

**CANCER HEALTH – July 22**

**Early Lung Cancer Surgery Is Safe and Effective for People With HIV**

A study performed by researchers at the Icahn School of Medicine at Mount Sinai comparing postoperative complications and mortality among HIV-positive and HIV-negative U.S. veterans undergoing surgery for early-stage lung cancer did not see any significant differences in rates of postsurgical complications or death. "Concerns regarding short-term surgical complications should have limited influence on treatment decisions for people with HIV with lung cancer," said study author Keith Sigel, MD, associate professor of medicine, general internal medicine and infectious diseases at the Icahn School of Medicine at Mount Sinai. He added, "In a national antiretroviral-era cohort of lung cancer patients undergoing surgical lung resection, short-term outcomes after surgery did not differ significantly by HIV status."

— **Keith M Sigel, MD, Associate Professor, Medicine, General Internal Medicine, Infectious Diseases, Icahn School of Medicine at Mount Sinai**

**CRAIN'S HEALTH PULSE – July 23**

**Mount Sinai Explains Strategy Behind Beth Israel Revamp**

Mount Sinai's plan to relocate and dramatically reduce the size of Beth Israel is critical to reversing the hundreds of millions in losses the hospital has accumulated in recent years, according to interviews with health system officials and its certificate-of-need application to the state Department of Health. Mount Sinai on Monday filed the application to begin a four-year, \$1 billion reconfiguring of its downtown operations. "The only path is to rebuild the hospital," said Jeremy Boal, MD, executive vice president and chief medical officer of the Mount Sinai Health System. He added, "The current campus is a huge, outdated facility with a massive amount of fixed costs. The infrastructure is past its prime. We're continuing to build out the ambulatory network associated with the hospital because that's where so much of the future is." According to Sabina Lim, MD, MPH, professor of psychiatry at the Icahn School of Medicine at Mount Sinai and vice president and chief of strategy for behavioral health at Mount Sinai Health System, "We're creating a full-thickness continuum of care within one location."

— **Jeremy Boal, MD, Professor, Population Health Science and Policy, Icahn School of Medicine at Mount Sinai, Executive Vice President, Chief Medical Officer, Mount Sinai Health System**

— **Sabina Lim, MD, MPH, Professor, Psychiatry, Icahn School of Medicine at Mount Sinai, Vice President, Chief of Strategy, Behavioral Health, Mount Sinai Health System**

Additional coverage: [Becker's Hospital Review: Law 360](#)

**ONCLIVE – July 23**

**Dr. Galsky on Maintenance Pembrolizumab in Urothelial Cancer**

Matthew Galsky, MD, director of genitourinary medical oncology at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai discusses the HCRN GU14-182 study, which looked at maintenance pembrolizumab versus placebo after first-line chemotherapy in patients with metastatic urothelial cancer. "The current standard of treatment for patients with metastatic urothelial cancer is platinum-based chemotherapy, generally given for six to eight cycles then discontinued due to concerns of increasing toxicity with diminishing benefit," said lead author Dr. Galsky. He added, "Initial chemotherapy could potentially induce immunogenic cell death or cause depletion of immunosuppressive cellular subsets, thereby enhancing the effects of subsequent immune checkpoint blockade."

— **Matthew Galsky, MD, Director, Genitourinary Medical Oncology, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Urology, Icahn School of Medicine at Mount Sinai**

**TARGETED ONCOLOGY – July 24**

**Phase II Trial Considers the Benefit of Switch Maintenance in Urothelial Cancer**

Matthew Galsky, MD, director of genitourinary medical oncology at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai discusses how the phase II HCRN GU14-182 study helps to define the role of switch maintenance therapy in patients with urothelial cancer. The study looked at maintenance with pembrolizumab (Keytruda) versus placebo following frontline chemotherapy in patients with metastatic urothelial cancer. According to Dr. Galsky, "In a few randomized phase III studies, immune checkpoint blockade has already been integrated as a switch maintenance strategy following chemotherapy. Responses seen in these trials could be due to the immune checkpoint inhibitor, the chemotherapy, or the combination."

— **Matthew Galsky, MD, Director, Genitourinary Medical Oncology, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Urology, Icahn School of Medicine at Mount Sinai**

PBS – July 24

### [Why It's So Hard to Predict How Much Funding 9/11 First Responders Need](#)

The idea of getting cancer from searching through the rubble of Ground Zero after the 9/11 attacks — and then standing guard over it for months — didn't occur to Kevin Zweigbaum. It did cross his mind that the swirling dust and fumes from the shattered World Trade Center might be unhealthy. According to Michael Crane, MD, MPH, medical director of the World Trade Center Health Program Clinical Center for Excellence at Mount Sinai. "You can't do standard epidemiology on a disaster like this." He added, "For a scientist, it's a messy situation. The fire department's data made a lot of the case about the terrible, terrible nature of this exposure. It was so, so valuable for clinicians to know."

— **Michael A. Crane, MD, MPH, Professor, Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai, Medical Director, Selikoff Centers for Occupational Health, Medical Director, World Trade Center Health Program Clinical Center of Excellence, Mount Sinai Health System**

INSIDER – July 25

### [Bowel Cancer Rates Continue to Rise in Young People, and Obesity, Genetics, and Diet May Be to Blame](#)

A new study found the proportion of people diagnosed with colon cancer who are under 50 years old rose from ten percent in 2004 to 12.2 percent in 2015. Experts aren't sure what's causing colon cancer more frequently in younger people, but it is clear there's not only one cause. Age is also a major factor. "While the current study rightfully raises alarm bells, you're still a lot more likely to get colon cancer after age 50 than before," said David Greenwald, MD, professor of medicine and gastroenterology at the Icahn School of Medicine at Mount Sinai. He added, "The most important factors associated with an increased risk of colorectal cancer include advancing age and a genetic predisposition to colorectal cancer."

— **David A. Greenwald, MD, Director, Clinical Gastroenterology and Endoscopy, The Mount Sinai Hospital, Professor, Medicine, Gastroenterology, Icahn School of Medicine at Mount Sinai**

U.S. NEWS & WORLD REPORT – July 25

### [Breast Implants Tied to Rare Cancer Risk Recalled](#)

Allergan's textured breast implants will be recalled due to their link to a rare cancer, the U.S. Food and Drug Administration announced Wednesday. The recall stems from concerns about a tumor known as breast implant-associated anaplastic large cell lymphoma. "The recall of these textured implants is a big deal in protecting women from the potential risks of developing, and dying from, this rare type of aggressive lymphoma," said Joshua Brody, MD, director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai. He added, "By preventing further use of these implants, the FDA is helping women to protect themselves from the medically serious and emotionally exhausting effects of these risks."

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [HealthDay](#); [Health](#); [MedPage Today](#); [New York Daily News](#); [Cure Today](#)

CBS NEW YORK – July 25

### [Textured Breast Implant Tied to Rare Cancer Taken Off U.S. Market](#)

Medical device maker Allergan Inc. is recalling a type of breast implant linked to a rare form of cancer. The FDA said it called for the removal after new information showed Allergan's Biocell breast implants account for a disproportionate share of rare lymphoma cases. How these implants lead to cancer is not known. "It is thought that perhaps the implants itself triggers the immune system to react," said Richard Bakst, MD, associate professor of radiation oncology at the Icahn School of Medicine at Mount Sinai. "We know if there is chronic inflammation of any sort, it is a nice backbone for lymphoma to develop." He added, "In most cases, simply removing the implant in the capsule is the primary treatment. In more advanced cases, some patients may receive chemo therapy and/or radiation therapy... so the prognosis in most cases is very favorable and is thought that long-term cure is possible."

— **Richard Bakst, MD, Associate Professor, Radiation Oncology, Icahn School of Medicine at Mount Sinai**

THE SCIENTIST – July 26

### [In Situ Vaccination: A Cancer Treatment a Century in the Making](#)

This past April, Mount Sinai oncologist Joshua Brody and his team announced a clinical trial that delivers immune modulators directly to the tumor environment that stimulate a patient's immune system to treat several types of cancer. The approach is called in situ vaccination, and it can take many forms such as a virus or targeted radiation. What they all have in common is that they are delivered directly into a tumor to help the immune system recognize and attack the malignancy and then, ideally, other cancer cells that have metastasized throughout the body. Along with the clinical trial announcement, Dr. Brody and his team published preliminary data showing that 8 out of 11 patients with lymphoma saw their treated tumors shrink, and in three patients even distant, untreated tumors dwindled in response to the in situ vaccine. The results were so promising, says Dr. Brody, that patients in the new trial will receive a checkpoint inhibitor, which he believes will boost the efficacy of the vaccine. In addition to the new trial testing the combination in lymphoma, breast, and head and neck cancer patients, the team is also conducting preclinical studies testing the technique in liver and ovarian cancer.

