David Nanod felt nervous when he was diagnosed with bladder cancer in January 2015. His doctors asked him if he wanted to be a part of a clinical trial provided through the University of Hawai‘i Cancer Center. Nanod who lives on Moloka‘i agreed because it was available in Hawai‘i.

“I was hoping for the best treatment, so I decided to participate. I probably would not have done it if it was anywhere else besides Hawai‘i. The logistics are too drastic to go all the way over to the mainland for the treatment,” said Nanod.

At any given time there are up to 150 cancer clinical trials available in Hawai‘i. Since the early 1980s the UH Cancer Center has treated nearly 6,000 patients on these trials administered through the Hawai‘i Cancer Consortium partner hospitals and community oncologists’ offices.

“Clinical trials will usually offer the latest state-of-the-art treatment for patients in Hawai‘i so they don’t have to go to the mainland to get that treatment. They can then be surrounded by support from family and friends,” said Charles Rosser, M.D., associate director of the UH Cancer Center’s Clinical and Translational Research Program.

Continued on page 5
Dear Friends,

With autumn comes seasonal changes, although often less pronounced in Hawai‘i than elsewhere in the world, unless you count VOG and humidity as seasonal changes. It seems fitting to discuss transitions at the University of Hawai‘i Cancer Center as we head into autumn, and prepare to launch a search for a new cancer center director. This search for a new director is one of several key steps we are taking towards renewing our designation from the National Cancer Institute.

These steps are guided by feedback we received from the Cancer Center’s External Advisory Committee (EAC), which made its annual visit in June. Our readiness for renewal of our NCI designation will be informed by how we respond to guidance from our EAC. The EAC is composed of scientists and administrators from cancer centers around the nation. Nearly two-thirds of our Cancer Center’s EAC are newly acquired, following a faculty-driven nomination process to find national advisors of greatest relevance to our Cancer Center. The EAC members met with Cancer Center faculty and leadership in June, along with Hawai‘i legislative leaders, and provided a blue print for strengthening the Cancer Center in preparation for renewal of our designation.

Although something we would anticipate, it is vital to note that the EAC members strongly recommended that the Cancer Center work closely with its broad base of stakeholders in order to keep its NCI designation. If the designation is lost, they said, it would not be regained easily, if at all. Losing the designation would compromise the ability of the Cancer Center to bring its more than $20 million in federal funding into the Hawaiian economy. More than 80 percent of the NCI’s $5 billion in extramural funding goes to the 68 cancer centers that have NCI designation.

The EAC also emphasized the need to (1) demonstrate a commitment to the UH Cancer Center by UH leadership, state leadership, and leading local hospitals; (2) strengthen and align the scientific programs within the Cancer Center, building strength and synergy around collaborative themes; (3) strengthen and advance the clinical trials operations affiliated with the Cancer Center; and (4) complete infrastructure changes (including development of the shared administrative services at Kaka‘ako that will bring efficiency of operations to the Cancer Center) in order to provide a solid foundation for the recruitment of the next director. Each of these tasks contain a multitude of activities that will keep faculty and staff quite busy in the coming year.

To facilitate the process of strengthening and aligning the scientific programs at the Cancer Center, I have obtained the permission of the UH Mānoa Chancellor to assign Chief Academic Leads from our faculty. Joe Ramos, director of the Cancer Biology Program, and James Turkson, director of the Natural Products and Experimental Therapeutics Program, have been assigned as the Chief Academic Leads.

I have also appointed Dr. Charles Rosser to take Dr. Brian Issell’s place as the head of the Clinical and Translational Research Program, and his spot on the Cancer Center’s Senior Leadership Committee. Issell stepped down from this role in April 2015, and

During the several years that I have been on the Friends board, I have often been asked who are the Friends and what do they do? In brief, the Friends is an organization formed shortly after the UH Cancer Center started operations in the early 1980’s. They were originally founded by local entertainer Ethel Azama and Delores Hill in 1981. The Friends did several fundraising events including the Tosh Kaneshiro Golf Tournament, the Terry Fox Run, Hawaii Marathon of Hope for Cancer Walk and the Patty Smith Memorial Fun Run. Later they started the Mauka Makai. Voyage of Discovery events and most recently the Gala Italia dinner.

During the early years of the Friends, major gifts of equipment were funded to the Cancer Center and grants were provided to several researchers. Over recent years we participated in the opening celebration of the new building and gifted some of the improvements.

