

M A R Y L A N D
State Council on Cancer Control



2006

Annual Report



STATE OF MARYLAND
DHMH

Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

Family Health Administration

Russell W. Moy, M.D., M.P.H., Director – Joan H. Salim, Deputy Director

January 2007

The Honorable Martin O'Malley
Governor
State House
Annapolis, MD 21401

Dear Governor O'Malley:

On behalf of the members of the State Council on Cancer Control, an independent commission established under Executive Order 01.01.1997.07 and reaffirmed under Executive Order 01.01.2002.25, I am pleased to submit the Council's 2006 Annual Report.

During 2006 the Council made robust strides in its mission with the Council holding four full meetings and one all day event, our 13th Annual Cancer Control Conference. In January 2006, the Council once again urged the Maryland General Assembly to pass several important pieces of legislation. In August 2006 the Council hosted a public health forum on cervical cancer vaccines and on November 15, 2006, the Cancer Council held the 13th Annual Cancer Control Conference held at Martin's West. Attended by over 240 and 390 people respectively, both events were a direct result of the hard work and dedication of members and staff. Finally, in 2006 the Council continued its work on implementing the Maryland Comprehensive Cancer Control Plan.

Looking forward to 2007, the Maryland State Council on Cancer Control will continue to utilize evidence-based research as the foundation for all Cancer Council activities and recommendations for cancer prevention programs and policies. In addition to focusing on a host of important topics, the Council will focus our efforts on several key issues outlined later in this report.

The Maryland State Council on Cancer Control looks forward building a strong relationship with your office, the Department of Health and Mental Hygiene, as well as community groups, so that we may all contribute in the fight against cancer in Maryland.

Sincerely,

J. Richard Lilly, M.D.
Chair – Maryland State Council on Cancer Control

Maryland State Council on Cancer Control 2005 Annual Report

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I. State Council on Cancer Control Membership

J. Richard Lilly, MD – Chair

Senior Partner, Multi-Specialty Practice Group

Martin D. Abeloff, MD – Vice Chair

Director, Johns Hopkins Kimmel Comprehensive Cancer Center

Esther Rae Barr

Executive Director
Maryland Academy of Family Physicians

Kevin Cullen, MD

Director
Univ. of Maryland Greenebaum Cancer
Center

Katherine P. Farrell, MD, MPH

Deputy Health Officer
Anne Arundel County Health Department

Mark Gorman

Manager of Public Policy
National Coalition of Cancer Survivorship

John Groopman, PhD

Professor
Johns Hopkins Bloomberg School of Public
Health

Gail Roddie-Hamlin

Chief Community Officer
American Cancer Society South-Atlantic
Division

Roger Harrell, MHA

Health Officer
Dorchester County Health Department

Dr. Miles Harrison, Jr.

Director of General Surgery
Maryland General Hospital

Phillip Heard, MD, MPH

Maryland Department of the Environment

Delegate John Leopold

Maryland House of Delegates

Senator Nathaniel J. McFadden

Maryland Senate

Edward D. Miller, MD

Dean
Johns Hopkins School of Medicine & CEO, Johns
Hopkins Medicine

David J. Ramsay, DM, DPhil

President
University of Maryland, Baltimore

Dr. Albert Steren

Physician

Diana Ulman

Founder
The Ulman Cancer Fund for Young Adults

Ex-Officio Members

Regina el Arculli, MA

Program Director, National Cancer Institute

Mary Leach, PhD

Executive Assistant to the President
University of Maryland, Baltimore

Executive Director

Robert Villanueva, MPA
Maryland Department of Health and Mental Hygiene

II. History, Mission, and Current Chair

History

The Maryland State Council on Cancer Control (Council) is a 25-member body appointed by the Governor with members selected from State agencies involved in cancer screening, prevention and treatment services, as well as members representing the general public, major academic medical institutions in Maryland's cancer community, national organizations, the business community, and health and scientific disciplines concerned with cancer control. In addition, at least one member of the Council is a known cancer survivor, one is a member of the Maryland State Senate, and another is a member of the Maryland House of Delegates. The Department of Health and Mental Hygiene (DHMH) provides the Council with necessary staff and resources.

The Council was established by an Executive Order on June 26, 1991. The mission of the Council was reaffirmed with updated Executive Orders in 1997 and 2002. For a copy of the Council's Executive Order, see Appendix A.

Council Mission

The Council advises the Governor, other government officials, public and private organizations, and the general public on comprehensive State policies and programs necessary to reduce the incidence and mortality of cancer in Maryland. In addition, the Council is charged with promoting and coordinating, in cooperation with other federal, State, local, or private agencies, unified programs that identify and address the cancer needs of Marylanders such as public and private partnerships to improve access to prevention, screening, and treatment services. Finally, the Council is charged with reviewing existing and planned cancer programs in the public and private sectors to assure proper allocation of State resources.

