

WORLD-CLASS CANCER CARE

20
23

ON STATEN ISLAND

CANCER
ANNUAL
REPORT



Richmond University
▲▲▲ **Medical Center**

Message from the President and Chief Executive Officer



Richmond University Medical Center's oncology program continued to grow in 2023, allowing members of our community to receive personalized care, close to home. Through our oncology service line, patients have access to the latest surgical procedures, radiation therapy, immunotherapy, chemotherapy, palliative care, and rehabilitation services without needing to leave Staten Island.

According to city and state studies, Staten Island has the highest cancer incidence rate of all of New York City, in addition to having the highest rate of any borough for 15 of the 25 cancers tracked by the state. Female breast cancer had the highest rate of any type of cancer on Staten Island, with a rate of 139.1 per 100,000 population; followed by prostate cancer, with a rate of 119.5. To address this local epidemic, over the past year we have recruited new oncologists and specialists from world-class medical institutions to provide our patients with advanced, medically proven effective treatments and leading-edge procedures. Thanks to community outreach events and health fairs conducted across Staten Island this past year, we provided over 1,000 screenings for cancers such as colorectal, prostate, breast, and lung, among others. Because of Staten Island's high cancer rates, the importance of providing these early detection modalities cannot be overstated.

In 2023, RUMC celebrated its 86th consecutive year of accreditation by the American College of Surgeons Commission on Cancer (ACSCC), making it the longest consecutively ACSCC-accredited program on Staten Island. Our Center for Cancer Care also maintained its accreditation by the American College of Radiation Oncology (ACRO) and its accreditation in Positron Emission Tomography (PET) by the American College of Radiology (ACR). Our

Comprehensive Breast and Imaging Center celebrated its fifth anniversary of serving the community and also celebrated its fourth consecutive year of ACR accreditation in mammography, breast ultrasound, stereotactic biopsy, and ultrasound guided biopsy services.

With the opening of the Lucille and Jay Chazanoff Surgical Pavilion, RUMC is well equipped with the most technologically advanced surgical department. This \$42 million pavilion includes 23 pre- and post-operation bays for patients, 10 new advanced surgical suites, including three specialty suites designed to accommodate our robotic surgery systems, a new cysto suite, and additional support units to enhance patient care, rivalling similar units found in any large academic institution across the metropolitan area.

As we look forward to 2024 and beyond, the state of our oncology program is strong. Our clinical and administrative senior leadership, led by the Board of Trustees, continues to make investments to ensure our hospital's rich history of providing state-of-the-art cancer services continues to grow. We are humbled by the faith and trust so many patients and their families place in us. To every member of our oncology department, thank you for the exceptional care you provide to our community and my best to our patients and families.

Daniel J. Messina, PhD, FACHE
President and Chief Executive Officer

Awards and accreditations: 2023



Proud to be Staten Island's longest consecutively accredited cancer program

This past year marked the 86th consecutive year of accreditation by the American College of Surgeons Commission on Cancer, making Richmond University Medical Center's oncology program the longest consecutively accredited program by the ACS on Staten Island.

Center for Cancer Care



The Center for Cancer Care maintained its accreditation by the American College of Radiation Oncology for a third consecutive year for continuing to provide an exceptional standard of patient care across all forms of radiation therapy. This past year also marked the center's fourth consecutive year of accreditation in Positron Emission Tomography (PET) by the American College of Radiology (ACR). The ACR gold seal of accreditation recognizes the center's specialists for providing advanced image quality utilizing PET scan technology while also maintaining the highest level of patient safety.

Comprehensive Breast and Imaging Center



This past year was the fifth consecutive year of American College of Radiology (ACR) accreditation for the Comprehensive Breast and Imaging Center in the areas of mammography, breast ultrasound, stereotactic biopsy and ultrasound guided biopsy services. The gold seal represents the highest level of accreditation provided by the ACR for quality of care and patient safety.

