

## PARTNERS...

A newsletter for the partners and providers of Early Detection Works,  
Kansas breast and cervical cancer screening and detection program

### Director's Message

Early Detection Works will not be suspending enrollment this year due to the availability of additional funds from Susan G. Komen for the Cure Mid-Kansas Affiliate, and Susan G. Komen for the Cure Greater Kansas City Affiliate. The Race Against Breast Cancer in Shawnee County continues to help EDW leverage funding by providing mammograms for local women. In addition, the ACS chapter of SE Kansas, and the Circle of Hope Support Group Private Community Foundation of Dodge City have provided additional funds for breast and cervical cancer screening and diagnostic services within their geographic area. Thank you to every single person who donated their time, money, ran or walked in a race, or in any other way contributed to keep Early Detection Works services available to low income, uninsured women.

The Program has experienced an increase in 'no shows' for this fiscal year. Currently, the state average for enrolled women who fail to keep appointments (or whose forms are not sent to EDW for payment) is as high as 45 percent in one region with a statewide average of 38 percent. We can NOT pay bills without client forms, so please submit forms to ensure proper and prompt payments.

We often receive checks returned to us with the notation 'not our patient' and a year later, we receive a letter stating we did not pay for services for that same woman. We pay bills based on what is submitted to us – so if you receive a check, please review your records carefully before returning it to us stating that the woman is not your patient.

To help ensure checks are not returned to us in error, we will send a letter with a copy of your returned check asking you to verify whether or not the check was returned to us in error. Please respond to claim the funds within 15 days of receiving the letter or the payment will be returned to the EDW fund account. At that point, we will have made every effort to pay the bill, and should you try to claim it at a later date, it will not be paid. Please talk with your regional nurse if you have questions or need assistance.

EDW has applied for colorectal cancer screening funds in order to expand the EDW program to include this important cancer screening. Our proposal includes both FOBT and colonoscopy services for asymptomatic people. This is an opportunity to increase screening among low income, uninsured men and women between the ages of 50 and 64. Watch for updates in the summer issue of Partners!

*Janet Neff, Director  
Cancer Prevention and Control Program*



**HELP US "GO GREEN" by filling out and returning the enclosed postage paid card with your e-mail address, and future copies of this newsletter will be sent to you electronically!**

[www.preventionworkskansas.org](http://www.preventionworkskansas.org)



### Regional Nurses

#### Northeast

Linda Redding, RN  
785-832-1701

#### North Central

Karla Schmidt, RN  
620-241-6465

#### South Central

Sherry Haworth, RN  
316-660-7332

#### Southeast

Stephanie Thompson, RN  
620-235-7136

#### West

Shelly Nelson, RN  
Toll-Free  
1-877-275-5302

### Early Detection Works

Toll-Free Hotline  
1-877-277-1368



### **Who is eligible for EDW?**

Women **50-64** are eligible for CBE, mammogram, pelvic exam and Pap test (based on Pap test history) if 225 percent of federal poverty level and uninsured or have hospitalization-only health insurance with at least a \$2,500 unmet deductible. Women **40-64** are eligible for CBE, mammogram\*, pelvic exam and Pap test (based on Pap test history) if 225 percent of federal poverty level and uninsured or have hospitalization only health insurance with at least a \$2,500 unmet deductible.

Women **under 40** who are symptomatic are eligible for diagnostic breast or cervical cancer testing if 225 percent of the federal poverty level and uninsured; in other words, eligible for treatment through the Breast and Cervical Cancer Treatment Act (Medicaid) should breast or cervical cancer be diagnosed. Women under the age of 40 must be symptomatic **OR request only a CBE and screening mammogram.\***

**\*EDW has been awarded grant funds from Susan G. Komen for the Cure for routine mammograms for women under the age of 50.** (Asymptomatic women under the age of 50 are not eligible for routine mammography reimbursed by federal grant [CDC] funds. A special thanks to our partners, Susan G. Komen for the Cure, for making these additional services possible.)

### **Cancer Statistics**

Cancer is a group of more than a hundred diseases that cause body cells to mutate and grow out of control. Cancer is the second leading cause of death of women in Kansas. On average, 6,139 women are diagnosed each year with cancer and an average of 2,569 die of the disease annually. Even though women have a lower incidence rate than men for cancer (451 vs. 523.4/100,000), cancer constitutes a considerable burden for women.

#### **Breast Cancer**

Not counting skin cancer, the most frequently diagnosed cancer in female Kansans is breast cancer. In 2005, 1,848 new female breast cancers were diagnosed which represents 30 percent of all cancers diagnosed among females. The age adjusted incidence rate for 2005 was 122.3/100,000 women which is slightly lower than the U.S. (123.6/100,000). It is important to note that aggregated Kansas Cancer Registry data from 2001 to 2005 show that the incidence rate is significantly lower in African-American women than in White women (118.8 vs. 126.0/100,000).

### **Statistics, continued**

Between 2003 and 2007, an average of 394 women died of breast cancer each year. The age-adjusted mortality rate for breast cancer is 24.2/100,000. Although incidence rates are lower, African-American women die of breast cancer at a significantly higher rate than White women (32.7/100,000 vs. 23.6/100,000).

It is estimated that 25.4 percent of women 40 years and older are not current on mammograms. According to the state 2006 Behavioral Risk Factor Surveillance System, those with more than one race, those who have less than a high school education, those who are current smokers, and those who are uninsured were more likely than others to report that they had not had a mammogram within the preceding two years.

