MESSAGE FROM THE CHAIR

As a small section, the Cancer Librarians have been amazingly active and productive over the past year, and there are many challenging plans in the works. The section has a new website: (http://www.selu.com/cancerlib/) thanks to excellent design skills of our webmaster and listserv manager, Ann Marie Clark, of Fred Hutchinson Cancer Research Center. A highlight of the site is the Core Cancer Library list of resources, a joint effort of several section members, under the leadership of Cheryl Warren, of ValleyCare Health Systems.

Cheryl Warren will soon be recruiting via the listserv for contributors to an updated edition of the more extensive Cancer Resources: An Annotated List. This popular compilation has served our section well in past years as a funding source, while providing the library community with a valuable collection development tool. Contributors who write 10 or more annotations will receive a free copy of the final product. This activity is a good way to generate AHIP credits. Please contact Cheryl (cwarren@valleycare.com) if you are interested in participating in this project.

We will also be attempting to update our bylaws, which are sorely out-dated and in need of revision. In addition, Program Chair, Gayle Above, of Roswell Park Cancer Institute, has been working on plans for several wonderful sessions at the Annual Meeting of MLA in Orlando.

Also, please note the article regarding the absence of current cancer meeting abstracts from the CanceRlit database. We are perhaps the professionals with the greatest motivation to express concern to NCI about this barrier to accessing cutting-edge research information.

Finally, I am pleased to welcome our newsletter editors, Helen Flitton and Tanya Smith, of the Huntsman Cancer Institute of the University of Utah. We all appreciate their dedication to this time-consuming job.

I'd also like to give special thanks to all officers of the section for serving this year and in the past. Please feel free to contact me with any questions, comments, or suggestions regarding our section.

Karen Albert
Cancer Librarians Section Chair
Fox Chase Cancer Center
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INSIDE THIS ISSUE

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Cancer Librarians Section Business Meeting – MLA Annual Meeting in Vancouver
May 9, 2000

Attendees: Tamara Harth, Sandy Larson, Jeanne LaRocco, Halya Lischingskiy, Jo-Ann Nicol, Kathy Reilly, Tanya Smith, Gayle Aboye, Karen Albert, Alice Boshke-Roberts, Ann Marie Clark, Christine Fleureil, Helen Flitton, Nina Galpern, Anna Habtter, Seungjae Song, Cynthia Stevens, Margaret Vugrin, Cheryl Warren, Christy Woodward

Held on Tuesday, May 9, the meeting was called to order by Section Chairperson, Cheryl Warren, at around 12:40 p.m. Approximately 20 people were in attendance, and a buffet luncheon was provided.

Cheryl asked if there were any corrections to the minutes, which had appeared in the newsletter from last year’s business meeting, and no one had any.

Treasurer, Christine Fleureil, reported that our savings account totals around $3,700.

Section Council Representative, Margaret Vugrin, provided an extensive update of programs and activities related to sections in general. See the article in this issue for more detail.

Program Chair, Gayle Aboye, gave a report on a programming possibility for the section to consider for the 2001 Annual Meeting. Both she and Cheryl Warren had been approached by Michele Tennant, of the Molecular Biology and Genomics SIG, about co-sponsoring an invited speakers’ session. The tentative topic was gene therapy. Since SIGs are not permitted to serve as lead sponsors of a program, our section was asked to take on this role. We were also asked to contribute funds to support this effort. The consensus of section meeting attendees was to pursue this opportunity and to offer $500 to help fund the program.

The first item under “New Business,” was a demonstration and discussion of the new section website. Ann Marie Clark showed slides of various portions of the in-process website, and solicited suggestions from the group on how to proceed. Overall, members seemed happy with the design and especially the crab logo. They agreed that names and addresses of all officers should be listed, along with the Core List and highlights from the newsletter. It was decided that access to the site would not be limited by a password requirement. The use of a site disclaimer was put on hold for further discussion at a later time. Ann Marie mentioned that hosting of our website by MLANET would cost $205/year. We are fortunate to have this function filled by Fred Hutchinson Cancer Research Center, at no cost to the section.

Next, Cheryl introduced the new newsletter editors, Helen Flitton and Tanya Smith. They welcomed contributions to the newsletter from section members. They also said they would be investigating the publication of an electronic version of the Cancer Librarians News, possibly for the spring issue. They would produce it in pdf format and send it to section members via the CancerLib Listserv. They plan to produce two issues per year, one in fall and one in spring.

Karen Albert next brought up the problem of limited coverage of meeting abstracts in Cancerlit. She had learned from NCI that important meeting abstracts like those from ASCO and ASTRO are no longer being included or indexed consistently in Cancerlit. Consequently, this information is much more difficult to locate and access. Karen agreed to post to the section listserv a suggested format for a letter to go to the appropriate person at NCI expressing concern over this new policy.

Cheryl and the group discussed the pros and cons of partnering with Cancersource.com, a reputable new cancer information website that has a number of society and organizational “sponsors,” endorsing the site’s mission. It was decided that Cheryl would contact MLA headquarters for more guidelines regarding this. The section would accept ads from the site for the newsletter, would review their site in the Cancer Resources list or in the newsletter, and would post to our listserv some publicity regarding the site.

Cheryl noted that the Core List of Cancer Resources is just about complete. It is due to appear on the section’s website. She will add ISBN numbers for each book, and will drop from the list any older titles that do not have upcoming new editions listed anywhere.

