Patients Benefit from Support Given to Head and Neck Cancer Program

SINCE ITS INCEPTION IN 1987, Yale’s Head and Neck Program has followed a team approach to patient care and cancer cure with interdisciplinary services and state of the art treatment. Clarence T. Sasaki, MD, Chief of the Section of Otolaryngology at Yale-New Haven Hospital and the Charles W. Ohse Professor of Surgery at the Yale University School of Medicine leads the program. Sasaki, an international leader in the field of head and neck cancer, has built the program with additional staff, patient friendly resources, and novel techniques in the treatment of head and neck cancer.

“Dr. Sasaki was tremendous. We were so very well pleased with his care for my father,” Dr. Carmen Balzano, an internist in the New Haven area praised. Dr. Balzano’s father was diagnosed with squamous cell carcinoma, “he gave us hope while being honest and explaining everything thoroughly to both my father and our family,” Balzano continued.

The sixth most common cancer in the world, with 500,000 new patients diagnosed annually, head and neck cancer has a low overall five-year survival rate of 52%. The effects of cancer are devastating and debilitating to every cancer patient; with loss of or altered speech and swallowing or possible deformities left on the face and neck, head and neck patients suffer severe emotional reactions. Although the past 30 years have not seen significant increases in the overall survival rate for patients, there have been brilliant advances in quality of life for patients with the development of minimally invasive treatment techniques for head and neck cancer.

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Lannin Strives for Coordinated Breast Care at Yale

Yale Cancer Center and the Department of Surgery recently welcomed Donald R. Lannin, MD, FACS as Executive Director of the Yale Comprehensive Breast Care Center. Dr. Lannin directed the breast center at East Carolina University for twenty years and the Leo W. Jenkins Cancer Center for ten years before coming to Yale. He is an experienced breast surgeon and researcher and was one of the first physicians to perform sentinel node biopsies in the country.

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**Ted Mann Lectures Recognize Janeway’s Contributions to Immunology**

**DR. CHARLES JANEWAY, JR.**

has spent the last twenty-five years studying the immune system at Yale University School of Medicine as a Howard Hughes Medical Institute Investigator. Many have described his contributions to the field of immunology as “immeasurable,” to wit, Dr. Janeway jokes, “if it isn’t measurable, it doesn’t exist.” In a recent introduction, Dr. Vincent T. DeVita, Jr., Director of Yale Cancer Center, said in response, “his contributions are highly significant, it is the true impact that is not yet fully measured.” Dr. Janeway is an internationally recognized immunologist whose numerous publications, awards, and presentations over the past twenty-five years have unlocked the field of innate immunology.

Yale Cancer Center has recently named the Dr. Charles Janeway, Jr. Lecture Series in Tumor Immunology to recognize Dr. Janeway for his contributions to Yale Cancer Center and the field of immunology. Dr. Janeway has chosen all of the speakers in the series from an assuredly long list of respected friends and colleagues he has met throughout his career.

Dr. Janeway is widely recognized for his hypothesis and subsequent proven theory of innate immunity. The field of immunology consisted of the study of purely adaptive immunity in the mid-1980s. “I felt very strongly that something was missing,” Janeway explained. In 1989, in an introductory essay for the Cold Spring Harbor Symposium titled, *Approaching the Asymptote: Evolution and Revolution in Immunology*, Dr. Janeway revolutionized the field of immunology with the revelation of the idea of innate immunology.

Innate immunity distinguishes self from non-self using receptors and signaling systems to provide pre-existing host defense against infections, which produce an immediate maximal anti-pathogen response. Adaptive immunity is characterized by its immunologic memory, it enables us to remember pathogens that we have resisted and therefore allows us to immunize against detrimental pathogens making vaccines successful.

After having proven and defined innate immunity with the help of Ruslan Medzhitov, a post-doctoral fellow in his laboratory, Dr. Janeway has once again turned his focus to the mechanisms of adaptive immunity. He is currently studying the adaptive immune system and its relationship to autoimmune diseases, specifically diabetes and multiple sclerosis.