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

TODAY – July 26

### [Woman, 24, thought spot under eye was a pimple — it turned out to be skin cancer](#)

About a year ago, Gibson Miller noticed a tiny spot under her left eye. The pink blemish looked like a pimple, but it never went away. She was worried, so she went to the dermatologist for a skin check. Her instinct was right: She had a stage 1 basal cell carcinoma. Since Miller was 9 she played tennis and continued through high school and most of college, which meant she “was constantly outside.” While she started using sunscreen her senior year of high school, she admits that she wasn't always consistent. Dr. James Chelnis, an ophthalmologist at New York Eye and Ear Infirmary of Mount Sinai, who treated Miller, said he often sees patients who have cancer near their eyes because they forget to protect them. “Around the eyes, you are not typically putting a heavy dose of sunblock and it is exposed,” he said. “It is true that a hat and sunglasses do help. But, it is important to pick the right sunblock.”

— **James Chelnis, MD, Assistant Clinical Professor, Medical Education, Icahn School of Medicine at Mount Sinai, Ophthalmology, New York Eye and Ear Infirmary of Mount Sinai**

HEALIO: HEMONC TODAY – July 26

### [HemOnc Today honors Next Gen Innovators](#)

HemOnc Today held a reception at ASCO Annual Meeting to honor its third class of Next Gen Innovators. The publication's 111 Next Gen Innovators — which include clinicians and researchers who specialize in solid tumors, hematologic malignancies and benign hematology — are a highly select group of early career hematologists and oncologists who have advanced their field through innovative approaches in the clinical and research settings. HemOnc Today Editorial Board Members, along with other leaders in the field, nominated exceptional individuals for this honor. Joshua Brody, MD; Benjamin Greenbaum, MD; Thomas Marron, MD; Cardinale Smith, MD; and Che-Kai Tso, MD were among those who were honored.

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

— **Benjamin D. Greenbaum, PhD, Assistant Professor, Medicine, Hematology and Medical Oncology, Pathology, Oncological Sciences, Icahn School of Medicine at Mount Sinai**

— **Thomas Marron, MD, PhD, Assistant Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

— **Cardinale Smith, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Geriatrics, Palliative Medicine, Icahn School of Medicine at Mount Sinai, Director, Quality for Cancer Services, Mount Sinai Health System**

— **Che-Kai Tso, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

PEOPLE – July 30

### [Dozens of 9/11 Responders Watch Trump Sign New Funding Bill: 'We Have an Obligation' to Them](#)

With more than 60 responders from the September 11, 2001 attacks looking on, President Donald Trump on Monday signed into law the hard-fought-for bill that will extend funding for the September 11th Victim Compensation Fund (VCF) for another seven decades. The act provides money for the VCF, which helps financially support 9/11 responders, survivors and their families through 2092 - a necessity considering many have developed various diseases since 2011, due to their exposure to carcinogens like jet fuel, mercury and asbestos as well as other debris and toxins. Some 40,000 of the 76,000 9/11 responders registered with the World Trade Center Health Program at the Icahn School of Medicine at Mount Sinai in Manhattan have health conditions, including 10,000 who have developed various cancers associated with exposure to the toxins at the site, according to program director Dr. Michael Crane.

— **Michael A. Crane, MD, MPH, Professor, Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai, Medical Director, Selikoff Centers for Occupational Health and World Trade Center Health Program Clinical Center of Excellence, Mount Sinai Health System**

MEDPAGE TODAY – July 30

### [Dramatic OS Boost With Kisqali in Young Breast Cancer Patients](#)

Adding ribociclib (Kisqali) to endocrine therapy significantly prolonged survival in women with advanced HR-positive/HER-negative breast cancer, with a 29 percent lower risk of death, according to new research. “This is a study examining the efficacy of ribociclib, one of the CDK 4,6 inhibitors, in combination with an aromatase inhibitor for the initial treatment of premenopausal women with metastatic/advanced breast cancer,” said Amy Tiersten, MD, clinical director of breast medical oncology at The Mount Sinai Hospital. “The majority of breast cancers are hormone receptor positive and CDK 4,6 inhibitors are some of the most exciting new drugs for this type of breast cancer over the course of the last few years. What is truly unique about this study is its sole focus on our youngest patients with breast showing great efficacy for this group of women. Importantly it is also the first study to show a survival advantage for patients receiving the CDK 4,6 versus placebo in the frontline setting.”

— **Amy D. Tiersten, MD, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Oncologist, Breast Cancer Medical Oncology Program, Dubin Breast Center, The Mount Sinai Hospital**

ONCOLOGY TUBE – July 30

### [KEYNOTE-365 in mCRPC Results](#)

William Oh, MD, professor of medicine, hematology, urology, and medical oncology at the Icahn School of Medicine at Mount Sinai, explains the results of KEYNOTE-365, pembrolizumab in metastatic castration-resistant prostate cancer (mCRPC). “KEYNOTE-365 was looking at multiple arms, they reported now three of the arms: A, B, and C and at this meeting, for the first time we’re seeing arm C,” said Dr. Oh. “What was interesting about this was that it was well tolerated.”

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

OBR – July 30

### [Che-Kai Tsao, MD, Regarding the Evolving Landscape of Metastatic Clear Cell RCC](#)

Che-Kai Tsao, MD, associate professor, medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, describes the evolving landscape in the treatment of 1st line metastatic clear cell renal cell carcinoma (RCC). “The treatment of RCC has really evolved in the last two years,” said Dr. Tsao. “We look at various factors. There are patient factors, there are treatment factors, and there are disease factors.”

— **Che-Kai Tsao, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Medical Director, Ruttenberg Treatment Center, The Tisch Cancer Institute, The Mount Sinai Hospital**

OBR – July 30

### [Che-Kai Tsao, MD, on Deciding Between I-O + TKIs Combinations Indicated for the Treatment of RCC](#)

Che-Kai Tsao, MD, associate professor, medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai explains how to decide between the various combinations of immuno-oncology and tyrosine kinase inhibitors (TKIs) indicated for the treatment of second line renal cell. “There is not a lot of data that exists in terms of picking out a combination of first-line treatments and following by a specific type of second-line therapies,” said Dr. Tsao. “We know there are various therapies that have been approved in the second line setting.”

— **Che-Kai Tsao, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Medical Director, Rutenberg Treatment Center, The Tisch Cancer Institute, The Mount Sinai Hospital**

TARGETED ONCOLOGY – August 1

### [CPI-0610 Demonstrates Activity in Patients with Myelofibrosis After Ruxolitinib Failure](#)

Marina Kremyanskaya, MD, PhD, assistant professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, discusses unique findings from the phase II trial investigating the effect of CPI-0610, a bromodomain and extra-terminal protein inhibitor, as treatment for patients with myelofibrosis who previously progressed on ruxolitinib. Dr. Kremyanskaya notes an improvement in bone marrow fibrosis in patients that had sequential bone marrow studies available. “This is exciting because the combination seems to have an effect on the bone marrow environment of patients with MF,” she added.

— **Marina Kremyanskaya, MD, PhD, Assistant Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

ONCOLOGY NURSING NEWS – August 1

### [More Is Needed for Immunotherapy in Lung Cancer](#)

Immunotherapy generated landmark change in the treatment of lung cancer, but there are still some pressing issues and unanswered questions that need to be addressed, according to Fred Hirsch, MD, PhD, executive director at the Center for Thoracic Oncology in the Tisch Cancer Institute at Mount Sinai and professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai. “We need solid clinical trials. We need to be sure we get biopsies from the patients before and after treatment to learn about sensitive mechanisms and resistant mechanisms,” said Dr. Hirsch.

— **Fred Hirsch, MD, PhD, Executive Director, Center for Thoracic Oncology, Associate Director, Biomarker Discovery, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

HEALTHLINE – August 1

### [Breast Implants Being Recalled: What to Know and What to Do Next](#)

The recent recall of textured breast implants has people with them wondering what to do: Leave them, or get them removed immediately? The implants have been linked to a rare cancer known as breast implant-associated anaplastic large cell lymphoma. Joshua Brody, MD, director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai said some types of implants induce inflammation that can increase the chance of developing cancer, and also help “hide” developing cancers from the immune system. “Many cases of implant-associated lymphoma have developed mutations and expression of immune-suppressive proteins, which prevent anti-tumor immune cells from clearing the cancer, and these chances likely begin with the inflammation induced by some implants.”