Cheryl also indicated that she would try to organize the production of a new Cancer Resources: An Annotated List, to cover 1998-2000 or 2001. For the last edition, Cheryl’s institution covered the publication and mailing costs. This time we will need to seek other sponsors. Possibly, commercial ads or an educational grant from a drug company could provide financial support for this project. Editors would be: Cheryl Warren, Karen Albert, Nina Galpern, and Beth Lewis. The target date for beginning work on this list will be the fall, with the projected publication date in the winter. Cheryl will try to use the listserv and email to handle most of the communication for this excellent section fund raising resource.

Cheryl then reviewed the names of the new section officers:
Chair: Karen Albert
Secretary: Beth Lewis
Chair-Elect/Program Chair: Gayle Aboye

The meeting adjourned at approximately 2 p.m.

Karen Albert
Section Chairperson
km_albert@sfcc.edu
Core Cancer Library
Cheryl Warren
Valley Care Health Library

Cancer Librarians Section of MLA has finished the Cancer Librarians Section List project. CLS developed this core list of cancer materials in an effort to identify up-to-date titles that would be basic and useful for the small to medium library. The purpose of the list is to aid in selection and collection development, but CLS does propose that this is a definitive list that meets the needs of all institutions. A thank you to the many CLS librarians who contributed their resource titles, ideas and comments. An extra thanks to the librarians who critiqued the lengthy finished list for errors after it was sent out over the CLS listserv. The list can be found on the CLS web site at http://www.selu.com/cancerlib. Comments or updates can be directed to Cheryl Warren at cherylw@valleycare.com.

Message from the Editors
Tanya Smith & Helen Fliton
Huntsman Cancer Institute

As we move toward an electronic version of the Cancer Librarians Section News, we ask that all members of the section join the Cancerlib Listserv (see instructions below). We will send future editions of the Cancer Librarians Section News to members of the Cancerlib Listerv as both PDF and MSWord files. The Cancer Librarians Section web site will post select articles from the newsletters. Please let us know if you are not able to receive an electronic version of the newsletter, and we will send one to you through the US Mail. (Tanya Smith: tanya.smith@hci.utah.edu or Helen Fliton: helen.fliton@hci.utah.edu)

CANCERLIB LISTSERV
MLA Cancer Librarians Section members are welcome and encouraged to join the section’s official listserv, Cancerlib. The listserv is hosted by the Fred Hutchinson Cancer Research Center. Please contact Ann Marie Clark at aclark@fhcrc.org or the Server Administrator at cbenson@fhcrc.org if you have any questions or problems.

Please send all email for the listserv (to be posted for the membership to read) to: cancerlib@fhcrc.org You can also use this mailing list with a web browser such as Internet Explorer or Netscape Navigator. The URL is:

http://koala.fhcrc.org:81/cgi-bin/yris.pl

Click on "General grouping of mailing lists". Click on "cancerlib". Enter your e-mail address, but leave the password blank. Click on "Click here to enter cancerlib". You will see a list of 4 or 5 choices and a Search box, which allows you to search old messages sent to the list:

- "Read Messages" -- read messages sent to the list
- "Create a New Message" -- send a message to this list
- "Your Settings" -- control the way you receive messages from this list
- "Leave (unsubscribe)" -- unsubscribe from the list.
- "Search" -- another way to search old messages sent to this list.

Cancer Librarians Section News 3
Section Council Minutes
2000 Annual Conference, MLA Vancouver, CA
Margaret Vugrin
TTUHSC Library

Saturday Meeting
This is the first year that Sections will be sending liaisons to the MLA Membership Committee meeting. They will be looking at issues related to membership diversity, recruitment and retention. Margaret Vugrin is Cancer's Section liaison to the Membership Committee. This is a three-year appointment.

Ratification of e-mail votes: Since a number of states do not sanction e-mail voting as a legal method of voting the following e-mail votes were ratified:
1. Formation of the Corporate Information Services Section
2. Name change of Medical School Libraries Section to Library Management and Leadership Section
3. Formation of the Voyager SIG
4. Formation of the African American Medical Librarians Alliance SIG

Highlights of Committee Reports:
Liaisons from various Sections are invited to attend CE Committee meetings.

The Communications Committee reviewed issues of moving to the Section Council Website.

Elections Committee presented the slate of candidates for Section Council nominees to the MLA Nominating Committee. These were voted on in the 2nd meeting of Section Council. Peg Hewitt and Margaret Vugrin were introduced as nominees for Vice-chair of Section Council.

MLANET Liaison reported on the audit of MLANET. There was considerable addition to the Members-Only section, improvements to the communication process between webworkers and the editorial board were explored, there was discussion about hosting fees for individual sections on MLANET and the difficulties that SIGs, who do not collect monies, would have if wanting to use MLANET.

The Credentialing committee is concerned that smaller numbers of members are renewing their memberships. Sections are welcome to send liaisons to the credentialing committee; a 1-2 hour commitment at the annual meeting would be required.

Section/SIG Review committee completed revision of the SIG manual. A checklist has been developed to assist conveners in determining criteria for creation of SIGs.

Standards presented a handout of their activities.
The BPC 200 Program Planning Liaison report included the following items: 32 programs were scheduled, 194 contributed papers were submitted, 905 of these were submitted electronically. 78 were accepted - 40% acceptance rate. The MLA Board will be revisiting the fixed program schedule this year. Jean McClarity is the new program planner that was hired by MLA.

MLA 2000 will have 4 section programming sessions, one on each day. MLA has purchased abstract managing software and will be using it for this upcoming conference. Sections are restricted to being the lead for two sponsored programs only, but no limit to the number of sessions that a Section can co-sponsor.

