CURE® presents our readers with a unique opportunity each year to nominate a colleague, patient, friend and family of outstanding individuals working to end the stigma and make a difference in the lives of those affected by lung cancer. Together as one community, we can raise awareness of lung cancer, and most importantly, recognize and celebrate the esteemed individuals contributing to improving the lives of patients with lung cancer, our Lung Cancer Heroes®.

CURE®’s Healer and Heroes events are designed to inspire, instill hope and celebrate those who truly dedicate their lives to helping the cancer community at large. To learn more about our awards programs, scan the QR code.

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cure® LUNG CANCER HEROES

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VOLUME 2
This book is dedicated to all of the heroes in this space — patients, doctors, caregivers and advocates — who dedicate their lives and careers to improving care for patients and the lung cancer community.

If you would like to give this book as a gift to your lung cancer hero, we’ve provided this page for your message.

This book honors:
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THE SECOND ANNUAL Lung Cancer Heroes® awards program provides us another opportunity to recognize incredible people who nurture hope and cultivate fortitude. These heroes include physicians, nurses and patient advocates, all of whom rise above the challenges to make a real difference in people’s lives.

As we host this awards program, I continue to be blown away by how courageous and bold people are in the face of what can be a frightening obstacle: lung cancer. This year, we are honoring two doctors and a patient-turned-advocate, but it’s important to note that every single person who was nominated by their friends, family and colleagues are, in fact, heroes.

There are countless inspirational quotes about heroes, but one that stands out to me is from Christopher Reeve, who played the hero, Superman. “A hero is an ordinary individual who finds the strength to persevere and endure in spite of overwhelming obstacles.” Although these patients, doctors, advocates, nurses and others may seem ordinary at first glance, they go above and beyond to educate, inspire and encourage while navigating the many obstacles, from the cancer itself to barriers to treatment to gaps in research.

While reading the nominations, I learned about so many brave doctors who compassionately cared for their patients no matter what difficulties they faced. »
“(What is notable) is his dedication to the highest level of patient care even under the most difficult circumstances,” a doctor wrote about his fellow colleague. “He has ensured top-notch care for the neediest minority patient groups of the poorest county in New York state — the Bronx — for 20 years, never yielding to institutional or other pressures to sway from his goal and instilling the same dedication in others around him.”

I also learned that many patient advocates, among others, used the COVID-19 pandemic as an opportunity to discover new ways to connect patients and survivors with each other.

“We have been inspired by his story of lung cancer survivorship, his advocacy and the way he uses his (podcast) platform to inform and advocate for others to use their voice,” a patient advocate wrote in her nomination about a podcast host. “In an era of trauma, people whose buoyancy elevates both purpose and agency shine like a flashlight in the darkness. During the past year of uncertainty, (he) was that light for many.”

Other nominators detailed how helping patients with lung cancer is, truly, some people’s mission in life.

“(She) is a gentle soul who was placed on Earth for this purpose: to guide those with the most common cancer there is,” a nurse wrote about her colleague. “She has done all this while being the single mother of five children, all now amazing adults.”

We look forward to the Lung Cancer Heroes® awards program, held virtually again this year. The program gives us another opportunity to hear the powerful stories of these real-life heroes in the lung cancer space who persevere with great compassion and teach us to embrace, not avoid, life’s setbacks and challenges.

— Mike Hennessy Jr.

President and CEO of MJH Life Sciences™
Our Lung Cancer Heroes® Winners
From left: DR. HOSSEIN BORGHAEI and DR. MARTIN J. EDELMAN
PHOTOS BY KRISTA PATTON
IT IS MY PLEASURE TO nominate Dr. Hossein (Hoss) Borghaei as a lung cancer hero. He has been the true academic triple threat as a clinician, researcher and educator.

Hoss came to the United States by himself in his teens as a political refugee from the turmoil in Iran. Completely on his own and through his hard work, scholarship, initiative and refusal to let things get him down, he went to college and then to medical school. After his internal medicine residency at Graduate Hospital in Philadelphia, he became a medical oncology fellow at Fox Chase Cancer Center, where he developed an interest in thoracic oncology under the tutelage of Dr. Corey Langer.

With Dr. Langer’s departure during a time of turmoil at Fox Chase, Hoss became the primary thoracic oncologist at the institution. Hoss is the consummate clinician. Despite busy clinics, he never seems rushed. His patients absolutely love him. His kindness, humor and concern shine through. The nursing staff adores him, and I have never heard him utter an unkind word. His clinic is characterized by both the devotion to patients as individuals and to advancing
clinical research. He is the primary driver behind the thoracic portfolio of clinical trials at Fox Chase Cancer Center.

As an educator, he has had a fellow clinic for several years and is uniformly rated as an outstanding teacher by the fellows. In addition, he has also had residents and other students rotate through his clinic and laboratory, many of whom have gone on to seek careers in thoracic oncology.

In terms of science, Hoss has established himself as an expert in the field on immunotherapy in lung cancer and is regularly invited to participate in talks and other programs dealing with
this subject at national and international meetings (e.g., American Society of Clinical Oncology [ASCO], European Society for Medical Oncology). As a clinical investigator, Hoss has led numerous investigator-initiated trials and was a member of the steering committee and the first author of the *New England Journal of Medicine* publication describing the role of immunotherapy in non-small cell lung cancer. The paper was the basis for the Food and Drug Administration approval of an immunotherapy drug in the second-line setting for non-small cell lung cancer as well as National Comprehensive Cancer Network and ASCO guideline changes. Hoss is the national principal investigator on the phase 3 ECOG-ACRIN EA5163 trial. This study is designed to answer several important questions regarding the sequencing of chemotherapy and immunotherapy and will likely result in changes in the standard of care.

Importantly, he contributes his time to the institution and the thoracic (and greater oncologic) community. Within the Office of Clinical Research, Hoss currently chairs the Research Review Committee, one of the busiest and most important committees for Fox Chase. He also serves as chief of the thoracic disease site, directs the tobacco treatment program and is a member of the Institutional Biosafety Committee.

In addition to his service locally, Hoss has a record of service to the lung cancer community both within the region and across the nation. Nationally, he is a member of the Eastern Cooperative Oncology Group Thoracic Core Committee and was vice chair for the Clinical Cancer Research and Epidemiology Study Section of the American Cancer Society. Internationally, he is a member of the Education Committee for the International Association for the Study of Lung Cancer and an associate editor of the journal *Lung Cancer*.

Prior to my coming to Fox Chase, I knew Hoss for several years as a member of the thoracic oncology community and now have had the opportunity as a member of the thoracic oncology group at Fox Chase Cancer Center to work closely with him. He is an outstanding clinician and a warm and friendly individual. At a time when we question the value of immigration, he demonstrates why immigrants are the backbone of the country. He is definitely a lung cancer hero.
AN INTERVIEW WITH Dr. Hossein Borghaei
By Dara Chadwick

**DR. HOSSEIN BORGHAEI** credits mentorship early in his career with inspiring his interest in lung cancer and how immunotherapy can play a role in its treatment.

Fifteen years ago, people with lung cancer didn’t have a lot of options, Borghaei says. “I felt like this was a disease where I could contribute and do something meaningful down the road for patients with this diagnosis.”

And contribute he has. Borghaei is chief of the Division of Thoracic Medical Oncology and also serves as co-leader of the Molecular Therapeutics Program. In 2015, he was the lead author of a paper published in the *New England Journal of Medicine* showing that the immunotherapy drug Opdivo (nivolumab) worked better than chemotherapy (the standard of care) for patients with non-small cell lung cancer in the second-line setting. That clinical trial led to Food and Drug Administration approval of the drug for second-line treatment, he says.

“It was very gratifying, and I’m grateful that I got to be the first author,” Borghaei says. “In our field, that’s a big deal. It was a seal of approval from my colleagues on that study.”

Borghaei’s current research includes a National Cancer Institute-supported phase 3 trial of a new first-line immunotherapy treatment option. The multicenter national study, which is now recruiting participants, is “another major effort to see if we can use immunotherapy a little bit differently in lung cancer,” he says.
WINNER PROFILE

At the center of Borghaei’s work — always — are his patients. “The person sitting in front of you is a person, not a disease,” he says. “Treatment responses are different in individuals. It’s important to remember that you’re not just treating lung cancer. You’re treating Mrs. Smith, who also has lung cancer.”

Over the years, he’s often felt like a member of his patients’ families, Borghaei says. “Lung cancer is such a life-altering diagnosis,” he says, adding that he focuses on providing clear explanations and making patients feel comfortable enough to ask any question. “If it’s an emotional discussion, I make sure I’m close by if they want to hold a hand. I’m from the Middle East, and we show emotions. I bring that with me into the clinic.”

Borghaei came to the U.S. alone from his native Iran at the age of 17. His dream was to become a doctor. “It wasn’t always easy,” he says. “But people were so nice and supportive.”

That’s exactly how many of Borghaei’s patients describe him — which likely stems from his philosophy of treating patients the way he’d like to be treated. “I talk with patients about their fears, concerns and hopes,” he says. “I get to know them and their family members.”

Those connections with patients are what drive Borghaei to seek new and better ways to treat lung cancer. “As physicians, we are proud of what we do, and we remember success stories,” he says. “But there are lots of stories you accumulate and carry with you about all the things you were not able to do. It gets emotional sometimes thinking about those patients.”

Borghaei notes that more research, funding and support for lung cancer are needed. “We’ve made improvements,” he says. “We’ve had some tremendous advances. I’m happy that I was able to contribute my piece to improve outcomes for people with lung cancer.”

“It’s important to remember that you’re not just treating lung cancer. You’re treating Mrs. Smith, who also has lung cancer.”

—DR. HOSSEIN BORGHAEI
WINNING ESSAY

LAUNCHING THE WHITE RIBBON PROJECT TO CHANGE THE PUBLIC PERCEPTION OF LUNG CANCER

HEIDI NAFMAN-ONDA, MS
THE WHITE RIBBON PROJECT, DENVER, COLORADO

Written by Michelle Hills, retired LCSW, Overland Park, Kansas

IN OCTOBER 2020, lung cancer survivors were facing the long-term effects of prolonged lockdowns from the COVID-19 pandemic. Heidi was a member of a Zoom support group. Frustrated by the lack of initiatives by cancer centers in advance of lung cancer awareness month in November, Heidi’s husband made her a large white ribbon made of wood. From that point forward, a grassroots movement was born.

Now there are almost 1,000 white ribbons across the U.S. (39 states), Canada, Europe and the Philippines. By creating a community of survivors, researchers, physicians and clinicians, The White Ribbon Project — under Heidi’s direction — has influenced real change.

Cancer centers are revising the criteria for early lung cancer screening (beyond a history of smoking) and creating media campaigns to raise lung cancer awareness. A podcast was launched — “The Research Evangelist” — that has featured brilliant researchers to help empower and educate the lung cancer community. In addition, The White Ribbon Project »
community members now have direct access to some of the nation's leading lung cancer experts through Saturday Zoom meetings.