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**



**MEDICAL XPRESS – August 2**

**[Researchers make immunotherapy work for treatment-resistant lymphoma](#)**

Mount Sinai researchers have developed a way to use immunotherapy drugs against treatment-resistant non-Hodgkin's lymphomas for the first time by combining them with stem cell transplantation, an approach that also dramatically increased the success of the drugs in melanoma and lung cancer, according to a study published in Cancer Discovery. "Using immunotransplant to enhance the efficacy of checkpoint blockade therapy could be broadly significant as these immunotherapies are a standard therapy for melanoma, kidney cancer, lung cancer, and others," said the study's corresponding author Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai. "Even for settings in which checkpoint blockade therapy proves ineffective, our data suggest that its efficacy may be 'rescued' by immunotransplant. This research also suggests that the addition of checkpoint blockade may improve other T cell therapies, such as CAR-T therapy."

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Health Europa](#); [Zee News](#); [ET Healthworld](#)

**ONCOLOGY TUBE – August 2**

**[Upcoming Prostate Cancer PARP Inhibitor Trials](#)**

William Oh, MD, chief of hematology and medical oncology at the Icahn School of Medicine at Mount Sinai shares details on upcoming prostate cancer PARP inhibitor trials. "There are several different companies developing PARP inhibitors in prostate cancer. Over the last few years, we've identified that besides breast, ovarian, and now pancreas cancer, prostate cancer is an important area where DNA damage repair mutations have relevance clinically."

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

**ONCOLOGY TUBE – August 2**

**[The Role of Biomarker Selection Trials in Prostate Cancer](#)**

William Oh, MD, chief of hematology and medical oncology at the Icahn School of Medicine at Mount Sinai elaborates on how biomarker selection trials may help identify in prostate cancer patients. "People heard a lot about AR-V7 a few years back and in metastatic hormone sensitive prostate cancer, unfortunately AR-V7 is really not very prevalent at all so that really won't help us. We are trying to get at whether there are subsets of patients who should get chemotherapy or subsets of patients who should get AR targeted therapies."

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

**DAILY MAIL - August**

**[New York Teacher, 24, Shocked after What She Thought Was Pimple Under Her Eye Turned out to be Skin Cancer](#)**

Gibson Miller, a 24-year-old middle school teacher, noticed a light pink spot under her left eye when she woke up one morning in August 2018. She dismissed it as a blemish but, several months later, it still hadn't gone away. Miller decided to visit her dermatologist, who ordered a biopsy. Within a week, she was diagnosed with basal cell carcinoma, the most common form of skin cancer that would require two surgeries: one to remove the cancer and another to reconstruct the tissue around the eye. The following day, she had reconstructive surgery done by James Chelnis, MD, assistant clinical professor of medical education at the Icahn School of Medicine at Mount Sinai. "The reason we see a higher rate of skin cancer around the eye is that it's very difficult to protect it."

— **James Chelnis, MD, Assistant Clinical Professor, Medical Education, Icahn School of Medicine at Mount Sinai, Ophthalmology, New York Eye and Ear Infirmary of Mount Sinai**

Additional coverage: [Prevention](#); [Yahoo News](#)

ENDOCRINOLOGY ADVISOR – August 2

[Bone Health Essentials: Follow-Up After Breast and Prostate Cancer](#)

For patients with cancer who received hormone-disrupting chemotherapy, improved long-term survival has come with a catch: decreased bone mineral density (BMD). Survivors of prostate and breast cancer and their clinicians need to monitor bone and dental health because the essential hormones used for bone remodeling have been depleted by androgen deprivation therapy and premature menopause and chemotherapy, respectively. Cancer treatment-induced bone loss can occur when the body is depleted of androgens and estrogens, which are essential for bone growth and maintenance. "Androgen deprivation therapy is associated with bone loss and may lead to osteoporosis," said coauthor William K. Oh, MD, chief, Division of Hematology and Medical Oncology and professor of medicine and urology at the Icahn School of Medicine at Mount Sinai in New York City. "Diabetes can also contribute to bone fragility and osteoporosis, and so the two conditions may synergistically cause bone-related issues such as pain and fracture."

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

MSN HEALTH – August 2

[8 Pancreatic Cancer Symptoms You've Probably Been Ignoring](#)

Your skin looking yellow can be one of the clearest symptoms of pancreatic cancer. "Often, patients feel fine until one day a friend notices their eyes look yellow, then they go to the doctor and find they have advanced pancreatic cancer" says Christopher DiMaio, MD, a gastroenterologist at The Mount Sinai Hospital in New York City. Cancers that start near the head of the pancreas can block the bile duct, preventing bile from reaching the intestines, where it helps break down fats and eventually leaves the body in the stool. This bile builds up and causes jaundice, which is yellowing of the skin or eyes, he adds.

— **Christopher DiMaio, MD, Associate Professor, Medicine, Gastroenterology, Director, Therapeutic Endoscopy, Icahn School of Medicine at Mount Sinai**

YAHOO FINANCE – August 5

[Mount Sinai Researchers Make Immunotherapy Work for Treatment-Resistant Lymphoma](#)

Mount Sinai researchers have developed a way to use immunotherapy drugs against treatment-resistant non-Hodgkin's lymphomas for the first time by combining them with stem cell transplantation, an approach that also dramatically increased the success of the drugs in melanoma and lung cancer, according to a study published in Cancer Discovery. "Using immunotransplant to enhance the efficacy of checkpoint blockade therapy could be broadly significant as these immunotherapies are a standard therapy for melanoma, kidney cancer, lung cancer, and others," said the study's corresponding author Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai. "Even for settings in which checkpoint blockade therapy proves ineffective, our data suggest that its efficacy may be 'rescued' by immunotransplant. This research also suggests that the addition of checkpoint blockade may improve other T cell therapies, such as CAR-T therapy."

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Fierce Biotech](#); [The Chestnut Post](#)

**WOMEN'S HEALTH ONLINE – August 5**

### [This Woman Thought She Had a Pimple Under Her Eye—But It Turned Out to Be Skin Cancer](#)

Gibson Miller, 24, noticed she had a spot under her left eye but assumed it was a zit. A year ago, she realized it hadn't gone away and finally decided to see a doctor. Miller's doctor took a biopsy—and that revealed her "pimple" was actually stage one basal cell carcinoma, a type of skin cancer that usually appears as a semi-transparent bump on the skin. "Skin cancer can sometimes mimic a pimple or a blemish, since the first sign of skin cancer can be a red bump that doesn't go away," said Gary Goldenberg, MD, assistant clinical professor of dermatology at the Icahn School of Medicine at Mount Sinai. He added, "In general, basal cell carcinoma (which Miller had) and squamous cell carcinoma, another form of skin cancer, can look like a pimple to the average person."

— **Gary Goldenberg, MD, Assistant Clinical Professor, Dermatology, Pathology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Yahoo Lifestyle](#); [Men's Health Online](#)

**HEALIO: HEMONC TODAY – August 5**

### [Radiation Oncologist Inducted into Honorary Police Surgeons Society](#)

Richard Bakst, MD, associate professor of radiation oncology at the Icahn School of Medicine at Mount Sinai, was appointed as a member of the Society of Honorary Police Surgeons of the City of New York (NYPD). Members of the Society are physicians who exhibit outstanding service and expertise in a specific medical specialty. When service members or their immediate family members are injured, the NYPD calls upon the closest and most appropriate Honorary Surgeon to tend to the patient upon his or her arrival at a medical facility. "As a native New Yorker, it is an honor and privilege to be inducted into the Society and be part of one of the best police departments in the country" said Dr. Bakst.

— **Richard Bakst, MD, Associate Professor, Radiation Oncology, Icahn School of Medicine at Mount Sinai**

**ONCLIVE – August 5**

### [Dr. Madduri on the Potential Impact of CAR T-Cell Therapy in Multiple Myeloma](#)

Deepu Madduri, MD, assistant professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai discusses the potential impact of CAR T-cell therapy in multiple myeloma. According to Dr. Madduri, there are several CAR T-cell products that are being explored in myeloma, most of which target BCMA. "It'll be important to wait for the data to come out of these trials because each product would preclude exposure to another in practice." She added, "Every year, more therapies are being approved in myeloma."

