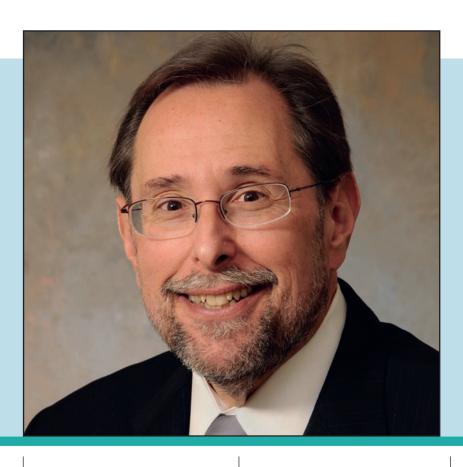
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# Richard Schilsky Chosen ASCO's First Chief Medical Officer: How It Came About

BY ERIC T. ROSENTHAL

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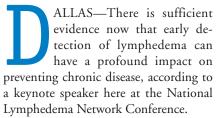


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## Bioimpedence Detects Subclinical Lymphedema

BY ROBERT H. CARLSON



It makes sense, therefore, to closely monitor breast cancer patients for the earliest signs of subclinical lymphedema, said Frank A. Vicini, MD, Chief Academic Officer for Michigan Healthcare Professionals and National Director of Breast Cancer Clinical Research and Outcomes for 21st Century Oncology in Michigan.

He discussed recent research in early diagnosis, and described plans for start-

ing a clinical program to use bioimpedence spectroscopy to test breast cancer patients before and after treatment at 21st Century Oncology sites.

Vicini, former Chief of Oncology Services at William Beaumont Hospital, Royal Oak, Michigan, where he also established a lymphedema program, spoke in a keynote lecture at the conference,



which is jointly sponsored by the National Lymphedema Network and the University of Chicago Pritzker School of Medicine.

With improved outcomes following treatment of breast cancer, chronic toxicities including breast cancer related lymphedema are gaining increased significance, he said, noting, though, that continued on page 23

### →LYMPHEDEMA-SUBCLINICAL

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lymphedema remains probably one of the least studied areas in breast oncology.

### **No Prospective Monitoring**

"Until recently there has been almost no prospective monitoring of patients at risk," he said. This is due to the lack of "sensitive assessment tools to effectively manage lymphedema, and because physicians don't have time for lengthy manual procedures. Consequently, lymphedema is not being diagnosed until swelling is visible. We

need to detect this and begin treatment at stage zero, and not wait until it has reached an irreversible stage."

Lymphedema is not a rare complication of cancer treatment. In breast cancer, the incidence has been reported as high as up to almost 50 percent after mastectomy, 28 percent after lumpectomy, and 17 percent after sentinel node biopsy and radiation therapy, he said. In other cancers, the incidence is 41 percent after cervical cancer, five to 10 percent after endometrial cancer, and 60 to 67 percent after vulvar cancer.

Vicini described the program he and associates have initiated and oversee at several 21st Century Oncology sites

using the L-Dex bioimpedence device to take baseline measurements of every breast cancer patient. The device measures changes in extracellular fluid in the affected limb. Changes can be detected within three to six months after locoregional therapy, he said.

L-Dex measurements as well as traditional tape measurements are taken at baseline before treatment, one month post-surgery, and periodically after that.

He said 21st Century treats about 3,200 breast cancer patients annually with radiation at the 126 centers across the country. "Our goal is to ultimately monitor every patient who is seen for breast cancer treatment,



FRANK VICINI, MD: "Our goal is to ultimately monitor every patient who is seen for breast cancer treatment, not only related to radiation therapy but also to surgery, in the hopes of identifying those at risk and intervening at a time when the lymphedema process can be reversed with simple, inexpensive maneuvers."

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## 'Catching On'

Early detection, when lymphedema is in the subclinical stage, is catching on among clinicians and researchers, said Saskia Thiadens, RN, founder and Executive Director of the National Lymphedema Network.



SASKIA THIADENS, RN: "I hope the L-Dex will be identified by the insurance world and become the standard procedure for breast cancer, and other cancers as well. That's how I see the future—early detection."

"If we can help patients identify fluid buildup in the extracellular tissue, we can get them into a sleeve and follow them, and even better, do a study simultaneously."

She said she sees lymphedema screening in the same light as when the routine use of mammography was in the early stages. "I hope the L-Dex will be identified by the insurance world and become the standard procedure for breast cancer, and other cancers as well. That's how I see the future—early detection."