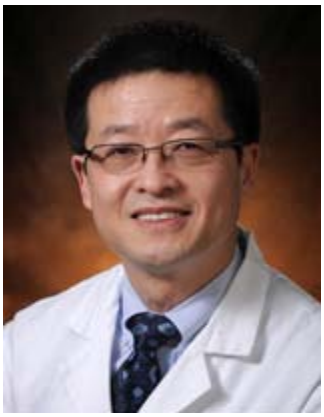
Chinese American Hematologist Oncologist Network (CAHON)

The President Note

It has been 6 years since CAHON was established. There have been a lot of changes in this period of time: tremendous advances in cancer biological oriented therapy globally, thriving development of cancer research and therapy in China, and of course, the success of our CAHON members, including career development, practice improvement and growth of our children.

As the new leaders of CAHON administration, we are committed to continuing to organize and support the needs of Chinese Americans who are working in areas regarding cancer research, therapy, and education. We will continue to establish, facilitate, and consolidate the collaboration between China and USA in hematology-oncology research, new therapy development, patient care, and education. Hope these bi-weekly eNews updates will serve the organization and our members well.



Wei-Jing Sun, MD
President

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Biweekly News and Information Updates for Members

September 1st, 2010

Volume 1, Issue 1

Highlights:

- *New CAHON Management*
- *Contest for Logo for CAHON*
- *Proposed future plans*
- *CSCO Annual Meeting in Beijing*
- *Herceptin improves survival in patients with HER-2 positive gastric cancer*

New CAHON Management Team (2010-2012)

The new CAHON management team formed recently has the following members:

President: Weijing Sun, MD
VP: Yang-Min Ning, MD, PhD
Treasurer: Jeff Ye, MD
Chair, Membership: Tina Li, MD, PhD
Director, Education and Communication: Janice Lu, MD
Director, Clinic Practice Coordination: Zili He, MD
Director, Relationship and General management: Jingzhou Hou, MD

Why Do We Do Newsletters?

As noted from the President's Note on the front page, the new CAHON management team is committed to continuing the excellence of the previous CAHON executive teams and to exploring more novel channels and/or pathways to expand and consolidate our organization, to enhance our professional function and appearance between US-Sino hematology-oncology researchers and practitioners, and to better serve our members for various professional needs.

Timely dissemination of important information and news is critical for an organization to grow and function efficiently. In our initial team meeting held 2 weeks ago, we felt that it is important and necessary for us to have such an e-news letter to energize our organization and to keep our members actively informed about new trends, new plans, and new initiatives. For each letter, we intend to be concise but informative, focusing on major developments or events. In these days, we are not lack of new information; however, we may need more information tailored to our mission and activities. Remember, we serve as a bridge between US and China in the hematology and oncology field.

We hope that our letters are helpful to you in your daily professional activity. We'd like to have your constructive feedback or recommendations on inclusion of oncology news, member's achievements, promotion or relocation, and professional opportunity availability, etc. We definitely welcome you to volunteer for compiling our letters if you are interested in exercising your writing or publication skills. We are looking forward to hearing from you, especially for this first issue.

The e-Newsletter Volunteer Team

Open Call for Logo Design for CAHON

Chinese American Hematologist and Oncologist Network or CAHON is an organization with members who are interested in treating or finding cures for blood diseases and cancers. Our members are unique in that we are trained in both China and America. Our mission is two fold:

A. To foster communications amongst Chinese American medical professionals for the delivery of high-quality health care to patients with neoplastic (cancer) and hematological (blood) diseases.
B. To promote medical information exchanges between the United States and China in the field of oncology (study of cancer) and hematology (study of blood diseases).

The Winning Logo Designer Will be Honored with A Certificate and Cash Prize.

We are calling for design of a logo for CAHON to reflect the mission and identity of this organization. The ideal logo should fulfill the following standards:

1. Simple design.
2. In color or black/white. If it is in color, its symbolism must not be lost if it is copied in black and white.
3. Reflect our primary interests in eliminating cancer.
4. To remind of our mission to serve as a bridge between US and Chinese hematology and oncology community.
5. The designer must agree to release the copyright of the chosen design to CAHON.

If chosen, the designer will receive a cash prize ($100?) and a certificate of appreciation from CAHON.

Volunteers Highly Needed

We'd like to have more volunteers to help fulfill our mission and develop in the future. We are specially interested in any motivated member or their kid (at college or high school) who has strong knowledge and skills on managing websites to maintain and update our website(www.cahon.org). Periodic complimentary pay for the service provided will be negotiable and available. Please contact our website improvement team members.