Current Council Chair

Dr. J. Richard Lilly, a Board Certified Family Physician, is the Senior Partner in a multi-specialty Practice Group in Prince George's County and has served as the Maryland State Council on Cancer Control's Chairman since his appointment in August 1999. Dr. Lilly received his medical degree from Temple University in Philadelphia and completed his internship at the Church Hospital in Baltimore, Maryland. From 1970 –1973 Dr. Lilly served as a Clinical Assistant Professor in the Family Practice Program at the University of Maryland and, from 1974-1978, was a faculty member of the Department of Family Medicine at the University of Maryland, and founder of the Residency Program at Prince George's County Hospital and Medical Center.

In 1995, Dr. Lilly was awarded a Governor's Citation as one of Maryland's most respected and admired members of the medical profession, and in 1996 was selected by the American Hospital Association and the American Medical Association as one of the 50 Most Positive Physicians in America. In 1995-1996, Dr. Lilly served as the President of Med-Chi, the Maryland State Medical Society, and currently serves as Chair of the Med-Chi Insurance Agency. Dr. Lilly has served on the Board of Carefirst BlueCross/BlueShield since 1996 and was a founding partner of Doctor's Community Hospital in Prince George's County. Dr. Lilly earned his B.A. in Chemistry from Gettysburg College in 1958.

III. Maryland State Council on Cancer Control 2006 Meeting Schedule

The State Council on Cancer Control held four meetings and one conference during calendar year 2006. Agenda items for these meetings included the Cigarette Restitution Fund Program, legislation arising from the 2006 Maryland General Assembly, and the Maryland Comprehensive Cancer Control Plan.

Date	Location
<p style="text-align: center;">Friday March 10, 2006 9:30 – 11:30</p>	<p style="text-align: center;">American Cancer Society White Marsh, MD</p>
<p style="text-align: center;">Friday June 16, 2006 9:30 – 11:30</p>	<p style="text-align: center;">University of Maryland Baltimore Baltimore, MD</p>
<p style="text-align: center;">Friday September 15, 2006 9:30 – 11:30</p>	<p style="text-align: center;">Maryland Dept of the Environment Baltimore, MD</p>
<p style="text-align: center;">November 15, 2006 8:30 – 3:30</p>	<p style="text-align: center;">13th Annual Cancer Conference Martin’s West</p>
<p style="text-align: center;">Friday December 15, 2006 Annual Retreat 9:30 – 12:30</p>	<p style="text-align: center;">Bloomberg School of Public Health at Johns Hopkins Baltimore, MD</p>

Agendas for the 2006 Cancer Council Meetings can be found in Appendix B

IV. 2006 Council Activities and Accomplishments

A. 2006 Legislative Session

Since its inception in 1991, the State Council on Cancer Control has played an active role in the legislative process by supporting certain legislative measures in the General Assembly aimed at reducing the incidence and burden of cancer in Maryland. During the 2006 session, the Cancer Council supported initiatives such as legislation banning smoking in bars and restaurants, which, though defeated in committee, made significant progress. In addition, legislation calling for further regulation of tanning beds was considered, but ultimately not given a favorable report. Finally, legislation to extend the sunset of past legislation covering home visits after mastectomy or surgical removal of a testicle was passed and signed into law by the Governor.

For a complete listing of all legislation tracked during the 2006 Maryland General Assembly session, see Appendix C.

B. Comprehensive Cancer Control Planning in Maryland

Since October 2001, DHMH has participated in a cooperative agreement with the Centers for Disease Control and Prevention (CDC) to update the Maryland State Cancer Plan. During a 29-month planning process, the State Council on Cancer Control served as the managing body directing the comprehensive cancer control planning efforts for the State of Maryland.

Since its publication in April 2004, over 1,300 copies of the 2004-2008 Maryland Comprehensive Cancer Control Plan have been disseminated across the State of Maryland and the country. In late 2006, the Executive Summary of the Maryland Comprehensive Cancer Control Plan was published and disseminated to over 500 individuals.

In 2005, DHMH applied, on behalf of and in collaboration with, the Baltimore City Colorectal Cancer Collaborative and its partner organizations, for a grant to conduct colorectal cancer screening in Baltimore City under a demonstration project with the CDC. Objectives contained in the colorectal cancer chapter of the Maryland Comprehensive Cancer Control Plan were the basis of the application. In September 2005, DHMH was awarded a cooperative agreement from the CDC for a multi-site colorectal cancer screening demonstration project in Baltimore City. The program is managed by DHMH, with the Collaborative serving as the Steering Committee for all activities under this cooperative agreement.