The project has served as a tool to empower all patients, families and their caregivers in a way that has never before been achieved. We aren’t ashamed anymore. No more waiting for November. The time is now.
HEIDI NAFMAN-ONDA of Denver was just 55 years old when she felt a familiar pain. The lifelong fitness enthusiast and health educator had a history of ovarian cysts and suspected she'd developed another. She saw her gynecologist, but tests came back negative. Her doctor then sent her for a CT scan of her chest, abdomen and pelvis.

The results were shocking. Doctors found a 2.5-centimeter mass in the upper lobe of her left lung and what she describes as two “plump” mediastinal lymph nodes. A subsequent positron emission tomography (PET) scan and biopsy confirmed the diagnosis: stage 3 adenocarcinoma of the lung.

With no history of smoking, Nafman-Onda couldn't believe the diagnosis — nor could her husband, Pierre, a primary care physician.
“As people with a background in prevention, how could we not know that I was at risk for lung cancer?” she says. “I knew that if we didn’t know, others didn’t know either. The only message out there is, ‘Don’t smoke, and you won’t get this.’ That clearly is not true.”

Nafman-Onda says raising awareness and educating people about lung cancer risk is critical. “Each year, lung cancer kills more people than breast, colon and prostate cancer combined,” she says. “Yet lung cancer research is underfunded. That’s unacceptable. Over 235,000 of us are diagnosed every year.”

Her frustration with the lack of attention paid to lung cancer continued to grow. Nafman-Onda says she spent months trying to find out what cancer centers were planning to do for Lung Cancer Awareness Month in November. Getting no good answers, she took matters into her own hands.

Her husband had taken up woodworking as an outlet during her illness, so she asked him to make her a ribbon from plywood. They painted the 2-foot tall ribbon white and emblazoned it with the words, “Lung Cancer Awareness.”

Nafman-Onda put the ribbon on her front door and posted a picture of it in a private Facebook group for survivor advocates in Colorado. Soon, others asked if she could make ribbons for them, and The White Ribbon Project was born.

WINNER PROFILE

(“The White Ribbon Project) was my way of taking back some control in my life. I can scream from my front door that anyone with lungs can get lung cancer.”

—HEIDI NAFMAN-ONDA
“It was my way of taking back some control in my life,” she says. “I can scream from my front door that anyone with lungs can get lung cancer. I didn't have to ask for permission to do that, and it made me feel like there was something I could do.”

The white ribbons have become a symbol of hope and visibility for lung cancer advocates. Nafman-Onda keeps hers in the background of Zoom calls with other survivors and advocates. She takes it out to public landmarks and shares photos on social media. She’s even taken it to medical offices for photos with doctors and staff.

Today, The White Ribbon Project has created 767 wooden ribbons that Nafman-Onda has distributed to lung cancer survivors, researchers, physicians and advocates across the country. She says the organization is in the process of becoming a 501(c)(3).

The White Ribbon Project is all about getting ribbons to people so they don't feel alone, she says. But it's also about keeping lung cancer visible.

“Lung cancer has been a hidden epidemic because it's been unfairly stigmatized,” she says. “People get the diagnosis, they’re overwhelmed and then they hide.”

No more hiding, Nafman-Onda says. People with a smoking history need to get screened. And everyone needs to know they’re at risk regardless of whether they have a history of smoking.

After being treated with chemotherapy and radiation simultaneously, followed by immunotherapy, Nafman-Onda says she's doing well and remains focused on raising awareness.

“These ribbons have become an amazing symbol,” she says. “There's a power in their uniformity. Doctors have thanked us for making them. The key to breaking a stigma is to humanize it.”
IT IS MY GREAT PLEASURE to nominate Dr. Kenneth Rosenzweig as a lung cancer hero for 2021. I have known about Dr. Rosenzweig’s significant contributions to the field of lung cancer for many years in my role as CEO of the International Association for the Study of Lung Cancer, and I have only been more appreciative of his achievements as his colleague at Mount Sinai for the past three years.

Dr. Rosenzweig’s curriculum vitae speaks for itself. He graduated with honors from Brown University. He subsequently attended Yale School of Medicine, where he was a member of the prestigious Alpha Omega Alpha Honor Medical Society. He did his training in radiation oncology at Harvard Medical School and then began his career at Memorial Sloan Kettering Cancer Center (MSKCC). »
At MSKCC and later at Mount Sinai, Dr. Rosenzweig performed extraordinary research in the field of lung cancer and mesothelioma. He has published more than 150 scientific manuscripts and authored numerous book chapters and guidelines. I would classify his contributions to the field in four distinct categories: research, education, patient care and community service.
**Research:** Dr. Rosenzweig’s work has established the standard of care for radiation therapy technique in both locally advanced lung cancer and mesothelioma. His National Institutes of Health-funded phase 1 protocol was the first to demonstrate the method to safely escalate dose in patients with stage 3 lung cancer and how to account for tumor motion and incorporate metabolic imaging such as positron emission tomography scans into the treatment paradigm. His technique is the template for how every patient in the world is currently treated with radiation therapy. His work established safety guidelines for the treatment of early-stage lung cancer with stereotactic body radiation therapy. He also pioneered the use of intensity modulated radiation therapy for mesothelioma. Both this project and his lung cancer work resulted in landmark publications in the *Journal of Clinical Oncology* and formed the basis of multiple cooperative group trials including NRG-LU006.

**Education:** Dr. Rosenzweig has been equally committed to teaching other physicians how to treat lung cancer. His mentees lead lung cancer and mesothelioma programs at institutions across the United States including MSKCC, The University of Texas MD Anderson Cancer Center, University of Washington, University of Florida and elsewhere. As vice chair of the Accreditation Council for Graduate Medical Education for Radiation Oncology and committee chair for the American Board of Radiology, he has helped develop the standards that every practicing radiation oncologist needs to know in the treatment of lung cancer to ensure that all patients will receive the highest-quality care regardless of where they receive their treatment. He has also chaired numerous guidelines committees, which codify the standard of care in the treatment of lung cancer. For more than a decade, Dr. Rosenzweig participated as a volunteer in Chartrounds, giving community physicians the opportunity to present challenging cases to him and receive advice on how to care for their patients.

**Patient care:** Throughout his years as a researcher, educator and administrator, Dr. Rosenzweig has also maintained a busy clinical practice devoted to people suffering from lung cancer and mesothelioma. He has been awarded the Cullman Family Award for Excellence in Physician Communication, which is given to the top 1% of physicians. He
is consistently on the *New York* magazine list of Top Doctors. As chair of the department of radiation oncology, he has established a culture of the highest-quality patient care, with innovative systems to reduce treatment error and improve the patient experience. His department is typically at the top of patient satisfaction surveys and frequently hosts visitors from other institutions looking to improve their processes. Most recently, his department has established schools for radiation therapists and radiation dosimetrists, ensuring that every aspect of patient care is the best it can be.

**Community service:** Dr. Rosenzweig has participated in numerous patient education seminars to inform patients on new treatments for lung cancer. He is a regular volunteer monthly panelist on CancerCare talks, which draws hundreds of participants living with or helping family members with lung cancer. As mentioned previously, he gives back to the oncology community through his numerous leadership roles on national committees, including a term as president of the American Radium Society, the country’s oldest organization devoted to the study of cancer.

I would mention in his life outside of the hospital, Dr. Rosenzweig is no less inspiring. He was recently reelected to his third term as city councilman in his hometown of Englewood, New Jersey, and has been involved in numerous community organizations for more than 20 years. He also recently received the 2021 Community Service Award from the Rotary Club of Englewood. He also serves on multiple alumni committees for Brown University, including some leadership roles. It is incredible that Dr. Rosenzweig can devote long days to his duties as a physician, researcher, educator and chair and then come home and spend a few more hours working to improve his community. And he also finds time to run the New York City Marathon every year.

In conclusion, Dr. Rosenzweig’s commitment to helping patients with lung cancer and mesothelioma is truly heroic, and I can think of no one more deserving of this award.
INNOVATING THE FUTURE OF CARE

AN INTERVIEW WITH Dr. Kenneth Rosenzweig
By Dara Chadwick

DR. KENNETH ROSENZWEIG, professor and system chair in the Department of Radiation Oncology at the Icahn School of Medicine at Mount Sinai in New York City, jokes that he has an empty chair to thank for the start of his distinguished career in treating lung cancer and mesothelioma.

According to Rosenzweig, when he finished training and took his first role at Memorial Sloan Kettering Cancer Center, the doctor who was treating lung cancer had just left. “I was told, ‘We need you to fill in,’” he says. “I got very lucky. Lung cancer was a huge interest to me.”

Rosenzweig has been instrumental in developing new radiation techniques to help people with mesothelioma. As surgery evolved from removing the entire lung and its lining to removing the lining only, radiation therapy became more challenging, he says. “With my colleagues at Sloan, I devised a technique to treat disease left behind on the surface of the lung while minimizing damage to the lung,” he says of the procedure known as pleural IMRT, which stands for intensity-modulated radiotherapy. “I’m very proud that it’s become the standard of care for patients.”

Rosenzweig has also contributed to innovation in stereotactic radiation techniques — particularly in determining the safest radiation dose for a patient and in evaluating the lung »
WINNER PROFILE

after treatment to distinguish between expected damage and damage that might indicate a tumor is recurring.

Innovation remains a theme in Rosenzweig’s clinic at Mount Sinai. He has developed processes that have led to error reduction and improved patient safety.

“When I came to Mount Sinai, we changed all our processes to make everything we do completely transparent throughout the department,” he says, adding that successful radiation treatment requires coordination among physicians, nurses, radiation therapists, physicists and administrative assistants. This process is now studied by medical professionals from all over the world who come to the clinic to observe and learn, he says.

Improving processes and helping others learn come naturally to Rosenzweig. He helped develop national standards for training in radiation oncology, contributing to committees with both the American Board of Radiology and the Accreditation Council of Graduate Medical Education. As former director of residency programs at both Memorial Sloan Kettering and at Mount Sinai, Rosenzweig has trained many doctors who’ve gone on to specialize in lung cancer. “I’m very proud of that,” he says. “These doctors are leading programs across the country. They’re fantastic researchers and physicians.”

Rosenzweig says he likes to think he’s helped doctors have a better appreciation for and understanding of radiation. “I certainly have a better understanding of medical oncology and surgery from what my colleagues have taught me,” he says.

His focus on innovation also plays a significant role in patient care. Rosenzweig remembers a former young patient with advanced lung cancer who had an extraordinarily poor prognosis.
She came to see him and a colleague, hoping they would take a more aggressive approach to her treatment. Rosenzweig treated her with some of the techniques he developed for mesothelioma, he says. She has since married, had children and become a lung cancer advocate.

“I think about her often when we’re faced with people for whom the situation doesn’t look good,” he says. “Coming up with safe ways to do aggressive treatment — that out of the box thinking — can really be impactful on an individual.”

