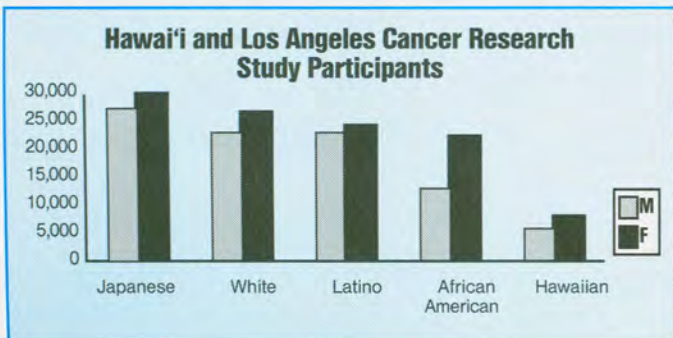


We are pleased to present the second newsletter of the Cancer Research Study. It's time to update you about our activities during the past year and to inform you of our future plans.

WE HAVE A NEW NAME!

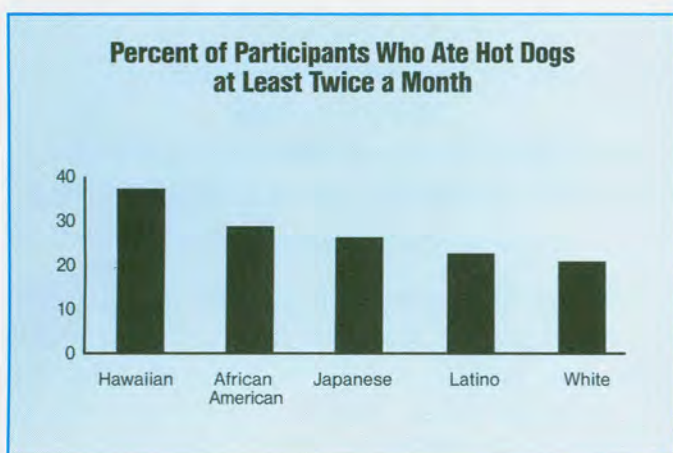
In our last newsletter we mentioned that this important study is one of the largest and most ethnically diverse in the world. To add to the ethnic diversity, the University of Southern California joined with the University of Hawai'i to include residents of both states. The following graph shows the current breakdown of study participants in our larger ethnic groups:



We are very excited about this diversity. You may wonder why this ethnic diversity is so important to our research team. The reason is simple. Disease patterns for all of the major cancer sites are very different among the ethnic/racial groups that make up our study. For example, Hawaiians have low prostate cancer rates, but high lung cancer rates. On the other hand, Japanese have low lung cancer rates, but high rates of stomach cancer. Whites have low rates of stomach cancer, but high breast cancer rates. In contrast, African Americans have low thyroid cancer rates, but high prostate cancer rates. Latinos have low rates of colon and breast cancer.

We want to know why.

Ethnic diversity contributes to variation in the dietary patterns of our study participants. For example, the figure below shows how the consumption of hot dogs differs among the ethnic groups. We believe, as do other researchers, that eating habits contribute to one-third or more of all cancers in the United States today.



Foreign-born subjects also add to the diversity of our study because they are more likely to have dietary habits that differ from U.S. born subjects. Fifty-two percent of our Latino participants are foreign-born! Since we asked you how long you have lived in the United States, we will be able to see how dietary habits change over time.

The ethnic diversity of our subjects allows us to study the dietary factors that may contribute to the differences in disease rates.

During the past year we have been busy processing all of the questionnaires and calling participants for missing information.

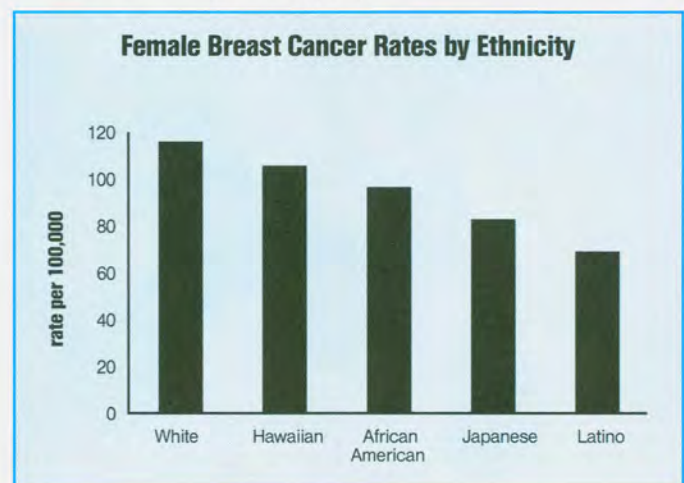


Shirleen Saiki at the optical scanning machine.

