

OUR GOAL: TO END CANCER

How are we going to end cancer? Through Research and Clinical Trials.

The UofL Health – Brown Cancer Center gives patients their best chances when facing cancer. Close collaboration between researchers and physicians allows tomorrow's medicine to be available to our patients first, working in parallel to fight cancer through prevention, early diagnosis, effective therapies and scientific breakthroughs.

Much of our research involves clinical trials where new cancer drugs and diagnostics are tested to advance the science of oncology and improve patient care.



Myth: Clinical trials are only for those with advanced cancer.

Our cancer-specific multidisciplinary clinics offer National Cancer Institute cooperative trials for all stages of cancer.

We continue to be a leader in the testing of cellular therapies including immunotherapy and TILs trials, which have resulted in the prolonged survival of our patients. These trials bring us closer to the day when all cancer patients can declare "no evidence of disease."

THE CLINICAL TRIAL THAT SAVED HER LIFE

In 2013, Lana Boes started experiencing stomach pain, bloating and cramping. Boes mentioned these symptoms to her primary care doctor during an unrelated visit. With her family history of colon cancer and her previous cervical cancer diagnosis, she was referred to UofL Health – Brown Cancer Center for additional testing.

Diagnosed at 42 with colon cancer, Boes underwent surgery that initially was successful, but the cancer returned. After her second surgery, she started chemotherapy. When this first chemotherapy drug failed, she started a second one that had harsher side effects on Boes. This second drug eventually failed too. That's when it was revealed through genetic testing that Boes had Lynch syndrome, a genetic mutation that carries a higher risk for cancer.

At 100 pounds, with no appetite or energy, Boes was physically and mentally tired of fighting the cancer. After nearly two years with multiple surgeries, chemotherapy attempts, blood transfusions and more, Boes' cancer returned again and the chemotherapy that was no longer working was being stopped.

The Brown Cancer Center gave me my life back... and I am forever grateful for the care I received.

- Lana Boes

Feeling like she was running out of options, in 2016 Boes was offered an opportunity to participate in a new clinical trial for an immunotherapy drug that had success treating other types of cancer, but wasn't yet approved for colon cancer. With support from her family, she decided to enter the trial.

"Lana started to suffer not only from the side effects of her cancer progressing, but also the side effects of treatment. It was clear that we needed something new and different," said Rebecca Redman, M.D., Boes' oncologist and deputy director of clinical research at the UofL Health – Brown Cancer Center.

Upon first receiving the treatment, her condition improved almost immediately. The trial gave Boes her appetite, energy, strength and her life back. After two years on the immunotherapy drug, she completed the trial, and five years later her cancer is still no longer detectable and is considered in remission.

After years of planning only how to get through days of treatment, Boes now plans and celebrates every birthday and every milestone. She gives thanks not only to the trial that saved her life, but also to Dr. Redman and the staff at Brown Cancer Center for looking for all possible solutions and noticing her struggle with the chemotherapy treatments. At such a pivotal moment in her life, Boes expressed her gratitude to the Brown Cancer Center for their kindness, care and attention during her journey.



Lana Boes

"The Brown Cancer Center gave me my life back. I traveled to Paris to celebrate being five years cancer-free," said Boes. "I get to try new restaurants and spend time on the water with my husband and our dogs. I get to live my life and I am forever grateful for the care I received at Brown Cancer Center."

The Brown Cancer Center is also grateful for Boes' willingness to participate in the drug trial with no guarantees of success. Not only did Boes' experience with the trial help treat her cancer, but it also opened up new treatment opportunities for future cancer patients. Her participation helped expand FDA approval of this drug to the treatment of cancers with microsatellite instability, including those associated with Lynch syndrome. This generally means insurance companies will cover the treatment and makes the drug available to more patients now that it is approved for more than 15 types of cancer including skin cancer, cervical cancer, lung cancer and some types of breast cancer.

Boes now shares her story through Colon Cancer Prevention Project's Survivor Support Group, where she has found an amazing support system and friends for life. Boes hopes that every person fighting cancer gets the same opportunities she had to face colon cancer and is willing to participate in clinical trials that may not only help them like it did for her, but help other cancer patients have more treatment options in the future.

Now patients can receive world-renowned care in **three Louisville locations:**



Downtown – 529 S. Jackson St.



Northeast – 2401 Terra Crossing Blvd.



Bluegrass – 1460 Bluegrass Ave.

UOFL HEALTH – CANCER SCREENING PROGRAM

For more info visit UofLHealth.org/Screenings or call 502-210-4497

Mammography can lower your risk of dying of breast cancer by 40%.

40 YEARS

Screening is recommended for women 40 and older annually, but can be done earlier for those considered high risk.

Colon Cancer is the #2 cancer killer in the U.S.

45 YEARS

Women and men 45 and older should be screened. How often depends on the type of testing. Colonoscopy is the most effective screening option.

Lung Cancer is #1 in cancer deaths. Smoking is the #1 risk factor.

50 YEARS

Ages 50-80 with a 20-pack-year smoking history or quit within the last 15 years and had a 20-pack-year smoking history should be screened annually.*

*A pack-year is calculated by the number of years smoked, multiplied by the number of packs smoked per day. For example: 2 packs per day x 10 years equals 20-pack-years.