	2	3	0	
Kidney & Renal Pelvis	24	3.2	15	9	23	1	4	7	2	1	5	4	0	
Ureter	1	0.1	0	1	1	0	1	0	0	0	0	0	0	
Other Urinary Organs	0	0	0	0	0	0	0	0	0	0	0	0	0	
Urinary System	57	7.6	38	19	50	7	19	11	4	2	7	7	0	
Eye & Orbit	0	0	0	0	0	0	0	0	0	0	0	0	0	
Brain	8	1.1	8	0	8	0	0	0	0	0	0	0	8	
Cranial Nerves Oth Nerves	4	0.5	2	2	4	0	0	0	0	0	0	0	0	
Brain & Other Nervous System	12	1.6	10	2	12	0	0	0	0	0	0	0	8	
Thyroid	15	2	4	11	13	2	1	7	0	2	2	1	0	
Other Endocrine incl Thym	2	0.3	1	1	1	1	0	0	0	0	0	0	0	
Endocrine System	17	2.3	5	12	14	3	1	7	0	2	2	1	0	
Hodgkin - Nodal Disease	4	0.5	3	1	2	2	0	0	1	0	1	0	0	
Hodgkin - Extranodal Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	
Hodgkin Disease	4	0.5	3	1	2	2	0	0	1	0	1	0	0	
NHL - Nodal Lymphomas	17	2.3	11	6	11	6	0	0	0	2	4	4	1	
NHL - Extranodal Lymphomas	11	1.5	4	7	9	2	0	4	2	0	3	0	0	
Non-Hodgkin Lymphomas	28	3.8	15	13	20	8	0	4	2	2	7	4	1	
Lymphoma	32	4.3	18	14	22	10	0	4	3	2	8	4	1	
Myeloma	5	0.7	3	2	5	0	0	0	0	0	0	0	5	
Acute Lymphocytic	0	0	0	0	0	0	0	0	0	0	0	0	0	
Chronic Lymphocytic	6	0.8	4	2	4	2	0	0	0	0	0	0	4	
Other Lymphocytic	1	0.1	1	0	1	0	0	0	0	0	0	0	1	
Lymphocytic	7	0.9	5	2	5	2	0	0	0	0	0	0	5	
Acute Myeloid	1	0.1	1	0	0	1	0	0	0	0	0	0	0	
Acute Monocytic	0	0	0	0	0	0	0	0	0	0	0	0	0	
Chronic Myeloid	3	0.4	3	0	2	1	0	0	0	0	0	0	2	
Other Myeloid/Monocytic	0	0	0	0	0	0	0	0	0	0	0	0	0	
Myeloid & Monocytic	4	0.5	4	0	2	2	0	0	0	0	0	0	2	
Other Acute Leukemia	1	0.1	1	0	0	1	0	0	0	0	0	0	0	
Aleukemic, Subleukemic	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other	1	0.1	1	0	0	1	0	0	0	0	0	0	0	
Leukemia	12	1.5	10	2	7	5	0	0	0	0	0	0	7	
Mesothelioma	1	0.1	1	0	1	0	0	0	0	0	0	0	1	
Kaposi Sarcoma	1	0.1	1	0	1	0	0	0	0	0	0	0	1	
Miscellaneous	32	4.3	18	14	20	12	0	0	0	0	0	0	20	
TOTAL	743	100	379	364	553	190	46	119	101	74	96	62	50	

Focus on Breast Cancer 2006

Carcinoma of the breast is the most highly publicized women's health issue today. It accounts for 31 percent of all cancers in women. An estimated one in eight women will be diagnosed with breast cancer. This translates into an estimated 3,170 new cases of breast cancer in South Carolina in 2006. Self Regional Healthcare and the surgeons who see these patients strive to continue to provide the latest in breast cancer treatment for women in Greenwood and the Lakelands region.