In addition to practicing medicine, Rosenzweig serves on the city council in Englewood, New Jersey. “The issues I tackle at work are in some ways similar to the issues I deal with at the city level,” he says. “It’s ultimately about people wanting to live their best lives.”

Rosenzweig adds he’s been fortunate to see “astonishing” strides made in lung cancer care during his more than 20 years of practice. “It’s been an incredibly exciting time to be in the field,” he says.
Nominations
From left: KELSEY AHMED and CORI DUBIE-O’CONNOR
PHOTOS BY CAIT COSTA
WHEN I THINK OF THE noun “caretaker,” a lot of words come to my mind: generous, giving, thoughtful, supportive and willing to do just about anything for the better of the person they look after.

When I think of Kelsey Ahmed, I think of all of those things.

Kelsey has been a dedicated participant, committee member and advocate for the American Lung Association since I met her in 2019. She has attended every American Lung Association event, joined every committee and completed every call to action — whether it be reaching out to local legislators to better the lives of those who suffer from lung disease or ensuring we have prizes to raffle off to raise the critical funds we need as an organization. She takes every task she is given with pride and fulfills every duty asked of her. She goes above and beyond for the American Lung Association in so many ways. All of this she does for her mother, Martha.

After Kelsey’s mother, Martha, was diagnosed with stage 4 non-small cell lung cancer, Kelsey and her family got to work raising funds and spreading awareness for the American Lung Association. »
NOMINEES
Since I was introduced to Kelsey just a few years ago, she has since spoken at our Annual LUNG FORCE Walk: Providence about the importance of raising funds and celebrating life. Kelsey has recruited friends and family members to join their team, Martha Matters, at multiple events, raising more than $13,000 for our LUNG FORCE Walk: Providence in 2021. Over the past three years, Kelsey, Martha and the rest of her team have raised almost $40,000 for the American Lung Association.

Kelsey is on multiple event committees and attends every meeting, making suggestions that will better the event for those who suffer from lung disease and make the day easier and safer for those who suffer from lung disease.

Our mission at the American Lung Association is to save lives by improving lung health and preventing lung disease through research, education and advocacy. The funds Kelsey and her team have raised have directly affected and supported those who suffer from lung disease daily. The American Lung Association has also introduced a COVID-19 Action Initiative. This will be used to provide free lung health education and masks to those in need, protect public health by advocating for COVID-19 and flu vaccines in underserved communities of color and prevent future outbreaks by investing in respiratory virus research.

Everything Kelsey and her team do to spread awareness and raise funds makes a direct impact on not just her family but people in our community.

Kelsey is generous, giving, thoughtful, supportive and willing to do just about anything for her mother, Martha, for all of the women in her life who have suffered from lung disease and for the American Lung Association.
VISIONARY DEFENDER OF EARLY DETECTION AND PROMPT TREATMENT

DR. RAMI ARFOOSH
NORTHEAST GEORGIA MEDICAL CENTER, GAINESVILLE, GEORGIA

Written by Andria Caton, M.S.N., RN, OCN, CHPN, Northeast Georgia Medical Center, Gainesville, GA

VISIONARY: a person who inspires others to pursue a long-term concept.
DEFENDER: a person who protects others from danger.

Dr. Rami Arfoosh, a pulmonologist, has been defending people with abnormal lung cancer screening exams for more than four years in northeast Georgia. With high rates of incidence and mortality, lung cancer is a dangerous and often silent killer for the residents of northeast Georgia. For Dr. Arfoosh, lung cancer screening, quick referrals and prompt treatment for people with newly diagnosed lung cancer are at the forefront of his daily work.

Under his leadership of chest board, an interdisciplinary team that reviews abnormal lung cancer screening exams, he has directed the evaluations of over 200 abnormal lung scans, assisted with the identification of over 50 early-stage lung cancers, gradually improved the time to treatment for those with newly diagnosed lung cancer and facilitated prompt referrals for people during the COVID-19 pandemic. By the end of 2020, Dr. Arfoosh and the chest board completed
more lung cancer screening exam evaluations than the previous year and cut the time to treatment almost in half. Dr. Arfoosh’s achievements in early detection and prompt treatment of lung cancer are most certainly rooted in his ability to collaborate with the interdisciplinary team to identify the best evidence-based approaches to care.

Dr. Arfoosh relentlessly strives to improve overall lung cancer care in northeast Georgia. Recently, his visionary concept of implementing a lung nodule clinic to detect earlier-stage lung cancers for people in Northeast Georgia that do not fit into the traditional lung screening guidelines is in the early phases of development.

Dr. Arfoosh cares about people after they receive a lung cancer diagnosis. Dr. Arfoosh lends his assistance and backing to the monthly community lung cancer support group, and he frequently speaks to the group (who are often patients in his practice) on survivorship issues and long-term side effects of lung cancer treatment.

In addition to his passion for early detection and prompt treatment of lung cancer, Dr. Arfoosh is a lifelong learner and teacher. He takes time to mentor physician residents, physician assistant students and medical students in his daily pulmonary practice. During chest board discussions, he can be heard taking additional time to explain radiographic findings, review clinical data and reinforce evidence-based guidelines with the students. Dr. Arfoosh ensures the success of lung cancer care in the future by investing his time with residents and students today.

The people of Northeast Georgia are fortunate to have Dr. Rami Arfoosh, a dedicated visionary defender in the fight against lung cancer.
NOMINEES

From left: DR. RAMI ARFOOSH and ANDRIA CATON, M.S.N., RN, OCN, CHPN
PHOTO BY ABBY STANCIL
NOMINEES

UPAL BASU ROY, PH.D., M.P.H.

PHOTO BY CLAUDIO PAPAPIETRO
I NOMINATE UPAL BASU-ROY for the CURE® Lung Cancer Heroes® award. Upal is the senior director of LUNGevity Research at the LUNGevity Foundation. He spearheads LUNGevity’s Translational Science Research Program and its Patient-Focused Research Center. In these roles, Upal oversees LUNGevity’s research awards program. This includes monitoring and evaluating the research projects as well as implementing and managing LUNGevity’s patient-focused research, including Project Transform, a multiyear, multistakeholder patient preference study that LUNGevity is conducting with The Ohio State University School of Medicine.

Upal also guides the scientific program for LUNGevity’s International Lung Cancer Survivorship Conference, translates research into patient-friendly resources and communicates the collective voice of the community to industry and government to ensure that the patient is at the center of all research. He has a passion for action in addressing health disparities as a member of LUNGevity’s Health Equity Council, and he also tirelessly fights for those who don’t have a voice. Upal holds a Ph.D. in molecular and cellular biology from the University of Arizona and an M.P.H. in global health policy and management from New York University.
In addition to his brilliant mind, Upal has a true gift of being able to think from his heart. Upal always puts patients first when it comes to both research and support. A few examples: He educates the patient community, helps patients navigate the fragmented system, fights for drug access issues in other countries, addresses disparities and supports patient-driven initiatives in research and advocacy.

I have worked with Upal on patient-driven research between the EGFR Resisters patient advocacy group and LUNGevity Foundation. The EGFR Resisters would not have been able to make the impact that we have made in research or to present data at the International Association for the Study of Lung Cancer’s World Conference on Lung Cancer and North America Conference on Lung Cancer without his leadership and support. He is instrumental in fostering relationships and making sure that we (laypeople) are always prepared and understand the complex science. I also can say with certainty that I would not be the advocate I am today without Upal’s unwavering and unconditional guidance and encouragement.

Beyond his profession, Upal acts on his passion and sympathy to raise awareness for lung cancer. Whether it’s 6 a.m. or 9 p.m., Upal is always willing and ready to help patients and other advocates in a way that seems effortless. He makes people feel like the outside world stops existing for as long as we need. He has helped me with countless slides for presentations and with writing articles, and he also is always there to listen while I practice or just listen when I need an ear.

Upal’s generosity with his time, his skills and his heart extend to the whole lung cancer community. Despite watching the disease destroy, debilitate and take the lives of his own loved ones and people he has grown to love and care about, he still — off the clock — fights with us and for us. To be able to maintain this dedication through so much devastation is true compassion that cannot be learned.

I have been a lung cancer advocate for 20 years, and Upal is the most collaborative person I have ever worked with and the humblest. He never asks for recognition (always making sure people know that his efforts are collaborative), and he has never received the recognition that he deserves — which is why I am nominating him.
It is the only way that I, and others in the community, know how to show our gratitude and thank him.

Upal is a true leader in the field both as a professional and as a model of humane, compassionate care. The work he does on and off the clock has helped transform the landscape of lung cancer research and advocacy. His efforts in lung cancer research may save many lives, but more importantly, his genuine care and dedication to patients and our families has, and will continue to, change lives. His genuine care and dedication are the epitome of hope, a vital emotion for anyone hit by the cruelty of lung cancer.
From left: JILL FELDMAN, JANET FREEMAN-DAILY
and UPAL BASU ROY, PH.D., M.P.H.

PHOTO PROVIDED BY FELDMAN

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From left: JILL FELDMAN, JANET FREEMAN-DAILY
and UPAL BASU ROY, PH.D., M.P.H.

PHOTO PROVIDED BY FELDMAN
UPAL BASU ROY, PH.D., M.P.H.
LUNGevity FOUNDATION, BETHESDA, MARYLAND

Written by Janet Freeman-Daily, M.S., ENG, The ROS1ders, Federal Way, Washington

UPAL BASU ROY is currently the senior director of LUNGevity Research at the LUNGevity Foundation. He holds a Ph.D. in molecular and cellular biology from the University of Arizona in Tucson and an M.P.H. in global health policy and management from New York University.

In his official capacity, he spearheads LUNGevity’s Translational Science Research Programs and its Patient-Focused Research Center. The research programs he develops and manages, such as Project Transform and Project PEER, focus on capturing the experience and perspective of patients with lung cancer in a way that will improve treatment and patient care for all lung cancer types. His LUNGevity work also includes overseeing its research awards program, participating in the Health Equity Council, guiding the scientific program of its International Lung Cancer Survivorship Conference, tracking developments in lung cancer care and translating new research into patient-friendly materials. He also provides patient perspective to government agencies, academia and industry, such as exploring ways to make clinical trials more accessible to a wider variety of patients.

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In addition to an in-depth understanding of lung cancer science and research, Upal has a real heart for patients. He has generously given his personal as well as professional time to serve on an institutional review board, address disparities in cancer care, educate individual patients and help them navigate cancer drug access issues in other countries, and facilitate several patient-driven initiatives. For example, he helped create Project PRIORITY — a collaboration between LUNGevity Foundation and EGFR Resisters to capture the lived experience of patients who have EGFR-positive lung cancer — and analyzed data for presentations. Another example is helping the patient group ALK Positive develop their research grant awards process. Additionally, he served as a volunteer mentor for the new International Association for the Study of Lung Cancer’s Supportive Training for Advocates on Research and Science (STARS) program, which helps lung cancer advocates evolve into research advocates, and he developed a STARS training module for small cell lung cancer.

