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## The Microbiome: Friend or Foe?

NYUCI Scientists Study Inflammation, Bacteria, and Cancer

Unless you're a pro at oral hygiene, you've probably been told more than once that you need to floss more. Here's another reason: Chronic gum disease may raise your risk of stomach cancer and cancers of the head and neck.

That's just one area of research at the NYU Cancer Institute aiming to scrutinize the link between inflammation, microbes (such as bacteria), and cancer. Such studies are under way in numerous laboratories and in epidemiological programs — those that examine cancer determinants in populations. The goal is to learn more about how inflammation, the microbiome — the bacteria, viruses, and fungi residing in our bodies — and cancer are related, and ultimately to use this information to prevent or treat the disease.

Here's the rub: Your body contains trillions of "friendly" bacteria that we need and use for normal processes, such as digestion.



**What's in *your* mouth?** NYUCI researchers have demonstrated a link between gum disease and oral and digestive cancers.

But we don't yet know friend from foe. Making that distinction is a goal of many researchers in the microbiome field.

"This is a relatively recent area of inquiry, taking off in the last decade or so. New technologies have opened new areas of scientific study," explains Richard Hayes, DDS, PhD, Professor and Director of the Division of Epi-

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It's helpful for many people with cancer to know their loved ones are thinking about them.

## When Someone You Care About Says They Have Cancer: Five Things to Know

How would you react if someone you loved told you he or she was diagnosed with cancer? You might even be wondering, "How should I react?"

"Upon hearing the news, it's natural to feel frightened because we don't know what to expect," says clinical psychologist Karen Langer, PhD, Manager of Supportive Services at the NYUCI and Clinical Associate Professor of Rehabilitation Medicine. "With time and more information, however, that initial sense of feeling 'stunned' typically dissipates. We mobilize the strengths within ourselves, and

we can focus on how to genuinely support our loved ones during this challenging time."

What might you feel, and how can you best support the patient in his or her time of need? Here is some guidance:

**1. Know that you may experience a range of feelings.** It's normal to feel sadness, worry, anxiety, anger, and disappointment. These feelings are common as we try to get a handle on the situation and feel more in control. Feelings are dynamic and can vary over time. Acknowledge your feelings and let them move through

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# Message from the Director

As many of you know, NYU Langone Medical Center was hit hard by Hurricane Sandy last October, forcing us to close our inpatient hospital for many weeks. We were able to continue providing outpatient cancer services at the NYU Clinical Cancer Center, and our staff rallied to provide the very best care that our patients have come to expect. The reopening



of our hospital in January was a remarkable achievement, and today we are stronger than ever. Thus we began this year feeling revitalized and reenergized, and I felt more grateful than ever for such a dedicated cadre of staff members who pull together in times of crisis so we can continue to meet our mission.

We were also delighted last year to earn the renewal of our federal support as a National Cancer Institute (NCI)-designated cancer center. We continued to build our ranks of physicians, scientists, and faculty who do both. And we held our Annual Gala on October 17 at The Plaza, where our generous supporters gathered to celebrate the progress we've made and our plans for the future.

In this issue, you'll be able to read about progress we are making to understand the fundamental causes of cancer — in this case, how chronic inflammation and bacteria may instigate cancer development and growth. This is truly a multidisciplinary effort involving collaborations among laboratory researchers, clinicians, and population science investigators. This line of inquiry is a perfect example of the strides that can be made at a cancer center like ours, which is affiliated with a larger university family.

Speaking of family, another article in this issue offers guidance on how to respond when a loved one tells you he or she has cancer. We talk about how important it is to offer positive support while letting your loved ones call the shots about what they need and are ready to receive from you.

Another way to help patients through the journey of cancer is to offer integrative medicine services. I'd like to thank Bonnie Pfeifer Evans for her generous contribution to support integrative oncology programs that may benefit women with breast cancer. Programs such as these demonstrate the commitment of the NYUCI to treating the whole person, not just the disease.

Finally, I'd like to take this opportunity to welcome several new faculty members and board members to our team, whom you can read about in this issue. Of course, you are vital members of our team as well. I'd like to thank you for your support and your continued faith in the mission of the NYU Cancer Institute.

William L. Carroll, MD

The Julie and Edward J. Minskoff Professor of Pediatrics  
Professor of Pathology  
Director, NYU Cancer Institute

## Hassenfeld Center Makes Back to School a Blast

September may evoke feelings of elation for parents eager to get their children back to the classroom, and dread among kids saying goodbye to the lazy days of summer. But for children and teens diagnosed with cancer, returning to school each year marks an important milestone, and one to be celebrated.

Staff at the Stephen D. Hassenfeld Children's Center for Cancer and Blood Disorders agree. That's why each August, the Hassenfeld Center hosts a Back to School Blast. All current and former patients of any age are invited to attend, as well as their siblings. "We recognize how a cancer or blood disorder diagnosis impacts the entire family," explained Lita Anglin, Family Health Librarian at the Hassenfeld Center and the NYU Clinical Cancer Center, who coordinates the annual Back to School Blast with the center's psychosocial services staff. "Siblings are often the 'unsung heroes' during treatment. So we encourage them to attend as well."