Michael Homan, Frieda Weise and Carla Funk all addressed Section Council, welcoming us and giving us a brief overview of MLA and it's accomplishments, it's future and reorganization.

Discussion of Motions/Issues:
1. Formation of an Internet SIG
2. Suggestions that Hospital Libraries consider updating their standards document
3. Possible name change for the MLA Bulletin to be discussed with membership
4. Solicit input from your section on the possibility of removing one SIG informal meeting slot to provide time for an additional business meeting
5. There were 839 registrants for CE courses

Wednesday Meeting
Election of Vice-Chair was completed: Margaret Vugrin lost by one vote to Peg Hewitt. Nominating Committee winners were: Janis Brown, Jody Guenther, Virginia Lingle, Faith Meakin, Neil Rambo, and Jean Sayre. Ann Weller and Jon Eldredge were elected as back-ups.

An update on the Internet SIG was presented. This group will focus on informatics, not reference. Their petition will be reviewed by the Section/SIG Review Committee and will be forwarded on to Section Council if it meets with the review committee’s criteria.

Section Council Representatives were reminded to communicate to Section Chairs the need to review documentation at the Section Council Website regarding the restructuring process. It is essential to do this prior to the March election process in order to follow the appropriate transition process. By-Laws changes will need to be implemented this year, but sections need to wait do this until they receive information from the MLA By-Laws
Committee regarding changes that need to be made.

A proposal of moving Section Council’s website from the hosting site at Duke to MLA headquarters was discussed and approved. A second motion was proposed to create a Section Council Web Committee to update and maintain currency on the website. This also was passed.

The International Cooperation Section presented a program of sister libraries in Antigua and Latvia. This would entail some fund raising issues. Section Council felt that more information was needed and asked the Section to resubmit its request with additional information.

The Library Management and Leadership Section submitted a motion for a name change to Leadership and Management Section. After discussion the motion was passed and will be sent to the MLA Board for final approval.

In response to the question presented by NPC 2001 regarding dropping an informal SIG slot for a business slot, three sections responded no, 10 responded in favor. Please convey additional responses to this request for information to Francis Lynch.

Section Council mailings will be reduced from four to two. It was also suggested that the Section Council Table at the annual meeting be enhanced in some fashion.

Hospital Library Section responded back to review and update the Hospital Libraries Standards requested by the MLA Board.

An informational item was presented to Section Council concerning the costs involved for MLA to host Section web pages.

Respectfully submitted,

Margaret Vugrin, MSLS, AHIP
Cancer Section Representative &
Section Council Secretary

 MLA 2001: AN INFORMATION ODYSSEY

May 25-30, 2001
Orlando, Florida

Attendees at MLA’s annual meetings present and discuss scholarly papers, applied research, and issues in health sciences information management. The event gives members and affiliated professionals a chance to share ideas, hear from other experts, see the latest products, and socialize. Please visit MLA’s Annual Conference web site for more information.

http://www.mlaha.org/am/am2001/index.html

Current Literature

Report on Carcinogens 9th Edition Released
Auburn Steward

The Department of Health and Human Services released the Report on Carcinogens 9th Edition on the web at http://ehs.niehs.nih.gov/roc/toc9.html. The report is published every two years by the National Toxicology Program of the National Institute of Environmental Health Sciences. It identifies substances including metals, pesticides, drugs, and natural and synthetic chemicals, as well as mixtures and exposure circumstances that are Known or are Reasonably Anticipated to cause cancer in humans, and to which a significant number of Americans are exposed.

Substances newly listed or reclassified in the Report on Carcinogens as Known or Reasonably Anticipated Human Carcinogens include:

- Alcoholic Beverage Consumption
- 1,3-Butadiene
- Cadmium and Cadmium Compounds
- Chloroprene
- Diesel Exhaust Particulates
- Dyes Metabolized to Benzidine (Benzidine Dyes as a Class)
- Environmental Tobacco Smoke
- Ethyl Acrylate (delisted)
- Ethylene Oxide
- Isoprene
- Methyl-t-Butyl Ether
- Phenolphthalein
- Saccharin (delisted)
- Silica, Crystalline (respirable size)
- Smokeless Tobacco
- Strong Inorganic Acid Mists Containing Sulfuric Acid
- Tamoxifen
- Tetrafluoroethylene
- Tobacco Smoking
- Trichloroethylene
- Solar UV Radiation and Exposure to Sunlamps and Sunbeds

Reprinted from PH/H&LA News (Summer/Fall 2000); originally from a MEDLIB-L posting by Auburn Steward, MLIS, AHIP from the Center for Toxicology & Environmental Health.
Spirituality and Cancer Collection Development

Sharon A. Lezotte, MHE, MLIS

"Religion without science is blind, Science without religion is lame." - Albert Einstein

BRIEF DISCUSSION

Is spirituality a therapeutic modality? This question is being raised more and more often in the area of health and wellness. There is strong indication that materials relevant to spirituality or inspirational thought might be appropriate for inclusion in a cancer/consumer health library collection. Spirituality has cross-cultural implications that may or may not include organized religion for the individual patient. Spirituality is being seen as one of the mind-body concepts, many of which have been proven useful for relaxation and stress management, pain control, and an overall better quality of life. Health care personnel add a warmer blanket of care for the cancer community by weaving together the concepts of spirituality such as prayer, visualization, meditation, and the concept of hope with good end-of-life care, grief support, and compassion.