Most of Upal’s work happens behind the scenes and does not get the same visibility as awareness campaigns and policy advocacy. However, his work is essential for improving outcomes for all patients with lung cancer. He deserves the highest appreciation and recognition from the entire lung cancer community.

— JANET FREEMAN-DAILY, M.S., ENG
OUR FRIEND, UPAL BASU ROY

UPAL BASU ROY, PH.D., M.P.H.
LUNGEVITY FOUNDATION, BETHESDA, MARYLAND

Written by Kristin Ito, International Association for the Study of Lung Cancer, Denver, Colorado

Upal Basu Roy is the executive director of LUNGevity Research at the LUNGevity Foundation. I have had the pleasure of getting to know and working with Upal for the past five years in my position with the International Association for the Study of Lung Cancer (IASLC).

Upal is one of the most dedicated, empathetic and passionate individuals I know within the lung cancer community. His dedication is continuously demonstrated by his involvement in multiple projects beyond what is listed within his job description. I have been incredibly
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BASU ROY AND COLLEAGUES AT THE 2019 WORLD CONFERENCE OF LUNG CANCER
PHOTO PROVIDED BY ITO
fortunate to work closely with Upal in the development and execution of the IASLC Supportive Training for Advocates on Research and Science (STARS) program. His involvement in this program truly adds to its success.

When it comes to empathy, it is not easy for many, but for Upal, it is palpable. He is more than a colleague within the lung cancer community; he is a dear friend. Patients/survivors, caregivers, advocates, researchers, clinicians, etc., from all over the world know they can call upon Upal for a caring heart and listening ear.

Passion is an intense, driving or overmastering feeling or conviction. It is clear from Upal’s work that he is passionate to make a difference in the world. Together with a research advocate in Nigeria and another patient/survivor research advocate in the U.S., we are taking steps to tackle access issues within Nigeria. With his partnership in this important project, Upal is always able to see the big picture and think two steps ahead to ensure our efforts are not lost.

There are many among us who are unsung heroes and deserving of recognition, and Upal is one of them. Upal has been active in the world of patient advocacy for roughly 12 years, and honoring him with the Lung Cancer Heroes® award would shed light on the goodness that he contributes. I know I am not alone in asking. Please honor my friend and colleague with this prestigious award.

“It is clear from Upal’s work that he is passionate to make a difference in the world.”
—Kristin Ito
NOMINEES

THE ART OF ENGAGEMENT: FROM SURVIVORSHIP TO RESEARCH

DAVE BJORK
“THE RESEARCH EVANGELIST” PODCAST, GEORGETOWN, MASSACHUSETTS

Written by Jennifer Sertl, GRYT Health, Rochester, New York

I AM THE STRATEGIC ALIGNMENT adviser at GRYT Health, a digital oncology platform that supports patients and builds cancer survivorship through education and advocacy. It is our honor at GRYT Health to introduce you to our nomination for 2021 Lung Cancer Heroes®: Dave Bjork.

I personally discovered @bjork5 on Twitter a year ago. He tagged a colleague that I knew, and I found his stream of educational articles and patient stories intriguing. Our team at GRYT Health has gotten to know him very well over the past year, as he helps guide our virtual patient education to work in collaboration with industry leaders.

We have been inspired by his story of lung cancer survivorship, his advocacy and the way he uses his platform to inform and advocate for others to use their voice. In an era of trauma, people whose buoyancy elevates both purpose and agency shine like a flashlight in the darkness. During the past year of uncertainty, Dave was that light for many.

Because of Dave’s long career in the health care industry and nonprofit fundraising, building relationships came easy to him, but telling his own story did not. Doubt about the value of his story initially held him back. “For many years, I was very quiet about (my lung cancer journey) »
because I had a sense of survivor’s guilt,” he said. “I had such a great outcome. So many others
that I knew did not have good outcomes.”

The support of a close friend encouraged Dave to start using his voice to share his story and
inspire others.

“Once I started letting my voice be heard, I started connecting with other people, and it
became a magical experience,” he said.

The “magical experience” he is talking about is the podcast he started called “The Research
Evangelist,” which shares good news about the amazing people in the life science community
who are making a difference. It is Dave’s life mission to connect individuals, patient advocacy
groups, biopharma companies, academic institutions and other key influencers to forge strong
partnerships to focus on research.

Dave is a community builder. In addition to his podcast, he has founded two large
Boston-area events: Cannons Fighting Cancer and FRAXA Biotech Games. Cannons Fighting
Cancer partners with the Boston Cannons to elevate awareness of the cutting-edge can-
cer research being done in laboratories in Greater Boston. The FRAXA Biotech Games
bring together the Boston biotech community to network in a friendly setting and form
new relationships and potential collaborations — while raising money for a great cause.
Proceeds from the event benefit the FRAXA Research Foundation, which supports research
projects for fragile X syndrome at institutions around the world, including Massachusetts
Institute of Technology, Harvard, Stanford University and University of California, San Diego.
WHEN YOU RECEIVE devastating health news, such as a stage 3 or 4 lung cancer diagnosis, hope isn’t always the first word that comes to mind. However, out of the darkness there is sometimes light, and in South Florida, Dr. Mark Block is a beacon of hope and light for many patients who’ve recently received a diagnosis of cancer.

As the chief of the Division of Thoracic Surgery Program at Memorial Healthcare System in South Florida, Dr. Block dedicates his life to providing top-notch patient care, transparency and innovation to every patient treatment plan.

Dr. Block has practiced general thoracic surgery since completing his residency in cardiothoracic surgery at Barnes Hospital in St. Louis in 1997. He received his undergraduate and medical degrees from Yale University and completed his general surgery residency at the University of Chicago.

Before coming to Memorial Healthcare System, Dr. Block practiced general thoracic surgery as an assistant professor of surgery at the University of California, San Francisco,
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From left: NICOLE REYES, KAYLE ROURKE, DR. MARK BLOCK, CHRISSY COHEN and JENISA MALAVE

PHOTOS BY JANERIS MARTE
and then at the Medical University of South Carolina, where he was also the director of the Thoracic Oncology Working Group.

Dr. Block holds certifications from the American Board of Surgery and the American Board of Thoracic Surgery. He has also published more than 25 articles in peer-reviewed journals and been an invited contributor to several authoritative textbooks on thoracic surgery.

Dr. Block is also very involved with numerous health organizations that are working to save lives and promote lung health, including the American College of Chest Physicians, American College of Surgeons, South Florida Chapter of the Florida Medical Association, Southern Thoracic Surgical Association, Association for Academic Surgery, General Thoracic Surgical Club, American Society of Clinical Oncology, American Association for Cancer Research, Federation of American Societies for Experimental Biology, »
American Association of Immunologists, American Cancer Society, Society of Thoracic Surgeons, American Association for the Advancement of Science and American Lung Association.

In fact, in 2015, Dr. Block joined the local leadership board of the American Lung Association in South Florida to further his impact on the lives touched by lung cancer. Since joining, he has used his platform as a board member and physician to raise local media outlets’ awareness of lung cancer on behalf of the American Lung Association. He is a strong proponent for early detection and lung cancer screening.

Empowering patients and caregivers with lifesaving knowledge and education is an additional focus of Dr. Block’s. He has served as a presenter and moderator for the American Lung Association’s LUNG FORCE Expo for many years, helping to educate doctors, nurses and respiratory therapists about the newest treatments for lung cancer. He has also given numerous presentations to organizations like Gilda’s Club South Florida and the Cardiovascular Institute Symposium.

In 2018, he was honored with the American Lung Association’s LUNG FORCE Distinguished Physician Award for outstanding patient care and exemplary dedication to raising the profile of lung cancer.

As Stacey Eisdorfer, a stage 3 lung cancer survivor and current patient of Dr. Block, puts it: He inspires courage and optimism in place of uncertainty and fear. “In 2019, when I was told I had a malignancy on my lower left lobe of my lung, I researched a thoracic surgeon affiliated with Memorial Hospital. I was told that Dr. Block was the guy. On my first visit, within moments, he greeted me with a smile (and) gave me great news that we could operate and that there was no reason why I shouldn’t live a normal life,” Eisdorfer said. “He truly comforted me with his kind and informative manner. He was certain with my treatment plan I’d be OK. His words, confidence and calming presence brought me hope.”
In that same meeting, he even had me chuckling alongside him and my best friend. In the months that followed, he allowed my family to be right by my side all the way. My surgery was a success, and I am now cancer free. Thank you, Dr. Block, for saving my life.”

Dr. Block has also inspired numerous patients with lung cancer to share their stories as LUNG FORCE Heroes in the American Lung Association’s LUNG FORCE campaign. By empowering and encouraging local heroes to engage in meaningful storytelling, he hopes to save countless more lives by sharing firsthand experiences and encouraging others to assess their own symptoms, signs and eligibility for early screening. He has provided a powerful voice to the LUNG FORCE campaign since 2018.

Local lung cancer survivors, like Bonnie Ulrich, credit Dr. Block with being an inspiration to their own advocacy work.

“After being lung cancer free for 13 years, in 2019, my cancer returned,” Ulrich said. “While I was undergoing my treatment, which consisted of six chemotherapy sessions, 30 radiations and a year of immunotherapy, I became more active in lung cancer advocacy and awareness. I have included Dr. Block and my cancer team at Memorial Cancer Institute in my advocacy work because, quite frankly, they were/are saving my life and they inspire me to share my story. I depend on this amazing team on a daily basis to get me through my journey. Dr. Mark Block and the staff at Memorial Cancer Institute go (above) and beyond the ‘basic protocol’ of treating patients. In my opinion, Dr. Block and the staff at Memorial Cancer Institute are No. 1. Dr. Block relates to his patients in a way to alleviate the fear, curiosity and loss of hope that a patient with lung cancer lives with. I am now and will be eternally grateful to Dr. Block and my team.”

In 2020, Dr. Block joined the regional leadership board for the American Lung Association to expand his service to this important cause and to advance the mission to create a world free of lung cancer and all lung disease.
KATIE BROWN
PHOTO BY JARED REY HERNANDEZ
AS A LUNG CANCER SURVIVOR, I met Katie Brown online after first joining one of the LUNGevity lung cancer support groups on Facebook. I quickly learned that she is one of the most caring and kind people I have ever met — not only in her role for LUNGevity but also as the daughter of a patient with lung cancer who lost his battle some time ago. She is such an inspirational person, mom and wife and an amazing advocate who works so hard for us all. At the same time, she is also living with her own chronic health condition.

Because of her dedication, her compassion and how she truly touched my heart as a patient with stage 4 lung cancer, I became involved in lung cancer advocacy and now volunteer for several lung cancer support groups including LUNGevity.

She is truly adored and loved by everyone in the lung cancer community. I truly believe she is a lung cancer hero and deserving of this honor! ☝
I was diagnosed with lung cancer in 2011. It didn’t look good. Dr. Abraham Chachoua kept me alive long enough to get me into the 2015 drug trial for Opdivo (nivolumab) at Memorial Sloan Kettering Cancer Center. I had such bad side effects that I didn’t finish the trial. But it worked.