Ms. Anglin created the event with Harlan Saroken, a volunteer who serves on the Hassenfeld Committee. "We thought about having an event that would celebrate the return to school and give families a little bit of help," said Ms. Anglin. Each year, Ms. Saroken secures donations of school supplies for the children (contributed by office supply company W.B. Mason), and she and her husband, Brian, donate backpacks as well.

The Back to School Blast features educational and health-related activities for patients and their siblings. Past events have included support groups and workshops for parents, as well as fun science experiments. The day usually features New York City Fire Department officials teaching about fire safety, plus talks by the Hassenfeld Center wellness coordinator about healthy habits and physical activity for the school year.



Children at the Hassenfeld Back to School Blast enjoyed a display about healthy breakfast choices.

At last year's event on August 16, the sixth annual gathering, participants could enjoy a trivia game, learn about collage making (and receive a family museum pass) from staff of the Museum of Modern Art, and get up to speed on proper tooth-brushing techniques (thanks to instruction by residents from the NYU College of Dentistry). Some children were able to slip away to have their blood drawn for analysis — part of the routine procedures done during cancer care — saving them from having to return for another appointment.

The event also included a display about healthy breakfast choices. Helping to dole out puffed millet and corn at the breakfast table was Kahron Savage, 13. Kahron grew so tall during his nearly two-year absence from school to treat T-cell leukemia that few classmates recognized him when he returned to eighth grade last year.

A big kid now, with a quick smile, Kahron is enjoying a fresh start at Grand Street Campus, a public high school in Brooklyn. He looks forward to playing basketball and hopes to play football, once his Mediport is removed. "I am ready for the New York Regents tests and everything," said Kahron, who selected a new red backpack

filled with donated supplies. "I am proud of myself for getting through everything I did to get myself better."

Noelia Lara, 19, has an idea of how Kahron feels. She had spent her quinceañera — the Latin American celebration of a girl's 15th birthday — in the hospital, newly diagnosed with acute lymphoblastic leukemia. Her first Back to School Blast was nine months later, even though at the time, school for her entailed a tutor coming to her Queens apartment to teach her 10th grade studies.

"Having cancer really accelerated my maturity," Noelia asserted. "I focused on my health and doing everything I could to get better, instead of on my friends and on what I was missing. But it's still hard. You feel alone." Healthy today, Noelia is studying at LaGuardia Community College, working toward her dream of becoming a child psychologist for young patients with cancer.

"Here, we never say, 'I know how you feel,' because we don't know," said Dolli Holland, LCSW, a senior social worker at the Hassenfeld Center who staffed the reception table at the Back to School Blast. "But you," she said to Noelia, "You will be able to say that." ■

demology in the Departments of Population Health and Environmental Medicine. “We used to culture only one bacterium at a time. Now we use novel computer-based methods which make it more efficient and less expensive to analyze hundreds of bacteria at once, propelling this research forward. A solid story has yet to emerge, but this is just the beginning.”

### Plenty to Go Around

The microbiome is a hot area of study. To be sure, there’s no shortage of microbes for researchers to analyze. Our bodies are home to over 100 trillion of these microscopic organisms, most of which live in peaceful coexistence with us. But scientists are learning that the introduction of more “hostile” species, such as *H. pylori* bacte-

Bacteria in the mouth are capable of metabolizing alcohol into a cancer-causing form, called acetaldehyde, which may react with the tissue lining the mouth and pharynx, possibly through inflammation.

Dr. Hayes and Zhiheng Pei, MD, PhD, Associate Professor of Pathology and Medicine, are conducting a National Cancer Institute (NCI)-supported prospective study of 70,000 individuals. The researchers are comparing bacterial profiles in oral wash samples of people who developed head and neck cancers with the samples from people who didn’t develop cancer to see if they can identify a bacterial “signature” that could be used to predict head and neck cancer risk.

Jiyoung Ahn, PhD, Assistant Professor of Population Health and Environmental

the cancer change the oral microbiome?”

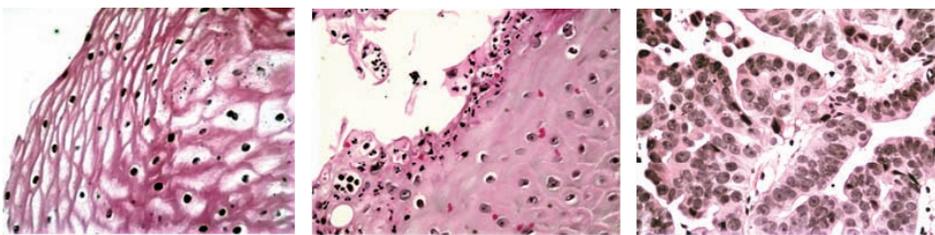
Yu Chen, PhD, Associate Professor of Population Health and Environmental Medicine, has been studying the link between oral health conditions and precancerous lesions of the stomach. She is collaborating with Fritz Francois, MD, Assistant Professor of Medicine; Martin Blaser, MD, Frederick H. King Professor of Internal Medicine and Chair of the Department of Medicine; Dr. Pei; and colleagues at the NYU College of Dentistry, including Yihong Li, DDS, PhD, Ananda Dasanayake, BDS, PhD, and Patricia Corby, DDS. Dr. Chen invited individuals who were scheduled for upper endoscopy at Bellevue Hospital Center to undergo a comprehensive oral examination at the Bluestone Center for Clinical Research, which is part of NYU College of Dentistry. The researchers found that people with precancerous lesions in the stomach were nearly three times as likely as healthy individuals not to floss and to have a higher percentage of tooth sites with gingival (gum) bleeding — factors related to active gingivitis and periodontitis.