— **Deepu Madduri, MD, Assistant Professor, Medicine, Hematology and Medical Oncology, Urology, Icahn School of Medicine at Mount Sinai**

**SCIENCE DAILY - August 6**

### [Researchers Make Immunotherapy Work for Treatment-resistant Lymphoma](#)

Mount Sinai researchers have developed a way to use immunotherapy drugs against treatment-resistant non-Hodgkin's lymphomas for the first time by combining them with stem cell transplantation, an approach that also dramatically increased the success of the drugs in melanoma and lung cancer, according to a study published in Cancer Discovery. "Using immunotransplant to enhance the efficacy of checkpoint blockade therapy could be broadly significant as these immunotherapies are a standard therapy for melanoma, kidney cancer, lung cancer, and others," said the study's corresponding author Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai. "Even for settings in which checkpoint blockade therapy proves ineffective, our data suggest that its efficacy may be 'rescued' by immunotransplant. This research also suggests that the addition of checkpoint blockade may improve other T cell therapies, such as CAR-T therapy."

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**



URO TODAY – August 6

### [Biology and Genomic Distinctions in Metastatic Urothelial Carcinoma and Upper Tract Urothelial Cancers](#)

Matthew Galsky, MD, director of genitourinary medical oncology at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai discusses research programs and recent findings that drive closer to providing personalized medicine in the treatments in metastatic urothelial carcinoma and upper tract urothelial cancers.

— **Matthew Galsky, MD, Director, Genitourinary Medical Oncology, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Urology, Icahn School of Medicine at Mount Sinai**

EAT THIS, NOT THAT – August 6

### [30 Things Oncologists Do to Prevent Cancer](#)

You're about to hear advice from the last people you'd ever want to meet. Oncologists specialize in the diagnosis and treatment of cancer. If you're talking to one, and you're not at a dinner party, you might be one of the 100 million folks around the world who have it. "I am very careful about keeping up with proven cancer screening interventions," said Amy Tiersten, MD, clinical director of breast medical oncology at The Mount Sinai Hospital. Dr. Tiersten stays current on preventative tests like colonoscopy, skin cancer exams, and gynecologic follow-ups.

— **Amy D. Tiersten, MD, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Oncologist, Breast Cancer Medical Oncology Program, Dubin Breast Center, The Mount Sinai Hospital**

MEDPAGE TODAY – August 7

### [USPSTF Still Pans Screening for Pancreatic Cancer](#)

The U.S. Preventive Services Task Force has issued a "D" recommendation against screening for pancreatic cancer in low-risk adults with no signs or symptoms of this lethal disease. Such recommendations imply moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits. Aimee Lucas, MD, MS, associate professor of medicine and gastroenterology at the Icahn School of Medicine at Mount Sinai explained that with the relatively low prevalence of pancreatic cancer, even an ideal screening test with 99 percent sensitivity and 99 percent specificity would yield 1,000 false-positive results if applied to 100,000 patients. She added, "These false-positive results would require subsequent diagnostic evaluation and accrue additional complications, costs, and patient distress that would cause the risks of screening to outweigh any potential benefit."

— **Aimee Lucas, MD, MS, Associate Professor, Gastroenterology, Medicine, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Healio](#)

ONCLIVE – August 7

### [Dr. Galsky on the HCRN GU14-182 Study Results in Urothelial Cancer](#)

Matthew Galsky, MD, director of genitourinary medical oncology at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai discusses the HCRN GU14-182 Study Results in Urothelial Cancer. "Response rate was a secondary endpoint of the study. In a maintenance study, patients can enter the study having had a complete response (CR) to first-line chemotherapy." He added, "There are differing opinions regarding whether those patients should receive a switch maintenance treatment approach. One side of the argument is that a switch maintenance approach could lead to a real durable complete response in this group of patients."

— **Matthew Galsky, MD, Director, Genitourinary Medical Oncology, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Urology, Icahn School of Medicine at Mount Sinai**

**MYELOMA RESEARCH NEWS – August 7**

**[clonoSEQ Assay Approved in New York to Measure MRD in Myeloma, Other Blood Cancers](#)**

The clonoSEQ Assay — a test that detects cancer cells present in very small numbers in a patient's bone marrow, blood, or tissue sample — now is available to New York residents with multiple myeloma and other B-cell blood cancers. "The approval gives patients in New York access to the standardized, FDA-cleared clinical MRD testing that is already being utilized throughout the rest of the country," said Ajai Chari, MD, director of clinical research in multiple myeloma at the Icahn School of Medicine at Mount Sinai.

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

**ONCLIVE – August 7**

**[Dr. Chari on the Use of Frontline Daratumumab in Transplant-Eligible Patients With Myeloma](#)**

Ajai Chari, MD, associate professor, hematology and medical oncology, Mount Sinai Hospital, discusses the use of frontline daratumumab (Darzalex) in transplant-eligible patients with multiple myeloma. Historically, transplant-eligible patients have been treated with bortezomib (Velcade), lenalidomide (Revlimid) and dexamethasone, says Dr. Chari. However, trials are now examining whether quadruplet regimens may be more effective than triplets. The phase III CASSIOPEIA study showed that the primary endpoint of stringent complete response (sCR) increased from 20% in the control arm to 29% with the addition of daratumumab to bortezomib, thalidomide (Thalomid), and dexamethasone. At a follow-up of 18 months, there was a significant improvement in progression-free survival (PFS) with the addition of daratumumab and minimal additive toxicities, says Dr. Chari.

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

**TARGETED ONCOLOGY – August 9**

**[Research Shifting to Explore Combinations for Treatment of Advanced HCC, Expert Says](#)**

Now that several single-agent tyrosine kinase inhibitors (TKIs) have been ingrained as standards of care to treat patients with hepatocellular carcinoma (HCC) in the first- and second-line settings, the next wave of research is shifting and single agents will become a thing of the past, according to Josep Llovet, MD, PhD, founder and director of the Liver Cancer Program at the Icahn School of Medicine at Mount Sinai. He added, "Now, we're finishing a period of single-agent [therapies] and moving to the next phase, which is combination therapies.... I think we're moving to the next 5 years where we will see combinations of agents in frontline and second line."

— **Josep M. Llovet, MD, PhD, Director, Founder, The Liver Cancer Program, Professor, Medicine, Icahn School of Medicine at Mount Sinai**

**THE SCIENTIST ONLINE – August 12**

**[Two Genes Conspire in Endometriosis and Cancer to Help Cells Migrate](#)**

Two well-known gene mutations work in tandem to allow endometrial cells, the cells that line the uterus, to migrate outside of the organ, a phenomenon characteristic of diseases such as endometriosis and endometrial cancer, according to a study published in *Nature Communications*. In order to gain a better understanding of how exactly these genes were influencing the development of endometrial cancer, researchers genetically engineered 49 mice to express different amounts of the genes. According to Konstantin Zakashansky, MD, associate professor of obstetrics, gynecology, and reproductive science at the Icahn School of Medicine at Mount Sinai, "The value of this paper is really uncovering this intricate mechanism, and once it's known how that drives cancer, you can start to target those genes in hopes of reversing the process or preventing cancer in those at risk."

— **Konstantin Zakashansky, MD, Associate Professor, Obstetrics, Gynecology, and Reproductive Science, Icahn School of Medicine at Mount Sinai**

**RHEUMATOLOGY ADVISOR – August 13**

**[Bone Health Essentials: Follow-Up After Breast and Prostate Cancer](#)**

For patients with cancer who received hormone-disrupting chemotherapy, improved long-term survival has come with a catch: decreased bone mineral density, according to researchers at the Icahn School of Medicine at Mount Sinai. Survivors of prostate and breast cancer and their clinicians need to monitor bone and dental health because the essential hormones used for bone remodeling have been depleted by androgen deprivation therapy and premature menopause and chemotherapy, respectively. “Androgen deprivation therapy is associated with bone loss and may lead to osteoporosis,” said co-author William Oh, MD, chief of hematology and medical oncology at the Icahn School of Medicine at Mount Sinai. “Diabetes can also contribute to bone fragility and osteoporosis, and so the two conditions may synergistically cause bone-related issues such as pain and fracture.”

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

**HEALTHINATION – August 14**

**[What Is Prostate Cancer?](#)**

Unfortunately, there aren't any early warning signs for prostate cancer. The growing tumor doesn't push against anything the body (which is often the cause of symptoms or pain), so the disease can be silent for many years. “We know that prostate cancer is a very common disease—the most common in men,” said William Oh, MD, chief of hematology and medical oncology at the Icahn School of Medicine at Mount Sinai. He added, “We don't know what causes it, but we know that this prostate organ can get cancerous as men get older.”

— **William K. Oh, MD, Professor, Medicine, Hematology, Medical Oncology, Urology, Chief, Division of Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Associate Director, Clinical Research, Tisch Cancer Institute**

**NEW YORK POST – August 14**

**[America's Biggest Cancer Killer: Government's Failure to Back Screenings](#)**

The biggest cancer killer isn't smoking, or a chemical in the environment, or even an inherited gene. It's the failure to screen patients at high risk for the disease. Curing cancer is about detecting it early when it's still treatable. Pancreatic cancer has a dismal nine percent survival rate, partly because it is often diagnosed late, when it has spread too far to be surgically removed. “Screening can find lung cancers when they are still highly curable,” said Claudia Henschke, MD, PhD, clinical professor of molecular and interventional radiology at the Icahn School of Medicine at Mount Sinai.