“I envision that in the near future we will be able to treat all autoimmune diseases by inducing suppressor T-Cells in children; I see it as being as easy as applying a strip of antigens to the forearm of a child,” Janeway explained. Although the goal of creating a vaccine for cancer is far off, it is probable that the vaccine would be created in the same manner, as a cocktail of cancer antigens using Toll ligands or dendritic cells coated with peptides from various types of tumors, which would be given to prepare the body to fight off cancer.

**The Ted Mann Lecture Series Honoring Dr. Charles Janeway, Jr.**

**June 25, 2002**

Natural Killers Cells and Their Receptors
Lorenzo Moretta, MD
Research Director, Giannina Gaslini Pediatric Institute
Professor of General Pathology
University of Genova
Genova, Italy

**September 17, 2002**

Vaccines for the Future
Hans Wigzell, MD, PhD
Professor, Department of Immunology
President of Karolinska Institutet
Stockholm, Sweden

**October 8, 2002**

Making T Cells Work for Therapy of Human Diseases
Philip D. Greenberg, MD
Professor of Medicine, Division of Oncology

Professor of Immunology and Director of Immunology Program
Center for AIDS Research
University of Washington School of Medicine

**October 22, 2002**

Allo Antigens for Tumor Specific Immunotherapy
Elsa A. J. M. Goulmy, PhD
Professor, Department of Immunohematology and Blood Transfusion
Leiden University Medical Center
The Netherlands

**November 12, 2002**

Monoclonal Antibody Therapy of Lymphoma: Does It Work and How Does It Work?
David G. Maloney, MD, PhD
Associate Professor of Medicine, Division of Oncology
University of Washington
Rowland Joins National Dialogue on Cancer

**CONNECTICUT GOVERNOR JOHN G. ROWLAND** recently joined a nationwide effort to overcome cancer by accepting membership as a collaborating partner of the National Dialogue on Cancer. Rowland will serve as the Co-Chair, along with Governor Roy Barnes of Georgia, of the committee on state cancer plan initiatives. Governor Barnes is nationally recognized for creating the Georgia Cancer Coalition (GCC) funded substantially with tobacco settlement monies, which are expected to be between $300-$400 million over the next 5-7 years in that state. The GCC focuses on strengthening the cancer services, education, and research available in Georgia. The NDC has made a goal that all states and territories will have implemented a state cancer plan by 2003.

**Defying the Odds**

Defying the Odds is the autobiography of Marcia Israel-Curley, a Yale Cancer Center Advisory Board member and two-time cancer survivor. Mrs. Israel-Curley was the founder of Juddy’s, a retail fashion institution, which began with one tiny store in LA in 1948 and grew to a major public company with 104 stores and over 2,000 employees when it was sold in 1989. Juddy’s was the first American store marketed to the fashion style of teenage and young women. Mrs. Israel-Curley is one of America’s first female entrepreneurs with large-scale success. The drive and motivation that contributed to her success in business translated into a positive attitude helping to make her a two-time breast cancer survivor.

Marcia Israel-Curley lives in Los Angeles and New York City with her husband, Jim Curley. Mrs. Israel-Curley supported the Marcia Israel Laboratory for the Earlier Detection of Breast Cancer, which was established in 1999 at Yale Cancer Center.

The National Dialogue on Cancer is Co-Chaired by former President George Bush and Mrs. Bush; Senator Dianne Feinstein serves as Vice-Chair. Yale Cancer Center Director, Vincent T. DeVita, Jr., MD also serves on the NDC along with YCC Advisory Board Member Paula Zahn of CNN News. Members of the National Dialogue on Cancer include leaders of national cancer organizations, agencies, and institutions, as well as government officials.

Earlier this year, Connecticut’s cancer plan was completed by the Cancer Consortium for the State of Connecticut, which includes Yale University, the University of Connecticut, the State Department of Public Health, the American Cancer Society, and the Connecticut Medical Society under the leadership of Dr. Ruth McCorkle, Director for Cancer Control and Dr. Susan Mayne, Associate Director and senior leader of Yale Cancer Center Cancer Prevention and Control Program. The plan, which was submitted to Governor Rowland’s office, coordinates efforts to reduce the burden of cancer through screening and research goals, prevention and control services, policy development, and regulatory measures. The NDC is pledging to help all states compile similar plans to create a nationwide campaign in the battle against cancer.