“These data suggest that oral conditions related to periodontal disease may be predisposing factors for stomach cancer, which is consistent with literature supporting the positive association between tooth loss and stomach cancer mortality,” says Dr. Chen. The next step is to study these patients’ oral microbiomes in hopes of finding specific bacteria that may explain this association.

### Building on History

*H. pylori* remains the major cause of stomach cancer around the world. Dr. Blaser and his colleagues established this association in the mid-1990s, and have been exploring the different strains of the bacterium and their ability to cause stomach cancer.

Until 1930, stomach cancer was the most common cancer in America. But as *H. pylori* infection rates have declined (due to increased use of antibiotics,



NYUCI scientists are studying the interplay between microbes, inflammation, and cancer. Shown here, from left: normal esophageal tissue, esophagitis (inflammation), and esophageal cancer.

ria, can have dire consequences in some individuals, but not others.

There are numerous ways in which microbes may influence cancer risk. They may cause inflammation when put in direct contact with tissue (such as the lining of the mouth or esophagus), or they may make tissue more susceptible to the cancer-causing effects of carcinogens (such as tobacco and alcohol). Studies have already established *H. pylori* bacteria as a cause of stomach cancer and human papillomavirus (HPV) as an instigator of cervical and oropharynx cancers. Now scientists are digging deeper to link other microbes to cancer and to study the mechanisms underlying the association.

### A Mouthful of Trouble?

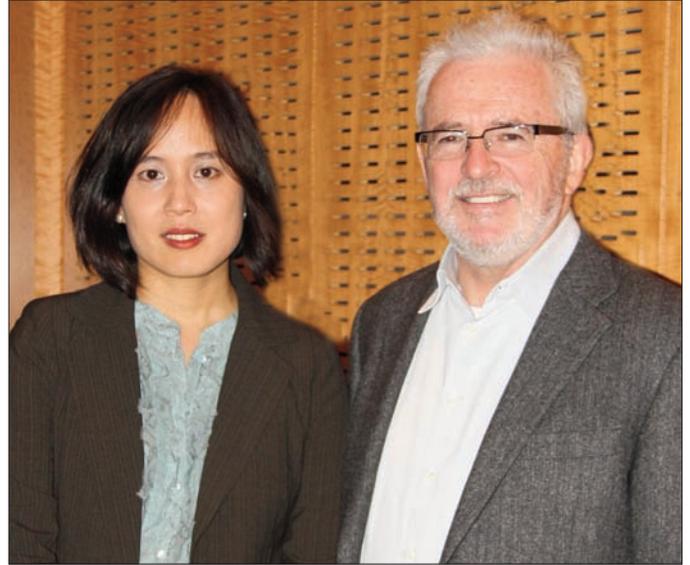
Alcohol is a known cause of oral cancers.

Medicine, found that individuals with periodontitis had more than double the risk of cancers of the oral cavity and digestive tract. Cancer risk rose with increasing periodontitis severity and was specifically associated with an oral bacterium called *P. gingivalis*, which the scientists suggest may serve as a biomarker for microbe-associated digestive cancers.

Dr. Ahn is also exploring the relationship between the mouth microbiome and pancreatic cancer. From a study of 75,000 people who contributed oral wash samples and who agreed to be monitored for ten years, she is comparing 300 people who subsequently developed pancreatic cancer and 300 who did not, to see how their oral microbiome data differ. “We want to clarify what caused what,” she says. “Did the bacteria cause the pancreatic cancer, or did



George Miller, MD, and Jiyoung Ahn, PhD, are each exploring the link between the microbiome and pancreatic cancer.



Richard Hayes, DDS, PhD, and Yu Chen, PhD, are studying the influence of oral health on head and neck cancers (Hayes) and stomach precancers (Chen).

among other causes), so has stomach cancer. Interestingly, however, other cancers are on the rise. Cancer of the junction between the esophagus and the stomach is the fastest growing cancer in the United States, notes Dr. Blaser. “*H. pylori* is part of the human microbiome, and it is disappearing,” he says. “It causes stomach cancer, but seems to have a protective effect on the esophagus.”

Dr. Pei is trying to find out more about this association. He and his colleagues have studied the microbiomes of people with esophageal cancer and found a higher population of Gram-negative bacteria, which are usually found in the acidic environment of the stomach. But when acid from the stomach bubbles up into the esophagus (a condition called reflux), those bacteria can enter the esophagus and may cause chronic inflammation (esophagitis). This may explain the link that has been established between chronic reflux and esophageal cancer. “Bacteria are an essential component of chronic inflammation and cancer in the digestive tract,” Dr. Pei concludes.