In Kansas, women who lack health coverage and live in households with an annual income of 225 percent or less of the Federal Poverty Level are eligible to receive a free mammogram from the EDW program, a federally funded initiative in collaboration with Susan G. Komen for the Cure. During the 2008 calendar year, 4,605 women aged 40 to 64 were screened for breast cancer through this program.

#### **Cervical Cancer**

According to the American Cancer Society (ACS) cervical cancer was once one of the most common causes of death for American women. Because of increased use of Pap tests to screen for the disease, a 74 percent decrease occurred in the annual number of new cases from 1955 to 1992. The ACS expects this decline to continue at four percent each year.

In Kansas, from 2001 to 2005, on average, 107 new cases of invasive cervical cancer were diagnosed annually. The age-adjusted rate of the disease was 7.7/100,000 in 2005, a lower rate than that of the U.S. estimated at 8.5/100,000. Aggregated registry data (2001 - 2005) show that the number of new cases is lower in White than in African-American women.

Between 2003 and 2007, an average of 33 women died of cervical cancer in Kansas each year with a death rate of 2.1/100,000. A similar death rate was observed for U.S. women between 2001 and 2005.

In 2006, it is estimated that 16.4 percent of adult women did not receive a Pap test during the preceding three years. Women with less than a high school education, a household income less than \$25,000, and the uninsured were more likely than others to lack a Pap test in the preceding three years.

## Meet Kelly Nightengale

**Kelly Nightengale** has been the Education/Information Officer for the NE Region's Early Detection Works (EDW) program since January. For over ten years she worked with the disability rights movement at an independent living center. Her past experience involved outreach to people in institutions who were moving into a community setting, and with homeless people with disabilities. Her work in this field covered the spectrum of housing issues for people with disabilities from fair housing advocacy to home ownership. Kelly developed a grant program for first time homebuyers with disabilities that included funds for modifications of purchased homes to make them fully accessible to people with physical disabilities. She worked not only in direct service with consumers, but in collaboration with agencies and housing providers.

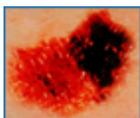


The job of Education/Information Officer provides exciting opportunities for direct outreach to uninsured women as well as collaboration with the leaders of underserved communities. Kelly's goal is to increase EDW enrollment in underserved populations. She partners with the Black Health Care Coalition of Kansas City and faith communities, attending free blood pressure, glucose and cholesterol screening events, offering eligible participants information about EDW and the chance to enroll on site. She has also collaborated with the Kansas City, Kansas Housing Authority to work with their tenants' associations on providing education about EDW at tenant meetings.

In her free time she enjoys spending time with her cats, her partner and his daughter; playing guitar, banjo and accordion; vegetarian cooking; camping; walking and biking. Kelly has enjoyed meeting providers and looks forward to working with EDW partners, providers and NE Region clients.

## May is Skin Cancer Awareness Month

Thank you, Kelly, for demonstrating skin cancer prevention techniques -- wearing a hat and staying in the shade are great for risk reduction! Skin cancer is the most common form of cancer in the U.S. One in five Americans will develop skin cancer in their lifetime. More than one million new cases of skin cancer will be diagnosed in the U.S. this year. The two most common types are basal cell and squamous cell carcinoma, which are highly curable. Melanoma is the third most common and is more dangerous, especially among young people. Well over 100,000 new cases of melanoma will be diagnosed this year in the U.S. One American dies of melanoma almost every hour. In 2008, 8,420 deaths in the U.S. were attributed to melanoma. In Kansas, it is projected at least 550 new cases of melanoma will be diagnosed this year. It is estimated that 65 – 90 percent of melanomas are caused by exposure to ultraviolet (UV) light or sunlight. **ABCD's** of Melanoma can help you remember the symptoms and signs of the disease:



**Asymmetry** - one half is different than the other half.



**Border** - edges are notched, uneven, or blurred.



**Color** is uneven. Shades of brown, tan, and black are present.



**Diameter** is greater than 6 mm.

Other warning signs include: appearance of a new bump or nodule; color spreads into surrounding skin; redness or swelling beyond the mole; pain; tenderness; itching; bleeding; oozing; scaly appearance. Changes in size, color, shape or texture of a mole, the development of a new mole, or any other unusual changes in the skin indicate the need to see a doctor or dermatologist as soon as possible. For more information, resources include:

- ☀ CDC's Choose Your Cover Campaign, [cdc.gov/cancer/skin/chooseyourcover](http://cdc.gov/cancer/skin/chooseyourcover)
- ☀ Environmental Protection Agency SunWise, [epa.gov/sunwise](http://epa.gov/sunwise)
- ☀ American Academy of Dermatology, [melanomamonday.org](http://melanomamonday.org)
- ☀ National Cancer Institute, [cancer.gov](http://cancer.gov)
- ☀ Kansas Cancer Information, [cancerkansas.org](http://cancerkansas.org)

**Reminder for Cervical Cancer Screening Paid for by EDW - Screening Intervals**

For conventional Pap tests and liquid-based cytology tests allowable intervals for normal screening history:

	<b>Cytology Test</b>	<b>Initial Screening</b>	<b>Subsequent Screenings</b>
<b>Women not at High Risk for Cervical Cancer</b>	Conventional	Annually until 3 consecutive documented normal/benign results within a 5 year period	Every 3 years
	Liquid-based	Every other year until 3 consecutive documented normal/benign results within a 5 year period.	Every 3 years
<b>Women at High Risk for Cervical Cancer</b>	Conventional	Annually	Annually
	Liquid-based	Every other year	Follow ASCCP guidelines

Early Detection Works  
 Office of Health Promotion  
 Kansas Department of Health & Environment  
 1000 SW Jackson Street, Suite 230  
 Topeka, KS 66612-1274  
 264-32