The Head and Neck Program at Yale-New Haven Medical Center is a forerunner in both developing treatment options and caring for patients. Using funding secured from the Yale-New Haven Hospital and Yale School of Medicine’s Clinical Program Development Fund in 2002, Sasaki has developed a more comprehensive program focusing on patients’ needs. “We are working to take care of our patients the way they deserve to be cared for,” Kari Coyle, Section Administrator explained. Marci Jasinski, a patient advocate, has been hired to assist the Head and Neck Program team in response to this initiative. The advocate is available to help patients schedule appointments, work with their insurance companies to create a one-on-one contract ensuring proper coverage for the patient’s care, to answer any questions that arise, and if necessary assist in making travel arrangements for patients and their families.

The Head and Neck Tumor Board sees all newly diagnosed or patients with re-occurring cancer during their initial appointment. The Tumor Board includes physicians from various disciplines and allows them to examine the patient as well as read through their chart before cumulatively deciding on the best course of treatment. “It allows the patient to benefit from the expertise of all disciplines during one appointment,” Shelley Jolie, RN, the nurse coordinator for the program said.

Both Jolie and Coyle are currently working on phase two of the Program’s website to further enhance the information available to the patients and families. “We want to make sure patients understand every aspect of their care and are able to access the information at their leisure from their home so that there are no surprises,” Jolie explained. The education portion of the website will include information regarding individual procedures and will answer questions on symptoms, preparation for surgery, and rehabilitation options.

The patient-friendly focus of the Head and Neck Program is demonstrated with the clinical initiatives recently brought to Yale by Sasaki and his team. Using laser microsurgery for laryngeal cancer, Dr. Sasaki has taken technology developed in Germany and introduced it to patients here at Yale. Its proven track record of remarkably low recurrence rates, excellent survival rates, and reduced healing time has given a brighter outlook to laryngeal cancer patients. Bruce Berman, a patient of Dr. Sasaki’s who underwent laser microsurgery to remove part of his larynx in August, spoke very highly of Dr. Sasaki and his team. “I owe everything to Dr. Sasaki and his skill, less than a month later I am virtually 100% recovered and eating regular foods,” Berman explained.

In addition, Dr. Yung Son and Dr. James Alex have introduced new initiatives intended to minimize loss of function and increase cure rates for head and neck cancer patients. Dr. Son has combined brachytherapy with external beam radiation therapy for treatment of cancer of the oropharynx and hypopharynx. Both have shown dramatic increases in two-year survival rates, at 70% and 90% respectively. Dr. Alex is currently working to develop the use of sentinel node radiocolocalization in head and neck squamous cell carcinoma to reduce the need for prophylactic neck dissection when the sentinel node is biopsy negative. The work of both Dr. Son and Dr. Alex is supported in part by the Clinical Program Development Fund initiative. In 1978, Dr. Sasaki introduced a radically new form of neck dissection called the Functional Neck Dissection. This surgical procedure, learned when he served a fellowship with Professor Ettore Bocca of Milan, Italy, spares vital nerves, muscles, and vessels while removing cancer...
WHILE MANY HIGH SCHOOLS STUDENTS spend their summer hanging out with their friends, life guarding at a beach, or in another part-time position, four Wallingford High School students chose to spend it in research laboratories through Bristol-Myers Squibb’s Summer Science Internship Program. The program, which is in its 16th year, matches students in their junior and senior years from each of the two Wallingford public high schools with a researcher affiliated with Yale Cancer Center for a summer of learning and hands on experience. “It’s a win-win program, the students gain valuable experience while the research laboratories benefit from their hard work and huge contributions,” Bonnie King, PhD explained. Dr. King has mentored a student for the past three summers, DeVika Dhandapani, an incoming senior at Mark T. Sheehan High School finished up her summer in King’s lab in late August.

Dhandapani began her research under King’s direction doing experiments to optimize the isolation of breast cancer cells from breast fluids. She admitted the method of altering variables to optimize the separation of the cells was frustrating at first but felt accomplished when a good result was ultimately identified. Dhandapani then moved on to work with FISH (fluorescence in situ hybridization) analysis, a technique used to measure genetic abnormalities in breast cancer cells. Eventually she was able to teach the procedure to graduate students, surely a source of pride for a high school student. Due to her work with the FISH analysis, Dhandapani will be listed as a co-author on an upcoming manuscript.