He and his colleagues are now doing studies to further define the strains of Gram-negative bacteria that may raise esophageal cancer risk. Once identified, scientists could introduce these strains

into laboratory animals to see if they induce cancer. They could also assess the potential value of anti-inflammatory drugs for reducing cancer risk.

#### **A Gut Reaction**

Some intestinal bacteria may metabolize food components that enter the gut. Dr. Ahn and Liying Yang, Research Assistant Professor, are conducting an NCI-funded study comparing the intestinal microbiome between people with colorectal cancer and healthy individuals. With NYUCI funding, Dr. Ahn is also conducting the Human Microbiome and Colorectal Tumors Study, in which information on usual dietary intake and stool samples for microbiome analysis are collected from people who have had normal colonoscopy results. Study participants are being followed over time to see which specific gut bacterial profiles are associated with the subsequent development of colorectal tumors, and to assess the influence of dietary factors.

Bacteria in the intestine may also be implicated in cancers outside the digestive tract. In work led by Claudia Plottel, MD, Clinical Associate Professor of Medicine, researchers found that estrogen metabolism takes place in the gut and is highly dependent on the actions of gut bacteria.

If all goes as it should, estrogen in the gut is excreted from the body. But if the bacteria are not functioning normally, estrogen is reabsorbed into the body, potentially raising the risk of estrogen-related cancers such as breast cancer. Drs. Plottel and Blaser are now studying this association in animal studies.

The intestinal microbiome may also play a role in pancreatic cancer. George Miller, MD, Assistant Professor of Surgery and Cell Biology, is analyzing a group of proteins called toll-like receptors (TLRs), which become activated by byproducts of inflammation and microbes. Bacteria in the digestive tract can migrate to the pancreas, produce TLRs, and stimulate inflammation.

“The pancreatic tumor environment is full of inflammatory cells that provide feedback to cancer cells,” Dr. Miller explains. “Once TLRs are activated, it starts a vicious cycle of inflammation that contributes to the cancer, and then more inflammation results.” He and colleagues from other labs are studying the intestinal microbiomes of patients with pancreatic cancer to see how they differ from those of people without the disease.

One potential target is a family of proteins on immune cells called “pattern recognition receptors” (PRRs), which are

you. And then speak with your loved one to see how you can offer your support.

**2. Think carefully about your initial responses.** If you find yourself at a loss for words upon hearing the news, you may respond, “I am so sorry. This news is difficult.” It is then best to say something that will be helpful or healing. You can reassure your loved one that you care and are thinking about him or her, and that

look to those around them to form a large support network, while others choose to move forward on their own, or with the help of only a couple of close friends or family members. Let the patient call the shots.

What kind of help might you offer? It can be concrete, such as assisting with chores or errands, shopping, or driving children to and from school and sports

approach enables the patient to maintain autonomy and a sense of control.”

**5. Asking “How’s it going for you?” may be a better question than “How are you feeling?”** During the experience with cancer, not everyone wants to talk about their illness, and many may prefer to focus on other things going on in their lives during their conversations with friends or family. Conversely, some people prefer to focus primarily on the cancer. “Determining a person’s preferences about what they want or don’t want to talk about, or to hear about, can be helpful. Good communication is a powerful tool during a journey with cancer,” says Dr. Langer.

Some patients may not return phone calls, or they may seem curt in their replies to your inquiries. Don’t feel you need to distance yourself if this happens. It may still be helpful to reach out to your loved one by phone or text (depending on personal preference), stating, “I just wanted to let you know I am thinking of you. I’m here if you want to call, but if you don’t, that’s fine and I understand.”

And speaking of means of communication, it’s helpful to ask the patient about his or her preferences for contact. Do not use the patient’s office e-mail address or telephone number unless the patient has told you this is okay; some patients prefer not to tell coworkers about their illness. You might also ask if the patient is comfortable with you leaving messages on voicemail or an answering machine.

Support and professional counseling are available for patients with cancer and their families. Friends may also rely on each other and can be instrumental in offering loving support. “There are ways we can help those we love while respecting their personal needs and wishes,” Dr. Langer concludes. “As human beings, cancer challenges us to consider the truly enduring and deeply meaningful aspects of our lives, and to think about those who are most important to us.” ■



Some people with cancer are more willing to accept help than others. One way to help is to offer assistance with grocery shopping.

you will be there. “Saying something as simple as ‘I am thinking about you, and I am here with you to support you in whatever ways you would like’ can mean a lot to the patient,” says Dr. Langer.

You may offer to go through the process with them if they wish. Be mindful of your schedule and capabilities when you offer help, however, so you can be counted on to deliver what you say you will.

One thing that a person newly diagnosed with cancer doesn’t want to hear: “It could be worse.” It’s a difficult time, and they need support.

**3. When it comes to offering help, take your cues from the patient.** Some people

practices. Or you can offer to accompany or drive your loved one to appointments and treatments. Another way of helping might include sharing information from the patient with family and friends so he or she doesn’t have to update people individually.