During the past two decades, the Friends have provided support for educational and informative events for the UH Cancer Center. These include the Quest for Cure events here on Oahu and the Run for Hope West Hawaii Cancer Symposium and New Frontiers events on the neighbor islands. We have also supported the Hawaii Science Fair/Senior Research Awards, and the Clinical Trial Participation Awards for the Hawaii Society of Clinical Oncology. This publication is also funded in part by the Friends.

Most recent programs added to our annual budget include quarterly “Excellence in Research Awards” which recognize success by individual researchers at UH Cancer Center and provides funding directly to their research. Finally, with the help of Hawaiian Airlines, we have supported clinical trials research by providing travel for neighbor island residents participating in trials under UH Cancer Center auspices. We are presently adding to this plan for residents of Oahu with transportation concerns.

Our involvement is funded by your support and we thank you for it. Be assured that funds received from our donors go directly to the UH Cancer Center via these programs.

CLINICAL TRIALS

We are supporters of local clinical trials which strengthen our relationship with our consortium partner hospitals and clinicians statewide. We are working closely with the Dr. Charles Rosser and others in Senior Management at the UH Cancer Center to assure that clinical trials can be made as easy and trouble free as possible for all trial participants. This involves three basic areas of work. First, creating a database of all prior participants and getting the other information that will smooth the experience. Second, developing a clear, concise description of what patient participation involves from finding out what trials may be available for your particular diagnosis and determining the regular routine of the trial selected, its duration, and any other information that will smooth the experience. Third, making participation easy for all by providing transportation options which make access to the trial hospital or other venue simple and at little or no expense. We need to increase patient participation in the
Nineteen high school and undergraduate students were selected as summer interns to conduct cancer research from June to August 2015 at the University of Hawai’i Cancer Center. These interns did everything from analyzing extracts from natural products for potential cancer drugs to examining smoking habits among adolescents.

The Cancer Center’s program places interns under the guidance of faculty mentors, who help them gain research experience and complete an independent project. At the end of this year’s program, the interns presented their research findings at the first annual poster session open to the public.

The summer internship program enhances Hawai’i’s efforts to build the state’s science and technology workforce. It also provides valuable experience and encouragement to local youth contemplating a possible future in science. A number of past interns have gone on to earn advanced degrees from top universities before returning to work in Hawai’i as physicians and scientists.

The Cancer Center internship program is supported in part by the National Cancer Institute’s Cancer Center Support Grant, Continuing Umbrella of the Cancer Center internship program is supported in part by the National Cancer Institute’s Cancer Center Support Grant, Continuing Umbrella of

**UNDERGRADUATE INTERNS**

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**NEW HIRES**

Hongjun Gao, Ph.D., joined the UH Cancer Center as a postdoctoral research fellow. He will investigate the role of the RasGRP1/Ras gene in controlling cellular growth in skin cancer development. Gao will also explore the function of the RasGRP1 gene in the origin of multiple cancer types and the microRNA signaling pathways being regulated by the gene in cancer development.

Jeffrey Huang, Pharm.D., joined the Clinical and Translational Research Program as an Assistant Specialist and Phase I Project Specialist. He is responsible for developing investigator-initiated clinical trials and early phase clinical trials. He will engage cancer clinicians and researchers to develop early phase clinical trials as lead investigators and work with the pharmaceutical industry to acquire novel agents to test in these trials. Huang will also work with the lead investigators on scientific publications, grant applications, and project reports.
**Four Best Friends Become Young Philanthropists**

“Just as ripples spread out when a single pebble is dropped into water, the actions of individuals can have far-reaching effects.”

– Dalai Lama

**Hi! We are the Best Friends 4 Ever—Devyn, Kiyera, Kendall, and Shaylee. What inspired us to do this started earlier in the year when our school had a fundraiser for the Jump Rope for Heart. But, when we realized that we were too late to raise money for that, we decided to raise money for other things besides that. So we decided on doing a bake sale to raise money for breast cancer research and the Humane Society. We decided on breast cancer because Kiyera’s aunty and Devyn’s great-grandmother are both breast cancer survivors. Kiyera’s aunty got breast cancer right after her baby cousin was born. It was sad, but luckily they found it early so it wasn’t too big. It was super duper scary but luckily she is very strong and brave, and fought the cancer. And now she is cancer free! Devyn’s great-grandmother has also been cancer free for 19 years. We also decided to donate to the Humane Society because Kiyera and Shaylee adopted their dogs there. That is why the bake sale was very important to us and our families. We printed out colorful flyers and fancy pre-sale order forms, and handed them out to everyone we knew about a week prior to the bake sale. We were also invited to sell everything we baked at a wedding! We raised all the money for breast cancer at the wedding because they had many family members die from and survive breast cancer. We sold delicious muffins, scrumptious cookies, velvety brownies, luscious cupcakes, and crunchy rice Krispy treats. We also put the donations in a sparkly red box.”