My last CT scan showed no cancer. He is my hero.
HERE IN NEW ZEALAND, we are falling behind the rest of the world when it comes to cancer care, treatment and options. It can be overwhelming and is a road filled with many obstacles. Standard care in New Zealand lacks the basics of many Organization for Economic Co-operation and Development countries.

Terri has helped me, a patient with unknown stage 3C (possibly now stage 4), understand the mechanics of my mutation, introduced me to a range of professionals in the Asia-Pacific area and encouraged me to fight for basic care in a proactive and positive way. I would not have been able to navigate this journey without her. She emails me, and we had a Zoom call that was amazing and filled me with hope. When I was feeling lost and despondent, she reminded me that I was full of strength and that I had the control over my learning, my research and my ability to do everything I can to change my path and the path for others.

As a patient advocate, Terri is a global powerhouse and pillar of strength, and I hope she will be recognized for all that she does and continues to do. I feel she is a bridge between
patients, oncologists and researchers and brings everyone together. She does this with empathy and kindness.

I was navigating my cancer journey without a map — and Terri gave me one to help me find direction. Terri Conneran is my lung cancer hero!
IN MEDICINE, WE OFTEN regard those we hold in highest esteem as being “triple threats,” excelling in the tripartite missions of academic medicine of patient care, teaching and scientific inquiry. The person I am nominating for the Lung Cancer Heroes® award, Dr. Roy H. Decker, embodies these three missions more than anyone I have been blessed to know or work with. He is a lung cancer hero — a “triple threat” in lung radiation oncology as a clinical innovator, teacher and ground-breaking clinical trialist.

First, he led the early development of stereotactic body radiotherapy (SBRT) for early-stage lung cancer and was the first to adopt it in the state of Connecticut. This clinical innovation has saved and improved countless lives compared to prior conventional...
radiotherapy. Dr. Decker has refined how to safely and effectively treat patients with SBRT, publishing innovative clinical research in high-impact journals such as the *Journal of Thoracic Oncology* and *Journal of Clinical Oncology*.

For example, in 2012, he was the senior author of the manuscript, “Stereotactic body radiotherapy for central lung tumors,” published in the *Journal of Thoracic Oncology*. In 2012, because we were still learning how to treat lung tumors with SBRT, the treatment of these central lung tumors close to the mediastinum and central structures was considered unsafe, given reports of extraordinary toxicity from SBRT. Dr. Decker was able to open the door to safe SBRT treatment of central tumors — through careful clinical research — by modifying treatment parameters and prescription to balance biologically effective radiation dose and toxicity. Thousands of patients have benefited from this realization.

Second, as a teacher, he selflessly taught others around the state how to perform SBRT and, as a result, life-saving radiosurgery has been available throughout the state regardless of practice affiliation. It is difficult to remember the days when SBRT for early lung cancer was a treatment without a textbook, with only the steady and reassuring hand of an experienced clinician such as Dr. Decker.

He also serves as former program director (now, associate program director) of the radiation oncology residency program, teaching the next generation of radiation oncologists how to treat patients with the highest quality of care. He has received numerous teaching awards in recognition of his efforts. And speaking of textbooks, he has co-authored the definitive chapter on lung cancer in the “Perez and Brady’s Principles and Practice of Radiation Oncology,” the textbook of record for radiation oncology.

Finally, Dr. Decker has pushed the envelope by investigating the intersection between immunotherapy and radiation for lung cancer. At Yale, he conducted a phase 2 study that examined
Keytruda (pembrolizumab) and SBRT for progressive or metastatic non-small cell lung cancer. He used a mass cytometry by time-of-flight analysis on peripheral blood of patients and elucidated subpopulations of peripheral immune cells that were correlated with treatment response. Holding a Ph.D. in addition to an M.D., he is able to bridge the gap between basic science and clinical medicine. Therefore, he is the ideal translational investigator. Proof of his leadership lies in his directorship of the Yale Cancer Center Clinical Trials Office as well as the Radiation Oncology Committee for the Southwest Oncology Group, a National Cancer Institute cooperative group. Through these roles, he guides and mentors faculty who are engaging in clinical trials throughout the entire Yale Cancer Center network.

In summary, Dr. Decker is a consummate clinician, teacher and clinical trialist. His vision guides the Yale Cancer Center Clinical Trials Office. He is a giant in the field of lung radiation oncology and is truly a lung cancer hero.
IN OCTOBER 2018, I was diagnosed with non-small cell adenocarcinoma lung cancer. Just prior to that, my stepson had started dating a girl in Florida where they lived. Living in New York, we hadn’t yet met her. She and I became Facebook friends, and her mother and I had a few mutual friends.

As we got to know each other, it became known to me that Mariann, the aunt of my stepson’s girlfriend, had lung cancer. We had the opportunity to meet, and she told me her story. Having been newly diagnosed myself, I saw how amazingly well she was doing and had been a survivor for about three years already. I was extremely encouraged. She was working at the time, and each year she formed a team called Bighouse Warriors to walk in the LUNGevity Lung Force Walk. Her team has raised thousands of dollars.

Mariann is now a six-year survivor, and I’m almost a three-year survivor. Ironically, we’ve now become family since my stepson and her niece have married. Mariann and I text each other about our care and even share the same oncologist. She has been my lung cancer hero and if you meet her, you’ll understand why.
MY WIFE, PEGGY FIELDS, was told in April 2003 that she had small cell lung cancer. She was given three weeks to three months to live. Dr. Ranjith Dissanayake was her treating physician.

That was 18 years ago in April, and she is still here with me — alive and kicking.

She did have a bout with large cell cancer in 2018. Dr. Dissanayake also pulled her through that. I think he deserves all the recognition that can be given. He is a wonderful oncologist.
DUSTY DONALDSON IS definitely an inspiration to anybody who has the opportunity to meet her. Dusty was diagnosed with lung cancer in 2005 and founded the Dusty Joy Foundation (LiveLung) in 2010. She has served as executive director for more than a decade, focused on helping anybody who is diagnosed with lung cancer. LiveLung is a 501(c)(3) nonprofit public charity, part of the Dusty Joy Foundation, with a mission of advancing lung cancer awareness and early detection and increasing compassion for people impacted by lung cancer.

Dusty co-authored the book “The ABCs of Lung Cancer for Patients and Advocates” with Kimberly Lester. Dusty also is co-chair of the Lung Cancer Action Network (LungCAN), an association of U.S.-based nonprofit groups focusing on lung cancer. In addition, Dusty is a contributing writer for Health Union’s www.lungcancer.net and a member of the National Lung Cancer Roundtable’s Survivorship, Stigma and Nihilism Task Group.

For the past 10 years, Dusty has worked so hard to support patients like me. She serves a large number of patients locally and in other states and is always eager to create partnerships ›
CARMEN M. WAGNER, PH.D., NBC-HWC
PHOTO BY MORGAN HENDERSON
with other organizations to better serve all of us. She is an amazing lung cancer advocate and an inspiration to us all. As one of the members of LiveLung, I have learned to admire her commitment, her energy and her engagement with other supporting groups locally and nationally.

Prior to being diagnosed with early-stage lung cancer in 2005, Dusty had been an award-winning journalist and a media and public relations professional. She uses her knowledge of communication and personal and professional experience to advocate for all of us and help us continue the fight. I am honored to be a part of her group, and I am delighted to nominate her for the Lung Cancer Heroes® award.
From left: DEBORAH ANN BOTH, B.S.N., RN, CTTS and CHRISTINE EASTEP, M.H.A., B.S.N., RN

PHOTOS BY DEVON ALBEIT
BELIEVE IT OR NOT, there was a time when doctors and nurses were allowed to smoke in the nurse's station and patients could smoke in their hospital beds. It was really frightening if you found your patient asleep in their bed holding a cigarette or if you saw big, black cigarette burns on their crisp, white sheets. Now that was a long time ago. Fortunately, most hospitals and workplaces are now designated “smoke free.” This has become a standard policy to help decrease the number of people who get lung cancer from smoking.

My lung cancer hero is Christine Eastep, MHA, BSN, RN. She is the manager of the Thoracic Oncology Center at OSUCCC – James/The Ohio State University Wexner Medical Center. It is standard policy based on evidence-based practice to try to help each and every patient in her clinic become smoke free and to give them support, confidence and, most of all, hope during their lung cancer journey.

OSUCCC – James is one of the leading comprehensive cancer centers in the nation. In the thoracic oncology clinic that Christine manages, they see more than 100 patients daily with
various stages of lung cancer, with a significant percentage of them smokers. I am nominating Christine for the Lung Cancer Heroes® award because she demonstrates the highest commitment to every one of the patients and her staff to improve the outcomes in lung cancer treatment. Christine has supported the proven evidence that every smoker will benefit from counseling before they begin their tobacco cessation journey and lung cancer treatment. Christine has made it a priority to send each of her staff nurses to tobacco cessation classes so that each one of them are tobacco-cessation-certified counselors.

Christine has made it possible for her staff to have the knowledge to improve the health and quality of life for each patient during lung cancer treatment. Evidence shows that if a patient with lung cancer is able to quit smoking before they have lung surgery, they will heal more quickly, have less chance of getting postoperative pneumonia and typically have a shorter length of stay in the hospital. If a patient quits smoking before they have chemotherapy or radiation, they have fewer side effects such as nausea or loss of appetite and also have less chance of recurrence after completion of their treatment. Every patient who is seen in Christine's clinic is assessed using the “5 As” of tobacco-cessation counseling: ask, advise, assess, assist and arrange.

Christine is a leader who is committed to doing what's best for her staff and all our patients with lung cancer. During the past year, she became so passionate to help patients quit smoking that she spearheaded the development of an innovative tool called “The Buckeye Quit Stick.” Christine and the thoracic clinic staff will be completing a pilot study in which patients will be provided The Buckeye Quit Stick — a tool they can use to satisfy the hand-to-oral habit of cigarette smoking and aid them in their journey to quit smoking. It also connects the patient to their health care team as a “Buckeye” via OSUCCC – James/The Ohio State University Wexner Medical Center.

Christine's staff would agree she is a leader who is compassionate, kind and a dedicated advocate for each patient with lung cancer. Christine would tell you it is not an easy journey to undergo lung cancer treatment and/or quit smoking. Christine sees it through the eyes of hundreds of patients every day. President Joe Biden recently visited OSUCCC – James and said, “This place is a source of hope.”
Christine is a beacon of hope. She is an integral part of OSUCCC – James and The Ohio State University Wexner Medical Center in the thoracic oncology clinic. She is a true lung cancer hero. The entire staff of OSUCCC – James share the same vision of striving to have a cancer-free world. Christine and her staff embrace these words, giving hope for each patient in the thoracic oncology clinic on a daily basis.
IN ABOUT 2008, my wife Linda Klein was diagnosed with stage 4 non-small cell lung cancer. She really had no symptoms except a very slight light cough. Her primary doctor put her on an antibiotic for one week, and the cough seemed to go away. Three weeks later, the cough returned, and she was sent for a chest X-ray. The diagnosis was lung cancer.