**4. Be respectful of those who may decline your help.** You can say you want to help, but if the person declines, it’s not necessarily a reflection of his or her closeness to you. Some people feel uncomfortable having others assist them, and depending on others is not part of their identity. Dr. Langer advises, “Let them know you can ease their burden or workload, but that you respect that they are in charge. This

## Contribution Supports Programs to Empower Women, Inspire Others

A generous contribution from The Charles Evans Foundation is funding research related to lifestyle interventions and integrative medicine services at the NYU Cancer Institute which have the potential to improve the lives of women with breast cancer.

The donation is a gift from Bonnie Pfeifer Evans, a New York City philanthro-



With a contribution from The Charles Evans Foundation, Bonnie Pfeifer Evans is supporting research to improve the lives of women with breast cancer.

pist whose late husband, Charles Evans, was a founder of the fashion house Evan-Picone. Mr. Evans died in 2007. Mrs. Evans made the gift to honor a friend going through breast cancer treatment as well as Mrs. Evans' mother, who died of breast cancer. "The more I found out about the initiatives, work, and patient care at the NYU Cancer Institute, the more impressed I became," she says. As an active individual

who incorporates exercise, good nutrition, and a healthy lifestyle into her own life, she believes in the value of such interventions for people with cancer, too.

The \$250,000 gift is being used to support research evaluating lifestyle interventions to improve quality of life in women with breast cancer. One project is assessing an eight-week exercise program for newly diagnosed breast cancer patients who are overweight. In partnership with Martha Eddy, EdD, of Moving for Life, investigators are surveying participants before, after, and up to one year following completion of the program to see if women change their exercise behaviors as a result of the initiative.

"It is increasingly clear that modifications in diet and exercise may contribute to improved outcomes after breast cancer treatment," says Freya Schnabel, MD, Professor of Surgery and Director of Breast Surgery at the NYU Cancer Institute, who treated Mrs. Evans' friend. "We are grateful to The Charles Evans Foundation for providing the support to help us launch this program."

In another project supported by the gift, NYUCI investigators are assessing the effectiveness of acupuncture to reduce pain and shoulder/chest tightness after surgery in women who had mastectomy and placement of a tissue expander (part of the breast reconstruction process). Up to a third of women who undergo this surgical procedure report postoperative pain that sometimes continues long-term.

"When a woman hears she has breast cancer, it can be overwhelming. She can feel helpless in so many ways," explains Mrs. Evans. "Lifestyle interventions enable women to make choices that can be empowering for them, and hopefully inspire their family members and friends around them to feel empowered, too." ■

## Arena Oncology Becomes Part of NYU Langone Medical Center

Arena Oncology, a provider of high-quality cancer care in Lake Success, Long Island since 1984, is now part of NYU Langone Medical Center (NYULMC). The practice is part of NYULMC's Faculty Group Practice and was recruited for its expertise and certifications in internal medicine, hematology, and oncology. Patients treated at NYU Langone Arena Oncology can continue to receive excellent cancer care, and their doctors are now full-time faculty members of NYU School of Medicine.

NYU Langone Arena Oncology offers chemotherapy, immunotherapy, comprehensive management of hematologic cancers, and internal medicine services on eastern Long Island, sparing many patients from a trip to Manhattan to receive NYULMC's renowned care. The doctors at NYU Langone Arena Oncology include Frank P. Arena, MD, founder of Arena Oncology; Anna Kurzyna-Solinas, MD; Richard S. Stark, MD; and Nikhil Uppal, MD. All of the doctors are board-certified oncologists.

Because of the wide variety of services provided at NYU Langone Arena Oncology, most patients receive their care on an outpatient basis. Along with the latest advances in equipment and technology, the office has its own protocols with pharmaceutical companies, placing it in a position to offer the newest drugs and the most current treatment regimens. ■

*More information:*  
NYU Langone Arena Oncology  
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Lake Success, NY 11042  
Phone: 516-466-6611

# NYUCI 2012 Gala Raises Over \$1.5 Million

More than 400 supporters of the NYU Cancer Institute gathered at The Plaza Hotel last October for the annual gala, celebrating the Cancer Institute's accomplishments and hearing about plans for its continued growth. The event, chaired by the NYUCI Advisory Board, raised more than \$1.5 million to support the NYUCI's patient care, research, education, and cancer prevention programs.

James L. Speyer, MD, Professor of Medicine and Associate Director, Strategic Planning, Network Development and Public Affairs, was the evening's honoree. He was praised as a model clinician,

outstanding leader, and compassionate provider of personalized cancer care. Jaana Sareva, a long-term survivor of metastatic breast cancer and a patient of Dr. Speyer, was the guest speaker.

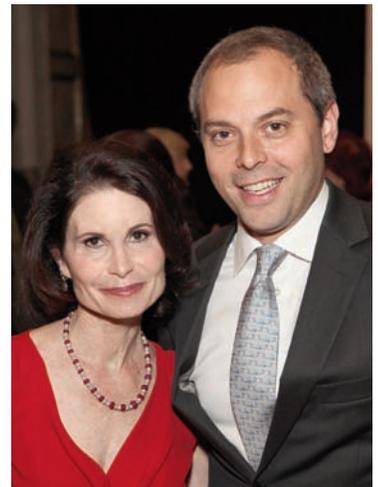
"Patient-centered care has always been our driving force. And you might say that for decades, tonight's honoree, the incomparable Dr. Jim Speyer, has been our 'torch bearer,'" Lori Fink, NYUCI Advisory Board Chair, told the guests. "Throughout Jim's impressive tenure with the Cancer Institute, he has reminded us to listen always to what the individuals and families we serve actually need."



