

USC/Norris cancer experts lead presentations at Department of Defense's Breast Cancer Research Program

Breast cancer researchers from USC/Norris led several presentations at the fourth Era of Hope meeting of the Department of Defense (DOD) Breast Cancer Research Program (BCRP). The biannual June meeting was held in Philadelphia.

The Era of Hope meeting is recognized as one of the premiere breast cancer research conferences in the United States. This year's meeting highlighted the multidisciplinary and innovative approaches funded by the DOD program including many at USC/Norris.

Cancer epidemiologist Leslie Bernstein, professor of preventive medicine and the AFLAC Chair in Cancer Research at the Keck School of Medicine, gave the plenary session presentation on the meeting's opening night.

Anna Wu, professor of preventive medicine,

chaired a symposium on biomarkers of breast cancer risk, while Michael Press, professor of pathology and the Harold E. Lee Chair in Cancer Research, presented his work on targeted therapies.

The DOD's Breast Cancer Research Program falls under the Congressionally Directed Medical Research Programs (CDMRP), which originated from a unique partnership among the public, Congress and the DOD.

In 1992, grassroots advocacy organizations provided much of the impetus that led to funding research on the screening and diagnosis of breast cancer among military women and dependents.

Since that time, the CDMRP has expanded to become second only to the National Cancer Institute



Leslie Bernstein, professor of preventive medicine, addresses the Era of Hope meeting in Philadelphia in June.

as a source of funding for breast cancer research. Bernstein, Wu and Press are three of the many USC researchers who receive DOD support .

PROSTATE: Combination imaging technique may help fine-tune treatment of prostate cancers

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cancer that has metastasized outside the prostate capsule will be invited to participate in the study. Jadvar will look at PET's usefulness both in men who are treated with androgen-ablation therapy as well as those who are treated through chemotherapy.

Androgen-ablation therapy, also called androgen-deprivation therapy or simply hormone therapy, uses either drugs or surgery to lower levels of male hormones—such as testosterone—in the body. Male hormones can cause prostate cancer cells to grow, and suppressing the hormones can stop or stunt their growth.

In men whose cancer does not respond to androgen deprivation, oncologists usually prescribe chemotherapy to control the cancer's growth.

Through FDG PET-CT, Jadvar

wants to see objectively how well both androgen ablation and chemotherapy work. While patients are still receiving treatment, Jadvar will conduct the imaging studies.

In this study, results of the imaging studies will not alter or influence patients' course of treatment.

In all, Jadvar will recruit 160 men who are undergoing androgen-ablation therapy and another 160 who are undergoing chemotherapy. Each participant will receive four FDG PET-CT scans during therapy.

Patients will be scanned from the top of the head to below the knees. Physicians also will monitor patients' PSA levels.

Jadvar hopes that FDG PET-CT scans will enable him to see whether tumors are responding to therapy as soon as treatment begins and throughout the therapy. If the imaging can

show how well hormone therapy and chemotherapy work—while therapy is still underway—oncologists may come to rely on FDG PET-CT to better guide treatment decisions in the future.

The imaging might also help shine light on whether metastases located in one part of the body, such as the brain, respond differently to treatment than those in other parts of the body, such as bone. And because FDG PET shows tumor metabolism, the FDG PET scans will be able to show whether treatment is stunting a tumor's activity—even when CT scans show no change in a tumor's size.

When data from the study have been analyzed, Jadvar also hopes that results will enable physicians to associate findings on FDG PET scans to patients' outcome.

Jadvar explained that even in men with metastatic prostate cancer who

initially respond well to androgen-ablation therapy, the cancer eventually grows resistant to the hormone suppression and spreads despite the therapy. That usually takes about 18 months to happen, Jadvar said. "But we cannot predict exactly when that hormone-refractory stage will happen," he said. "If we know that a man will develop the hormone-refractory stage in a year, for example, that information may be helpful to the clinician, who can employ other treatments earlier to delay the hormone-refractory stage and possibly enhance overall survival."

Meanwhile, men whose metastatic prostate cancer does not respond to hormone treatment survive for an average of eight months, Jadvar said, but their lifespan may be significantly more or less.

"I'm hoping FDG PET will help better predict how long they are going to live," he said. "It's important to be honest with a patient, and for counseling, it's important to tell them the truth—and give them the best information we have on their lifespan."

Jadvar will work with clinicians at the USC/Norris Comprehensive Cancer Center and Hospital and LAC+USC Medical Center on the study. Keck School clinicians include David Quinn, Jacek Pinski, Ana Aparicio and Eila Skinner, along with Przemyslaw Twardowski, oncologist at the City of Hope.

Susan Groshen, biostatistician at the Keck School, and radiologists Peter Conti and Robert Henderson, will be co-investigators as well. Jadvar noted that Edward Grant, chair of radiology, has been a key supporter for the project.

Scans will be conducted at the USC PET Imaging Science Center located at the Healthcare Consultation Center.

Wayne L. Simmonds, School of Medicine graduate and longtime instructor, 88

Wayne L. Simmonds, a dermatologist and microbiologist who taught at the Keck School of Medicine even as he pursued his doctorate, died of complications of Alzheimer's disease on July 3. He was 88.

Born in 1916 on a farm in Kansas, Simmonds entered the University of Wichita, obtaining his associate degree in 1943, and served on staff as a laboratory instructor until he entered the United States Army in World War II.

Upon completion of his military service, he returned to the University of

Wichita, graduating in 1946 with a master's degree. Later that year, he joined USC's medical school as a laboratory instructor in medical microbiology, while at the same time pursuing a doctorate in medical microbiology, completing this program in 1949. He went on to teach in the Department of Medical Microbiology, eventually as a full professor. At the same time, he enrolled as a student in the USC School of Medicine, graduating in 1958 with his medical degree.

After finishing his

internship and residency program at LAC+USC Medical Center's General Hospital, he entered private practice in Pasadena, specializing in dermatology.

Simmonds was known as a leader in his field, and for many years he served on the Surgery Course Faculty for the American Academy of Dermatology.

He became interested in both dermatologic and cosmetic surgery, and was a founding member of the American Society of Dermatologic Surgery, and the International Society of Dermatologic Surgery. In

1980 he also served as president of the American Society of Dermatologic Surgery.

He was on the staff at both Huntington Memorial and St. Luke's hospitals in Pasadena.

Simmonds retired from full-time practice in the early 1980s.

He is survived by his wife, Marie; brother Thaine Simmonds; sons David, Jeff and Stephen Simmonds; stepdaughter Kristin Seguin, and grandchildren Ryan and Adam Simmonds, and Andrew and Sarah Seguin.