

LIFE | HEALTH

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RICHARD VAN ETTEN, UCI RESEARCHER



STEPPING UP THE FIGHT AGAINST CANCER

A UCI DOCTOR DISCUSSES NEW TOOLS THAT PINPOINT TUMORS WITH FEWER SIDE EFFECTS.

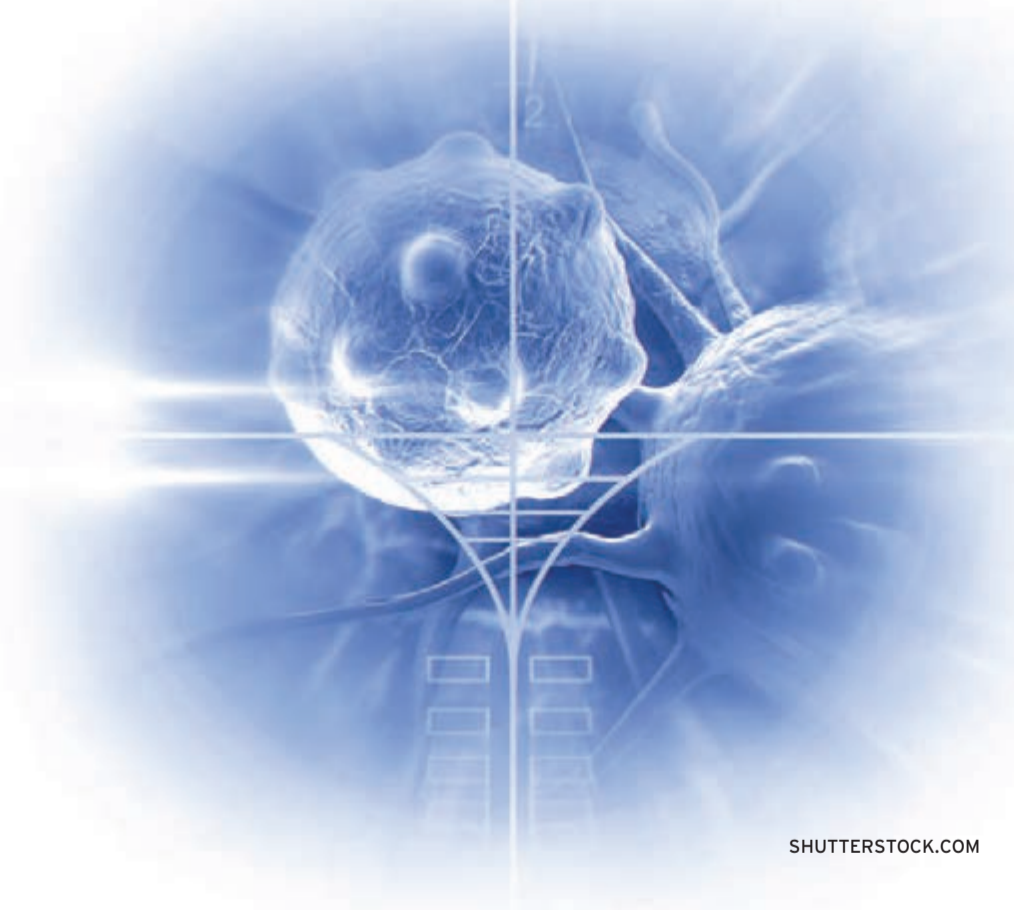
BY MEGAN NICOLAI
STAFF WRITER

Researchers at UC Irvine Health and across the globe are studying new ways to attack cancer cells directly. Richard Van Etten, director of the Chao Family Comprehensive Cancer Center at UC Irvine, highlighted some of the cutting-edge research into new treatments during a recent lecture at Newport Beach Central Library. Two main branches of study – targeted therapies and immunotherapies – are showing a lot

of promise and are likely the future of cancer treatment, he said. “The future is already here; it’s coming very, very fast,” Van Etten said. “We’re taking cancers that are previously incurable and we’re curing them. We’re taking other cancers and turning them into chronic diseases patients can live with.” Nevertheless, Van Etten said, cancer is on track to overtake cardiovascular disease as the No. 1 killer in the U.S. Treatment of more than 150 forms of cancer is expected to cost the

Dr. Richard Van Etten, director of UC Irvine’s Chao Family Comprehensive Cancer Center, holds frozen leukemia cells used by researchers working on new treatments. Targeted therapies and immunotherapies show promise to cure cancers or reduce their effects, he says.