Down the hall from King and Dhandapani, Alberto Distefano was working with Dr. Michael Stern in his genetics laboratory. Distefano is majoring in biology at UCONN and graduated in June from Sheehan High School. “This summer has helped me confirm my choice to focus on biology in school, it was a really rewarding experience,” he explained. Distefano examined the signaling pathways of nematodes to study the development of new cells. Using mutagenesis, or the altering of genes, Distefano tracked the changes in the worm using fluorescent markers. He worked closely with several graduate students while Stern, rounding out his summer experience, mentored him.

“This summer was such a great opportunity for me, definitely a wonderful experience. I would like to thank Dr. King for being so patient with me, she is a wonderful mentor,” Dhandapani said. She and the three other high school students chosen for the program were selected by their school guidance department and science teachers as the best science students in the school. Bristol-Myers Squibb supports the students with a stipend and recognition at an end of the summer event. Bristol-Myers Squibb is a pharmaceutical company headquartered in New York City, locally they are based in Wallingford, CT.

Clinical Trials Education Series

The National Cancer Institute has collaborated with the Cancer Information Service (CIS) to create a Clinical Trials Education Series to educate families, health professionals, and the general public about cancer clinical trials. “We recognize that most people understand very little about clinical trials; by collaborating with organizations throughout New England, the Cancer Information Service’s Partnership Program is working to increase the public’s knowledge of clinical trials,” Hilarie Campbell, the CIS Partnership Program Coordinator explained.

The education series provides a comprehensive set of teaching tools including booklets, videos, and slide programs to help raise awareness of clinical trials available for cancer patients and to dispel myths and fears related to participation in trials. For more information on the program or to order copies of the materials, please call 1-800-4-CANCER or visit [www.cancer.gov/publications](http://www.cancer.gov/publications).
Yale Acquires New Instrument to Advance Cancer Research

The YCC/Keck Mass Spectrometry Resource at Yale Cancer Center recently received the largest instrumentation grant awarded to the Yale University School of Medicine. The $1.4 million dollar grant for the purchase of an FT-ICR Mass Spectrometer will significantly benefit cancer research and many other research projects. The FT-ICR Mass Spectrometer provides extremely accurate mass determinations at high sensitivity. This instrument allows the identification of proteins and their post-translational modifications, which are structural changes that are often critical for normal and abnormal cellular function.

The performance of the FT-ICR should greatly exceed that of other mass spectrometers in the YCC/Keck Mass Spectrometry Resource in three areas: resolution, mass accuracy, and the ability to fragment proteins. For example, the FT-ICR is capable of achieving a resolution as high as 900,000 at a mass of 857 daltons; currently the highest resolution attainable on mass spectrometers at Yale is about 20,000. The 1.5 parts per million mass accuracy of the FT-ICR also out-performs the 5 parts per million mass accuracy that can be obtained on other instruments at Yale. The sequencing of peptides and small proteins benefits from the three methods of fragmentation offered by the FT-ICR versus the one method typically employed by other mass spectrometers.

Dr. Alan G. Marshall, who directs the Ion Cyclotron Program at the National High Magnetic Field Laboratory in Tallahassee, FL, was delighted to hear that the YCC/Keck Mass Spectrometry Resource was awarded funding to acquire an FT-ICR. Dr. Marshall said, “the new instrument should prove uniquely useful for identifying the fundamental modifications to proteins that make human cells different in different tissues and organs of the body.”

It is estimated that humans may contain 30,000-35,000 (or more) different proteins with only a subset being expressed in a given cell type. Cancer often results in altering the relative level of expression of individual proteins and their modifications. Many predict that identifying these changes in protein expression will allow for earlier diagnosis, more accurate classification of the type of cancer, and better understanding of the disease. One important area of use for this instrument will be to detect differences in protein expression as growing cells undergo the transition from a normal to metastatic state. The extremely high resolution and mass accuracy of the newly acquired FT-ICR Mass Spectrometer will give researchers improved opportunity to detect these subtle changes in the human proteome.