**Director’s Message**

Continued from Page 2

will continue to serve the Cancer Center in clinical trials-related committees and at various tumor boards. I also plan to transition out of the Cancer Center Director role sometime in 2016 as we recruit a new director based upon the solid base we are forming for the Cancer Center. I plan to be working closely with that future leader of the Cancer Center to sustain the momentum we have achieved in developing a health sciences campus at Kaka’ako that will advance the health of all the people of Hawai‘i.

I would like to extend my appreciation to the Friends of the University of Hawai‘i Cancer Center and to you, the readers of this newsletter, who are some of our most important stakeholders. Your support keeps us at the forefront of cancer research and care.

Times of transition and change are never easy, but we are working hard to ensure a successful future for the Cancer Center, and the people of Hawai‘i.

Mahalo,

Jerris R. Hedges, M.D., M.S., M.M.M.
Interim Director, University of Hawai‘i Cancer Center
Dean and Professor of Medicine
Barry and Virginia Weinman Endowed Chair
John A. Burns School of Medicine
University of Hawai‘i at Mānoa

**Friends of the University of Hawai‘i Cancer Center**

Continued from Page 2

many trials available through the UHCC. In my opinion, simple concise and easily available information is the best way to accomplish this.

Clinical trials are important in several ways other than the possible cures or treatments that they may provide. They are profitable activities that make it attractive for our consortium hospitals and clinicians statewide to work with the UH Cancer Center. This allays the need for a clinical hospital of our own at this time which allows us to operate in concert with many clinical hospitals within a short distance from our Kaka‘ako facility and at substantially less cost. Trials are an important part of our NCI designation both required for our continuing recognition and which in turn provide substantial grant funding to us. Finally and most important to our participating patients, the superior care received during trials is patently linked to superior outcomes.

Aloha,

Earl Stoner, Jr.
President
Friends of the University of Hawai‘i Cancer Center
This started out as a small bake sale, but then it turned out to be way more important and exciting than we thought! But it is very exciting to have nice, little, happy surprises in life. It is what we live for!

A very special thank you to our FAVORITE teacher, Mr. Schwengel for proofreading this, to our family and friends who donated money to our causes, to our parents for making this all happen, (and buying the supplies), and an even greater thank you to all of you for letting us visit the UH Cancer Center on June 5th! It really was special to us. We were very happy to be at the Cancer Center; it made us feel good to know that we are using the money to help other people and not just buy stuff for ourselves.

We were very honored to have visited the UH Cancer Center; it is not every day that we can visit the Cancer Center. Before we thought it was not really a big deal, but the more we learned about how serious breast cancer is, the more important it seemed to us, our families, and our friends.

Contributed by Kiyera Werny, Shaylee Ungos, Devyn Goo, and Kendall Kirton, students at Punahou School.

Clinical Trials Research: The Goal Is to Improve Survival and Quality of Life

Continued from Page 1

Clinical trials may lead to custom-designed treatments (personalized medicine) that can have greater impact on a patient’s specific cancer. Dr. Rosser highlighted the efforts of researchers and clinicians to get trials in Hawai‘i for the most common tumors in the state including breast, prostate, colon, and lung cancers.

“Many times we see dramatic responses. We see tumors melt away, and survival extended dramatically. When we see this happen, that is what keeps us going day in and day out,” said Dr. Rosser.

Clinical trials have provided marked advances in cures, life extension, care, quality of life and prevention. Through these trials personalized care is becoming a reality to fit the specific treatment to the unique patient at the precise time. About half of the clinical trials are for adults and the other half are for children.

“Childhood cancer cure rates have been steadily improving over the past several decades. Although the development of new agents and targeted therapies has made an impact, by far, the biggest contribution to improved survival is the high percentage of enrollment in clinical trials,” said Darryl Glaser, M.D., a pediatric hematologist-oncologist at Kapi‘olani Blood and Cancer Center.

“By having almost every child in the country treated on the same clinical trial, we can quickly learn which treatments are more effective. We are then able to move forward to make further advancements,” stated Dr. Glaser.

The UH Cancer Center provides national cooperative clinical trials through a National Cancer Institute (NCI) Community Oncology Research Program that is funded by the NCI. Taking part in the program has given people in Hawai‘i, including those in underserved and minority populations, access to the best standard treatment and an opportunity for improved care.

Dr. Rosser said, “We have to always look at improving care, we aim to get survival rates to 100 percent.”