Cancer stats by site

Site Name	%
Oral Cavity	2.30%
Digestive System	16.40%
Respiratory System	12.60%
Blood & Bone Marrow	10.20%
Bone	0.30%
Connect/Soft Tissue	0.90%
Skin	1.50%
Breast	14.10%
Female Genital	6.40%
Male Genital	14.00%
Urinary System	6.40%
Central Nervous System	5.50%
Lymphatic System	2.80%
Unknown Primary	1.10%
Other/III-Defined	0.50%



Head & Neck | A groundbreaking clinical trial for head and neck cancers

The Division of Otolaryngology at Richmond University Medical Center, more commonly referred to as Ear, Nose, and Throat or ENT, is participating in a clinical trial exploring groundbreaking nanomedicine treatments for head and neck cancers, and has enrolled the first patient in the country to participate in the international study.

Nanomedicine involves using nanocarriers to deliver drugs directly to sites of action, reducing necessary doses and possible side effects.

“Injectable nanoparticles make radiation more effective in older patients who can’t get chemotherapy,” explained Christopher Lisi, MD, chief of the Division of Otolaryngology at RUMC and director of RUMC’s Center for Advanced ENT, Sinus and Voice Care.

“We are excited and honored to be selected as part of this study,” Dr. Lisi said.

Head and neck cancers rank sixth among the most common cancers today, according to the National Library of Medicine, and the survival rate has remained virtually unchanged over the past 25 years because of late diagnosis and ineffective treatments.

Tobacco and alcohol are the two main risk factors, and Staten Island has the highest rate of cigarette smoking among the five New York City boroughs, Dr. Lisi pointed out.

Head and neck cancers affect areas of the body that are fundamental for the five senses, making it necessary to treat them effectively and non-invasively as early as possible without compromising vital functions. This is not always possible with conventional treatments of chemotherapy or radiotherapy.

New head and neck surgeon

Shanmugappiriya Sivarajah, MD, a reconstructive surgeon specializing in minimally invasive robotic surgery for cancers of the head and neck, joined Dr. Lisi in late 2023. She specializes in treating sinus issues, voice box issues, and cancers of the mouth and throat.

She is the first surgeon on Staten Island to focus on head and neck cancers, Dr. Lisi noted.

Dr. Sivarajah is also a certified surgeon for Inspire, an FDA-approved treatment for people with moderate to severe obstructive sleep apnea who are unable to use or get consistent benefit from CPAP (continuous positive airway pressure) devices.

Inspire therapy works inside the body with a patient’s natural breathing process. The system consists of a small impulse generator implanted beneath the clavicle; a breathing sensing lead placed between the external and intercostal muscles, and a stimulation lead attached to the branch of the hypoglossal nerve that produces tongue protrusion. The Inspire impulse generator, which is similar in size and appearance to a cardiac pacemaker, gently stimulates the tongue forward, out of the back of the throat, to alleviate snoring and apnea. Inspire is an outpatient procedure that takes about two hours to complete under general anesthesia, Dr. Lisi said.



*Christopher Lisi, MD
Chief, Division of Otolaryngology
Director, Center for Advanced ENT,
Sinus and Voice Care*

Radiation Oncology | Clinical trial aims to tame cancer treatment side effects

Richmond University Medical Center is participating in a clinical trial addressing lymphedema, a common side effect among patients who have undergone surgery or radiation for head and neck cancers.

Under the direction of two RUMC radiation oncologists, Mark Adams, MD, and Hoon Lee, MD, multiple patients have been enrolled into phase 3 of the trial, which examines the safety and efficacy of an advanced pneumatic compression device (APCD).

Up to 75% of patients will manifest symptoms of lymphedema after treatment for head and neck cancers, according to the American Head and Neck Society. Lymphedema is marked by swelling due to the accumulation of lymph, a substance consisting of water, proteins, chemicals and white blood cells. Surgery and radiation can interrupt functioning of the lymph nodes, causing the substance to collect in the soft tissues of the neck, chin, cheeks and jaw-line.

Lymphedema can also occur internally, involving the mucous membranes of the mouth and throat, causing changes in voice, difficulty swallowing, a sense of something being “stuck” in the back of the throat, and, in severe cases, difficulty breathing.

Paired with inflatable garments, the APCD provides gradient pressure to stimulate adjacent lymphatic regions and redirect fluid. Pneumatic chambers cover part of the head, neck and chest with brief applications of dynamic pressure in a wave-like manner.

Drs. Adams and Lee are also using a cutting-edge technique to minimize side effects resulting from prostate cancer

“If phase 3 is positive, it will impact the standard of care for all patients. “The goals in oncology are to improve the precision of therapy and minimize side effects.”