— **Claudia I. Henschke, MD, PhD, Clinical Professor, Molecular and Interventional Radiology, Icahn School of Medicine at Mount Sinai**

**CANCER NETWORK – August 15**

**[Does Evidence Support Screening for Pancreatic Cancer?](#)**

The U.S. Preventive Services Task Force found that imaging-based screening for pancreatic cancer can detect the malignancy in individuals with high familial risk based on a review published in *JAMA*. But the evidence base for screening is still substantially limited and the organization recommends against screening in asymptomatic adults. According to Aimee Lucas, MD, MS, associate professor of medicine and gastroenterology at the Icahn School of Medicine at Mount Sinai who was not involved in the study, “With this relatively low prevalence, even an ideal screening test with 99 percent sensitivity and 99 percent specificity would yield 1000 false positive results if applied to 100,000 patients.” She added, “These false positive results would require subsequent diagnostic evaluation and accrue additional complications, costs, and patient distress that would cause the risks of screening to outweigh any potential benefit.”

— **Aimee Lucas, MD, MS, Associate Professor, Gastroenterology, Medicine, Icahn School of Medicine at Mount Sinai**

**TARGETED ONCOLOGY – August 15**

**[Expert Highlights Importance of Molecular Testing in Patients With Lung Cancer](#)**

Fred Hirsch, MD, PhD, executive director at the Center for Thoracic Oncology in the Tisch Cancer Institute at Mount Sinai and professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai shares a message with oncologists regarding molecular testing in patients with lung cancer. According to Dr. Hirsch, the most important message is that molecular characterization of the patient's tumor must be done in order to best treat the patient. He added, "Today's lung cancer treatments are mainly based on the molecular profile of patients, especially in the setting of advanced disease. Understanding a patient's molecular profile is essential in selecting the right treatment."

— ***Fred Hirsch, MD, PhD, Executive Director, Center for Thoracic Oncology, Associate Director, Biomarker Discovery, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai***

**ONCOLOGY TUBE – August 16**

**[Results Of Novel In Situ Vaccine: Vaccine Is Created Directly At The Tumor Site, Minor Side Effects Like Fever Or Flu Like Symptoms](#)**

Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai discusses vaccines. "By vaccine, we mean a therapeutic vaccine, a vaccine to treat a problem that's already there, not a preventative vaccine. He added, "This therapeutic vaccine is designed to treat lymphoma, and it's exciting for us because now we have a new ongoing trial combining the vaccine with a new immunotherapy."

— ***Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai***

**ONCOLOGY TUBE – August 16**

**[Combining Chemo & Immunotherapy Did Not Help Patients: Hope To See Survival Level Off As Data Matures](#)**

Nicholas Rohs, MD, assistant professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai discusses treatment options for cancer patients. "I hope we see as the data matures that the survival levels off, and that there will be a group of patients that have long-term survival." He added, "We've seen that with a lot of other frontline immunotherapies that some patients are living significantly longer when we get them access to these drugs early on."

— ***Nicholas Rohs, MD, Assistant Professor of Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, The Tisch Cancer Institute, Mount Sinai Health System***

**REUTERS ONLINE – August 19**

**[As Americans Get Heavier, Obesity-linked Cancers May Strike Earlier](#)**

Increasing numbers of middle-aged Americans appear to be developing cancers that can be associated with obesity, new data suggest, and the increase in these cancers among 50- to 64-year-olds parallels the rising rates of obesity. "While it looks like the growing rates of obesity are driving up obesity-associated cancers, this study can't prove that," said Daniel Labow, MD, professor of surgery at the Icahn School of Medicine at Mount Sinai and site chair of the department of surgery at Mount Sinai St. Luke's and Mount Sinai West. He added, "There are so many other factors that could be affecting trends and movements in cancer incidence."

— ***Daniel M. Labow, MD, Professor, Surgery, Icahn School of Medicine at Mount Sinai, Site Chair, Department of Surgery, Mount Sinai St. Luke's, Mount Sinai West***

Additional coverage: [Business Insider](#); [Physician's Weekly](#); [Netscape](#); [MD Alert](#)

**CANCER THERAPY ADVISOR – August 19**

**[Looking at Survival Differently in Patients With Metastatic Kidney Cancer](#)**

For patients with metastatic renal cell carcinoma, the average five-year survival from time of diagnosis is low — 12 percent — but that number does not take into account whether a patient had already survived for a certain number of years. A metric that does factor in current survivorship is conditional survival, and may more accurately assess prognosis than traditional survival and even bring optimism to metastatic RCC patients, according to the findings of a large population-based cohort study recently published in *Frontiers in Oncology*. “In the overall sense, it is a different way to look at survival and can be informative for some doctors and patients, and is not certainly a common way we look at survival,” said Che-Kai Tsao, MD, associate professor, medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai who was not involved in the study. He added, “But it’s an interesting and unique outlook on survival in cancer.”

— **Che-Kai Tsao, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, Medical Director, Rutenberg Treatment Center, The Tisch Cancer Institute, The Mount Sinai Hospital**

**HEALTHDAY – August 22**

**[Drug Offers Hope Against a Tough-to-Treat Blood Cancer](#)**

Patients with a form of blood cancer known as multiple myeloma who haven't responded to other therapies might have a new weapon against the disease, according to researchers at the Icahn School of Medicine at Mount Sinai and published in *The New England Journal of Medicine*. A drug called selinexor appeared to help patients with the blood and bone marrow cancer, according to a clinical trial involving 122 people. “This study proved that a novel, first-in-class drug with a new mechanism of action can kill a patient's cancer cells,” said senior author Sundar Jagannath, MD, director of the myeloma program at the Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai. He added, “Selinexor also worked in patients who had exhausted every other treatment and who would have been placed on hospice care otherwise.” According to study author Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, “This study is meaningful for patients with multiple myeloma who haven't had success on multiple other therapies.”

— **Sundar Jagannath, MD, Professor, Medicine, Hematology, Medical Oncology, Director, Myeloma Program, Tisch Cancer Institute, Icahn School of Medicine at Mount Sinai**

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [U.S. News & World Report](#); [Medical Xpress](#); [Onclive](#); [Yahoo Finance](#); [Healio](#); [HemOnc Today](#); [Doctors Lounge](#); [Clinical Connection](#); [Science Magazine](#); [eCancer](#); [News-Medical](#)

**TARGETED ONCOLOGY – August 22**

**[Precision Medicine Trials and Molecular Testing Guidelines Expand to Reach More Patients](#)**

The Lung Cancer Master Protocol, a large precision medicine umbrella trial supported by the National Cancer Institute and their partners, has opened the trial to include advanced-stage patients with all non-small cell lung cancers. To accommodate these new trial patients, the NCI has also made further changes to the trial's protocol. Fred Hirsch, MD, PhD, executive director at the Center for Thoracic Oncology in the Tisch Cancer Institute at Mount Sinai and professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai discusses the status and importance of the trial and new recommendations for molecular testing and liquid biopsies working their way into practice in the lung cancer field. “I'm excited about many of the clinical trials that are happening. However, I'm most excited about The Lung Cancer Master Protocol, the Lung-MAP, which I have been a part of developing.” He added, “This is a master protocol which started for patients with squamous lung cancer but has been adapted to also include nonsquamous lung cancer. Today, it is focusing on molecular targeted therapies but we also have immunotherapy involved in the Lung-MAP study, particularly looking into the immunotherapy-refractory space.”

— **Fred Hirsch, MD, PhD, Executive Director, Center for Thoracic Oncology, Associate Director, Biomarker Discovery, The Tisch Cancer Institute, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**



MEDPAGE TODAY – August 23

### [Data Now Out for New Last-Line Myeloma Drug](#)

Patients with a form of blood cancer known as multiple myeloma who haven't responded to other therapies might have a new weapon against the disease, according to researchers at the Icahn School of Medicine at Mount Sinai and published in *The New England Journal of Medicine*. A drug called selinexor appeared to help patients with the blood and bone marrow cancer, according to a clinical trial involving 122 people. "This study proved that a novel, first-in-class drug with a new mechanism of action can kill a patient's cancer cells," said senior author Sundar Jagannath, MD, director of the myeloma program at the Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai. He added, "Selinexor also worked in patients who had exhausted every other treatment and who would have been placed on hospice care otherwise." According to study author Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, "This study is meaningful for patients with multiple myeloma who haven't had success on multiple other therapies."