The www.MarylandCancerPlan.org Web site continues to be the “home base” for comprehensive cancer control efforts in Maryland. Updated regularly by DHMH, this Web site has served as an effective tool for information dissemination, evaluation, and program announcements. In addition, the Web site was used to register individuals for the various Council conferences, many of which focused on a host of issues contained in the 2004-2008 Maryland Comprehensive Cancer Control Plan. By the end of 2006, over 47,000 hits were registered on this website.

Evaluation of the Cancer Planning Process

In fall of 2005, Social Solutions International, Inc. (SSI) was awarded a contract from DHMH, on behalf of the Maryland State Council on Cancer Control, to construct and execute an evaluation plan, strategy, and process for the planning phase of the 2004-2008 Maryland Comprehensive

Cancer Control Plan (MCCCP). The Social Solutions project team surveyed healthcare professionals in the field of cancer control, including MCCCP committee members, at the 12th Maryland State Council on Cancer Control Conference.

The Council conference was held on November 16, 2006 at the Martin's West in Baltimore, Maryland and approximately 390 individuals attended. A majority of individuals attending the conference were allied health professionals; however, all individuals interested in cancer control and related topics were encouraged to attend. SSI obtained detailed surveys from approximately fifty-two percent (51.5%, n=201) of the 390 conference attendees.

In an attempt to reach additional committee members, SSI also sent out a survey via email using the conference listserv provided by DHMH. MCCCP Committee members were contacted by email on two occasions over a one-month period and were provided a survey in PDF format.

Findings based on surveys (collected from 211 health professionals, representing 20 counties throughout Maryland and Baltimore City) suggest that those involved in cancer control are indeed using the plan as a resource guide. Seventy-five percent of survey respondents had a copy of the MCCCP and 71% of respondents stated that they or their organization had used the MCCCP in some way.

When asked for details regarding their use of the MCCCP, participants' most frequent response (79%) was that they used it as a reference. Sixty-six percent of respondents had read the plan or portions of it, 48% had used the plan for planning new activities, 34% used it to show partnerships and consensus recommendations, and 18% used it to apply for new funding.

The most relevant chapters of the MCCCP, with 50% or more of respondents selecting them as relevant to their area of focus, included: cancer disparities; breast cancer; colorectal cancer; burden of cancer in Maryland; and tobacco use and lung cancer.

Survey respondents and their organizations stated that they made numerous changes as a result of the MCCCP. The most frequently reported change associated with the MCCCP was increased knowledge of cancer control activities and resources (68%). Sixty-two percent of respondents increased their knowledge of others involved in cancer control, 40% increased dialogue and partnerships with others, 12% received increased funding, and 11% stated that their organization had changed its goals and objectives.

The feedback elicited from both committee members and MCCCP users provided the basis for recommendations to improve the Maryland Comprehensive Cancer Control Plan. These recommendations fall into three broad recommendations for the future development, dissemination, and implementation of the MCCCP. The recommendations are as follows:

1. Provide updates to MCCCP data and resources when possible and consider including chapters on additional topic areas;
2. Increase familiarity and use of the MCCCP through active outreach and community engagement strategies; and
3. Take steps toward implementing the strategies and achieving the goals outlined in the MCCCP.

MCCCP staff will be working on these recommendations in 2007 to ensure that the document has the most utility for Marylanders.

C. Cervical Cancer Activities: The Public Health Forum on Cervical Cancer Vaccines

During the 2004 Maryland General Assembly, Senate Bill 499 established a Cervical Cancer Committee. The bill required DHMH to staff the Committee, and required the Committee to present findings and recommendations about developments in cervical cancer to the Governor and the General Assembly annually for five years beginning in October 1, 2004.

Developments and information on cervical cancer were presented to the attendees at the 2006 Maryland State Council on Cancer Control's Annual Cancer Conference, including the announcement regarding the development of prophylactic cervical cancer vaccines. These vaccines can be administered early in life and would prevent a person from ever being infected with the Human Papilloma Virus (HPV).



In April of 2006 it was announced that the first of several HPV vaccines would be coming to market within six months; a decision was made to hold a one-day public health forum dedicated to the issue of HPV vaccines. The forum, held on August 15, 2006 at the Pikesville Hilton, brought together nationally and internationally known experts in the area of cervical cancer vaccines; the forum invited any interested citizen to learn about the vaccines and their potential impact on

healthcare and public health in Maryland, and worldwide. While the forum was originally intended to educate approximately 100 attendees, the interest from Marylanders was very high; over 250 people registered for the event.

The day began with former State Senator Gloria Lawlah **(at right)**, chief architect of several pieces of cervical cancer legislation, welcoming the attendees on behalf of the Maryland General Assembly. Senator Lawlah spoke about the importance of cervical cancer prevention and the implementation of HPV vaccines as a way to reduce cervical cancer in Maryland. In addition to Senator Lawlah, Dr. Russell Moy from DHMH and Dr. Katherine Farrell from the Cancer Council greeted attendees.