MINDY SCHAUER, STAFF PHOTOGRAPHER



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St. Joseph CEO announces plans to leave post

Deborah Proctor will end 10-year tenure as health care industry undergoes broad changes and increasing financial pressure.



ANA P. GUTIERREZ, FOR THE REGISTER

Among Deborah Proctor’s feats as CEO of St. Joseph Health was forging a partnership with Hoag Hospital.

Deborah Proctor, CEO of St. Joseph Health, will step down at the end of this year after a decade in which she oversaw St. Joseph’s growth into a \$6 billion medical delivery system that has become a major pillar of hospital and physician care in Orange County and beyond. She will leave the Catholic nonprofit health system in a fortified position to confront the headwinds buffeting the hospital industry. All hospitals are under financial pressure in an era of new payment models that stress the quality of patient care rather than the



JENNA CHANDLER
STAFF WRITER

volume of services provided. And they face fines for medical errors and readmissions that are deemed above normal. St. Joseph owns 16 hospitals in California, Texas and New Mexico – including three in Orange County – and has numerous affiliated doctor groups. Proctor, 63, is the first woman who is not a nun to head the health system

since it was formed in 1920 after a flu epidemic by the Sisters of St. Joseph of Orange. She joined the hospital group as CEO in 2005, and later shepherded it to a powerhouse affiliation with one of the most profitable hospitals in the county, Hoag Hospital. “It’s been a period of rapid change. I imagine it’s a really tough and increasingly competitive environment,” said Mireille Jacobson, director of the Center for Health Care Management

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THEY'RE GAME FOR SOME EXERCISE



BILL ALKOFER, STAFF PHOTOGRAPHER

Katie Shalvoy, left, can't quite pull down a pass as defender Jessica Connor watches during Beach City Sports' recent National Flag Football Tournament at Huntington State Beach. Organizers says they hope the co-ed, eight-on-eight, double-elimination tournament will become an annual event.

QUOTE OF THE WEEK

“Women may experience a combination of things they don't always associate with a heart attack. Maybe we need to do a better job of explaining and describing to the public what a heart attack looks and feels like.”

JUDITH LICHTMAN
ASSOCIATE PROFESSOR OF EPIDEMIOLOGY AT THE YALE SCHOOL OF PUBLIC HEALTH, DISCUSSING A STUDY SHE AND COLLEAGUES CONDUCTED EXPLORING WHY WOMEN OFTEN DELAY GETTING EMERGENCY CARE FOR HEART ATTACK SYMPTOMS, AS TOLD TO NATIONAL PUBLIC RADIO

CANCER: UCI explores new treatments

FROM PAGE 1

country about \$173 billion annually by 2020, according to a 2011 report in the Journal of the National Cancer Institute.

Standard treatment for cancer often means trying to attack tumors at the expense of healthy cells in the body.

Chemotherapy drugs kill all rapidly dividing cells in a patient. This can shrink or destroy many cancerous tumors, but it can also kill cells in bone marrow, leading to low blood cell counts; cells in the gastrointestinal tract, leading to mouth sores or stomach upset; or hair cells, leading to hair loss. Radiation therapy will kill cancer cells by damaging their DNA, but will also kill healthy cells.

Targeted therapy and immunotherapy approaches are intended to take aim specifically at cancer cells.

TARGETED THERAPIES

Doctors and researchers are trying to find abnormalities in cancer cells that drive their growth, usually a mutation in their DNA, and develop medications or treatments to target and kill those cells, Van Etten said.

For complicated cancers such as melanoma and lung cancer, up to 200 mutations have been identified in the cells' DNA, Van Etten said.

“We have to slough through those one at a time to figure out which (mutations) are really important for driving through the disease,” he said.

IMMUNOTHERAPIES

Immunotherapies are designed to help a patient's immune system fight off cancer cells.

Malignant cells often have traits the body's white blood cells can recognize



MINDY SCHAUER, STAFF PHOTOGRAPHER

Therapies that more closely target malignant cells while sparing healthy ones are the focus of many cancer researchers, says Dr. Richard Van Etten of UC Irvine.

and attack. Three possible treatments have a chance of boosting that fight, Van Etten said.