Dr. Kenneth Williams, the Principal Investigator on this grant and the Director of the HHMI Biopolymer/Keck Foundation Biotechnology Resource Laboratory explained, “this grant, which was made possible by the dedicated efforts of the Co-Directors, Kathy Stone and Walt McMurray, other staff of the YCC/Keck Mass Spectrometry Resource, and by the strong support of the twenty-five key personnel at Yale and seven other institutions, will bring a uniquely powerful resource within reach of the Yale University scientific community.”

“Analysis carried out on this state-of-the-art mass spectrometer should substantially strengthen research programs which are directed at utilizing the rapidly evolving science of proteomics to better diagnose, understand, and treat cancer, as well as many other diseases,” Dr. Williams continued.

Spotlight on Nursing: Clinical Research Nursing

Clinical research nurses are an integral part of the ongoing search for cancer cures. The increasing number of clinical trials available to cancer patients gives both the physician and the patient alternative treatment options. Clinical trials are research studies that help physicians and researchers find methods to improve patient care. Individual studies are created to answer scientific questions and to discover better ways to prevent, diagnose, or treat cancer. Clinical research nurses play a critical role in monitoring the patient’s health and determining the safety and effectiveness of their treatment.

Clinical trials are often the final step of a long scientific process, which begins in a research laboratory, to develop new approaches to fighting cancer. They evaluate new drugs and combinations of agents, as well as new uses or dosages for existing medications.

While many patients are apprehensive about clinical trials it is important they realize that trials have gone through rigorous investigation before being approved for patient use. “Most people are unaware of the numerous tests trials have undergone before reaching the patient; research nurses coordinate the care throughout. “We are in effect cheerleaders to get other disciplines involved and on the same page,” Elspeth Knill-Selby, RN, OCN said

Yale Cancer Center has divided their research nurses by disease site so that they may concentrate on patients on trial with similar symptoms and side effects. A collaborative effort is created between the physician, research nurse, and patient in an effort to offer maximum care. As trials have become more complex, more departments become involved with the care of the patient on trial; research nurses coordinate the care throughout. “We are in effect cheerleaders to get other disciplines involved and on the same page,” Elspeth Knill-Selby, RN, OCN said

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Clinical research nurses are responsible for patient recruitment, ensuring regulatory compliance, explaining the protocol to the patient and their family, data collection and analysis, toxicity assessments, and educating the nursing staff and community oncology offices on protocols. “We are one another’s support system,” Knill-Selby asserted when asked how she dealt with the pressures of research nursing. Arlene Hsu, RN, OCN, Linda Rink, RN, Barbara Siconolfi, RN, and Inger Christensen, RN are currently recruiting patients for clinical trials at Yale Cancer Center.


**UPCOMING EVENTS**

- **September 30, 2002**
  5th Annual Burger King Children’s Charities Golf and Tennis Classic
  Brookdale Country Club, Florham Park, NJ
  For more information, (212) 929-4757

- **October 9, 2002**
  Understanding Cancer: Second Wednesdays’ Lecture Series
  Breast Cancer: HRT, Issues in Mammography, and Options for Care
  Dr. Vincent T. DeVita, Jr., Director of Yale Cancer Center
  Dr. Donald Lannin, Director of the Yale Breast Care Center

- **November 13, 2002**
  Lung Cancer: Current Therapies and Future Directions
  Dr. John Murren, Associate Professor, Medical Oncology
  Marianne Davies, RN, MSN, ACNP, APRN

- **January 8, 2003**
  Coping with Depression: Tools and Strategies
  Bonnie Indeck, MSW, LCSW

- **February 12, 2003**
  Gynecologic Oncology Panel
  Speakers to be announced

- **March 12, 2003**
  Prostate Cancer: The Modern Era
  Dr. Richard Peschel, Professor, Therapeutic Radiology

- **April 9, 2003**
  Dispelling Myths, Navigating Treatment Options and Using New Technology
  Bonnie Indeck, MSW, LCSW

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**YNHH East Pavilion Cafeteria, 6:00 – 8:00 pm**
For Reservations, Please Call (203) 688-2000
For More Information, Please Call (203) 737-2439

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Yale Cancer Center’s quarterly newsletter is written to inform the public and the Center’s friends, volunteers, donors, and staff on current items of interest at Yale Cancer Center. All inquiries should be addressed to: Renee Moore, Public Affairs Manager, 100 Church Street South, Suite 211, New Haven, CT 06519-1714

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