Research is revealing that a rich spiritual life may actually improve patient outcomes. Cancer patients who seek support from friends and fellow patients, and who share an element of spirituality appear to improve their quality of life. "Social connectedness and a faith dimension are two relatively consistent characteristics among some long-term survivors of cancer," says oncologist Dr. Edward Creagan of the Mayo Clinic in Rochester, Minnesota.

Cancer patients who seek support from friends and fellow patients, and who share an element of spirituality appear to improve their quality of life.

In the medical community, there is the general recognition of the interactions between the body and mind or spirit, known as psychoneuroimmunology. Stress physiology has knowledge about the cellular and molecular events that turn emotional events in the outside world into a cardiovascular and/or immune system response. Coping skills are VERY important. The relaxation response, meditation, inspired thoughts, quiet time, or prayer enable an individual's inner resources to be activated.

The Harvard Mind Body Institute on Spirituality & Health states that religion is widespread and deeply influences our society, culture, and health practices. Recent Gallup surveys indicate that 96% of Americans believe in God or a universal spirit, 90% pray, and 43% attend church at least weekly. The Institute believes that these various religious or spiritual practices can have an impact on physical and mental health, on the meaning that illness has for persons, and on decisions that people make about seeking health care. They also have found that religion is commonly used as a way of coping with stress caused by health problems. Their studies indicate that 40% or more of those with serious medical illness report their religion is the most important factor that keeps them going. So strong is this trend becoming that currently 83 of the 112 medical schools are now offering a spirituality and medicine course.

On March 25th 2000, a conference held in Washington D.C. with representatives from 50 medical schools and hospital centers, dealt with issues of cross culture / multi cultural and spirituality issues in the health care field. The conference, "Spirituality, Cross-cultural Issues and End of Life Care: Curricular Development," explored such areas as skills in taking spiritual histories, the data on spirituality and health, the creative use of diversity, and end of life decision-making. The conference was well received.

In collection development of this area, as with all consumer health materials, evaluation criteria should be employed. A multicultural attitude and a balanced, natural approach should be looked for in the expression of these ideas. Collection resources should avoid delving into a single, extreme, dogmatic approach or direction as the only means of attaining a spiritual existence. Personal experience has led me to believe that supporting patients with inspirational materials can provide a positive benefit.

RELATED WEB SITES

http://www.cancersupportivecare.com/spirituality.html - The Cancer Supportive Care Program for Total Supportive Care has a section on this topic.

http://www.cansearch.org/programs/spirituality.htm - from the National Coalition for Cancer Survivorship has a letter from 1997 about their attitude about spirituality.

http://www2.cancer.org/SiteSearch/wwwAltFrame.cfm?select=/prayer.htm - is the American Cancer Society's discussion of spirituality and prayer.

http://www.oncology.com - has the section Cancer Buddies that includes a discussion topic section on Spirituality.

http://www.cancercare.org/bookstore/spirituality.htm - is a commercial site, but does have short discussion of books concerned with the topic of cancer and spirituality.

http://www.childrenshospital.org/public-affairs/sept97news/rabbi.html - is an article about a rabbi on pastoral counseling at a children's hospital.

http://womenshealth.about.com/health/womenshealth/msubcancer/support.htm has two or three good links in the spiritual support area for women.
COLLECTION DEVELOPMENT

1. Videos

Healing/Dying: An Interview with Stephen Levine is divided into two parts. The first part deals with healing from illness and healing grief. The second part deals with caring for the dying person and dealing with process of losing someone you love.

CANCER: A Turning Point - An Interview with Dr. Lawrence LeShan. Classic psychotherapy is daunting and ineffective at helping people survive cancer, but Lawrence LeShan pioneered a more pleasant therapeutic adventure aimed at rediscovering what brings you satisfaction in life which can result in awaking our immune systems. His approach has had remarkable results even for many patients with terminal cancer.

CANCER: Increasing Your Odds for Survival (Documentary Series). This guide does not break down cancers into subspecialties of individual cancers. It is a general resource guide aimed at empowering the cancer patient and family, and it will help you choose your path to healing. There are experts to represent the full spectrum of healing approaches. The interviews address theories and philosophies of the physical, emotional, spiritual, and psychological aspects of coping with cancer and finding a path to healing.

2. Books

Alexander DS; Spiritual Abundance: Meditations and Affirmations on Prosperity for Every Day of the Year; JP Tarcher; 1997.

Bass DC, editor; Practicing Our Faith: Jossé-Bass Inc; 1997.

Batchelor S; Buddhism Without Beliefs: a Contemporary Guide to Awakening; Riverhead Books; 1997.


Becvar DS; Soul Healing; Basic Books; 1997.

Berrin S; A Heart of Wisdom: Making the Jewish Journey from Midlife; Jewish Lights Publishing; 1997.


Casey K; Daily Meditations for Practicing the Course; HarperCollins Publishers; 1995.

Chodron. P; When Things Fall Apart: Heart Advice for Difficult Times; Random House; 1997.


Dean A; Peace of Mind: Daily Meditations for Easing Stress; Bantam Books; 1995.

Dosick WD; When Life Hurts; Harper; 1998.


Dossey L; The Power of Meditation and Prayer; Hay House; 1997.

Elahi B; Foundations of Natural Spirituality: A Scientific Approach to the Nature of the Spiritual Self; Element; 1997.

Fleischman PH; Cultivating Inner Peace; G.P. Putman’s Sons; 1997.

Foster RJ; Prayer: Finding the Heart’s True Home; Harper; 1992.


Goldstein J; Insight Meditation; Random House; 1994.