Dr. Amy Berrington de Gonzalez **(at left)** gave a detailed presentation on the burden that cervical cancer has on Maryland, the nation, and the world. She highlighted the fact that worldwide, over 270,000 people die from cervical cancer each year, and that third world nations carry a disproportionate burden of this cancer due to lack of screening. Dr. de Gonzalez illustrated the link between HPV and cervical cancers, and spoke about the promise of HPV vaccines. Dr. de Gonzalez also pointed out that the extraordinarily high cost of the HPV vaccine is the most pressing concern, especially in countries where screening programs are lacking and vaccination programs are extremely under funded.



Following Dr. de Gonzalez's overview of cervical cancer, Dr. Alan Hildesheim **(at left)**, a senior researcher from the Division of Epidemiology and Genetics at the National Cancer Institute, provided a detailed overview of cervical cancer vaccines. Dr. Hildesheim spoke about the development of the vaccines and supporting data derived from the efficacy trials that were undertaken. Dr. Hildesheim carefully explained the major issues still surrounding HPV vaccines, including the age of inoculation, whether men should be vaccinated, and the process or inclusion of HPV vaccines in the existing cervical cancer screening programs. Dr. Hildesheim concluded by saying that cost of the vaccines is one of the primary major concerns for its usage and that while there may be a change to screening guidelines with the advent of HPV vaccines, public health screening programs will still be needed now and in the future.

After Drs. de Gonzalez and Hildesheim, Edward Hirschhorn **(at right)**, Chief of the Vaccine for Children (VFC) program at DHMH, spoke about the implications of the HPV vaccine on the population that his program reaches. After providing an overview of the VFC program and its funding streams, Mr. Hirschhorn indicated that VFC would be stocking the HPV vaccines as soon as there was a contract in place and would begin distributing the vaccine to participating physicians and directing them to vaccinate their VFC patients.



Following a networking lunch, Dr. James Tursi of Glaxo Smith Kline Pharmaceuticals (GSK) **(at right)** presented his company's development of a bivalent (HPV 16-18) HPV vaccine. Dr. Tursi provided an introduction to his company and an historical overview of GSK's involvement in vaccines. In addition, Dr. Tursi spoke about the development of the GSK HPV vaccine and how it differed from that of Merck, and then provided detailed data on the clinical trials GSK has performed with its vaccine and the results of these trials. Dr. Tursi concluded by indicating that GSK would be filing for licensure in the United States and around the world within a matter of months.



Next Dr. Liana Clark **(at left)**, a medical director for Merck Pharmaceutical's Vaccine Division, presented her company's advanced work in the area of cervical cancer vaccines. Dr. Clark discussed the philosophy, development, and positioning of Merck's quadrivalent HPV vaccine, Gardasil[®]. Dr. Clark provided an in-depth explanation of why Merck decided to create a vaccine that not only provided protection from the two most prevalent HPV types (16 and 18), but also the two most prevalent types (6 and 11) that cause genital warts. While covering the extensive clinical trials conducted, Dr. Clark addressed some of the issues Dr. Hildesheim mentioned earlier and how Merck would be working to combat them in the future.

Dr. Connie Trimble (**at right**) from the Johns Hopkins School of Medicine closed the conference with a presentation on the work her laboratory is conducting on a therapeutic HPV vaccine. While in its early stages of development, this vaccine is intended to be different from other vaccines in that it is given to an individual already infected with HPV. When a person is inoculated, it is hoped that the vaccine will cause a protective response and cause the HPV to be cleared from the patients system. Once cleared of HPV, the person could then be inoculated using a normal prophylactic HPV vaccine.



Summaries of the evaluations indicated that over 90% of attendees found the information to be useful in their work.

Presentations from the August 2006 public health forum presentations can be found at http://www.fha.state.md.us/cancer/cancerplan/html/cerv-can_presentations_2006.cfm

The agenda and evaluation results for the public health forum can also be found in Appendix D.

V. 2006 Maryland State Council on Cancer Control Conference¹



On November 15, 2006, at Martin's West in Baltimore, Maryland, the Maryland State Council on Cancer Control hosted its 13th annual conference on the issues and challenges in cancer control in Maryland. Four hundred individuals attended the conference, and it was the largest event ever sponsored by the State Council in Cancer Control.

Opening the morning session of the conference with welcoming remarks was former Secretary of DHMH, S. Anthony McCann (**at right**). Following former Secretary McCann, Council Chair, Dr. J. Richard Lilly (**at right, below**), welcomed attendees to the conference.