At this point, we made an appointment with Dr. Bruno Fang at the Astera Cancer Care office in New Brunswick, New Jersey. He then sent her for a positron emission tomography, or PET, scan. During our meeting with Dr. Fang, he stated that based on the reports he received showing a 7-centimeter tumor in one lung, lesions on the bone and gravel at the bottom of both lungs, her life
expectancy was one to one-and-a-half years. He said that with new chemotherapy drugs being approved and put on the market, he would do everything in his power and knowledge to help my wife live a quality life for a longer period of time.

He started her on infusions each week of a chemo drug as well as a drug that would stop nausea. After six weeks of the infusions, she had another PET scan, which showed the bone had healed and the tumor had shrunk to 3 centimeters. A great sign. We felt more confident that Dr. Fang had at least stopped the growth and metastasis and found the drug to prolong her quality of life.

Dr. Fang took my wife’s care personally and wanted her treatments to be successful. He treated all his patients the same way, and he never settled for the status quo. He always researched new drugs and treatments as they were released and used successfully. He really cared about the well-being of the patient as well as the family.

My wife continued under Dr. Fang’s care for more than three-and-a-half years using three different drugs. I can tell you that for almost three years, we went on family trips and cruises and my wife lived a full, quality life — because of the caring and knowledgeable Dr. Fang, who kept himself up-to-date on new drugs and therapies being approved by the Food and Drug Administration.

We loved Dr. Fang, and I can thank him thousands of times for giving my beautiful wife the additional three-and-a-half years of life and for his support and reassurance to our family to keep our chins up and to help my wife fight this dreaded disease.

I want to nominate this great, caring, committed doctor. Dr. Fang deserves to be honored as a great cancer doctor. He is the greatest in our eyes as well as in the eyes of many of his other patients and their families.
ALL EYES AND EARS were on Dr. Bret Friday when he was the keynote speaker at a cancer expo being held at the Holiday Center in Duluth, Minnesota, a few years ago. He was riveting. His compassion, intelligence and drive were apparent as he captivated us, his audience, with what we were hearing. This oncologist was talking about exciting innovations, such as immunotherapy, that sounded cutting edge. We learned that Essentia Health is a research hospital and that Dr. Friday is a research oncologist who hails from Mayo Clinic in Rochester, Minnesota.

“This is your new doctor,” I remember whispering to my dear friend.

I am so grateful to say that after she switched from a complacent provider to the fabulous Dr. Friday, her stage 4 cancer has been and continues to be in remission.

Dr. Bret Friday is a superhero.
From left: DR. SHIRISH GADGEEL and DIANE TAGLIOLI-HURA

PHOTOS BY SHARON HOEG
ON MARCH 28, 2020, I felt dizzy and fell at work, so they sent me to the emergency room for tests. I was sure it was vertigo because what else could it be at the age of 57? The doctor came into the room and said, “I know why you’re dizzy. You have a brain tumor.”

I had to be hearing things. I was a pretty healthy person, so this just couldn’t be. COVID-19 had just gotten bad, and I now had to face this and future treatments/surgeries alone.

I had emergency surgery to remove the brain tumor that was wreaking havoc on my life. The next day, I found out it originated in my lung. They had to have the wrong patient. Processing a brain tumor was one thing, but lung cancer was another. I have played the flute and have been singing professionally for over 40 years. My lungs get plenty of exercise, and I have never smoked. There had to be a mistake, but there wasn’t.

I was assigned an oncologist who spoke to my family and me virtually, explaining that I had stage 4 lung cancer. I had lost family members to both lung and brain cancer, and I was terrified. My mind immediately turned to distributing my most prized possessions and making sure my
husband was going to be OK. The oncologist they assigned to me was a brilliant man but very quiet, and I had a lot of questions. My Bachelor of Science degree is in biology, and my mission was to learn all I could about this monster invading my body. I was my best advocate and was now in for the fight of my life, literally.

My doctor started me on chemo and radiation treatments. In the beginning, I didn’t question the treatment plan because, after all, he is the doctor and I am the patient. My tumor was tested for a biomarker — what was causing the tumor to grow — and I tested positive for a mutation in the ALK gene. I joined some Facebook groups with people going through exactly what I was. There I found others with their boxing gloves on, fighting for their lives too, and the support was awesome.

In these groups, a certain oncologist’s name kept coming up here in Michigan: Dr. Shirish Gadgeel. I made an appointment with him, and that’s when my life changed completely. He is a ray of sunshine and hope because his knowledge of the ALK gene is abounding. He makes me feel that living a long life is a possibility. His attitude and personality are second to none. He is involved in research with doctors worldwide to develop our lifesaving medications.

I have a doctor out on the field coaching me, rooting for me and guiding me. He is going to give me the plays, and I will execute them. He is going to lead me to a victory of hopefully a long life with an illness that gave very little hope not long ago. I want to see not only my grandkids grow up but enjoy my future ones. I don’t want them to meet me as a picture on my piano, and I’m not ready to die at 57 because I have a lot to give.

I was dealt this hand of cards for a reason, and it’s my quest to find my purpose. They say having a positive outlook as a cancer patient is very important. I feel that I have that and more with Dr. Gadgeel on my side.
A year ago, she was having a very nutty cough that continued until December. She tried many medication options that the doctors prescribed, but nothing worked. I suggested the idea of getting an X-ray. She got the results, which showed a recurrence of lung cancer with a tumor size of 8.5 cubic centimeters.

That’s where her journey started.

The oncology team told her she had to go through chemotherapy before surgery as well as possibly having her left lung completely removed. Going through hell, she finished chemotherapy at the end of November. During the first week of December when she was getting ready for her surgery, they discovered that the cancer had gone to her brain. Her initial surgery was successfully performed, and the doctors saved half of her left lung. After the surgery, she went seven days without visits in the hospital due to the COVID-19 pandemic.

She recovered amazingly, but she struggled a lot during this whole process. There were times when she had to take trips to the emergency department because of the chemotherapy. Even after
chemotherapy, she still suffered with the side effects and was weakened by the treatment. On top of this, she had to deal with the pandemic and working around the implications of it.

As a cancer survivor, I wanted to be next to her and comfort her. Luckily, she had her husband by her side, and he helped her with whatever he could. Next, the doctors performed surgery on her brain to remove the tumor.

Skipping forward to today, Martha is walking three miles every day and trying her very best with the oxygen on her back. She is an amazing woman who never gives up. My friend Martha is definitely a warrior. No doubt about it.
IT IS WITH GREAT enthusiasm and categorical support that I submit my nomination for Dr. Nagla Abdel Karim for CURE® magazine's 2021 Lung Cancer Heroes® award. Dr. Karim has been a valued part of our Georgia Cancer Center family and shares her passion for health care with every patient with lung cancer she works with at our center.

The accomplishments of Dr. Karim are many, and her efforts in patient care and research to improve the lives of those with lung cancer are many. I can list a few to provide evidence of the deservedness of her nomination. At the Georgia Cancer Center, we serve a population of largely minority patients. It is well known that these patients suffer inequities and worse outcomes, and their enrollment in clinical trials has been dismal in this country. This contributes to the little progress in advancing their health outcomes.

Recently, Dr. Karim was part of a partnership grant from the biotechnology company Genentech. The grant, totaling more than $748,000, will allow Dr. Karim to partner with the GO₂ Foundation for Lung Cancer, the O’Neal Comprehensive Cancer Center at the University of

Written by Dr. Jorge Cortes, Georgia Cancer Center at Augusta University

A PHYSICIAN-SCIENTIST WITH A HUGE HEART

DR. NAGLA ABDEL KARIM
GEORGIA CANCER CENTER AT AUGUSTA UNIVERSITY
From left: DR. NAGLA ABDEL KARIM and DR. JORGE CORTES
Alabama at Birmingham and the Vanderbilt-Ingram Cancer Center to understand why African American patients living with lung cancer are so hesitant to join clinical trials created to see if new treatments and therapies will increase the survival of this population.

As part of their work to apply for the grant, Dr. Karim analyzed data showing that only 6% of African American patients with cancer participate in clinical trials and that only 15% of our country’s Black patients with lung cancer are willing to be part of lung cancer clinical trials. In Georgia, we have a large African American population living in poverty and in rural parts of the state with very little access to cancer care options in their communities. Also, past studies and research data show African Americans are more likely to develop lung cancer during their lifetime. This is why the clinical trial Dr. Karim is involved in is so important and an example of why she deserves to be a lung cancer hero for 2021.

Dr. Karim’s participation in this research project will bring together focus groups to discuss clinical trials with African American patients with lung cancer to understand why they decide not to enroll in clinical research projects that could offer them a longer life with their loved ones. It will examine how the Georgia Cancer Center and other cancer centers across the Southeast United States can break down barriers to clinical trial hesitancy and other steps that will ensure African Americans are better represented in clinical research projects so that potential new therapies are more thoroughly tested on this population.

It is my sincere hope that you will consider Dr. Karim’s nomination as you select this year’s award recipients. Thank you for your time and for this opportunity to nominate a cancer physician-scientist with a huge heart who’s committed to more people living longer, happier, healthier lives after receiving a diagnosis of lung cancer.
I AM WRITING TO you in support of my wife’s oncologist, Dr. Frederic J. Kaye, as a hero in lung cancer. My wife was diagnosed with progressive bilateral mucinous lung adenocarcinoma and was referred to Dr. Kaye at the University of Florida Health Shands Cancer Hospital in 2017.

Dr. Kaye is professor of medicine and co-director of the University of Florida thoracic oncology program within the Division of Hematology and Oncology. He is a physician-scientist and an elected member of the American Society for Clinical Investigation, and he
serves as deputy editor-in-chief of the *Journal of the National Cancer Institute*. His lab identified the retinoblastoma gene as the first tumor suppressor gene in lung cancer. He was also co-author on the initial publication that identified EGFR mutations in lung cancer and was part of the clinical trials group that defined the role for new EGFR inhibitor drugs for patients with lung cancer. More recently, his lab discovered a new cancer gene pathway that underlies an important LKB1 mutant subtype of lung cancer, and he is also pursuing investigational clinical trials testing oncolytic viral therapy to enhance efficacy of immune therapies.

Most importantly, despite a very busy clinical practice, he has always been available to us with personal attention during these difficult times. This included evaluating my wife on the weekend after an unexpected emergency room visit. He has guided my wife through her treatments with experience and expertise while at the same time coordinating additional second-opinion evaluations and triaging possible clinical trials. Through a combination of chemotherapy, immunotherapy and selective stereotactic radiation therapy, she continues with stable disease and good quality of life.
DR. EDWARD S. KIM

PHOTO PROVIDED BY CITY OF HOPE ORANGE COUNTY
Dr. Edward S. Kim is a widely respected cancer researcher known for his work on the molecular prognostication of lung cancer. But where his extraordinary brilliance lies is in his executive leadership — as he works to change the way cancer care is accessed. He is bringing unprecedented levels of advanced care to the community setting, and he is changing present-day clinical trial practices to make them more inclusionary.