NYUCI Director William L. Carroll, MD



From left: Robert I. Grossman, MD, the Saul J. Farber Dean and CEO; Gala Honoree James Speyer, MD; and Kenneth Langone, NYULMC Board Chair



Lori Fink, Chair of the NYUCI Board of Advisors, and Joshua Samuelson, NYUCI Board member



From left: Lori Fink and Dr. Speyer with Laurie Perlmutter, NYUCI Board member



From left: NYUCI Board members Phyllis Putter Barasch and Constance McCatherin Silver with Dafna Bar-Sagi, PhD, Chief Scientific Officer

## NYUCI Announces Five New Recruits

The NYU Cancer Institute has announced the recruitment of five exceptional cancer specialists:

**Maher Abdul Hay, MD**, Instructor, will build his clinical practice at Bellevue Hospital Center, providing outstanding care in hematology and medical oncology to underserved populations. He received his medical degree from the American University of Beirut (AUB) and completed research fellowships at AUB and the University of Illinois at Chicago before pursuing an internal medicine residency at The State University of New York at Buffalo. Dr. Abdul Hay then completed a hematology/oncology fellowship at NYU Langone Medical Center, serving as Chief Fellow. He has conducted innovative research on the role of the STAT3 protein in the development and treatment of hematological cancers, and will continue this research at the NYUCI.

**David L. Green, MD, PhD**, Assistant Professor (Clinical), specializes in the care of patients with bleeding and blood clotting disorders. He received his MD/PhD from NYU School of Medicine and completed his internship and residency in medicine at Mount Sinai Medical Center. His training also included a fellowship in hematology at Johns Hopkins Hospital, a fellowship in medical oncology at Memorial Sloan-Kettering Cancer Center, and a research fellowship in molecular oncology at The Rockefeller University. Dr. Green is also Associate Director of the Bellevue Special Hematology Laboratory and Medical Director of the Anticoagulation Service at NYU Langone Medical Center.

**Arjun Balar, MD**, Assistant Professor (Clinical), is a medical oncologist specializing in genitourinary cancers. At the Smilow Comprehensive Prostate Cancer

Center, he will establish a multidisciplinary clinic for the care of patients with urothelial and renal cancers. Dr. Balar graduated from the University of South Florida College of Medicine, and completed his internal medicine residency at NewYork-Presbyterian Hospital/Weill Cornell Medical Center. He then entered the medical oncology and hematology fellowship program at Memorial Sloan-Kettering Cancer Center. Dr. Balar will concentrate his research efforts on urothelial and renal cancers.

**Ping Gu, MD**, Instructor, cares for patients with a wide variety of hematologic disorders and cancers. He earned his medical degree from Nanjing Medical University in China and became a Resident Surgeon at Jiangsu Cancer Hospital. Dr. Gu came to the United States to pursue a PhD in pathology at the Medical College of Ohio. He completed a residency through the New York Medical College (Richmond) Program, and was accepted into the Hematology and Oncology Fellowship Program at NYU Langone Medical Center. With a strong background in general surgery, Dr. Gu has focused on the care of patients with colon and liver cancers.

**Komal Jhaveri, MD**, Assistant Professor (Clinical), is combining her expertise in radiology and the medical management of breast cancer to create a practice utilizing radiological techniques to study new therapies for this disease. Dr. Jhaveri received her medical degree from KJ Medical College and Research Center/University of Mumbai, India, and a residency in nuclear medicine from the Radiation Medicine Center/University of Mumbai, and she was subsequently awarded a Diploma in Radiation Medicine. She also completed a residency at St. Luke's Roosevelt Hospital in New York and a medical oncology and hematology fellowship at Memorial Sloan-Kettering Cancer Center. ■

### The Microbiome: Friend or Foe?

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stimulated by byproducts of yeast and fungi and may be linked to pancreatic cancer. "We think the key is to modulate or block these receptors on immune cells," Dr. Miller contends.

Dafna Bar-Sagi, PhD, Professor of Biochemistry and Molecular Pharmacology, Senior Vice President and Vice Dean for Science, and Chief Scientific Officer, adds that the inflammatory response in pancreatic cancer has a significant impact on the body's immune response, making it possible for cancer cells to evade detection by the immune system. Therapies that stimulate the immune system to recognize and attack pancreatic cancer may therefore be a possible treatment.

Cancer cells also instigate an inflammatory response that repeatedly injures pancreatic tissue. The tissue does not have an opportunity to recover, and this chronic inflammatory state exacerbates the development of cancer. "By going haywire, the cancer cells not only affect their own growth, but also disrupt the well-being of the normal pancreatic tissue that surrounds them," Dr. Bar-Sagi says. The result is the vicious cycle of inflammation and cancer development.

### Putting It All Together

What could come of the findings generated by the studies of cancer researchers investigating the microbiome and inflammation? "This is an exciting field," concludes Dr. Ahn. "With a link between bacteria and cancer, there is the potential to use probiotics or antibiotics to reduce a person's risk of developing the disease by altering the microbiome."