As part of our survey, we have begun two small studies within the past year. One study will examine the genetic causes of breast cancer among high risk families. The other study will collect blood specimens from some participants in order to examine both dietary and genetic causes of cancer.

BREAST CANCER AND MAMMOGRAPHY

Statistics show that a woman has about a one in eight chance of being diagnosed with breast cancer in her lifetime. This makes cancer of the breast the most frequently occurring cancer among women in the United States. However, the risk of developing breast cancer varies in different ethnic/racial groups, as shown in the following graph:

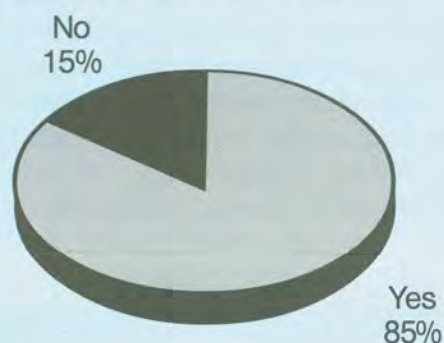


Understanding the causes of breast cancer is a high priority of our research team. We are dedicated to studying the various dietary factors that may contribute to this dreaded disease. Of course, we will inform you of everything we learn along the way.

Early detection is still the key to effective treatment and improved survival from breast cancer.

Mammography is currently the most effective method of screening for breast cancer. It uses a low dose X-ray to examine the internal structure of the breast for any abnormalities. Mammography can detect cancer before a woman or her physician can detect a lump by physical examination. According to the National Cancer Institute, the five-year survival rate for women whose tumors haven't spread beyond the breast is 92%! The figure below shows that 85% of the women in our study had a mammogram. Of these women, 56% had a mammogram within the last year.

Ever Had a Mammogram?



WHERE TO GET MORE INFORMATION

To learn more about breast cancer (or any cancer) and to receive free publications, contact:

- **National Cancer Institute**
Cancer Information Service
1-800-4-CANCER
- **American Cancer Society**
1-800-227-2345



Cancer Research Center
University of Hawai'i
1236 Lauhala Street, Suite 407
Honolulu, HI 96813

Address Service Requested

**the Hawai'i
and Los Angeles
Cancer Research
Study**



Three of our laboratory technicians: Rose Rahman, Traci Johnson (seated) and Enrique Zelaya.

FUTURE PLANS

From time to time, we need to obtain updated information from our study participants. Next year we will be sending you a **short** follow-up questionnaire. We will be asking you about recent illnesses and about your current use of vitamin and mineral supplements. We hope that you will continue your support of our research by returning your completed questionnaire.

Our entire research team thanks you for your participation. Without each and every one of you, this important study would not be possible.

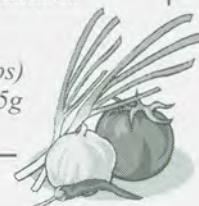
Here is an easy, delicious and healthful recipe for you.

SPANISH RICE WITH CHICKEN

- 1 c. uncooked rice
- ½ c. chopped onion
- ¼ c. chopped green bell pepper
- 1 Tbsp. vegetable oil
- 1 lb. skinless chicken breasts
- 2 8-oz. cans tomato sauce
- 1 ½ c. boiling water
- ½ tsp. salt
- dash of pepper

Boil chicken breasts until fully cooked, de-bone and chop. Rinse rice with water and drain well. Saute rice, onion, and green pepper in oil in a non-stick pan over medium heat. Add chicken and remaining ingredients. Bring to a boil. Turn heat to low. Cover and simmer for 20 minutes or until rice is tender and sauce is absorbed. Yields: 6 servings

Nutrient Information 1 Serving (1 1/4 cups) provides: Calories 260 Protein 25g Fat 5g Vitamin A 800I.U., Vitamin C 20mg



Non-Profit Org.
U.S. POSTAGE
PAID
Honolulu, HI
Permit No. 278