• Medications called **anti-body drug conjugates** hook a poison up to a patient's antibodies, which then seek out cancerous tumor cells. The antibodies are absorbed by the malignant cell and broken down, and the poison is released and kills the cell. The cancer cells are different from surrounding healthy cells, normal tissue is spared. Three of these drugs were approved last year by the Food and Drug Administration, Van Etten

said.

• Drugs called **checkpoint inhibitors** block the braking mechanism a patient's immune system typically employs to stop the work of white blood cells, meaning those cells can freely attack cancerous cells. Two such medications have been approved so far, with 10 more in the pipeline, Van Etten said.

“These can lead to some autoimmune responses as a side effect,” Van Etten said. “Still, they're fairly manageable. It's better than a fatal cancer.”

• **Genetically modified T-**

cells are white blood cells taken from a patient, trained to recognize the cancer cells in a laboratory and then put back in the patient. This treatment is still experimental and researchers are coming up with best practices for how to use it, Van Etten said.

“They're live cells. They'll divide and multiply and form an entire army that will go out and attack cancer cells,” he said.

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DID YOU KNOW? ADHD can boost chances of early death, study shows

Though the risk is very small, people with attention-deficit hyperactivity disorder may be twice as likely to die prematurely as those without the condition, according to a study published last week in the British medical journal The Lancet.

A team of Danish researchers collected information on more than 2 million people beginning with their first birthday, for a maximum of 32 years. Of that group, 32,000 were diagnosed with ADHD and 107 of the ADHD group died early.

“Our results add to the overwhelming existing evidence that ADHD is a true disorder and should not be taken lightly,” said Dr. Soren Dalsgaard, a senior researcher at Denmark's Aarhus University and lead researcher on the study.

The neurodevelopmental disorder affects about 11 percent of American children age 4 to 17, and often continues into adulthood, according to the Centers for Disease Control and Prevention. Symptoms include impulsivity, hyperactivity and difficulty maintaining attention.

Researchers found that accidents caused more than half of the premature deaths among the study subjects with ADHD.

“It's common for people with ADHD to be impulsive and act without thinking, which can lead to accidents,” said Stephen Faraone, director of child and adolescent psychiatry research at SUNY Upstate Medical University in New York. Faraone wrote an editorial accompanying the Lancet article.

Source: Health Day News



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PROCTOR: St. Joseph Health CEO to quit

FROM PAGE 1

and Policy at UC Irvine's The Merage School of Business.

Industry watchers said Proctor has navigated that competitive environment well by forging partnerships with insurance companies and former competitors - mainly Hoag.

The alliance, formed in the spring of 2013, created a new entity that provides about one-third of health care in Orange County through a network of six hospital facilities, their affiliated physician groups and outpatient clinics. The deal led to the creation of an umbrella group known as St. Joseph Hoag Health, which later formed a partnership with Children's Hospital of Orange County.

“Through Deborah's leadership, St. Joseph is very well positioned,” said Dr. Mitch Morris, a health care consultant with Deloitte LLP. “A very close relationship and integration with Hoag was a really smart move.”

Proctor's 42-year career in the health care industry began in cardiovascular critical care nursing. She said she fell in love with the “whole idea of physiology” in the eighth grade when she watched her teacher dissect a sheep's heart.

After working with St. Joseph Hospital in various leadership roles, then as a consultant with the Hay Group, she joined Ascension Health, the largest Catholic health care system in the country, as chief administrative officer.

“I was amazed when I began to work at St. Joseph that people talked about faith, how we would operate as an organization. It affected everything. At that time, the sisters were still very active in health care.... It really shaped my whole career,” she said.

As the CEO of St. Joseph Health, which also includes hospice care, outpatient services and community clinics, Proctor has been among the highest paid nonprofit executives in the county. She earned \$2.05 million in compensation and benefits in the 2012-13 fiscal year, according to the most recent tax returns filed with the IRS.

Proctor said she wants to devote more time to her four children and five grandchildren. “I was go-

ing to need to make this change in the next couple of years, and this seemed like the appropriate time,” she said. “The system is in a really good place right now.”

Proctor's replacement is expected to be named this year.

She is not the only major Orange County hospital executive stepping down. UCI Medical Center's CEO, Terry Belmont, said last month he will retire June 30.

“It's a really tough environment now. I might be wrong, but I don't think it's a coincidence, though, that there are these changes in leadership,” the Merage School's Jacobson said.

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