"It's not likely that you'll be able to eat a cup of yogurt and change your microbiome enough to alter your cancer risk," Dr. Hayes adds. "We know there's a link between the microbiome and cancer, but it may or may not turn out to be through inflammation. Only time and research will tell." ■

## NYUCI Announces Two New Board Members

Members of the NYU Cancer Institute's Board of Advisors support the clinical, research, educational, and community outreach goals of the NYUCI by serving as ambassadors among their friends and colleagues, raising funds, and financially supporting the Cancer Institute's mission. The NYUCI has announced the appointment of the following new Board members:



**Norman M. Feinberg** is President and Chief Executive of the Gateside Corporation, a commercial and residential real estate development and investment company. He has acquired and developed apartment, office, and industrial buildings in several states, and built one of the largest marinas in the country. He also has substantial business interests in France.

In 2011, Mr. Feinberg and his wife, Arline, contributed \$1 million to support translational research related to lymphoma. Mr. Feinberg was treated at the NYUCI for lymphoma in 2009. "Having experienced firsthand the dedication and excellence of the NYU Cancer Institute, I am pleased to continue my support by becoming a member of the Advisory Board," he said.

Mr. Feinberg is a graduate of New York University and has long been involved in philanthropic causes.



**Celeste Guth** is a Vice Chairman and has global responsibility for the Financial Institutions Group in the Investment Banking Division of Goldman Sachs. She joined Goldman Sachs in 1986, became a Vice President in 1990, and was named Managing Director in 1997 and Partner in 2002.

She was treated at the NYU Cancer Institute in 2007 and 2011. "When I was a patient at the NYU Clinical Cancer Center, I was impressed with the level of care and the compassion of everyone on my healthcare team," says Ms. Guth. "Serving on the Board of Advisors is my way of giving back to this extraordinary institution."

Ms. Guth graduated from Queens College of the City University of New York in 1982 and earned an MBA from Harvard Business School in 1986. ■

### How You Can Help

Donations to the NYU Cancer Institute can bring us closer to our goal of defeating cancer. Each gift — no matter what its size — furthers our research efforts, enhances our clinical services, and expands our community programs so that we may help more people overcome this illness. You can give online at [www.NYUCI.org](http://www.NYUCI.org), where you can:

- Create your own personal fundraising page
- Make an unrestricted gift
- Direct your gift to fund a particular area
- Honor your doctor, nurse, or loved one

Contributions can also be sent to:  
NYU Cancer Institute  
NYU Langone Medical Center  
Office of Development  
One Park Avenue, 17th Floor  
New York, NY 10016

For more information, please contact Margo Bloom at 212-404-3638 ([margo.bloom@nyumc.org](mailto:margo.bloom@nyumc.org))

## Howard A. Fine, MD, Neuro-oncologist, Joins NYU Cancer Institute



**Howard A. Fine, MD**, a renowned neuro-oncologist, has joined the staff of the NYU Cancer Institute. He was appointed the Anne Murnick Cogan and David H. Cogan Professor of

Oncology, Chief of the Division of Hematology and Medical Oncology, Director of the Brain Tumor Center, and Deputy Director of the NYUCI.

Prior to his arrival at the NYUCI, Dr. Fine was Chief of the Neuro-Oncology Branch at the National Cancer Institute (NCI), and he held a joint appointment with the National Institute of Neurological Disorders and Stroke as an adjunct investigator. While at the NCI, he developed one of the preeminent brain tumor programs in the world. At the NYUCI, he has a wide range of responsibilities, including directing clinical programs in solid tumor oncology, developmental therapeutics, malignant hematology, and experimental hematology.

"We are delighted to welcome Dr. Fine to the NYU Langone Medical Center faculty," said William L. Carroll, MD, NYUCI Director. "As one of today's leading neuro-oncologists and a visionary leader, he brings a wealth of expertise and experience in research to treat brain tumors in adults and children. He will continue to build on the world-class care our patients have already come to expect."

Dr. Fine completed both his internship and his residency in internal medicine at the Hospital of The University of Pennsylvania. He later completed a fellowship in medical oncology at the Dana-Farber Cancer Institute in Boston. ■



# events calendar

Registration is required for all events, and seating may be limited.

Please call 212-263-2266 or e-mail [NYUCIcommunityprograms@nyumc.org](mailto:NYUCIcommunityprograms@nyumc.org) for more information and to register, unless otherwise noted.

## HEALTH SCREENING AND GUIDELINES AT ANY AGE: WHICH TESTS ARE RIGHT FOR ME?

**Thursday, February 14, 12:00 P.M.–1:30 P.M., Location A\***

Getting preventive care is one of the most important steps you can take to manage your health. When a condition is diagnosed early, it is usually easier to treat. Acting early also gives you the opportunity to modify lifestyle choices and can help prevent the risk of cancer and heart disease. This lecture will discuss screening recommendations, including when and how often you should have screening.

**Presenters:** Laurie Vokes, Interim Regional Vice President, American Cancer Society (Brooklyn Region); Kathie-Ann Joseph, MD; Magdalena Ratnella, PA.