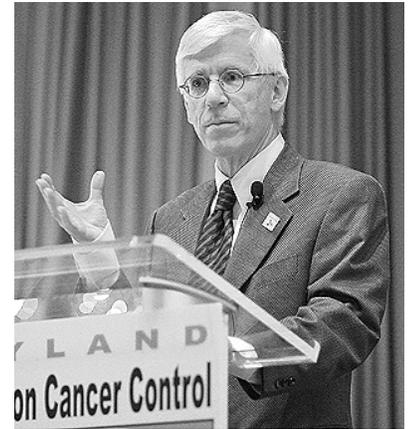


During his welcoming address, Dr. Lilly gave a historical perspective on the Cancer Council conference and how it has grown from a small event to one with 400 attendees. In addition, Dr. Lilly talked about the impact of tobacco and lung cancer on his practice and in his life. He spoke of the importance of working together to implement programs and policies to reduce the burden of tobacco and lung cancer, not only in Maryland, but also throughout the U.S. and the world. Dr. Lilly closed his comments by providing an overview of the conference agenda.



¹ The conference agenda, along with additional conference materials may be found in **Appendix E**.

Following Dr. Lilly, Jonathan M. Samet **(at right)**, MD, MS, Professor and Chairperson, Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health, provided a presentation on “Tobacco’s Toll.” Dr. Samet described the historical development of tobacco use in this country, dating all the way back to Native Americans, and detailed the 1939 research linking tobacco to several diseases, including lung cancer. Dr. Samet then focused on the reaction of public health to the epidemic of smoking, including the 1964, 1972, and 1986 Surgeon General’s report on smoking. Dr. Samet also discussed the impact of the 1999 Master Settlement Agreement with tobacco manufacturers. Dr. Samet concluded his presentation by focusing on the 2006 Surgeon General’s report on the health consequences of secondhand smoke.

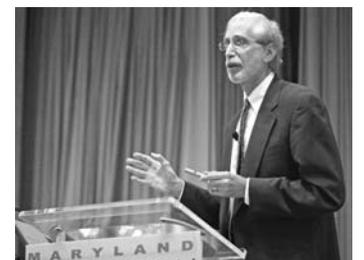


Next Dr. Christine Berg **(at right)**, Chief of the Early Detection Research Group in the Division of Cancer Control and the National Cancer Institute presented a talk entitled “Lung Cancer Screening: Promises and Pitfalls.” Dr. Berg detailed the rationale for screening for lung cancer and how screening, in tandem with smoking cessation, could impact lung cancer mortality rates. Dr. Berg highlighted data from the Mayo Clinic Lung Cancer Screening Trial and the Prostate, Lung, Colorectal, and Ovarian (PLCO) screen trial, both of which utilize chest x-rays to detect lung cancer, but which illustrate the shortcomings of chest x-rays as a screening modality.



Dr. Berg then provided in-depth research on the clinical trials currently being conducted in the U.S. and around the world about the efficacy of using of spiral CT scans to screen for lung cancer. Dr. Berg presented preliminary results from several large scale CT screening trials and noted the positive implications of CT scans. Dr. Berg also noted some potential downsides to this emerging screening modality as well, and stated that wider research on the use of CT scans is indeed needed, but the technology is promising for screening.

Following the panel on Cancer Screening Best Practices, the Directors of Maryland’s two major Cancer Centers shared their thoughts on the emerging issues in cancer control. Dr. Martin Abeloff **(at right)**, Director of the Kimmel Comprehensive Cancer Center at Johns Hopkins, talked about “Progress in the Prevention, Early Detection, and Treatment of Cancer” and focused on the major advances in these areas over the last 50 years. Dr. Abeloff advocated for communicating the strategic vision for research at the Kimmel Cancer Center and the Center’s focus on being an engine for translating research into real world applications. Dr. Abeloff quoted Dr. Samuel Broder, as saying, “Poverty is a carcinogen” and concluded his discussion by mentioning that no matter the research being done, if our citizens, particularly the poorest in the U.S., do not have access to care, then the risk of perpetuating disparities is heightened.



Dr. Kevin Cullen (**at right**), Director of the University of Maryland's Greenebaum Cancer Center, shared with the audience a major new partnership called "The American-Russian Cancer Alliance." Dr. Cullen said that Russia has one of the top five tobacco consumption rates in the world, with over 63% of men and 25% of high school aged children as smokers. This partnership was created, with the help of the US Congress and Russian Duma, to develop programs and policies to address ways to reduce the incidence and mortality of tobacco related diseases in Russia.



Following the annual networking luncheon, Ms. Joan Stine (**at left**), Director of the Office of Tobacco Use Prevention at DHMH, lead a panel presentation entitled "Maryland's Efforts in Tobacco Use Prevention." To start the panel presentation, Ms. Stine gave an overview of the Maryland Cigarette Restitution Fund Tobacco Use Prevention and Cessation Programs that have been in place for six years and the results that have been shown. She highlighted major successes in the program, including the establishment of a legal resource center and a Statewide quitline. Ms. Stine also pointed out that a survey of youth and adult tobacco use habits was also underway.