Dr. Kim, the physician-in-chief at City of Hope Orange County, is revolutionizing access to lifesaving cancer treatment. In his executive role, he is leading an effort to build a world-class cancer center and network of care in the heart of Orange County, California (population, 3.2 million), which will make advanced care available where people live and work — not in the traditional academic medical institution setting. Currently, 20% of people in Orange County must leave the area for highly specialized cancer care. But by situating all the resources of a top cancer
institution close to home, Dr. Kim and City of Hope will answer the call of local patients in need of the latest care and will, ultimately, save lives.

When completed, City of Hope Orange County will be a campus for advanced care and treatment, along with the latest in cancer research. Additionally, a network of cancer facilities — some already open for care — will branch throughout the region. This is a model Dr. Kim developed at
Atrium Health Levine Cancer Institute in Charlotte, North Carolina, and will pursue on an even greater scale in Orange County.

Additionally, Dr. Kim’s passion for promoting health access and equity has led him to trailblazing reform for clinical trials, shining a light on antiquated practices that have left out minority populations and others. His research and writing are disrupting age-old practices that often eliminate populations from even consideration for clinical trials due to age, previous access to care or other exclusionary practices.

The author of the American Society of Clinical Oncology (ASCO)-Friends of Cancer Research Joint Research Statement published in Clinical Cancer Research (2017 and 2021), Dr. Kim believes that clinical trials must start with the philosophy of including all participants by default, excluding those only for scientific-evidence-based safety reasons. In making his case, Dr. Kim cites the 2019 ASCO TAPUR study, which reviewed the electronic health records of 10,500 patients with advanced non-small cell lung cancer, finding that nearly half of all potential participants were unnecessarily excluded. As he points out, exclusionary practices hurt individuals and larger populations because studies do not represent real-world patients with cancer.

As noted earlier, Dr. Kim is also a widely respected cancer researcher who has contributed to many advances in thoracic oncology including the BATTLE study in 2012, which introduced personalized therapy in lung cancer. His brilliant work in molecular prognostication for lung cancer is revolutionizing personalized medicine, making immunotherapy an effective option for more patients.

For being one of the nation’s most passionate advocates for broader access to advanced cancer care, for his leadership in disrupting and transforming medical research and for his ground-breaking clinical work, Dr. Edward Kim is deserving of recognition. He is one of America’s greatest lung cancer heroes.
From left: THERESA ZOTTO NOLL and FRANK NOLL
PHOTO BY BEN HIDER
FRANK WAS BLESSED to be very healthy his whole life. He has been a lifelong avid and competitive runner, cyclist and triathlete, placing in the top of his age group in numerous races including the U.S. Cycling Federation State Master’s Time Trial Cycling Championship. He is also an accomplished portrait and landscape artist.

Almost seven years ago, at age 62, Frank received a diagnosis of advanced non-small cell lung cancer. Even though the initial diagnosis and treatment, including chemotherapy, immunotherapy, radiation and surgery to remove half of one lung, were difficult, he has used his experience with this disease to become a knowledgeable and ardent lung cancer awareness advocate.

Frank has raised more than $16,000 for lung cancer research at walk/run events and through an exhibit and sale of his art. He has been a guest and speaker at lung cancer conferences and has met with members of Congress at the Capitol to advocate for funding for research and early lung cancer screening. He is also a lifeline mentor for patients with newly diagnosed lung cancer at LUNGevity Foundation, a nonprofit lung cancer advocacy and support organization. In addition, he is involved in providing feedback to several pharmaceutical companies regarding literature and information provided to patients with lung cancer. His lung cancer story and his advocacy have been featured in several print and online publications.
I AM HEREBY HOPING to nominate my boss/colleague/mentor/friend, Dr. Roman Perez-Soler, known to everyone on a first name basis: Roman.

Roman received his original training in Spain but has been a constant beloved presence in the U.S. lung cancer arena for more than 30 years. He spent many years establishing a very successful translational research career at The University of Texas MD Anderson Cancer Center, followed by a leadership position at New York University. For about the past 20 years, he has been a rock-solid department chair at Montefiore Medical Center/Albert Einstein College of Medicine.

His accomplishments are numerous, from using novel translational research models to address basic aspects of lung cancer research to spearheading the development of key agents like erlotinib and topotecan that have made a huge impact in the management of patients to sustaining National Institutes of Health Research Project Grant (RO1) funding, as well as 250-plus publications, patents, etc.
From left: DR. BALAZS HALMOS and DR. ROMAN PEREZ-SOLER
But why Roman is a hero for me — and us — is not about him; it is about the vast numbers of others he has helped, mentored, encouraged and, most importantly, treated during his illustrious career.

So let me expand on “others.” What do I mean by that? First of all, Roman has nurtured multiple generations of oncologists who number in the hundreds — emerging from the faculty ranks and fellowship programs of Einstein/Montefiore and beyond, nationally and internationally — through his continued involvement with some of the best educational platforms in our field. Just to name one, the highly popular New York Lung Cancer Symposium, which he has co-run now for 16 or so years with Dr. Mark G. Kris of Memorial Sloan Kettering Cancer Center. It has truly developed into the yearly educational forum that brings together all academic thoracic oncologists, researchers and industry experts. In addition, he has enhanced thoracic oncology research immensely beyond running his own research group by training many faculty elsewhere with great success and collaborating/enhancing clinical thoracic research globally.
He went above and beyond from day one, understanding the devastating impact the pandemic had on the most vulnerable among us.

–DR. BALAZS HALMOS

And last, but certainly not least, is his dedication to the highest level of patient care even under the most difficult circumstances. He has ensured top-notch care for the neediest minority patient groups of the poorest county in New York state — the Bronx — for 20 years, never yielding to institutional or other pressures to sway from his goal and instilling that same dedication in others around him.

To top that off, we have had a chance to witness firsthand how he faced, head-on, the largest crisis of our professional and personal lives — the COVID-19 pandemic — which hit our minority patients particularly hard. He went above and beyond from day one, understanding the devastating impact the pandemic had on the most vulnerable among us: underserved patients with a cancer diagnosis facing this crisis. He led our department with remarkable strength, strategy and diligence to ensure that we could sustain outstanding, humane and compassionate cancer care even during these most testing times.

I just hope that I had been able to convince you that indeed this year, all roads lead to Roman. He is a real champion, a true hero and the most deserving of your award.
EDUCATORS, NURSES AND community members can work together to accomplish great things in lung cancer prevention. Ellen Petree, the Barrow County School System and local health care leaders identified a serious health concern for the residents of Barrow County, Georgia, in 2018.

Based on data revealed in a regional community needs assessment conducted by Truven Health Analytics, public health indicators demonstrated that lung cancer death rates, as well as lung cancer incidence rates, were significant health concerns in Barrow County. Furthermore, the incidence and death rates of lung cancer were occurring at higher rates per 100,000 people than the state and national benchmarks. Knowing that tobacco use typically begins in middle- and high-school-age youth, Ellen, the Barrow County School System and local health care leaders searched and reviewed evidence-based tobacco-use prevention programs to implement in elementary schools. »
From left: ELLEN PETREE and ANDRIA CATON, M.S.N., RN, OCN, CHPN
PHOTO PROVIDED BY PETREE AND TAKEN BY SHENLEY ROUNTREE
Tar Wars, the American Academy of Family Physicians’ tobacco-use prevention program, was selected as the intervention. The program was implemented by Ellen Petree, along with community nurses and local health care leaders, to reduce the number of future youth tobacco users in Barrow County. With Ellen’s leadership and guidance, the Barrow County School System, teachers, school nurses and more than 2,000 fourth- and fifth-grade students successfully participated in Tar Wars for each of the past three years, including during the COVID-19 pandemic.

Prior to the pandemic, Ellen coordinated the presentation of the evidence-based initiative program, Tar Wars, by local nurses and school nurses in the fourth- and fifth-grade classrooms of each of the nine Barrow County elementary schools. Pre- and post-tests were administered to assess learning gains and to refine future presentations.

Concerned about losing momentum with the students during the pandemic, Ellen organized a virtual delivery of the Tar Wars program with local oncology nurses and worked to have the pre- and post-tests administered online.

To pique interest, increase motivation and fuel participation of the fourth- and fifth-grade students, Ellen has also coordinated a poster contest each year to showcase the students’ learning after the Tar Wars presentations. Winning posters were selected through a Facebook public vote, and students were awarded cash prizes.

Unfortunately, personal habits that lead to the development of lung cancer start at an early age. To spare a future generation the burden and devastation of lung cancer, consistent and early tobacco-use prevention interventions are needed in our communities. Ellen Petree and the Barrow County School System are inspired to improve the long-term health of the community in which they live and work by focusing on the youth today.
JAN POULSEN
SANDY, UTAH

Written by Andy Robertson, IONIQ Sciences, Salt Lake City, Utah

JAN POULSEN LED THE LUNGevity Breathe Deep events in Salt Lake City for a number of years, which is where I met her. She’s a lung cancer survivor who decided she had too much to do to let the disease slow her down. As a never-smoker, she became an advocate for awareness, especially for radon gas testing and mitigation in homes.

Simply put, she’s an inspiration to those diagnosed with lung cancer, those affected by lung cancer and those who can make a difference against lung cancer in the life sciences community and radon gas community.
NOMINEES

From left: JAN POULSEN and ANDY ROBERTSON
PHOTO BY SHANNON VOLMAR
From left: LILIAN REED, RN, and SANDRA SOUTHERLAND, B.S.N., RN, OCN

PHOTO PROVIDED BY HOAG FAMILY CANCER INSTITUTE
LILIAN REED, RN
HOAG FAMILY CANCER INSTITUTE, NEWPORT BEACH, CALIFORNIA

Written by Sandra Southerland, B.S.N., RN, OCN, Hoag Family Cancer Institute, Newport Beach, California

LILIAN REED, RN, has been the lung cancer nurse navigator at Hoag Family Cancer Institute for about 18 years. She has been in the navigator position longer than any of the rest of us navigators. Most of her patients call her their angel. Her voice is calm and soothing, and her words are confident, just what the person on the other end needs to hear. At the tumor boards, the physicians treat her as their best friend, and they rely on her greatly.

Several years ago, she worked with a pulmonologist to start up the lung cancer screening program. Sometime after that, the role was transferred out of her hands, and the screening got a year behind. She took it back on, and she found three early-stage lung cancers.

Lilian facilitates the lung cancer support group. Yearly, she pays out of her own pocket to give awards and refreshments to her patients. Annually, she also leads the lung cancer walk.

Lilian is a gentle soul who was placed on Earth for this purpose: to guide those with the most common cancer there is. She has done all this while being the single mother of five children, all now amazing adults. She also has received the highest award for customer service called the George Hoag Pride Award.
JODY RUTH STEINHARDT, M.P.H., CHES
MAIMONIDES MEDICAL CENTER, BROOKLYN, NEW YORK

Written by Stephern Allison, D.H.Sc., MBA, PA, FACHE, Maimonides Medical Center, Brooklyn, New York

JODY RUTH STEINHARDT HAS BEEN the coordinator of the lung cancer screening program at Maimonides Medical Center since 2013. As a health educator, she has brought an awareness and community perspective to her work that ensures patients as well as health care providers are well informed.