— **Sundar Jagannath, MD, Professor, Medicine, Hematology, Medical Oncology, Director, Myeloma Program, Tisch Cancer Institute, Icahn School of Medicine at Mount Sinai**

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

AJMC – August 26

### [Dr. Ajai Chari Outlines Disparities and Treatment Patterns in Multiple Myeloma](#)

Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, discusses multiple myeloma. "Research has shown disparities in multiple myeloma treatment between clinical trials and real-world outcomes, as well as a lot of heterogeneity among treatment patterns by age and region." He added, "The disparities relate to the differences between clinical trials and real-world outcomes. So, in clinical trials we cherry picked really healthy patients."

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

BIOSPACE – August 26

### [Combination Drug Shows Efficacy in Tough-to-Treat Blood Cancer](#)

Patients with a form of blood cancer known as multiple myeloma who haven't responded to other therapies might have a new weapon against the disease, according to researchers at the Icahn School of Medicine at Mount Sinai and published in *The New England Journal of Medicine*. A drug called selinexor appeared to help patients with the blood and bone marrow cancer, according to a clinical trial involving 122 people. "This study proved that a novel, first-in-class drug with a new mechanism of action can kill a patient's cancer cells," said senior author Sundar Jagannath, MD, director of the myeloma program at The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai. He added, "Selinexor also worked in patients who had exhausted every other treatment and who would have been placed on hospice care otherwise." According to study author Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, "This study is meaningful for patients with multiple myeloma who haven't had success on multiple other therapies."

— **Sundar Jagannath, MD, Professor, Medicine, Hematology, Medical Oncology, Director, Myeloma Program, Tisch Cancer Institute, Icahn School of Medicine at Mount Sinai**

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

MSN – August 28

### Woman, 27, Thought Stress Caused Her Swollen Glands. She Had Thyroid Cancer.

This winter, Aubrie Cogan noticed a swelling in her neck, behind her ear. At first, she didn't think much of it. She didn't feel sick, just a little run down. She thought maybe it was stress causing inflammation, but visited Catherine Sinclair, MD, assistant professor of otolaryngology at the Icahn School of Medicine at Mount Sinai and director of head and neck surgery at Mount Sinai West. According to Dr. Sinclair, "We were able to see all of these unusual features that are diagnostic of thyroid cancer." Cogan received surgery to remove her thyroid and four lymph nodes where the cancer had spread. She may need to take a one-time radiation pill to reduce her chance of recurrence. Dr. Sinclair added, "One of the factors that influences whether the cancer comes back is the number of lymph nodes involved."

— **Catherine F. Sinclair, MD, Assistant Professor, Otolaryngology, Director, Head and Neck Surgery, Mount Sinai West**

NEWS-MEDICAL – August 28

### Gold Nanoparticles Shown to Safely, Effectively Ablate Low-To Intermediate-grade Prostate Tumors

Biocompatible gold nanoparticles designed to convert near-infrared light to heat have been shown to safely and effectively ablate low- to intermediate-grade tumors within the prostate, according to a study conducted at the Icahn School of Medicine and published in the journal *Proceedings of the National Academy of Sciences*. "Gold-silica nanoshells infusion allows for a focused therapy that treats the cancer, while sparing the rest of the prostate, thus preserving a patient's quality of life by reducing unwanted side effects, which could include erectile dysfunction and/or the leakage of urine," said Ardeshir Rastinehad, DO, associate professor of urology and radiology, Icahn School of Medicine at Mount Sinai. "Mount Sinai's interventional urology program is research-driven and offers patients minimally invasive treatment therapies that improve quality of life," said Ashutosh Tewari, MD, MBBS, MCh, chair of the department of urology at the Mount Sinai Health System.

— **Ardeshir R. Rastinehad, DO, Associate Professor, Urology, Radiology, Director, Interventional Urology and Focal Therapy Icahn School of Medicine at Mount Sinai**

— **Ashutosh Tewari, MD, MBBS, MCh, Professor, System Chair, Urology, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Genetic Engineering & Biotechnology News](#)

REUTERS ONLINE – August 28

### Childhood Cancer Survivors Face Variety of Heart Risks

Childhood cancer survivors' risks for heart problems may be broader than what was previously recognized, researchers say. The new findings suggest that survivors of childhood cancers should focus on improving modifiable heart disease risk factors, such as high blood pressure and diabetes. "This study is a useful reminder to not overlook traditional risk factors and more common types of cardiovascular disease in childhood cancer survivors," said Prashant Vaishnava, MD, assistant professor of medicine and cardiology at the Icahn School of Medicine at Mount Sinai who was not involved in the study. "This is becoming a recurring theme in medicine as patients are able to survive diseases that once may have been quickly fatal. The treatment paradigm for these survivors shifts to management of those conditions which are ubiquitous in the general population."

— **Prashant Vaishnava, MD, Assistant Professor, Medicine, Cardiology, Icahn School of Medicine at Mount Sinai**

**SPECIALTY PHARMACY TIMES – August 29**

### [Drug Combination Leads to Effective Response, Remission in Patients with Multiple Myeloma](#)

Patients with a form of blood cancer known as multiple myeloma who haven't responded to other therapies might have a new weapon against the disease, according to researchers at the Icahn School of Medicine at Mount Sinai and published in *The New England Journal of Medicine*. A drug called selinexor appeared to help patients with the blood and bone marrow cancer, according to a clinical trial involving 122 people. "This study proved that a novel, first-in-class drug with a new mechanism of action can kill a patient's cancer cells," said senior author Sundar Jagannath, MD, director of the myeloma program at the Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai. He added, "Selinexor also worked in patients who had exhausted every other treatment and who would have been placed on hospice care otherwise." According to study author Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai, "This study is meaningful for patients with multiple myeloma who haven't had success on multiple other therapies."

— **Sundar Jagannath, MD, Professor, Medicine, Hematology, Medical Oncology, Director, Myeloma Program, Tisch Cancer Institute, Icahn School of Medicine at Mount Sinai**

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

**I3 HEALTH – August 29**

### [Treating Triple-Class Refractory Myeloma With Ajai Chari, MD](#)

Ajai Chari, MD, associate professor, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai discusses the importance of STORM's results regarding selinexor/dexamethasone and shares his perspective on other agents that are in development for triple-class refractory multiple myeloma. According to Dr. Chari, "The first point to make is that this is a very hard-to-treat population. Triple-class refractory means that patients are refractory to the three major classes of drugs we use in myeloma: proteasome inhibitors, immunomodulatory drugs, and the CD38 antibody." He added, "Fortunately, there is so much work being done in myeloma, thanks to a lot of collaborations between academia, pharmaceutical companies, nonprofits, and the FDA through organizations such as the Multiple Myeloma Research Consortium. I think that this brain trust with a lot of stakeholders is the reason behind a lot of drug development in this space. As I alluded to, I think that the next big target will probably be anti-BCMA therapies."

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

**CNA LIFESTYLE – August 29**

### [Childhood Cancer Survivors Face A Variety of Heart Risks](#)

Childhood cancer survivors' risks for heart problems may be broader than what was previously recognized, researchers say. The new findings suggest that survivors of childhood cancers should focus on improving modifiable heart disease risk factors, such as high blood pressure and diabetes. "This study is a useful reminder to not overlook traditional risk factors and more common types of cardiovascular disease in childhood cancer survivors," said Prashant Vaishnava, MD, assistant professor of medicine and cardiology at the Icahn School of Medicine at Mount Sinai who was not involved in the study. "This is becoming a recurring theme in medicine as patients are able to survive diseases that once may have been quickly fatal. The treatment paradigm for these survivors shifts to management of those conditions which are ubiquitous in the general population."

— **Prashant Vaishnava, MD, Assistant Professor, Medicine, Cardiology, Icahn School of Medicine at Mount Sinai**

BUZZ SPROUT – August 29

### [Road to Resilience: The Comedian and the Brain Tumor](#)

Five kids. Four Grammy nominations. One pear-sized brain tumor. When a life-threatening diagnosis turned comedy writer/director Jeannie Gaffigan's life upside-down, she and her husband, comedian Jim Gaffigan, turned to faith, family, and of course—humor. Joshua Bederson, MD, professor and system chair of neurosurgery at the Icahn School of Medicine at Mount Sinai performed the surgery that saved Jeannie's life.