— Hoon Lee, MD

treatment. Applied during radiation therapy, Space OAR Hydrogel minimizes urinary, sexual and bowel side effects and protects quality of life for patients.

The two physicians, who have served on the RUMC staff for a combined 51 years, are also part of the medical team participating in a clinical trial for the nano therapeutic treatment of head and neck cancers.

Accredited by the American College of Radiation Oncology, the RUMC program includes four radiation therapy technologists and two nurses who work alongside Drs. Adams and Lee.



Pediatric | Compassionate care for the youngest cancer patients

Cancer is the leading cause of death by disease after infancy among children in the United States, according to the National Cancer Institute. Approximately one in 285 children will be diagnosed with cancer before their 20th birthday, the American Childhood Cancer Organization reports.

The most common childhood cancers include leukemias, lymphomas, and malignant brain and other central nervous system tumors.

The pediatric oncology team at Richmond University Medical Center offers a comprehensive and compassionate program for newborns to adolescents, from diagnosis to treatment and recovery. Led by Mario Peichev, MD, the team includes physicians, nurses, technologists, pharmacists, therapists, and tumor registrars who offer the latest technology and treatments available.

In addition to chemotherapy and radiation to treat childhood cancers, RUMC offers immunotherapy, targeted therapy, linear accelerator (LINAC) therapy, high dose rate (HDR) brachytherapy and stereotactic radiosurgery.

A cancer survival program has been established for patients who were successfully treated for the disease in the past. During annual examinations, the RUMC team checks for long-term side effects from cancer treatment that can include urological, cardiac, or fertility issues.

Through the RUMC Family Care and Support Program, families of pediatric cancer patients can seek guidance and support from a team of licensed therapists and social workers.

As a hematologist-oncologist, Dr. Peichev treats diseases of the blood, spleen and lymph glands as well as anemia, clotting disorders, sickle cell disease, hemophilia, leukemia and lymphoma.

This past year, in cooperation with the Mount Sinai Health System, the Oncology Department at RUMC has initiated credentialing for the Children's Oncology Group, a nationwide organization directing new chemotherapy protocols with the latest in technology, Dr. Peichev said.



Oncologic Surgery | Surgical staff expands, new surgical pavilion unveiled

This past year, oncologic surgery services at Richmond University Medical Center grew tenfold in both manpower and resources. RUMC welcomed two new surgeons with a state-of-the-art \$42 million surgical pavilion that rivals that of any unit found in larger health-care institutions in New York City and beyond.

New oncologists

Two surgeons with subspecialties in cancer treatment have joined the oncology team at RUMC. Christopher Touloukian, MD, is a surgical oncologist specializing in malignancies of the colon, pancreas and liver, and Shanmugappiriya Sivarajah, MD, is a reconstructive surgeon specializing in minimally invasive robotic surgery for cancers of the head and neck.

Dr. Touloukian, whose clinical interests include advanced cutaneous malignancies and gastro-intestinal cancers, has a vested interest in research focused on immune-based therapies for cancer. He grew up in Woodbridge, Conn., and graduated from Columbia University Medical School before completing his general surgery training at Duke University in Durham, N.C., and his surgical oncology fellowship at the National Institutes of Health in Bethesda, Md.

Dr. Sivarajah completed a clinical fellowship in microvascular reconstruction, one of the most advanced surgical options available for rehabilitating surgical defects that are caused by the removal of head and neck tumors. She completed her undergraduate studies in neuroscience at the University of Toronto, medical school at the Schulich School of Medicine in London, Ontario, followed by residency in otolaryngology-head and neck surgery at the University of Alberta. She received a master's degree in public health from Harvard University in 2020.

She also completed two clinical fellowships in head and neck cancer surgery and microvascular reconstruction at Massachusetts Eye and Ear at Harvard University in 2022 and the South Carolina Sarah Cannon Fellowship in 2023.

Surgical pavilion opening

The opening of the 40,000-square-foot Lucille and Jay Chazanoff Surgical Pavilion is expanding the surgical team and attracting top talent to RUMC, said Loren Harris, MD, chair of the Department of Surgery and chief of general thoracic surgery.