Working Plans of Team Managements

1) Increase the representatives of CAHON:
   a. Increase the members in all area: academic (including those established, and fellows), practitioners, researchers, pharmaceutical members, and others. Learning from other organization (ACAP, CADA…)
   b. Will consolidate the e-mail address list/system
   c. Needs: secretary, web, news letter circulation
   d. Leaders: **Tina, Zili, Janice**
2) Bi-weekly news letter (e-mail circulation first, then e-mail
   a. News related to new drug development, practice guideline; government policy; job opportunity; education; members' info (moving, promotion,…)
   b. Starting issue: 9/1/2010
   c. Needs: secretary, web…
   d. Leaders **Yang-Min, Janice, Tina**
3) Web site improvement and development and management,
   a. Application info: get from Victor
   b. Looking for technical support.
   c. Needs: maintenance person (motivated, willingness, professional, 'controllable'), fee
   d. Coordinator (temporally) **Weijing, Yang-Min, Ke, Richard, Jeff**
4) Secretary, the key for maintenance and follow up
   a. Ideal person: knows both Chinese and English, professional, willingness
   b. Needs: Fee
   c. Coordinator: **Weijing, Jeff**
5) Collaborations:
   a. In USA: ASCO- Ruirong, Weijing, ASH –Jingzhou, Delong, AACR -Weijing
   b. Cooperative Groups (NSABP, ECOG, SWOG…) - Janice
   c. China: CSCO, CACA and others (USCACA…) Board members…Ruirong…
6) Education (CME, Web):
   a. Cont' and improving
   b. May have increased difficulty: PER, funding cut
   c. Needs: connections, funding (membership fee, Ad in the web…)
   d. Leaders: **Janice, Jing-Zhou**
7) Meeting and Publication: USA and China…*Journal of Hematology and Oncology, Chinese Medical Tribute*: **Delong, Ruirong**
8) Internally and Externally: increasing popularity and availability: Advertisement (CCC), Web, others…
9) Other: application for reciprocal membership of ASCO

The 13th CSCO Annual Meeting will be held in Beijing from Sep. 16-19. Several members of our CAHON will attend and present new developments to our Chinese colleagues. There is still time to make your arrangement to attend if you are interested in how CSCO works in China. We are working hard to establish a long-term relationship with CSCO and hope this will help our members to get a good opportunity to interact with our Chinese colleagues in meetings or at their workplaces in the future.

Biweekly News and Information Updates

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We are on Web:
http://www.cahon.org/

Our Logo?

(Please Submit Your Design)

CAHON's MISSION

CAHON, founded by Chinese American Hematologists and Oncologists in 2005, is dedicated to fostering communication amongst Chinese-American medical professionals for delivering high-quality health care to patients with neoplastic and hematological diseases, and to promoting medical information exchange between the United States and China in the field of hematology and oncology. CAHON strives to serve as a vital bridge between American and Chinese Hematology-Oncology communities in the levels of academia, industry, government regulation, and private practice.

Herceptin Improves Survival in Patients with HER2-Positive Advanced Gastric Cancer

A randomized, international, Phase 3 controlled trial in patients with HER2-positive advanced gastric or gastro-oesophageal junction cancer showed that trastuzumab plus chemotherapy improved survival as compared to chemotherapy alone. The improvement in the median survival was approximately 2.7 months. The results were published in the most recent issue of The Lancet. (http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(10)61121-X/fulltext).

Based on the paper, a total of 594 patients from 24 countries were randomized 1:1 to study treatment (trastuzumab plus chemotherapy, n=298; chemotherapy alone, n=296).The chemotherapy regimen consisted of capecitabine plus cisplatin or fluorouracil plus cisplatin, every 3 weeks for six cycles, or chemotherapy in combination with intravenous trastuzumab. The primary endpoint was overall survival in the ITT population. The median follow-up was 18.6 months (11—25) in the trastuzumab plus chemotherapy group and 17.1 months (9—25) in the chemotherapy alone group, respectively. The median overall survival was 13.8 months (95% CI 12—16) in patients receiving trastuzumab plus chemotherapy compared with 11.1 months (10—13) in those assigned to chemotherapy alone (hazard ratio 0·74; 95% CI 0·60—0·91; p=0·0046).

The most common adverse reactions included nausea (trastuzumab plus chemotherapy, 197 [67%] *vs* chemotherapy alone, 184 [63%]), vomiting (147 [50%] *vs* 134 [46%]), and neutropenia (157 [53%] *vs* 165 [57%]). Overall grade 3 or 4 adverse reactions (201 [68%] *vs* 198 [68%]) and cardiac adverse events (17 [6%] *vs* 18 [6%]) appeared similar between the two groups.

The authors concluded that trastuzumab in combination with chemotherapy can be considered as a new standard option for patients with HER2-positive advanced gastric or gastro-oesophageal junction cancer. However, a commentary stated that the findings may raise a moral question about the huge expenditure (possibly as much as $400 million worldwide) for such a modest survival benefit, particularly in countries with limited healthcare resources. Whether this new treatment regimen will become a new standard treatment in the US remains unknown at present. Currently, two- and three-drug combinations are widely used in the U.S for all patients regardless of their HER-2 status. The above findings appear suitable for a selected population of patients with advanced gastric cancer, highlighting the importance of individualizing cancer treatment.