Guiley RE; Wellness: Prayers for Comfort and Healing; Pocket Books; 1998.

Hanh TN; Be Still and Know: Reflections From Living Buddha, Living Christ; The Berkley Publishing Group; 1996.

Johnson W; The Posture of Meditations of All Traditions; Random House; 1996.


Lewis C; Readings for Meditation and Reflection; Harper; 1996.

Markway BG; Illuminating the Heart; New Harbinger; 1996.

Matthews DA; The Faith Factor; Viking; 1998.

McDonald K; How to Meditate: A Practical Guide; Wisdom Publishing; 1984.

Mullins T; Vitamins for Your Soul; 200 Ways to Nurture Your Spiritual Life; Doubleday; 1997.

Rappay L; The Tibetan Book of Healing; Morson Publishing; 1997

RavenWing J; The Return of Spirit: A Woman’s Call to Spiritual Action; Health Communications, Inc.; 1996.

Richardson PT; Four Spiritualities: Expressions of Self, Expressions of Spirit: Psychology of Contemporary Spiritual Choice; Davies-Black Publishing; 1996.


Somogyi R; Inner Peace in a 9 to 5 World; Citadel Press; 1996.

Stratton EK; Seeds of Light; Simon & Schuster; 1997.

Wright LM; Beliefs: Basic Books; 1996.
LITERATURE REVIEW:

1. Psychooncology 1999 Sep-Oct;8(5):439-50; Body, mind and spirit: towards the integration of religiosity and spirituality in cancer quality of life research; Mytko JJ, Knight SJ; VA Chicago Healthcare System, Lakeside, Health Services Research and Development, Department of Psychiatry and Behavioral Sciences, Northwestern University Medical School.

Recent opinion polls, media attention and empirical studies have highlighted the importance of religion and spirituality to the American public. Psychosocial researchers are incorporating these variables into studies of emotional and physical illness. A number of studies have found that, for cancer patients, religious, spiritual and quality of life concerns are paramount. This paper reviews the literature relating religion and spirituality to physical and emotional health and quality of life. Definitions and measurement issues related to religiosity/spirituality and quality of life are discussed. The paper provides a rationale and methodological suggestions for future studies assessing religious and spiritual beliefs of cancer patients in relation to quality of life. The authors conclude that regular inclusion of religiosity and spirituality measures in quality of life studies is needed in order to understand the integration of mind, body and spirit in cancer care.


Most of the commonly used quality of life (QOL) instruments in oncology do not include spirituality as a core domain. Previous research suggests that spirituality might be an important aspect of QOL for cancer patients and that it may, in fact, be especially salient in the context of life-threatening illness. This study used a large (n=1610) and ethnically diverse sample to address three questions relevant to including spirituality in QOL measurement: (1) Does spirituality demonstrate a positive association with QOL? (2) Is this association unique? and (3) Is there a clinical utility in including spirituality in QOL measurement? Spirituality, as measured by the Functional Assessment of Chronic Illness Therapy-Spiritual Well-Being (FACT-T-Sp), was found to be associated with QOL to the same degree as physical well-being, a domain unquestioned in its importance to QOL. The significant association between spirituality and QOL was unique, remaining after controlling for core QOL domains as well as other possible confounding variables. Furthermore, spiritual well-being was found to be related to the ability to enjoy life even in the midst of symptoms. It is concluded that these results support the move to the bio-psycho-social-spiritual model for QOL measurement in oncology.


This paper describes a pilot psychotherapy program entitled, Re-Creating Your Life: During and After Cancer, for people who have experienced cancer that integrates spiritual issues and resources. The literature suggests that people experiencing cancer wrestle with existential concerns related to control, identity, relationships, and meaning. For spiritually oriented people, religious and spiritual issues are likely to be embedded in these existential concerns. Moreover, spiritual resources are likely to play a role in resolving these issues. This seems even more likely given the body of research suggesting that spirituality and religion play a helpful role when people face a traumatic life event. The few studies that have examined the importance of religious variables for people experiencing cancer have found that this is also true for this population. Thus, a psychotherapeutic program for persons diagnosed with cancer might be more efficacious if it integrated spiritual issues and resources. This paper describes a treatment program oriented towards this goal and presents rationales for the interventions that are included in the therapy process. The program addresses the four existential concerns listed above, in ways that integrate spiritual issues and assist participants in drawing on spiritual resources. An outcome study is currently underway to evaluate the effectiveness of this intervention. Ten participants have participated, results are promising, and will be published when data collection is completed.


The purpose of this research was to identify concerns and issues related to quality of life in long-term female cancer survivors and to discuss the implications of these issues for nursing. Data were collected by mailed questionnaire to 188 female long-term cancer survivors whose mean age was 61 years. Respondents were recruited through a Michigan tumor registry. The newly developed Long-Term Quality of Life (LTQOL) instrument was used to measure quality of life in four domains: physical, psychological, social, and spiritual. We hypothesized that physical concerns would be minimal, whereas psychological, social, and spiritual areas would encompass salient issues. Our hypotheses were supported, with the lowest levels of quality of life found in the areas of spiritual philosophical views, diet and exercise habits, and social/emotional support; the highest area of quality of life was physical, i.e., the absence of somatic concerns. Long-term survivors have resolved many of the physical concerns resulting from their illness and treatment. However, nursing interventions can still improve quality of life in the psychological, social, and spiritual areas. A multipurpose support group for survivors is recommended, including "exercise partners" to support regular exercise, group discussions of spirituality and philosophical views of life, and community service activities with women's organizations and/or newly diagnosed women.