Designed to facilitate the best outcomes for surgical procedures, efficiency for medical staff and a seamless patient experience, the pavilion features 10 technologically-advanced operating rooms — six general suites and four specialty suites — and 23 pre-and post-operation bays for patients.

Three of the specialty suites can accommodate robotic surgery using the da Vinci Surgical System, which allows surgeons to perform complex procedures with more precision, flexibility and control. Located directly above the Emergency Department, the surgical suites offer efficient access for trauma patients.

“With the increased patient capacity, RUMC’s surgical staff is continuing to expand with specialists in a variety of subspecialty areas.”

— Loren Harris, MD



Thyroid | Endocrinology team keeps thyroid cancer at bay

Staten Island has a 67 percent higher rate of thyroid cancer compared to the other New York City boroughs, a recent study by the New York State Department of Health revealed.

The study ruled out the former Fresh Kills Landfill and other environmental toxins as causes for the uptick. A strong consensus pointed to a higher frequency of diagnostic imaging and cancer screening on Staten Island that identifies insignificant cancers where active treatment is not the standard of care.

Still, thyroid cancer is a health risk that demands awareness and the vast majority of cases are curable, said Philip E. Otterbeck, MD, chair of the Department of Medicine and chief of the Division of Endocrinology at RUMC.

In the U.S., thyroid cancer has the fastest rising incidence of all the major cancers, accounting for roughly 4% of all new cancer cases, according to [penmedicine.org](https://www.pennmedicine.org).

Women are diagnosed more frequently in their 40s and 50s, and men are typically in their 60s and 70s when diagnosed. Family history increases the risk, and thyroid cancer affects women more often than men.

In New York State and on Staten Island, thyroid cancer is the most common cancer among women aged 20-34, and it is the most common cancer among women aged 35-39 on Staten Island.

The RUMC endocrinology team uses state-of-the-art technology to screen and treat patients for the four principal subtypes of thyroid cancer -- papillary, follicular, medullary and anaplastic. Medullary and papillary are the most common types with the best survival rates, Dr. Otterbeck explained.

Thyroid nodules are usually first identified during a physical exam, followed by an ultrasound of the gland and a biopsy if a nodule is suspicious or abnormal in appearance. Ninety-five percent of nodules on ultrasound are benign, Dr. Otterbeck confirmed.

Blood work, CT scans, and positron emission tomography (PET) scans can also help with a thyroid cancer diagnosis. Non-surgical treatments include chemotherapy, radiation and oral medication, and surgical treatments include thyroidectomy, lobectomy and lymph node removal.

"The vast majority of patients are managed with totality of treatment" and have successful outcomes, Dr. Otterbeck said.

Clinical trials are underway for a type of targeted drug called tyrosine kinase inhibitors (TKIs), which block a cancer cell chemical messenger called tyrosine kinase.

"This newer treatment in clinical trials is rapidly emerging as a standard process in managing disease," Dr. Otterbeck said.

New Physicians

Dr. Otterbeck announced that two physicians have joined the RUMC multidisciplinary team in 2023. The first is Yin Nwe Tun, MD, who is board certified in endocrinology, diabetes and metabolism, and internal medicine. She is joined by Shanmugappiriya Sivarajah, MD, a surgeon specializing in head and neck cancers.

*Philip Otterbeck, MD
Chair, Department of Medicine
chief, Division of Endocrinology*



Palliative Care | Providing comfort and compassion when it's needed most

Two grants and a generous donation are making an expansion of palliative care services possible at Richmond University Medical Center.

With \$150,000 of combined donations from HYLAN, a leading communications infrastructure construction company; Incredibly Blessed Inc., a non-profit organization serving Staten Island, and from RUMC Foundation board member Dianne Powers, plans to enhance the program with additional staff that includes a music therapist are underway.

In 2023, RUMC provided palliative care to 275 patients living with a serious illness such as cancer, heart failure, Alzheimer's disease, kidney disease, dementia, HIV/AIDS and pulmonary fibrosis.

"Palliative care is supportive care any time in the disease process," explained Thomas Forlenza, MD, chief of the program at RUMC.

"Palliative" is from the Latin word *pallium*, which means *cloak*. When patients enroll in palliative care, they are "cloaked" with care and comfort as they receive highly focused pain and symptom management from a team that includes a physician, a nurse, a social worker and a pastoral care provider.