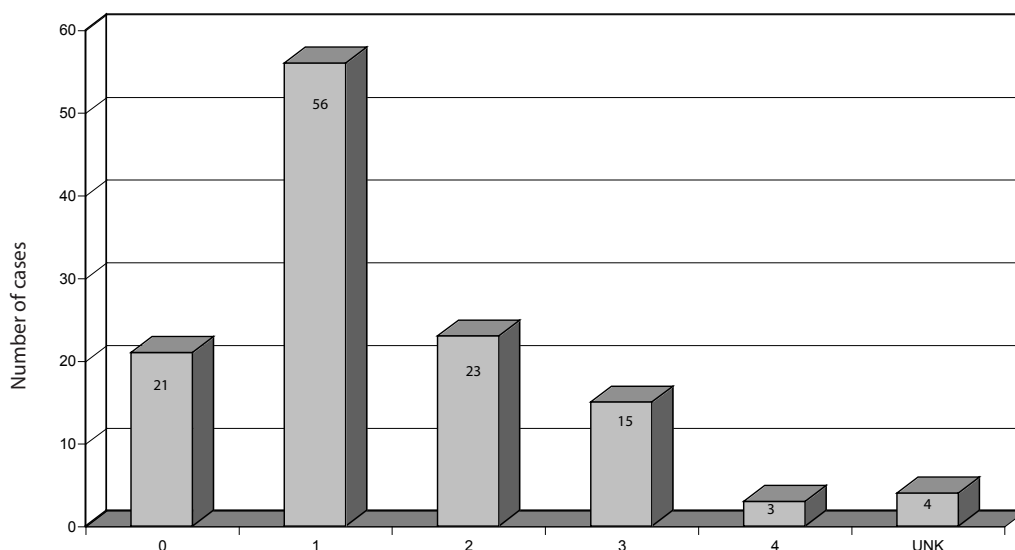
In 2006, there were 122 new cases of female breast cancer diagnosed at Self Regional Healthcare.

Treatment options are tailored to the individual but require close communication between surgical oncology, medical oncology and radiation oncology. Traditional modified mastectomy, breast conservation therapy, and sentinel lymph node biopsy are considered the mainstays of therapy, with adjuvant or neoadjuvant chemotherapy available, as is a full range of radiotherapy, including Mammosite.

The overall five-year survival data at Self Regional continues to parallel with five-year survival data nationally.

Doris Hancock, RN, BSN
Breast Health Coordinator

Female Breast Cancers by AJCC Stage, 2006 Self Regional Healthcare



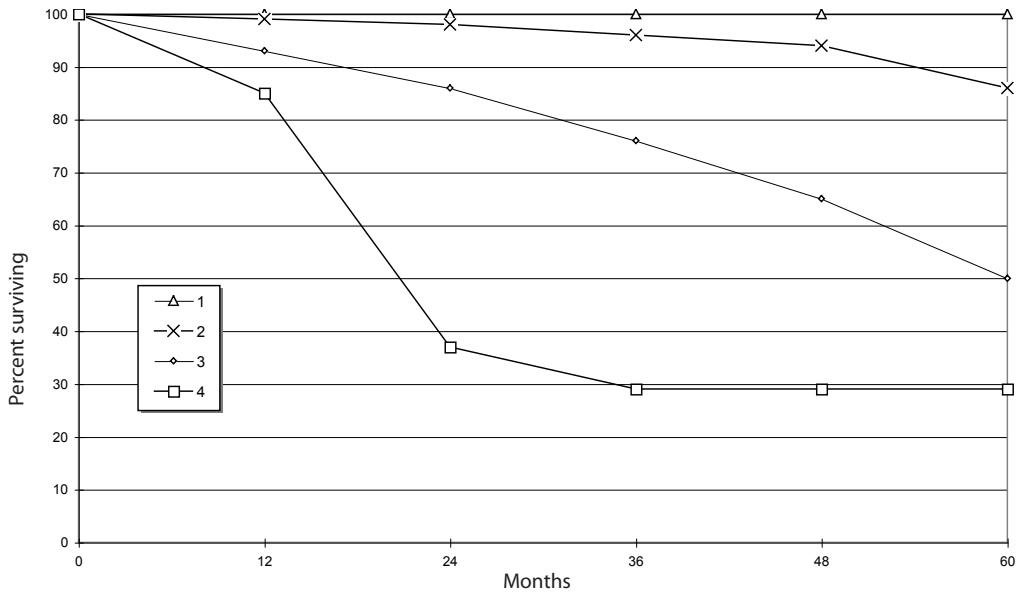
2006 Female Breast Cancer Data Summary

Cancer Facts and Figures estimates that 3,170 new female breast cancers will be diagnosed in South Carolina in 2006. Self Regional Healthcare accessioned 122 female breast cancers in the year 2006. The Self Regional Healthcare registry also accessioned one male breast cancer that is not included in the figures below.