5. Support Care Cancer 2000 Mar;8(2):110-4; Faith among patients with advanced cancer. A pilot study on patients offered "no more than" palliation; Norum J, Risberg T; Department of Oncology, University Hospital of Tromso, Norway.
Spiritual well-being is an important topic in cancer care. Being religious is reported to be potentially helpful by patients facing dilemmas concerning the quality and meaning of life. The aim of this study was to clarify patients’ attitudes to faith. Twenty patients aged 37-74 years and suffering from ten different incurable cancers were enrolled in the study. An interview technique focusing on the topic by way of an open question about faith was employed. The topic was only continued if the patient signaled a clear wish for this. Half the patients had a close relative present during the conversation, and an oncology nurse was present in all cases. Most patients (90%) intimated that the topic was of interest: 85% responded by saying they believed in God, and 75% reported that they prayed. A quarter (25%) mentioned that they had visited their local Lutheran pastor before their admission to hospital. One patient reported being a Jehovah’s Witness and one a member of the Norwegian Humanistically Ethical Association. Following the conversation nurse observed all patients and no raised level of anxiety was reported. Sixteen of the patients died within a median of 18 (1-180) days after the conversation. In conclusion, most patients responded positively to a question about faith. The topic should be addressed in the treatment of patients with advanced disease. However, care must be taken to avoid frightening the patients. Patients’ attitudes with regard to what death brings deserve respect.


The spiritual dimension is described and interpreted as the need for: meaning, purpose and fulfillment in life; hope/will to live; belief and faith. As the spiritual dimension is important for the attainment of an overall sense of health, well-being and quality of life (referred to as the health potential) and as illness and hospitalization can precipitate spiritual distress, patients’ spiritual needs should be addressed. The nurse’s role in spiritual care is discussed with reference to the nursing literature.

7. Psychooncology 2000 Jan-Feb;9(1):89; Exploring the relationships among spiritual well-being, quality of life, and psychological adjustment in women with breast cancer; Cotton SP, Levine EG, Fitzpatrick CM, Dowd KH, Targ E; Breast Cancer Personal Support and Lifestyle Intervention Trial, California Pacific Medical Center, San Francisco, CA, USA and University of California, San Francisco, CA, USA.

This study examined the relationships among spiritual well-being, quality of life, and psychological adjustment in 142 women diagnosed with breast cancer who were participating in a larger study designed to compare the efficacy of 2 psychosocial support programs. Participants were given a set of questionnaires that measured spiritual well-being, quality of life, and adjustment to cancer. Results revealed a positive correlation between spiritual well-being and quality of life, as well as significant correlations between spiritual well-being and specific adjustment styles (e.g. fighting spirit). There was also a negative correlation between quality of life and use of a helpless/hopeless adjustment style, and a positive correlation between quality of life and fatalism. In regression analyses, after controlling for demographic variables and adjustment styles, spiritual well-being contributed very little additional variance in quality of life. These findings suggest that while spiritual well-being is correlated with both quality of life and psychological adjustment, the relationships among these variables are more complex and perhaps indirect than previously considered.

8. Heart Lung 2000 May-Jun;29(3):180-95; Research on the quality of life of lung transplant candidates and recipients: an integrative review; Llanza DM, Lefayer CA, Farcas GA; Niehoff School of Nursing, Loyola University of Chicago, and Loyola University Medical Center, Maywood, IL 60153, USA.

Although lung transplantation is one of the most rapidly growing areas of solid organ transplantation, there has been little research on the quality of life of lung transplant candidates or recipients. This review critiques and synthesizes the quality-of-life reports concerning these patients that have been published between January 1980 and January 1999. The purposes of this review of the literature were to (1) examine both the conceptual and operational definitions of quality of life used; (2) identify and list the instruments used to measure quality of life; (3) investigate methodological issues; and (4) determine the state-of-the-art of research in this area. On the basis of this review, suggestions are made for future studies.


Spiritual beliefs and practices are believed to promote adjustment to cancer through their effect on existential concerns, including one’s personal search for the meaning of life and death, as well as hope. This study sought to identify the nature, prevalence, and correlates of spiritual/existential needs among an ethnically-diverse, urban sample of cancer patients (n=248). Patients indicated wanting help with: overcoming my fears (51%), finding hope (42%), finding meaning in life (40%), finding spiritual resources (39%); or someone to talk to about: finding peace of mind (43%), the meaning of life (28%), and dying and death (25%). Patients (n=71) reporting five or more spiritual/existential needs were more likely to be of Hispanic (61%) or African-American (41%) ethnicity (vs. 25% White), more recently diagnosed (mean=25.6 vs. 43.7 months), and unmarried (49% vs. 34%), compared with those (n=123) reporting two or fewer needs. Treatment status, cancer site, education, gender, age, and religion were not associated with level of needs endorsement. Discriminant analysis found minority status to be the best predictor of high needs endorsement, providing 65% correct classification, p<0.001. Implications for the development and delivery of spiritual/existential interventions in a multi-ethnic oncology setting are discussed.
WEB SITES

These run the gamut, from highly technical research forums for physicians to descriptions of specific diseases, treatments, and coping skills for patients to informal chat rooms and personal or anecdotal homepages. Broader health sites may also carry cancer information, so browse those covering men's, women's, and children's health, specific diseases such as prostate cancer, and pages devoted to pharmaceuticals and other therapies. Try to determine the site sponsor (or even country) as one important measure of site reliability. Another caveat is to check materials for consistency with your own hospital's medical practices and procedures. Help your clients identify sites on which "evidence-based medicine" would only be a foreign phrase! With those warnings, sample URL's follow.