Offered in addition to the primary treatment plan, palliative care is intended to provide day-to-day comfort and assistance for a patient and their loved ones. The interdisciplinary treatment focuses on meeting an array of needs to maintain quality of life while balancing them with appropriate clinical therapies.

Dr. Forlenza also plans to open a pain unit at the hospital specializing in the care of adult oncology patients, including those who need chemotherapy administration, blood transfusions and pain management.

"The goal is to manage difficult pain and symptoms for patients whose pain cannot be managed by floor nurses."

— Thomas Forlenza, MD

The palliative care team at RUMC is committed to providing compassion and support for patients and families who are experiencing difficulty in adjusting to a diagnosis and making decisions about treatment options.



Breast | A new technique for breast lesion treatment

A state-of-the-art procedure enabling the surgeon to pinpoint an impalpable breast lesion more efficiently, with less discomfort and less prep time for the patient, is now available at Richmond University Medical Center.

Magseed has replaced wire localization as a new marker for lumpectomies, explained Dara Fedele, MD, DABR, a board-certified radiologist and fellowship-trained breast imager at RUMC's Comprehensive Breast and Imaging Center, located at 1161 Victory Blvd.

A lumpectomy is the precise removal of abnormal tissue when a mastectomy is not indicated.

The small single-use metal device is designed to accurately mark the site of a breast cancer lesion for surgical removal. Magseed is 5mm long and made of surgical grade stainless steel.

"Patients tolerate this procedure very well, and it gives them a lot of flexibility with surgical timing," Dr. Fedele said. "I exclusively use this technology for all of our patients requiring guidance for lumpectomy. In general, they are happier with this approach compared to the older technology referred to as a wire localization."

Equipped with two GE mammography units, the Comprehensive Breast and Imaging Center performs thousands of screenings each year, including Digital Breast Tomosynthesis (DBT), now the standard of care and more commonly referred to as 3-D mammography.

Dr. Fedele performs all breast biopsies at the center, with the exception of MRI-guided breast biopsies, which are completed at the hospital.

Recommendations vary about when to start mammograms and how often to schedule them, she acknowledged.

"Check with your primary care doctor or gynecologist to determine your risk assessment," she advises.

"Our emphasis is on education," about prevention and risk, she added. "I follow each patient all the way through, and offer the highest standard of care."

She reminds patients that a mammography uses a very low dose of radiation – "about the same amount as going outdoors" – so there is no reason to fear or delay the procedure. She stressed that 99 percent of breast surgeries are ambulatory.

Three imaging technicians work alongside Dr. Fedele at the center, which also offers diagnostic mammography with ultrasound.

A graduate of Wagner College and the Renaissance School of Medicine at Stony Brook University, Dr. Fedele completed a diagnostic radiology residency program within the Yale-New Haven Health System.

She works in tandem with Lance Jung, MD, a breast surgeon with more than 27 years of experience. Dr. Jung holds a medical degree from New York Medical College and did his surgery training at The University Hospital of Stony Brook and completed a Minimally Invasive Surgery Fellowship at Westchester Medical Center.

*Dara Fedele, MD, DABR
Board Certified Radiologist*



Colorectal | New procedure removes GI tumors without surgery

Gastroenterologists at Richmond University Medical Center are using a minimally invasive procedure — endoscopic mucosal resection, or EMR — to remove precancerous, early-stage cancer or other abnormal tissues and lesions from the digestive tract.

EMR is performed with a long, narrow tube equipped with a light, video camera and additional instruments. During EMR of the upper digestive tract, the tube (endoscope) is passed down the throat to reach an abnormality in the esophagus, stomach or upper part of the small intestine.

EMR makes it possible to remove early-stage tumors without surgery, explained Wallen Chan, MD, board-certified gastroenterologist. Newer endoscopic techniques like EMR are appropriate when cancer has not yet invaded the layers of the colon.

Colorectal cancer, in which cells in the colon or rectum grow out of control, is much more treatable today and survival rates have improved, Dr. Chan confirmed. For stages 0-1 of colorectal cancer,

95% of patients survive; for stage 2, the survival rate is 70%, and for stage 3, it's 35 to 40%. Stage 4 colorectal cancer, which was formerly inoperable, now has a 20 to 25% survival rate, he said.