— **Joshua B. Bederson, MD, Professor, Neurosurgery, Icahn School of Medicine at Mount Sinai, System Chair, Department of Neurosurgery, Mount Sinai Health System**

AJMC – August 30

### [New Treatment Can Benefit Patients With MM Refractory to Multiple Other Therapies](#)

Patients with multiple myeloma (MM) whose disease is refractory to available treatments may have a better response if they are treated with selinexor with dexamethasone, according to a study published in the *New England Journal of Medicine*. Researchers from the Icahn School of Medicine at Mount Sinai found that patients taking the oral combination therapy saw a response within 2 months. Selinexor causes cancer cells to die by blocking the export of protein and messenger RNAs from the cancer cell to the cytoplasm. "This study is meaningful for patients with multiple myeloma who haven't had success on multiple other therapies," said Ajai Chari, MD, director of clinical research in the Multiple Myeloma Program at The Tisch Cancer Institute at Mount Sinai. The researchers found that the median progression-free survival was 3.7 months and the median overall survival (OS) was 8.6 months. "This study proved that a novel, first-in-class drug with a new mechanism of action can kill a patient's cancer cells," said the study's senior author, Sundar Jagannath, MBBS, director of the Multiple Myeloma Program and professor of medicine (hematology and medical oncology) at The Tisch Cancer Institute at Mount Sinai. "This proved that the drug worked in patients who had exhausted every other treatment and who would have been placed on hospice care otherwise."

— **Ajai Chari, MD, Director, Clinical Research in the Multiple Myeloma Program, Associate Director, Clinical Research, Mount Sinai Cancer Clinical Trials Office, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

— **Sundar Jagannath, MD, Professor, Medicine, Hematology, Medical Oncology, Director, Myeloma Program, Tisch Cancer Institute, Icahn School of Medicine at Mount Sinai**

Additional coverage: [Oncology Learning Network](#)

NY POST – August 30

### [Alex Trebek back at work on 'Jeopardy!' after finishing chemo](#)

Five months after being diagnosed with stage 4 pancreatic cancer, the beloved "Jeopardy!" host is finished with chemotherapy and has begun production of Season 36 of the enduring quiz show. His success so far is a big accomplishment. The odds aren't usually in these patients' favor. "Unfortunately, the prognosis is poor for patients with stage 4 pancreas cancer," Daniel M. Labow, MD, Chief of the Surgical Oncology Division at The Mount Sinai Hospital says. "In general, five-year survival rates are between 5 and 10 percent."

— **Daniel M. Labow, MD, Chief, Surgical Oncology Division, The Mount Sinai Hospital, Professor, Surgery, Icahn School of Medicine at Mount Sinai, Site Chair, Department of Surgery, Mount Sinai St. Luke's, Mount Sinai West**

**ONCOLOGY TUBE – September 4**

**September Is Thyroid Cancer Awareness Month - Mount Sinai Promotes Early Detection and Shares Tips For Prevention**

September is Thyroid Cancer Awareness Month, and doctors in the Mount Sinai Health System are promoting early detection by encouraging high-risk groups to be aware of symptoms. “While the overall prognosis for the majority of thyroid cancers is excellent, early diagnosis and treatment are critical to improve survival and decrease the risk of future recurrence,” said Brett Miles, MD, DDS, professor and co-chief of the division of head and neck oncology at the Icahn School of Medicine at Mount Sinai. “Although most thyroid cancers are highly treatable, the extent of treatment can be minimized when they are identified at earlier stages,” said Raymond Chai, MD, assistant professor of otolaryngology at the Icahn School of Medicine at Mount Sinai. “Thyroid cancer can affect people of all ages, and although it is more common in women, men can also be affected,” said Catherine Sinclair, MD, director of head and neck surgery at Mount Sinai West

— **Brett A. Miles, DDS, MD, Professor, Otolaryngology, Director, Head and Neck Oncology-Microvascular Reconstructive Surgery Fellowship Program, Icahn School of Medicine at Mount Sinai, Co-Chief, Division of Head and Neck Cancer Surgery, Department of Otolaryngology, Mount Sinai Health System**

— **Raymond Chai, MD, Assistant Professor, Otolaryngology, Icahn School of Medicine at Mount Sinai, Director, Head and Neck Robotic Surgery, Mount Sinai Downtown**

— **Catherine F. Sinclair, MD, Assistant Professor, Otolaryngology, Director, Head and Neck Surgery, Mount Sinai West**

**HEALIO: PULMONOLOGY – September 4**

**Non-small Cell Lung Cancer Associated With Poorer Prognosis in Older Patients With IPF**

Non-small cell lung cancer is associated with poorer prognosis and has a unique presentation in elderly patients with idiopathic pulmonary fibrosis, according to researchers at the Icahn School of Medicine at Mount Sinai. “One of the most interesting observations was that the rate of treatment for advanced cancer was lower in patients with lung fibrosis and lung cancer compared with those with lung cancer without lung fibrosis,” said author Charles Powell, MD, system chief of the division of pulmonary, critical care and sleep medicine at the Mount Sinai Health System and chief executive officer of the Mount Sinai-National Jewish Health Respiratory Institute. He added, “However, we do know that even though patients with advanced stage lung cancer have relatively low survival rates, treatment does improve length and quality of life.”

— **Charles Powell, MD, System Chief, Division of Pulmonary, Critical Care and Sleep Medicine, Mount Sinai Health System, Chief Executive Officer, Mount Sinai – National Jewish Health Respiratory Institute**

**CANCER NETWORK – September 4**

**Ibrutinib Combo In Chronic Lymphocytic Leukemia Is Superior, But Costly**

In the first-line setting, ibrutinib plus rituximab had a superior survival benefit to standard chemoimmunotherapy for patients with chronic lymphocytic leukemia, according to a recent study. Study researchers also noted that “indefinite” use of ibrutinib therapy has been associated with substantial expense. “I don’t think one hundred percent of people should be getting ibrutinib as frontline therapy,” said Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai. He added, “The ibrutinib combination is ‘definitely’ a ‘reasonable’ option and ‘better’ than fludarabine, cyclophosphamide, and rituximab, but it’s not ‘definitely’ better than rituximab plus bendamustine, which is the other chemoimmunotherapy regimen commonly used in this patient population.”

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**



CNBC – September 5

### [Here's What We Know About Ruth Bader Ginsburg's Latest Cancer Scare](#)

Supreme Court Justice Ruth Bader Ginsburg appeared healthy on Monday during a public appearance at the University at Buffalo, three days after completing a three-week course of radiation therapy to treat a tumor found on her pancreas. According to Raja Flores, MD, professor and system chair of thoracic surgery at the Icahn School of Medicine at Mount Sinai, the fact that the tumor was localized makes it more likely that Ginsburg had pancreatic cancer. He added, "There are a lot of unknowns here."

— **Raja M. Flores, MD, Steven and Ann Ames Professor, Thoracic Surgery, Icahn School of Medicine at Mount Sinai, Chair, Thoracic Surgery, Mount Sinai Health System**

REUTERS ONLINE – September 5

### [Cancer Doctors Don't Focus on Lifestyle Risks](#)

Cancer specialists only rarely advise patients on lifestyle changes that could improve overall health and possibly also reduce the risk of recurrence, a new survey suggests. The survey of doctors found that oncologists were far less likely than primary care physicians to offer advice on health promotion strategies, such as weight loss and smoking cessation, researchers reported in the journal *Cancer*. "The new findings are intriguing, but it's a very small study. I'd like to see a nationwide study," said Charles Shapiro, MD, director of translational breast cancer research and cancer survivorship at The Tisch Cancer Institute at Mount Sinai. He added, "My group is well versed in these kinds of things that patients can do for themselves and how successful they are."

— **Charles Shapiro, MD, Director, Translational Breast Cancer Research, Director, Cancer Survivorship, Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

NBC TODAY – September 5

### [Woman, 27, Thought Stress Caused Her Swollen Glands. She Had Thyroid Cancer](#)

This winter, Aubrie Cogan noticed a swelling in her neck, behind her ear. At first, she didn't think much of it. She didn't feel sick, just a little run down. She thought maybe it was stress causing inflammation, but visited Catherine Sinclair, MD, assistant professor of otolaryngology at the Icahn School of Medicine at Mount Sinai and director of head and neck surgery at Mount Sinai West. According to Dr. Sinclair, "We were able to see all of these unusual features that are diagnostic of thyroid cancer." Cogan received surgery to remove her thyroid and four lymph nodes where the cancer had spread. She may need to take a one-time radiation pill to reduce her chance of recurrence. Dr. Sinclair added, "One of the factors that influences whether the cancer comes back is the number of lymph nodes involved."