To find specific clinical trials offered in Hawai‘i go to http://oncore.cc.hawaii.edu/sip-mobile/sip.html or call (808) 586-2979.
Researchers from the UH Cancer Center and the local clinical community are collaborating to conduct a pilot study on a non-invasive form of breast cancer called ductal carcinoma in situ (DCIS). Partners in this project represent multiple disciplines of pathology, oncology, radiology, epidemiology, and molecular biology.

DCIS is a localized cluster of abnormal cells found in the milk passages or ducts of the breast that have not spread through the ducts into the surrounding tissue. New cases of DCIS have been increasing, most likely due to increased screening by mammography. The American Cancer Society estimates there will be approximately 231,840 new cases of invasive breast cancer and 60,290 new cases of carcinoma in situ in 2015.

When I was sick, I knew that the doctors, nurses, and scientists who were creating the crazy concoction of medicines that I was taking were beyond brilliant. Today, at 23-years-old, I understand that these scientists and their teams are the researchers I see in the halls at the UH Cancer Center, and are the people who helped to save my life and allowed me to be where I am today.

**Contributed by Mari T. Galiher**

Mari Galiher is a former communications intern at the UH Cancer Center. She is currently working on her Master’s Degree in Communications at UH Mānoa.

**A Childhood Cancer Survivor: Memories of Being on a Clinical Trial**

When I was four years old, I was diagnosed with acute lymphoblastic leukemia (ALL). I recall the day I was diagnosed and how distraught my parents were when the doctor shared the news with my family. My parents chose a clinical trial through the University of Hawai‘i Cancer Center. Both of my parents have always felt a trust for, and praised the incredible work of, the Cancer Center. Because of the clinical trial and type of cancer I had, I was fortunate to not have to undergo any radiation or bone marrow transplant. I lost my hair and very proudly flaunted my peach fuzz by refusing to wear hats and wigs. Once a month, I would spend a week in the hospital, which meant that I missed the least amount of school possible for a child undergoing cancer treatment.

**DCIS Pilot Study: Determining Risk for Advanced Cancer**

Researchers from the UH Cancer Center and the local clinical community are collaborating to conduct a pilot study on a non-invasive form of breast cancer called ductal carcinoma in situ (DCIS). Partners in this project represent multiple disciplines of pathology, oncology, radiology, epidemiology, and molecular biology.

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DCIS is often detected before any symptoms develop and is considered a pre-cancer because some cases can eventually become invasive cancers. Presently there is no proven method to identify which DCIS tumors will become invasive cancers and which will not.

The objective of this study is to identify risk profiles for disease progression from DCIS to invasive breast cancer among Hawai‘i’s multiethnic population using sample cases of women who had been diagnosed with DCIS. The study will compare DCIS patients who progressed to invasive breast cancer with DCIS patients who did not.

This information can be used to determine the appropriate course of treatment for women diagnosed with DCIS. “The ability to refine the diagnosis of DCIS, including more precise invasive cancer risk prediction, is critical as we move towards more personalized management of patients with breast disease,” said Dr. Jeffrey Killeen, one of the investigators involved in this study. He is a pathologist at Kapi‘olani Medical Center for Women and Children.

The most common initial treatment for DCIS is surgery—either a breast-conserving lumpectomy or mastectomy. Surgery may be followed by radiation, depending on the size or extent of the tumor. Hormonal therapy may also be recommended if the cancer tests positive for expression of hormone receptors.

The investigators intend to incorporate tumor characteristics, imaging, and molecular gene profiling of DCIS samples from a multiethnic population of cases diagnosed in Hawai‘i. Preliminary data indicate that there may be racial/ethnic differences in the proportion of DCIS cases that progress to invasive breast cancer.

The study will apply established predictors of DCIS progression including age, grade and size of tumor, and additionally evaluate the value of including demographic data such as race/ethnicity; clinical and pathologic factors related to the tumor tissue samples; imaging data such as breast density, ductal enhancement and calcification; and gene profiles to identify DCIS patients at highest risk of progression to invasive cancer. Molecular analyses of breast tumor tissues will be conducted on samples from the Hawai‘i Tumor Registry with greater than 15 years of follow up information.
Compounds Show Potential in Fighting Brain and Breast Cancers

James Turkson, Ph.D., Chief Academic Lead and director of the UH Cancer Center’s Natural Products and Experimental Therapeutics Program, discovered two chemical compounds that effectively stop the growth of brain cancer cells and breast tumors, opening the way for potential new drugs to be developed.

“It is particularly encouraging for brain tumor patients, who do not currently have effective treatment options besides surgery,” said Turkson.

About 15,320 people die from brain cancer each year nationwide. Breast cancer is the most common cancer among American women; about 40,931 die from the disease each year.