CancerNet in Español (US National Cancer Institute): http://cancernet.nci.nih.gov/sp_menu.htm

The most comprehensive and authoritative site for both professionals and patients. Descriptions of diseases by type and body site, recommended treatments, supportive care topics, and summaries of clinical trials. It is updated frequently and is also indexed on Oncolink, http://www.oncolink.upenn.edu/pdq_html2/span.

NOAH (New York Online Access to Health Care): http://noah.cuny.edu

A cooperative effort between several major New York libraries, and probably the best bilingual health site around. Parallel English/Spanish structure, easy to use, and contains patient education materials from National Cancer Institute and other sources, plus links to other oncology locations.

DiarioMedico: http://diariomedico.recoletos.es

A professional site from Spain, updated daily. Under Especialidades, see Oncología for the latest news and scientific papers, Internet links (many to English sites), and some patient information. Includes PubMed link (Acceso a Medline).

CancerStop: http://www.cancerstop.net

Mexican web pages of medium to high literacy level for patients and families. News, basic terminology, questions to ask the doctor, descriptions of common cancers, and explanations of conventional, experimental and alternative therapies.

EcoMedic: http://www.ecomedic.com/em/indice.htm

From Spain, over 25 cancer topics are listed under Enfermedades, with several each on breast and prostate cancer. Organized by description, types, symptoms, and treatments; some with diagrams.

Y-ME National Breast Cancer Organization: http://www.y-me.org

Information and counseling for breast cancer patients, with a bilingual newsletter, links to other breast cancer sites in Spanish, and a hotline for Spanish speakers.

Salud Latina: http://www.salud-latina.com

Includes a medical glossary, some of the popular health calculators, and a drop-down box for cancer and other "enfermedades."

American Cancer Society: http://www.cancer.org


FEFOC (Fundación para la Educación Pública y la Formación Oncológica Continuada): http://www.fefoc.org/menu.htm

Moffitt Cancer Center and Research Institute, Tampa, FL: http://www.moffitt.usf.edu/pated/espanol.htm

National Coalition for Cancer Survivorship: http://www.canssearch.org/spanish/index.html


INTERNET PROVIDERS AND PORTALS

Some Internet providers and search engines already offer Spanish-language services. Prodigy provides a Spanish option, links to Spanish web sites, and a search engine in Spanish. America Online permits searching for words in many languages and is developing more features.

Many search engines have screen buttons that take one directly to resources in Spanish:

Yahoo!, http://espanol.yahoo.com. Select Salud to see categories such as Enfermedades (the largest), with over 70 subsets including cancer.

Lycos, www.lycos.com. Click on Mexico at the bottom of the screen, then Salud, to Enfermedades y Daños for links to sites on cancer, AIDS, etc.


Yupi, www.yupi.com. Go from Salud, to Enfermedades, to Cáncer to see over 100 links to articles, organizational links, and even cancer statistics. Another track is Salud, to Tu Salud, to Enfermedades, to Cáncer for a drop-down box of articles (from NOAH, EcoMedic, National Cancer Institute, etc.) on specific diseases, cancer prevention, etc. Literacy level varies.
Cancer Information for Spanish Speaking Patients

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Your next request for cancer information could be from one of the more than 17 million Americans who speak Spanish at home. Malignancies are the second leading cause of death among Hispanic Americans. These clients come from many countries and have a variety of cultural backgrounds, information needs, and literacy levels. Most Spanish-speakers in the U.S. and Canada also speak English, but many appreciate a choice when it comes to health information.

Cancer-related pamphlets in Spanish are still easier to find than books, and many of these are now on the Internet. The web sites and print materials described here are representative, not comprehensive; chat rooms, audiovisuals, and alternative medicine have not been covered. Idioms and vocabulary may vary, depending on the country of origin. Luckily, the Spanish language has similarities to both English and French, so even non-Spanish speakers can scan for source and content.

BASIC HEALTH BOOKS

General-purpose health books may be a good starting place, especially if your Spanish vocabulary needs work:


Rees, AL, editor. *Información de salud para los consumidores*. (Health information for consumers) Oryx Press, 1998. 520p. 1-573561665 $74.95. 80+ oncology pages from the National Cancer Institute and other agencies in sections on Cancer, Women’s Health, and others. (May be difficult to obtain; Oryx no longer distributes.)

BOOK VENDORS

Some links to suppliers of books from Spain, Mexico, and South America include:

- Chulainn Publishing Corp., Bailey, CO, 888-525-2665, www.newpublications.com Use "Links" to access Leer (see entry below) without registering.

- Donar’s Spanish Books, Lafayette, CO, 800-552-3316 (no web site found). Will send monthly booklists with some health titles.


- Leer (Libros en español) www.lee.nisc.com [Free registration, or see Chulainn] Compilation of books from publishers and vendors, with links from titles to a provider. Entering “cancer” yielded a list of nearly 70 titles, 1996-2000.

- Libros sin Fronteras, Olympia, WA, 360-357-4332, www.libroessinfronteras.com Browsable online catalog on general health topics, with a few cancer titles.

Common Health Terms

Bienestar = wellness
Consejo = advice
Dolor = pain
Enfermedad = disease
Mama = breast
Pulmón = lung
Quimioterapia = chemotherapy
Salud = health
Seno = breast

PAMPHLETS

Many colorful Krames pamphlets are available in Spanish, a few on topics such as breast lumps, mammography, pap tests, and PSA testing. Krames is now part of StayWell (www.staywell.com, 1-800-333-3032), which offers a small but growing number of Spanish materials through its Krames On-Demand product, with stand-alone PC and Intranet versions.