The program model that Jody created is based in customer service, in which both the patient and the provider are customers. First, Jody speaks to every patient on the phone to ensure the patient meets current eligibility criteria and to schedule the appointment. She then meets the patients in the lobby of our hospital and escorts them to radiology for their lung screening scans. While waiting, Jody uses the opportunity to speak with patients about lung screening and what will happen during the two-minute scan, the importance of returning annually, and how a one-, three- or six-month follow-up does not mean cancer, as well as evaluating their readiness to quit smoking. At the same time, Jody is keenly aware of the patient’s anxiety level and offers guidance and support to help ease their concerns. Giving that one-on-one attention and developing a relationship are key to the success of the program, which boasts an 85% retention rate. »
From left: STEPHERN ALLISON, D.H.Sc., MBA, PA, FACHE, and JODY RUTH STEINHARDT, M.P.H., CHES
PHOTOS BY AGNE SOPYTE
Jody reads through every single low-dose CT report for our program. This is an informal quality-improvement process that allows Jody to stay on top of results. One case especially comes to mind: A patient had been coming for about three years, all with negative screenings. Jody was reading the report after that patient’s annual visit, and she noticed the radiologist mentioned that although the size and growth from the previous year was still within the Lung-RADS 2 range, the nodule had actually doubled in size from a scan three years before. Jody immediately notified the ordering doctor, the case was brought up at tumor board and, sure enough, the patient had lung cancer. It was diagnosed at stage 1A.

Additionally, physicians are informed through phone and mail when a patient is noncompliant with their screening appointments. This extra effort has proven a useful initiative because many patients call to either schedule or reschedule an appointment after their doctor has a conversation with them about missing lung screenings.

Jody is also very involved in lung-cancer-related activities outside of direct patient care. She has presented at several national conferences on a myriad of topics related to program structure, physician buy-in and the implementation of a commercial program management system. It is through Jody’s connections that the Maimonides Lung Cancer Screening Program is now a member of the National Lung Cancer Roundtable. Jody also serves on the New York Regional Leadership Board of the American Lung Association and became the vice chair on July 1.

Jody is a phenomenal program leader. Her dedication, passion, drive, caring and enthusiasm have helped to make our lung cancer screening program — which conducts more than 650 scans a year as a single-site program — one of the largest in New York City.
NOMINEES

DR. BRENDON STILES
PHOTO PROVIDED BY MONTEFIORE HEALTH SYSTEM
MY LUNG CANCER HERO is Dr. Brendon Stiles. Dr. Stiles is chief of the Division of Thoracic Surgery and Surgical Oncology at Montefiore Medical Center. I have known Dr. Stiles for seven years and have never met a kinder, more compassionate clinician in my entire life. He is such an accomplished thoracic surgeon, but he is so humble and generous with his time. He is a true asset to the lung cancer community.

Dr. Stiles is always thinking about his patients and others in the community (caregivers, family). He has built relationships with his patients that are truly personal for him. Beyond those relationships, he is engaged on social media with the broader community of patients with lung cancer, lung cancer advocates, caregivers and pharmaceutical company employees who are working to bring treatments to patients. He never says no to any introduction or to meeting new people; he is so generous with his time.

Much of his generosity is spent during his personal time because he just never says no, even though he has a wife and beautiful children he adores. His kindness and generosity cannot be overlooked. This is a brilliant, amazing human who gets pulled in many directions because
people want to connect with him. He is relentless on social media, engaging with other clinicians in serious discussions about lung cancer care and protocols and also with patients who are drawn to his empathy and compassion.

I am a lung cancer survivor who was treated in Boston. If I lived in New York City, there is one surgeon I would have sought out: Dr. Stiles. There is something special about him, and you know it when you see it. Good guy, nice person, smart, brilliant, kind, thoughtful, compassionate, eager to help, generous — all of the qualities that make him an amazing clinician and lung cancer hero. He deserves to be recognized for his commitment to this community.

I know many lung cancer oncologists/surgeons and have had many on my podcast, “The Research Evangelist.” But the first guest I had, of all I could have chosen, was Dr. Stiles. He is the amazing human that I wanted to showcase to the universe.

If you don't know him, you should. You will benefit from knowing him. I am honored to nominate Brendon as my lung cancer hero. 📌
TAMI TITTELFITZ, NP
CITY OF HOPE, DUARTE, CALIFORNIA

Written by Dr. Dan Raz, City of Hope, Los Angeles, California

TAMI TITTELFITZ HAS BEEN a lung cancer nurse practitioner for more than 25 years. She began her career at the University of Southern California in Los Angeles and has been at City of Hope in Duarte, California, the past 12 years. Tami has cared for thousands of patients with lung cancer over the years and works tirelessly with a sense of urgency to ensure her patients have the best care possible. She also has revolutionized care of malignant pleural effusion. Tami has an independent practice where she helps patients with cancer breathe easier and have the best-possible quality of life. Tami is one of a kind: a saint and a healer.
I am writing to give my strongest support and recommendation for Suzanne “Suzy” Walker for the 2021 class of Lung Cancer Heroes®. Suzy has more than 25 years of experience in thoracic oncology as a nurse and nurse practitioner. She completed her Ph.D. in nursing in 2020. I have been fortunate to have worked with her for more than 20 years, and she has cared for a family member of mine along with many other patients over the years.

She is respected as a senior advanced practice provider and has the highest level of competency as a practitioner, educator, scholar and health care professional. In her clinical role, she provides direct patient care, including patient and caregiver education, symptom management and end-of-life care for her patients with lung cancer and mesothelioma. Suzy is highly recognized by her peers — both physicians and advanced practice providers — in the medical, radiation and surgical oncology divisions within the University of Pennsylvania Health System and beyond as an expert in thoracic malignancies and mesothelioma.
NOMINEES

SUZANNE WALKER, PH.D., CRNP, and ELIZABETH PRECHTEL DUNPHY, DNP, CRNP, AOCN
Suzy is currently a nurse practitioner and coordinator of thoracic malignancies at the Abramson Cancer Center at Penn Presbyterian Medical Center. She has been in this role for approximately 14 years. Suzy has been an integral part of Penn Presbyterian Medical Center’s Mesothelioma and Pleural Malignancies program for many years. In addition to her patient care responsibilities, she is a member of the teaching faculty at the University of Pennsylvania School of Nursing in the Oncology Minor/Post Master’s Certificate Program.

Suzy disseminates knowledge locally at Penn but also via national forums. Some of her recent lectures include “Exploring Recent Advances in Precision Medicine for EGFR-Mutant NSCLC” for The Changing Face of Lung Cancer Lecture Series; Creative Educational Concepts Oncology; “Analyzing Concepts to Theorize in the Human Spirit of Palliative Care: Poster Symposium” at the Western Institute of Nursing research conference; and “Non-Small Cell Lung Cancer-Immunotherapy” at JADPRO Live. Suzy is also an accomplished author and published “The Lived Experience of Persons With Malignant Pleural Mesothelioma in the United States” in the journal *Cancer Nursing* in 2019 as the first author. Suzy was also co-editor for the book “Guide to Cancer Immunotherapy,” published by the Oncology Nursing Society.

Suzy focuses on identifying an unmet need — or an area of improvement — in cancer, and she develops and contributes to research that makes a difference for our patients. She works to optimize patient-provider relationships to improve quality of life and quality of care, specifically incorporating the latest technologies, such as telemedicine, to achieve these goals.

Within the health system, she has shown innovative leadership through her work as an early adopter and proponent of video telehealth. In 2017, she completed a pilot study that examined the role of video telehealth in end-of-life transitions, and in 2018, she became a champion for telehealth and developed our initial telehealth policy. She subsequently spearheaded a pilot telehealth program in our setting to provide supportive-care video visits for symptom assessment and management as well as end-of-life care, and she collaborated with our infusion team on the development of a virtual education program for patients who
recently received a diagnosis and are starting infusion therapy. She is currently a subinvestigator on a study examining the use of telehealth for adherence to oral anti-cancer therapies. Other innovative ways she has helped support our patients include spearheading a study that collected data demonstrating the need for a peer support group for our patients with mesothelioma. That group is now a reality in no small part due to Suzy’s leadership and devoted community engagement. Suzy also had the idea to develop a peer mentorship program for our patients who recently received a mesothelioma diagnosis. Suzy is currently working on a CARES Act (coronavirus relief bill) grant application to realize this program. She is a forward thinker and is always trying to find ways to enhance the patient experience and make cancer treatments and management as easy as possible on patients and their loved ones.

In summary, Suzy is a consummate professional, a caring provider, a mentor, a teacher, a trusted and valued partner and a cancer expert. She does not wear a cape, but she is a hero to me, to our clinical and teaching staff, and to patients and their caregivers. She is very deserving of this honor.

—ELIZABETH PRECHTEL DUNPHY, DNP, CRNP, AOCN
CURE® combines science with humanity to empower patients with cancer and their caregivers by offering the latest information on every aspect of the disease, from the technical and scientific to the social and emotional.

CURE® is produced by CURE Media Group, the leader in consumer-targeted oncology content that translates news about cancer for the lay audience and disseminates current information to patients, survivors, caregivers and health professionals. CURE Media Group’s offerings include its magazine, CURE®; special issues, such as CURE®’s annual cancer guide; exclusive online content at curetoday.com; events; the Lung Cancer Heroes® essay book; and the Moving Mountains for Multiple Myeloma program. CURE Media Group also includes Oncology Nursing News® and its website, OncNursingNews.com, which offer the latest news and clinical insights for oncology nursing professionals, plus live meeting coverage, video interviews and blog posts from peers.

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CURE® Lung Cancer Heroes® Volume 2 is a collection of inspiring essays written by patients, survivors, advocates, caregivers and colleagues about the people who touch lives while caring for those affected by lung cancer. These essays offer lessons about healing in the face of adversity, persevering against the odds and discovering kindness and compassion that can occur during one’s cancer journey.

“Most of her patients call her their angel. Her voice is calm and soothing, and her words are confident, just what the person on the other end needs to hear. At the tumor boards, the physicians treat her as their best friend, and they rely on her greatly.”
— ABOUT A LUNG CANCER HERO FROM NEWPORT BEACH, CALIFORNIA

“I have a doctor out on the field coaching me, rooting for me and guiding me. He is going to give me the plays, and I will execute them. He is going to lead me to a victory of hopefully a long life with an illness that gave very little hope not long ago.”
— ABOUT A LUNG CANCER HERO FROM DETROIT, MICHIGAN

“(He) is a true leader in the field both as a professional and as a model for humane, compassionate care. The work he does on and off the clock has helped transform the landscape of lung cancer research and advocacy.”
— ABOUT A LUNG CANCER HERO FROM BETHESDA, MARYLAND