After Ms. Stine spoke, Dr. Penny Borenstein (**top right**) and Dr. Judith Sensenbrenner (**middle right**), the local health officers from Howard and Wicomico Counties, respectively, gave detailed presentations on the structure and operation of the tobacco use prevention and cessation programs in their counties. Drs. Sensenbrenner and Borenstein both spoke of the development of their diverse community coalitions and included highlights of their programs.



Following Drs. Borenstein and Sensenbrenner was Dr. Carlo Diclemente, (**bottom right**) a professor in the Department of Psychology at the University of Maryland Baltimore County and an internationally know expert in the area of smoking cessation. Dr. Diclemente spoke about the science of smoking cessation and reviewed several behavior change models, as well as best practices. Dr. Diclemente also discussed the statewide smoking quit-line that is now operational in Maryland.



Kathleen Hoke-Dachille (**at left**), Director of the Center for Tobacco Regulation at the University Of Maryland School Of Law, closed the tobacco use prevention panel. Ms. Hoke-Dachille focused on the areas of clean indoor air laws, youth access issues, and smoking cessation insurance coverage. Ms. Hoke-Dachille spoke about the process that local jurisdictions like Montgomery and Talbot Counties underwent to pass clean indoor air laws in Maryland and pointed out that a statewide law has faced opposition for many years. Ms. Dachille stated that much has been done and many successes have been achieved in the areas of youth access legislation and insurance coverage for smoking cessation, as well as legislation banning the sale and/or purchase of cigarettes over the Internet.

Exhibitors

The hallways of Martin's West were filled with exhibits from various cancer-related organizations and programs. This year, 22 organizations had exhibitions, and the evaluations noted that the exhibits were very beneficial and informational to the attendees.



Conference Evaluation and Feedback

Conference participants were asked to complete a survey that allowed them to comment on the facilities and conference organization. Over 215 (64%) of the participants completed the survey. Over 82% of the evaluations said that the conference met or exceeded their expectations.

VI: Appendices

Appendix A

State Council on Cancer Control Executive Order

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Appendix B

2006 State Council on Cancer Control Meeting Agendas

Maryland State Council on Cancer Control

American Cancer Society – White Marsh

March 10, 2006

9:30 AM – 11:30 PM

Agenda

- **Call to Order** Dr. J. Richard Lilly
- **Approval of September Meeting Minutes** Dr. J. Richard Lilly
- **Announcements** Dr. J. Richard Lilly
- **Approval of 2006 Meeting Calendar** Group
- **Committee Reports**
 - Cancer Registry Advisory Committee Dr. Katherine Farrell
 - Legislative Committee Dr. Mary Leach
- **Franklin Square Cancer Center Presentation** Dr. William McGuire
- **November 16th Cancer Conference Wrap-Up** Vicki Varsalone
Robert Villanueva
- **Cigarette Restitution Fund Update** Dr. Carlessia Hussein
- **2006 Priority Discussion** Group
- **New Business** Group

Maryland State Council on Cancer Control

Bess and Frank Gladhill Board Room
Health Sciences and Human Services Library

University of Maryland, Baltimore

June 16, 2006

9:30-11:30

Agenda

- **Call to Order** Dr. J. Richard Lilly
- **Greetings** Dr. David Ramsay
- **Approval of February Meeting Minutes** Dr. J. Richard Lilly
- **Announcements** Dr. J. Richard Lilly
- **Maryland Comprehensive Cancer Control Plan Evaluation** Robert Villanueva
- **Cancer Conference Update** Vicki Varsalone
Felicia Plummer
- **Committee Reports**
Cancer Registry Advisory Committee Dr. Katherine Farrell
Legislative Committee Dr. Mary Leach
- **CRFP Update** Dr. Carlessia Hussein
Marsha Bienia
Joan Stine
- **New Business/Open Table** Group
- **Adjourn**

Maryland State Council on Cancer Control
Maryland Department of the Environment

September 15, 2006

9:30-11:30

Agenda

- **Call to Order** Dr. J. Richard Lilly
- **Greetings** Dr. Phil Heard
- **Approval of June Meeting Minutes** Dr. J. Richard Lilly
- **Announcements** Dr. J. Richard Lilly
- **Cervical Cancer Vaccines Event Recap and Discussion** Dr. Katherine Farrell
Dr. Kathy Helzlsouer
Dr. Albert Steren
- **Cancer Conference Update** Vicki Varsalone
Felicia Plummer
- **Committee Reports**
Cancer Registry Advisory Committee Dr. Katherine Farrell
Legislative Committee Dr. Mary Leach
- **CRFP Update** Dr. Carlessia Hussein
Marsha Bienia
- **New Business/Open Table** Group
- **Adjourn**