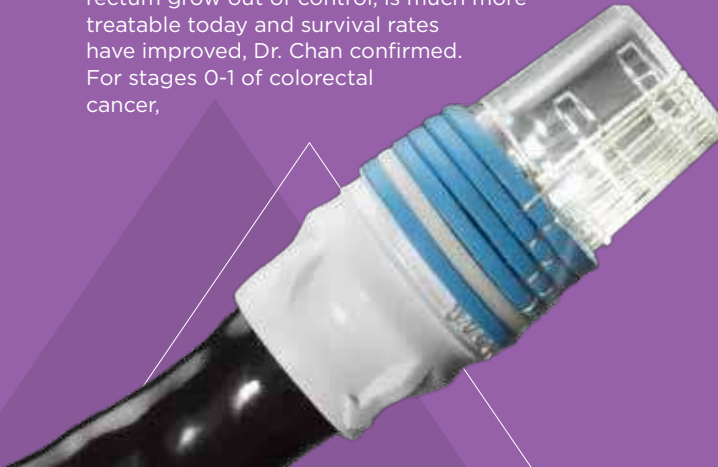
Immunotherapy is available at RUMC for colorectal cancer that has reached stages 3 and 4. The treatment harnesses the power of the body's own immune system to attack cancer cells, and has shown great promise when certain advanced cancers are diagnosed.

For colorectal cancer, the key is screening and early detection, Dr. Chan stressed. "The earlier you catch this cancer, the better the outcome," he said.

The American Society for Gastrointestinal Endoscopy (ASGE) recommends that screening every 10 years begins at age 45 for people with an average risk of colorectal cancer.

Colonoscopy is the gold standard for screening, especially for those with a family history of the disease and for patients whose previous colonoscopies have revealed polyps. More than 450 colonoscopies are performed each year at RUMC by a team of seven gastroenterologists, Dr. Chan said.

While colonoscopies are the gold standard for screening, at home test kits also provide a measure of screening that can lead to early detection of colorectal cancer. In 2023, the Department of Oncology distributed over 100 Fecal Immunochemical Tests (FIT kits) at community events throughout Staten Island.



Prostate | Specializing in detection and treatment

Prostate cancer is one of the most common cancers in men. In fact, about 288,000 new cases of prostate cancer are diagnosed in the country every year, according to the National Cancer Institute.

Prostate cancer starts in the prostate gland, an organ under the bladder that makes part of the fluid in semen. Prostate cancer occurs when cells in the gland grow out of control. This cancer is usually slow growing, taking years to grow large enough to cause problems.

As with other cancers, treatment for prostate cancer works best when the cancer is found early. The exact cause of prostate cancer is unknown. Most prostate cancers happen by chance, or due to shared environmental and common genetic factors.

“As patients get older, they have a higher risk of developing prostate cancer,” said Richard Maggio, MD, board-certified urologist at RUMC. “In fact in autopsy studies, about 80% of men over the age of 80 have some cancer in the prostate.”

Prostate cancer normally does not cause symptoms in its early stages. In fact, most men do not know they have prostate cancer until it is found during a routine medical screening.

When unusual symptoms are noticeable, they are most often problems with urinating. Typically, noticeable symptoms of prostate cancer do not occur until the cancer has begun to spread beyond the prostate, or it has metastasized in other parts of the body.

The most common way to check for prostate cancer is to have a routine prostate-specific antigen (PSA) blood test and prostate exam.

“Prostate cancer screenings should happen on a yearly basis

To increase early detection of prostate cancer, throughout 2023 the Department of Oncology provided free prostate-specific antigen (PSA) blood tests at community events throughout Staten Island. Over 100 PSA tests were performed throughout the year.

for men over the age of 50,” noted Dr. Maggio. “This is the best way to catch prostate cancer early.”

If a primary care physician identifies signs of prostate cancer, they will refer the patient to urology for diagnosis, as well as oncology for management.

A variety of tests will help determine the severity of the condition and which treatments are most appropriate.

Radiation therapy is one of the main methods used by the team at RUMC to treat prostate cancer. A highly effective way to destroy cancer cells, radiation therapy uses high-energy radiation channeled through a linear accelerator to target tumor DNA.

Other treatment methods, such as chemotherapy, hormonal therapy and surgery, may also be utilized in combination or alone. The oncology team at RUMC will work with each patient to create a plan that takes into consideration the patient’s specific diagnosis, overall health and other factors to determine the most appropriate methods for treatment.