— **Catherine F. Sinclair, MD, Assistant Professor, Otolaryngology, Director, Head and Neck Surgery, Mount Sinai West**

MEDICAL XPRESS – September 5

### [Quest for New Cancer Treatment Crosses Milestone](#)

A cancer therapy has crossed a milestone in clinical trials, a major development in a decades-long quest to develop a treatment that destroys tumors without the debilitating side effects of chemotherapy, invasive surgery and radiation. Published in the *Proceedings of the National Academy of Sciences*, and performed by researchers at the Icahn School of Medicine at Mount Sinai, results showed that of the 15 men who completed treatment, only two showed detectable signs of cancer in follow-up biopsies and MRIs one year later. "Gold-silica nanoshell infusion allows for a focused therapy that treats the cancer while sparing the rest of the prostate, thus preserving a patient's quality of life by reducing unwanted side effects, which could include erectile dysfunction and/or the leakage of urine," said lead author Ardeshir Rastinehad, DO, associate professor of urology and radiology, Icahn School of Medicine at Mount Sinai.

— **Ardeshir R. Rastinehad, DO, Associate Professor, Urology, Radiology, Director, Interventional Urology and Focal Therapy Icahn School of Medicine at Mount Sinai**

Additional coverage: [MEAWW](#); [Science Daily](#); [BioSpace](#)

HEALTH ONLINE – September 5

## [I Got Implants After Surviving Breast Cancer Twice—Then I Learned They Cause Cancer](#)

Diana Cavallo is no stranger to breast cancer. She lost her mother and one of her sisters to the disease, and Cavallo herself was diagnosed with breast cancer when she was 44—and then again when she was 49. Cavallo first found out about the association between some textured breast implants and breast implant-associated anaplastic large cell lymphoma in May after seeing multiple news stories on the link. “The odds of developing BIA-ALCL in the first place, though, are slim,” said Charles Andrew Salzberg, MD, professor of surgery and plastic surgery at the Icahn School of Medicine at Mount Sinai and the doctor who performed Cavallo’s surgery. “This is definitely a rare occurrence. There are only about 600 reported cases in the world, with about 75,000 textured implants in patients right now.

— **Charles Andrew Salzberg, MD, Surgery, Plastic Surgery, Icahn School of Medicine at Mount Sinai, Chief, Division of Plastic and Reconstructive Surgery, The Mount Sinai Hospital**

NEW YORK ONE – September 6

## [Mount Sinai Health System Push Up Challenge](#)

September is prostate cancer awareness month, and Mount Sinai Health System employees hit the ground for the fifth annual “Push Up Challenge.” The goals of the challenge is to encourage men to live healthy lifestyles and get prostate cancer exams. Participants also were able to see the technology doctors use to remove prostates.

— **Mount Sinai Health System**

Additional coverage: [W-ABC TV](#) (No Web Link Available); [Fox Five](#) (No Web Link Available)

EVERYDAY HEALTH – September 6

## [Should You Try a Cold Cap to Prevent Chemo-Related Hair Loss?](#)

For many people, especially women, losing hair as part of cancer treatment can be almost as devastating as the diagnosis. In fact, research suggests that for many patients chemotherapy-related hair loss is associated with depression, negative body image, lowered self-esteem, and a reduced sense of well-being. Some women are so concerned about chemotherapy-related hair loss that they opt to forgo the chemotherapy their doctor has recommended. A technology called cold cap therapy, also known as scalp cooling, might reduce your chances of losing your hair in the first place, according to researchers at the Icahn School of Medicine at Mount Sinai. “We were able to demonstrate that 70 percent of patients retained about 50 percent of their hair,” said Paula Klein, MD, and associate professor of medicine, hematology, and medical oncology at the Icahn School of Medicine at Mount Sinai. She added, “In order to maintain a sufficiently cold temperature caps need to be rotated every 20 to 30 minutes by a family member, friend, or hired capper.”

— **Paula Klein, MD, Associate Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai**

RENAL & UROLOGY NEWS – September 9

## [The Long-Term Health Effects of September 11, 2001](#)

Michael Crane, MD, MPH, medical director of the World Trade Center Health Program Clinical Center for Excellence at Mount Sinai discusses the long term health issues resulting from the September 11 events. “Prostate, kidney, and bladder cancers are among the 10 most frequently diagnosed cancers among WTC responders. An August 2019 study in *Molecular Cancer Research* suggests respiratory exposure to WTC dust can induce inflammatory and immune responses in prostate tissue associated with cancer.” He added, “Experts say kidney cancer appears to be part of the wave of 9-11-related illnesses. It’s related to the exposure, there’s no doubt in my mind. We do seem to be having them picked up at a point where we can treat them effectively. I certainly support efforts to expand organ donation.”

— **Michael A. Crane, MD, MPH, Professor, Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai, Medical Director, Selikoff Centers for Occupational Health and World Trade Center Health Program Clinical Center of Excellence, Mount Sinai Health System**

Additional coverage: [WCBS 880](#)

MEDPAGE TODAY – September 9

### [Metformin Repurposed: Boosts Survival in TKI-Treated Lung Cancer](#)

Adding metformin to standard inhibitors of epidermal growth factor receptor and tyrosine kinase inhibitors significantly improved both progression-free and overall survival in advanced lung adenocarcinoma – with no significant increase in adverse events, a randomized phase II study found. According to the study, since 2005, evidence of the antineoplastic effectiveness of metformin has been accumulating, with data showing that metformin reduces the risk of pancreatic, prostate, and lung cancer -- even with adjustment for age, smoking status, and glycated hemoglobin level. Nicholas Rohs, MD, assistant professor of medicine, hematology and medical oncology at the Icahn School of Medicine at Mount Sinai who was not involved in the study said, “In addition to changing the expression of proteins tied to cell proliferation, which slows down progression, adding another drug may help overcome cancer cells' resistance to treatment. And cancer cells need energy to grow, so reducing the availability of glucose may inhibit their ability to feed themselves.”

— **Nicholas Rohs, MD, Assistant Professor of Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, The Tisch Cancer Institute, Mount Sinai Health System**

NEW YORK ONE – September 10

### [Fatalities From 9/11 Illnesses Continue To Climb](#)

Michael Crane, MD, MPH, medical director of the World Trade Center Health Program Clinical Center for Excellence at Mount Sinai discusses illnesses as a result of September 11. “Just to put it in perspective, everybody ages, and as you age, even in the normal population you have higher risks of things like cancer. That's true of our population, and the increase that we're seeing in cancer is not huge, it's not multiples of the risk, but there is a substantial increase in many of the cancers.” He added, “We are going to see more of that, we're going to see more mental health issues, and we're concerned about things like these neuro-degenerative track conditions, we're concerned about Alzheimer's disease, cognitive problems, all of that.”

— **Michael A. Crane, MD, MPH, Professor, Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai, Medical Director, Selikoff Centers for Occupational Health and World Trade Center Health Program Clinical Center of Excellence, Mount Sinai Health System**

NEW YORK DAILY NEWS – September 10

### [Eating Chicken And Red Meat Linked With Higher Risk Of Cancers, Study Says](#) [— But Doctors Say Not To Worry Too Much](#)

Eating chicken, red and processed meat is associated with a higher risk of certain cancers, a new study says — but doctors say that doesn't mean you should worry too much. Chicken consumption was associated with an increased risk for malignant melanoma, prostate cancer and non-Hodgkin's lymphoma. According to Joshua Brody, MD, Director of the Lymphoma Immunotherapy Program at The Tisch Cancer Institute at Mount Sinai, who was not involved in the study, “While the study is important, a number of factors could be contributing to the results.” He added, “The study was not nearly conclusive enough to guide people towards lifestyle change.”

— **Joshua Brody, MD, Director, Lymphoma Immunotherapy Program, The Tisch Cancer Institute, Assistant Professor, Medicine, Hematology, Medical Oncology, Icahn School of Medicine at Mount Sinai**

YAHOO ENTERTAINMENT – September 11

### [9/11 Still Claiming Victims: 10,000 With Cancers, Thousands More With Other Illnesses](#)

As ceremonies are held Wednesday to remember the nearly 3,000 people killed on Sept. 11, 2001, a growing number of firefighters, police officers, tradesmen and others have gotten sick or died from illnesses related to the toxins in the dust from the burning buildings. “About 40,000 people have conditions linked to 9/11, including thousands with respiratory illnesses and mental health issues,” said Michael Crane, MD, MPH, medical director of the World Trade Center Health Program Clinical Center for Excellence at Mount Sinai.

— **Michael A. Crane, MD, MPH, Professor, Environmental Medicine and Public Health, Icahn School of Medicine at Mount Sinai, Medical Director, Selikoff Centers for Occupational Health and World Trade Center Health Program Clinical Center of Excellence, Mount Sinai Health System**

Additional coverage: [People](#)