To reserve your seat, call 718-963-8640. Lunch will be provided after the program. Presented in collaboration with the Office of Business Affairs, Woodhull Medical Center, North Brooklyn Health Network.

## PROSTATE CANCER EDUCATION SERIES

**5:30 P.M.–6:30 P.M., Location B\***

**Thursday, February 28**

**Topic:** Using the Internet for Prostate Cancer Education and Research

**Presenter:** Lita Anglin, MSIS

**Thursday, March 14**

**Topic:** Nutrition

**Presenter:** Geovanni Espinosa, ND, LAc, CNS, RH (AHG)

## STOP DIETING AND START EATING

**Tuesday, March 5, 6:00 P.M.–7:30 P.M., Location C\***

Learn to properly understand portion sizes so that you can lose weight, stop dieting, eat healthfully, and reduce your risk of cancer. Presenters will address the relationship between diet, obesity, and cancer and will demonstrate a healthy "plate makeover."

**Presenters:** Lisa R. Young, PhD, RD, and Niyati Parekh, PhD, RD, MS

## EATING TO FIGHT AND PREVENT COLORECTAL CANCER

**Wednesday, March 13, 12:00 P.M.–1:30 P.M., Location A\***

Evidence shows that a healthy diet is beneficial for the prevention and treatment of colorectal cancer. Join us to learn how a healthy diet can provide many benefits, including the prevention of colon cancer, increased energy, and weight loss.

**Presenters:** Harry A. Winters, MD, and Holly M. Mills, MS, RD

To reserve your seat, call 718-963-8640. Lunch will be provided after the program. Presented in collaboration with the Office of Business Affairs, Woodhull Medical Center, North Brooklyn Health Network.

## ANNUAL COLORECTAL CANCER AWARENESS LUNCHTIME PROGRAM

**Monday, March 18, 11:00 A.M.–1:00 P.M., Location D\***

Join NYU Cancer Institute's healthcare professionals for a discussion about screening, prevention, and new treatments for colorectal cancer. The importance of a healthy diet and exercise with regard to colon cancer will be discussed. A colorectal cancer survivor will also share a story. A healthy lunch will be provided after the program.

**Presenters:** Mark B. Pochapin, MD, Mitchell A. Bernstein, MD, FACS, Gail Leichman, MD, and Linda Schiano Chio, MS, RD

## HEAD AND NECK CANCER SCREENING

**Thursday, March 21, 5:00 P.M.–8:00 P.M., Location E\***

*Co-sponsored by the Division of Head and Neck Surgery/Department of Otolaryngology.*

Studies show that oral HPV (human papillomavirus) infection is linked to head and neck cancer independent of two other known risk factors: heavy tobacco and alcohol use. This screening, offered at no cost to you, will feature a visual inspection of the head, neck, and throat. Anyone over age 18 is welcome to attend. No appointment is necessary. **Please arrive no earlier than 4:30 P.M. and no later than 7:30 P.M. to ensure that you are seen.** For screening information only, please call 212-263-2266.

### Locations

**A:** Woodhull Medical Center, 760 Broadway, 2nd Floor Conference Room, Brooklyn, NY

**B:** NYU Clinical Cancer Center, 160 East 34th Street, Room 1121

**C:** NYU Langone Medical Center, 550 First Avenue, Alumni Hall B

**D:** NYU Langone Medical Center, 550 First Avenue, Farkas Auditorium

**E:** NYU Clinical Cancer Center, 160 East 34th Street, 9th floor

The NYU Cancer Institute helps advance the care of patients with the most common types of cancer and blood disorders, including those of the:

- Breast
- Gynecologic Cancers
- Gastrointestinal Tract
- Genitourinary System (such as prostate cancer)
- Neuro-Oncology (including brain cancer)
- Lung
- Head and Neck
- Melanoma
- Hematologic Cancers and other blood disorders
- Sarcoma
- Pediatric Cancers

**NYU Clinical Cancer Center**  
160 East 34th Street  
New York, NY 10016

As the principal outpatient facility of the NCI-designated NYU Cancer Institute, the NYU Clinical Cancer Center serves as home base for our patients and their caregivers. The center and its multidisciplinary team of experts provide convenient access to the latest treatment options and clinical trials, along with a variety of programs in cancer prevention, screening, diagnostics, genetic counseling, and supportive services.



## IMPORTANT PHONE NUMBERS

New Patient Physician Referral Line	212-731-5000
Clinical Trials Information	212-263-6485
Screening Mammography and/or Related Procedures	212-731-5002
NYU Clinical Cancer Center Support Group Information Line	212-731-5480
100 Women in Hedge Funds National Ovarian Cancer Early Detection Program	212-731-5345
Lung Cancer Screening Program	855-NYU-LUNG (855-698-5864)
Smoking Cessation	212-731-5767
Stephen D. Hassenfeld Children's Center for Cancer and Blood Disorders	212-263-8400

Speakers Bureau & Community Outreach Programs	212-263-6342
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NYULMC Office of Communications Media Inquiries	212-404-3555
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Office of Development/Donations	212-404-3640
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NYUCI Office of the Director	212-263-3276
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