*Richard Maggio, MD
Board Certified Urologist*

Lung | Hope for patients thanks to state-of-the-art care

Each year, more people die of lung cancer than of colon, breast and prostate cancers combined, making it the No. 1 cause of cancer-related deaths in the U.S., according to the American Cancer Society.

As the borough with the highest percentage of smokers, Staten Island has significantly higher rates of asthma, respiratory illness and lung cancer than the rest of New York City.

The Oncology Department at Richmond University Medical Center offers comprehensive lung cancer treatment to ensure that patients receive the most advanced medically proven effective care. The hospital first earned accreditation for its oncology services over 80 years ago from the American College of Surgeons Commission on Cancer, making its cancer care program the longest consecutively accredited program of its kind on Staten Island.

Because of recent advances in cancer treatment, patients have more reason to be optimistic than ever before. Most patients with lung cancer will undergo both nonsurgical and surgical treatments, including radiation therapy, chemotherapy and immunotherapy, said Keith Diaz, MD, chief of pulmonology.

Smoking is the primary cause of lung cancer, accounting for about 90% of cases, according to the American Lung Association. Cigarette smoke contains carcinogens that damage the cells in the lung tissue. Over time, this damage can cause cells to grow and change abnormally, developing into cancer cells.

Dr. Diaz helped to create RUMC's successful lung screening program, one of the most advanced in New York City. A lung screening involves the use of a low-dose computed tomography (CT) scan, which produces cross-section images of the lungs.

The experienced team of board-certified oncologists at RUMC uses minimally invasive techniques, including the da Vinci System, to stage and surgically remove cancerous tumors whenever possible. This means shorter hospital stays, less postoperative pain, and a faster return to day-to-day activities.

All cases requiring surgery are reviewed by RUMC's multidisciplinary tumor board to ensure treatment plans follow national guidelines. Found in their earliest stages, 90 percent of lung cancers are curable, Dr. Diaz said.



Tobacco Cessation | Targeting Staten Island's high smoking rate

Helping smokers conquer their addiction through education and motivation is the goal of the tobacco cessation program offered at Richmond University Medical Center.

A recent New York City Community Health Survey found that adult smoking rates continue to be significantly higher on Staten Island, at 19.9%, than the Bronx (13.7%), Brooklyn (11.2%), Manhattan (8.1%), and Queens (9.6%).

Available to people 18 and older, the RUMC Nicotine Education and Treatment Program is free and features face-to-face counseling with a customized approach to quitting.

In hour-long classes that run four to six weeks, certified Lung Nurse Navigator Nancy Sayegh-Rooney, RN, ONN-CG, NCTTP, teaches participants about the effects of first-hand and second-hand smoke, how to gradually decrease their tobacco use, and how to use deep-breathing exercises to ease withdrawal symptoms.

“Knowledge is power,” Rooney said. “We teach participants about tobacco – the product, the effects, the addiction and the science behind it – so they can make an educated choice to change. We have a lot of success with one-on-one coaching.”

Most participants are smokers in the 50s and 60s “who have had enough” and are ready to quit, she added. The program also addresses vaping, which becomes an addiction within seven seconds of the first inhalation.

A critical component to the tobacco cessation program is lung cancer screening, offered through the RUMC Oncology Department. Images derived from low-dose, 15-minute

CT scans of the chest are the gold standard for detecting abnormalities in the lung.

Supporting patients every step of the way, Rooney advocates for all lung cancer screening patients by setting up appointments and accompanying them to the scan. Follow-up phone calls are made with the results and, if needed, she works with the patient on next steps for treatment.

The RUMC Pulmonary Center provides state-of-the-art services for diagnosis of chronic obstructive pulmonary disease (COPD) and lung cancer as well as the latest medical and surgical treatment options. The center is directly connected to the hospital's Cardiopulmonary Rehabilitation Center, which offers programs and services that improve lung health and reduce the demand for future hospital visits.

Lung cancer is one of the most common causes of cancer deaths in the country. Early detection and improvements in standards of treatment are saving lives. When detected early, lung cancer has a 90% curable rate when found in its earliest stages.