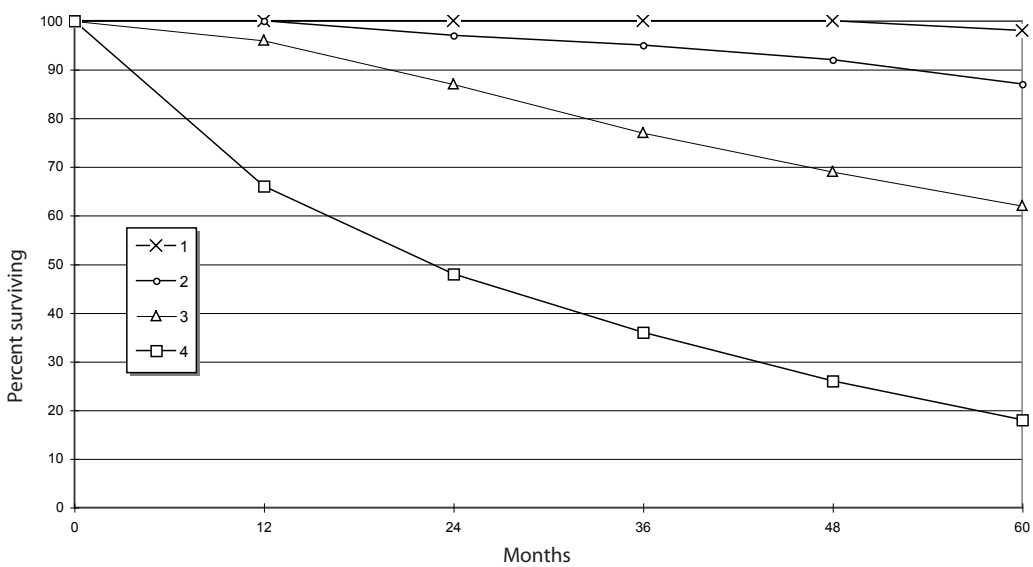
Distribution of Histology

Infiltrating Duct Carcinoma	82
Duct mixed with other types, in situ	1
Duct mixed with other types.	9
Infiltrating Ductular Carcinoma	2
Ductal Carcinoma, In Situ	9
Intracystic Carcinoma, In Situ	1
Lobular Carcinoma	5
Lobular, In Situ	1
Lobular mixed with other types	1
Papillary Carcinoma	1
Intraductal Micropapillary Carcinoma	5
Comedocarcinoma, In Situ	4
Apocrine Adenocarcinoma	1

Self Regional Healthcare Survival Data by AJCC Stage
2002-2006 Analytical Female Breast Cancer Cases



National Relative Survival Data by AJCC Stage
2002-2006 Analytical Female Breast Cancer Cases CIRF



GLOSSARY OF TERMS

Accessioned:	Entered into the Cancer Registry database.
AJCC Classification of Disease:	Refers to the classification of most cancer sites as set forth by the American Joint Committee on Cancer in the Manual for Staging of Cancer. The higher the stage is, the greater the degree of cancer invasion.
TNM Staging:	American Joint Committee on Cancer (AJCC) staging system based on tumor growth (T), spread to the primary lymph nodes (N) and metastasis (M).
American College of Surgeons:	Institute established in 1932 to improve the care of cancer patients at the hospital level.
Analytic Cases:	Cases newly diagnosed and/or at least part of initial treatment performed at our hospital.
Carcinoma:	A malignant new growth made up of epithelial cells tending to infiltrate the surrounding tissues, giving rise to metastases.
Demographics:	Information such as name, address, employment, etc.
Follow-up:	An organized system of lifetime surveillance of patients.
Histology:	The specific cell type of the cancer determined on pathological examination of the cancerous tissue/cells.
Malignant:	Tending to grow uncontrollably and become progressively worse, possibly resulting in death.
Primary Site:	The location (organ or tissue) within the body.
Lymphedema:	The accumulation of lymph in soft tissue and swelling. Caused by inflammation, obstruction, or removal lymph channels.

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REFERENCES

- American Cancer Facts and Figures 2006
- CIRF- Cancer Information Reference File
- Self Regional Healthcare Cancer Registry Statistics

CANCER PROGRAM DIRECTORY

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(864) 725-4111

Breast Health Coordinator	(864) 725-6004
Cancer Program Director	(864) 725-4771
Cancer Registry	(864) 725-5037
Community Health Information Center	(864) 725-4737 or 1-888-429-1589
CT Scheduling	(864) 725-5000
Endoscopy Lab	(864) 725-4750
HospiceCare of the Piedmont, Inc.	(864) 227-9393
Hospital Switchboard	(864) 725-4111
Home Health Services	(864) 725-7600
Laboratory Office	(864) 725-4824
Mammography	(864) 725-3301 or (864) 725-4192
Medical Records	(864) 725-5032
Medical Social Work	(864) 725-4680
MRI Scheduling	(864) 725-5000
Nuclear Medicine	(864) 725-4795
Oncology Research Coordinator	(864) 725-7129
Outpatient Chemotherapy Unit	(864) 725-7108
Outpatient Diagnostic Scheduling Center	(864) 725-5000
Pastoral Services	(864) 725-5023
Pathology Office	(864) 725-4811
Physical/Occupational Therapy	(864) 725-4181 or 864-725-4184
Radiation Oncology	(864) 725-4741
Radiology Diagnostic Registration	(864) 725-4109
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