Channing-Bete (www.channing-bete.com, 1-800-477-4776), another pamphlet provider, also lists many Spanish health pamphlets in its print catalog.

Scan for keywords in the non-indexed alphabetic list of foreign language pamphlets from Krames, Channing-Bete, and other organizations on the Utah Department of Health site, www.health.state.ut.us/ethnic/html/pamphlet_list.html.

CHID, the Combined Health Information Database (http://chid.nih.gov), can also be used to locate brochures. Use its Detailed Search to select categories and languages. Kidney and Urologic Diseases include prostate materials; clicking on individual titles brings up full citations with English abstracts and ordering or availability information.
CONCLUSION

North American publishers and others have discovered the Hispanic market, and a growing number of resources in Spanish will aid us in reaching out to Hispanic clients. Assess the needs in your area and coordinate efforts with other nearby libraries or resource centers. Low-literacy materials are still needed, especially those with diagrams or photos. It would be interesting to see educational titles based on the foto-novela format. News releases, information on screening clinics, and basic health information may already be available on local Hispanic media sites or in newspapers, and these sites may publicize your services, too. Access to both print and Internet materials in Spanish will empower both health professionals and Spanish-speaking patients to take action for better health.

SELECTED REFERENCES


(Reprinted from NN/LM-MR's Netlink, Spring 1999)

Continuing Education

Cancer Basics: Understanding the Big Picture

Mark Vrabel, MLS
Oncology Nursing Society

For those medical librarians employed in an oncology setting and responsible for providing cancer information services, a basic course in cancer concepts, terms, and treatment modalities is an ideal way to increase familiarity and understanding, particularly for those not possessing a healthcare background or clinical experience. I was able to participate in such a course when I pilot tested the "Cancer Basics: Understanding the Big Picture" course offered by Oncology Education Services, Inc., our Society's for-profit affiliate.

The content is exactly as advertised: A *basic* overview that does not require any prerequisite knowledge in the field, i.e. it is just as well-suited to medical librarians (even more so to those with a cancer concentration, obviously) as it is to nurses and other healthcare professionals involved in direct patient care.

If you would like additional information about the course, please contact Karen Adams or Denise Barilla at 1-888-637-7787 or visit http://www.oesweb.com and consult the "Events/Programs" section.

RECENT LITERATURE ABOUT THE ROLE OF MEDICAL LIBRARIANS

Mark Vrabel, MLS
Oncology Nursing Society

The September 2000 issue of Oncology Times includes "The Informationist: A New Health Profession?" in the "Viewpoints" department (pp.2-5). This rather in-depth editorial -- authored by Frank Davidoff, MD and Valerie Florance, PhD -- documents the valued role of medical librarians in the clinical setting, and proposes the need for a "new style librarian" trained and educated in both information science and clinical work (outlining the suggested steps in establishing a national program of such). It also cites the work of medical librarian Gertrude Lamb in moving medical librarians "out of the stacks" and into clinical services 30 years ago.
Olia Holowka Palmer
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For many years, medical librarians turned to the CancerLit database when in search of meeting abstracts on cancer-related topics. In 1997 CancerLit’s producer, the National Cancer Institute (NCI), changed certain production and distribution practices. One of the changes: meeting abstracts were no longer added to the database. In effect, CancerLit became a subset of MEDLINE (produced by the National Library of Medicine.)

Recently the NCI has been adding the 1998 and 1999 annual meeting proceedings of the American Society of Clinical Oncology (ASCO) into CancerLit. Searching CancerLit at NCI’s CancerNet web site will yield the 1998 and 1999 ASCO abstracts. (NB: the search must be done using author or keyword searching; at this time, post-1997 meeting abstracts are not MeSH indexed.) Unfortunately, searching CancerLit as provided by at least one vendor, Ovid, will not retrieve those same 1998 and 1999 abstracts. It is not known why this discrepancy exists.

While the re-introduction of ASCO abstracts is a welcome development, what of the meeting abstracts from other cancer-related groups? NCI has not announced any plans to reintroduce those abstracts. (Please see the following MedLib posting from Bill Trefzger of the National Cancer Institute for contact information for comments and suggestions.) It’s a shame to have lost the convenience of “one-stop” searching, but do not despair; alternatives exist.

First, locate the organization’s website and look for meeting abstracts there. Most of them will be easily identifiable, but some groups seem intent on honing our sleuthing skills, so if you can’t find the abstracts right away, persist. Look for words/phrases like “meeting(s),” “education,” “conference(s),” even “publications.”

Second, try the various other databases that may contain the abstract you seek, or information about it. Biological Abstracts/RRM will contain abstracts from some organizations (e.g., American Association for Cancer Research) and will provide records representing proceedings books from other organizations. AIDSLINE includes meeting abstracts from 1998 and is entering 1999 abstracts now. HealthSTAR now includes abstracts through 1999. OCLC’s PapersFirst and ProceedingsFirst will provide information about where to find abstracts.

Consider the possibility that the proceedings have been published only as a book and look in OCLC’s WorldCat, or in a large multi-institutional library catalog (like OhioLINK), or in NLM’s LOCATORplus. You can then request the volume through ILL.

Finally, remember that when the abstract you seek is impossible to find, tap the source. Track down the author and have your client contact him or her directly.
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