Community outreach highlights



▶ To promote the importance of early detection of colon cancer, RUMC distributed free at-home Fecal Immunochemical Test (FIT) Kits to the community during the month of March, which is National Colon Cancer Awareness Month.

▶ On March 25, RUMC collaborated with the Pride Center of Staten Island to provide a health fair for the community. RUMC distributed free Fecal Immunochemical Test (FIT) Kits, and provided screenings for prostate cancer.



▶ Staff dressed in blue on March 3 in recognition of National Colorectal Awareness Month, showing their support for those fighting the disease, to honor their caregivers, and to remember those lost to the disease.



▶ On May 13, Richmond University Medical Center collaborated once again with the Pride Center of Staten Island to hold a health fair at Empire Outlets shopping mall. In addition to other free health screenings, free Fecal Immunochemical Test (FIT) Kits were distributed to the attendees and prostate cancer screenings were provided.





▶ Urologist, Richard Maggio, MD, hosted a Town Hall at the Jewish Community Center of Staten Island on June 6 educating a crowd of over 75 attendees on the risk factors, symptoms, and treatments available for prostate cancer.

▶ On June 28, Subaru of America, Island Subaru, and the Leukemia and Lymphoma Society donated over 250 blankets and financial support of over \$27,000 to Richmond University Medical Center's Center for Cancer Care.



▶ On June 17, RUMC participated in Juneteenth celebrations held at Snug Harbor Cultural Center. In addition to promoting healthcare services to attendees, staff distributed take home colorectal cancer test kits.

▶ On September 11, Richmond University Medical Center provided health screenings and palliative care information at a meeting of Staten Island clergy held at St. Patrick's School in Richmondtown. Nearly 20 clergy were provided with Advanced Directive information and/or were screened for prostate cancer.



Community outreach highlights



▶ On September 21 and 22, in partnership with the New York State Court Officers and Fans for the Cure, RUMC provided free prostate cancer screenings in honor of September as National Prostate Cancer Awareness Month. Nearly 50 court officers, attorneys, and staff at the courthouse in St. George were screened and had their results analyzed by RUMC's oncology department.

▶ HYLAN hosted its 5th Annual Golf Outing on September 25 at the Metedeconk National Golf Club in Jackson, NJ. The event fundraised \$75,000 to support the palliative care program.



▶ On October 28, Dragon Kim's Karate USA presented President and Chief Executive Officer, Daniel J. Messina, PhD, FACHE, with a check for \$10,000 to support the breast cancer care programs at RUMC as well as its Comprehensive Breast and Imaging Center. The funds were raised by the students of the martial arts school who sold pink karate belts throughout the month of October, which is National Breast Cancer Awareness Month.





▶ On October 29, staff, family and friends joined over 10,000 people from across New York City to participate in the American Cancer Society's annual Making Strides Against Breast Cancer Walk-Statens Island.



▶ RUMC held a "Turquoise Takeover" event on November 1 in honor of National Lung Cancer Awareness Month. Turquoise is the official color of lung cancer awareness. Information about lung screening was provided and the lights were dimmed in the hospital to remember those lost to the disease.



▶ Richmond University Medical Center participated in the Staten Island Economic Development Corporation annual Health & Wellness Expo at the College of Staten Island. RUMC provided free at-home colon cancer screening kits and offered prostate cancer tests to attendees. Over 40 kits were distributed and nearly 20 attendees were tested for prostate cancer.

Comprehensive Breast and Imaging Center

▶ **718-818-1161**

Cancer Service Navigator

▶ **718-818-1485**

Cancer Services Program (NYSDOH Screening)

▶ **718-818-1141**

Center for Cancer Care

▶ **718-818-3000**

The Center for Integrative Behavioral Medicine

▶ **718-818-6132**

Gynecologic Oncology

▶ **718-818-2109**

Inpatient Oncology

▶ **718-818-4690**

Lung Nurse Navigator

▶ **718-818-2391**

Mammography Appointments

▶ **718-818-1161**

Outpatient Clinics

▶ **718-818-4570**

Palliative Care

▶ **718-818-4104**

Pediatric Oncology

▶ **718-818-4399**

Radiation Therapy

▶ **718-876-3000**

Rehabilitation Services

▶ **718-818-3163**

Smoking Cessation

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General Cancer Inquiries

▶ **718-818-1084**

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