The findings, published in the journal Cancer Research, describe the two chemical compounds, a hydroxamic acid-based inhibitor (SH5-07), and a benzoic acid-based inhibitor (SH4-54), that stop the growth of brain and breast cancer cells by blocking a certain function of the Stat3 protein.

“We would like to advance these studies to turn the chemical compounds into new anti-cancer drugs to help patients potentially have better survival chances.”

Why Young Adults Use e-Cigarettes

Pallav Pokhrel, Ph.D., an assistant professor in the Cancer Prevention and Control Program at the UH Cancer Center, researched why young adults use e-cigarettes.

“Despite the obvious relevance of e-cigarettes to public health, thus far, psychological research on e-cigarette use behavior has been limited,” said Pokhrel.

The findings published in Psychology & Health showed that some young adults like e-cigarettes because they serve a social, recreational, and sensory purpose. For example, they enjoy blowing out large clouds of vapor for entertainment. Others assume and believe e-cigarettes are safer than cigarettes.

The young adults who did not use e-cigarettes included reasons such as hassles involved in maintaining the product and inconsistencies in product quality across makes and models.

Researchers, including Pokhrel, would like to focus future studies on how recreational motives affect young adults trying and being addicted to e-cigarettes.

2015 Weiman Symposium

The UH Cancer Cancer Center will be hosting the 2015 Weiman Symposium, an International Conference on Mesothelioma in Populations Exposed to Naturally Occurring Asbestiform Fibers on November 9-10.

Mesothelioma is a deadly disease which kills about 3,200 people a year nationwide. This symposium is aimed at increasing knowledge to better fight this cancer.

Many notable local, national, and international scientists will be featured speakers including event coordinator Michele Carbone, M.D., Ph.D., and Haining Yang, Ph.D., of the University of Hawai‘i Cancer Center.

Marie-Claire King, Ph.D., will be honored as the 2015 Weinman Award recipient. She is noted for several major accomplishments including the discovery of the BRCA1 cancer syndrome, which led to prevention and early detection measures that save the lives of many women.

The Weinman Symposium is made possible through the generous support of The Barry and Virginia Weinman Foundation.

The event will be held at the Sullivan Conference Center at the UH Cancer Center and is free and open to the public.
Tumor Registry Key in Cancer Prevention and Control Efforts

The Hawai’i Tumor Registry (HTR) is finalizing an update of Hawai’i Cancer Facts & Figures that will provide cancer incidence and mortality rates for the years 2008-2012. The HTR, which is consistently a top-performing central registry, received a gold status ranking from the North American Association of Central Cancer Registries this past year for its high quality data.

The HTR has been feverishly working on the much-awaited update led by Principal Investigator, Brenda Hernandez, Ph.D., M.P.H., and Registry Director, Michael Green, C.T.R. Critical expertise has also been provided by Lynne Wilkens, Dr.P.H., co-director of the University of Hawai’i Cancer Center’s Biostatistics and Bioinformatics Shared Resource.

This publication is critically important for informing researchers, service providers, and policy makers about changing cancer risks and health disparities, ensuring that resources are focused to best help our population.

The new Hawai’i Cancer Facts & Figures shows that prostate and breast cancers remained the most common cancers in Hawai’i in 2008-2012. Annually across the state, over 1,000 women were diagnosed with invasive breast cancer and nearly 800 men were diagnosed with invasive prostate cancer. Hernandez reports that the new data show trends in Hawai’i similar to that of the United States overall. The incidence of some of the major cancers including colorectal and prostate are decreasing. Cancers with rising incidence include melanoma and cancers of the thyroid, kidney, liver, bladder, and endometrium. Oral cavity/oropharyngeal cancers have emerged as a top cancer among men. Given Hawai’i’s uniquely multiethnic population and the desire to provide relevant statistics at the local level, the HTR is the only National Cancer Institute Surveillance, Epidemiology, and End Results registry which produces its own ethnic-specific incidence rates. The new report will identify and describe substantial disparities across ethnic groups for a number of malignancies including cancers of the breast, lung, and thyroid, as well as melanoma of the skin.

On the immediate horizon is a release of the new incidence and mortality data. This will be followed by a more complete version of Hawai’i Cancer Facts & Figures, similar in format to the current (CF&F 2010) version. The complete new version will include updates of data on cancer prevention and screening behaviors from the Hawai’i State Department of Health as well as updated cancer screening guidelines. The full report will be made available (in hard copy and on-line in order to increase its accessibility). The HTR plans to update the data annually on-line in order to help to guide cancer prevention and control efforts and resources in Hawai’i.

Update coming soon!