Maryland State Council on Cancer Control

Johns Hopkins Bloomberg School of Public Health

Room E9519, 9th Floor

December 15, 2006

9:30-11:30

Agenda

- **Call to Order** Dr. J. Richard Lilly
- **Approval of September Meeting Minutes** Group
- **Announcements** Dr. J. Richard Lilly
- **Review of Proposed of 2007 Meeting Calendar** Group
- **November 15th Cancer Conference Wrap-Up** Felicia Plummer
Vicki Varsalone
Robert Villanueva
- **Committee Reports**
 - Cancer Registry Advisory Committee Dr. Katherine Farrell
 - Legislative Issues Mary Leach
- **Cigarette Restitution Fund Update** Dr. Carlessia Hussein
- **2007 Priority Discussion** Group
- **Old Business** Group

Appendix C

2006 State Council on Cancer Control Legislative Positions Chart

2006 State Council on Cancer Control Legislative Positions Chart

HB=House Bill, SB=Senate Bill, SJR=Senate Joint Resolution, HJR=House Joint Resolution;
Council Position: S=Support, O=Oppose, NP=No Position;
SWA=Support with Amendment; PWA=Passed with Amendment
House or Senate Action - UNF=Unfavorable, Amend=Amendment

SENATE BILLS

Bill #	Name	Sponsor (s)	Council Position	House Action	Senate Action	Enacted
SB 8	Income Tax - Credit for Prohibiting Smoking on Business Premises Providing for Maryland tax credit for prohibiting smoking on the premises business establishments.	Senator Klausmeier	NP		Unfavorable Report	
SB 298	Clean Indoor Air Act of 2006 Prohibiting a person from smoking tobacco products in indoor areas open to the public and places of employment.	Senators Ruben, et al.	S		No Action	
SB 491	Coverage for Home Visits After Mastectomy or Surgical Removal of a Testicle - Extension of Sunset Extending until 9/20/2011 a termination date for mandated insurance coverage for home visits following a mastectomy or surgical removal of a testicle.	Senators Teitelbaum, Britt, et al.	S	Passed 137-0	PWA 44-2	Signed by the Governor
SB 572	Tobacco Tax - Revenues for Pension Enhancements for State Employees and Teachers Altering the tobacco tax rates on tobacco products; and requiring the Comptroller to distribute a portion of specified tobacco tax revenues to a special fund to be used only to provide funding for pension enhancements for State employees and teachers.	Senators Ruben, et al.	NP		Heard 3/20	

HOUSE BILLS

Bill #	Name	Sponsor (s)	Council Position	House Action	Senate Action	Enacted
HB 200	<p>Health Insurance - Coverage for Hospitalization After Mastectomy</p> <p>Requiring specified health insurance carriers to provide inpatient hospitalization coverage for a specified minimum length of time following a mastectomy that is performed for the treatment of breast cancer.</p>	Delegates Benson and Nathan-Pulliam	NP	Withdrawn		
HB 375	<p>Clean Indoor Air Act of 2006</p> <p>Prohibiting a person from smoking tobacco products in indoor areas open to the public and places of employment.</p>	Delegate Frush, et al.	S	Unfavorable Report		
HB 1226	<p>Tanning Facilities - Licensing and Regulation</p> <p>Requiring persons to obtain a license from the Secretary of Health and Mental Hygiene to operate a tanning facility.</p>	Delegates Healey, Boteler, et al.	S	Withdrawn		
HB 1300	<p>Maryland Cigarette Fire Safety and Firefighter Protection Act</p> <p>Prohibiting the manufacture, sale, or offer for sale of cigarettes in the State unless the cigarettes have been tested in a specified manner and meet a performance standard.</p>	Delegate Moe, et al.	NP	PWA 122-12	No Action	
HB 1353	<p>Foster Care - Secondhand Smoke Exposure</p> <p>Requiring the Social Services Administration to adopt regulations requiring social service departments to consider secondhand smoke exposure in determining permanency plans for children in foster care and require foster care parents to protect children in foster care from exposure to secondhand smoke in enclosed places, etc.</p>	Delegate Cardin, et al.	NP	Unfavorable Report		

Appendix D

Cervical Cancer Vaccines: ***A Public Health Forum*** ***Hilton Pikesville*** ***August 3, 2006***

Sponsored by:
The Maryland Department of Health and Mental Hygiene
The Maryland State Council on Cancer Control
The Maryland Comprehensive Cancer Control Plan

Cervical Cancer Vaccines:

A Public Health Forum

Hilton Pikesville

August 3, 2006

- 8:30 – 9:30: Registration and Continental Breakfast**
- 9:30 – 10:00: Call to Order, Welcome and Remarks**
- Dr. Michelle Gourdine, Maryland Dept. of Health & Mental Hygiene
 - Dr. Katherine Farrell, Maryland State Council on Cancer Control
 - Senator Gloria Lawlah, Maryland State Senate
- 10:00 – 10:30: The Burden of Cervical Cancer in Maryland, the Nation, and the World**
- Dr. Amy Berrington de Gonzalez, Johns Hopkins School of Public Health
- 10:35 – 11:25: Cervical Cancer Vaccines: An Overview**
- Dr. Alan Hildesheim, National Cancer Institute
- 11:30 – 11:45: Incorporating Vaccines into Existing Public Health Programs**
- Edward Hirshorn, Maryland Department of Health and Mental Hygiene
- 11:45 – 12:45: Networking Lunch**
- 12:50 – 2:30: Cervical Cancer Vaccine Presentations**
- **Prophylactic Vaccines**
 - Merck Pharmaceuticals: Dr. Liana Clark
 - GlaxoSmithKline Biologicals: Dr. James Tursi
 - **Therapeutic Vaccines**
 - Dr. Connie Trimble – Johns Hopkins School of Public Health
- 2:30 – 2:55: Question and Answers of Panel**
- 3:00: Summation and Adjournment**

Public Health Forum on Cervical Cancer Vaccines: Evaluation Form

August 3, 2006

Note: There were 172 evaluations returned

1. My affiliation is:

Note: some respondents marked multiple affiliations

Member of Local Government	4/ 2%
Healthcare Provider	17/ 10%
Health Education/Community Outreach	18/ 10%
Local Health Department staff	99/ 58%
DHMH	27/ 16%
Researcher	4/ 2%
Administrator	3/ 2%
Student	2/ 1%
Cancer Council Member	1/ 1%
Other (<i>answers below are included in the 17 "other" responses</i>)	17/ 10%
RN	1/ 1%
NP	2/ 1%
Hospital Epidemiologist	1/ 1%
Insurer	1/ 1%
Non-profit	2/ 1%
DC Dept of Health/WDC	1 /1%
Data Coordinator	1/ 1%
BCCP	2/ 1%
Department of Legislative Services	1/ 1%
American Cancer Society	1/ 1%
Lobbyist	1/ 1%
Pharmaceutical	1/ 1%
Representative of Local Government Program	1/ 1%

2. The content of this conference was useful in my current position

Yes	155/ 90%
No	1/ 1%
No response	18/ 10%

3. The purpose of this event was to inform and educate the public about the emerging issues of cervical cancer vaccines and their potential impact upon Maryland, the nation, and the world. Do you feel that the content of the forum matched the purpose of the event?

Yes	149/ 87%
No	0
No response	26/ 15%

4.	Do you feel that the content of the forum was commercially biased in any way?	
	Yes	7/ 4%
	No	115/ 67%
	No response	50/ 29%
5.	Overall the speakers provided relevant and useful information	
	Yes	118/ 69%
	No	0
	No response	56/ 33%
	Amy Berrington de Gonzalez provided relevant and useful information	
	Yes	171/ 99%
	No	0
	No response	1/ 1%
	Amy Berrington de Gonzalez communicated the material in an effective manner	
	Yes	171/ 99%
	No	2/ 1%
	No response	2/ 1%
	Allan Hildesheim provided relevant and useful information	
	Yes	170/ 99%
	No	1/ 1%
	No response	0
	Allan Hildesheim communicated the material in an effective manner	
	Yes	169/ 98%
	No	3/ 2%
	No response	3/ 2%
	Edward Hirshorn provided relevant and useful information	
	Yes	167/ 97%
	No	4/ 2%
	No response	4/ 2%
	Edward Hirshorn communicated the material in an effective manner	
	Yes	160/ 93%
	No	6/ 3%
	No response	9/ 5%
	Liana Clark provided relevant and useful information	
	Yes	159/ 92%
	No	5/ 3%
	No response	8/ 5%
	Liana Clark communicated the material in an effective manner	
	Yes	138/ 80%
	No	23/ 13%
	No response	12/ 7%

James P. Tursi provided relevant and useful information	
Yes	153/ 89%
No	4/ 2%
No response	14/ 8%

James P. Tursi communicated the material in an effective manner	
Yes	153/ 89%
No	3/ 2%
No response	17/ 10%

Connie Trimble provided relevant and useful information	
Yes	156/ 91%
No	0
No response	20/ 12%

Connie Trimble communicated the material in an effective manner	
Yes	158/ 92%
No	4/ 2%
No response	20/ 12%

6. Would you be interested in attending future public health forums like this one?

Yes	171/ 99%
No	1/ 1%

Appendix E

Cancer Issues and Challenges

***The 13th Maryland State Council on Cancer Control
Conference***

November 15, 2006

Cancer Issues and Challenges

The 13th Maryland State Council on Cancer Control Conference

November 15, 2006

- 7:45 – 8:30: Registration and Continental Breakfast**
- 8:30 – 9:00: Call to Order, Welcome and Remarks**
- S. Anthony McCann, Secretary, Maryland Dept. of Health & Mental Hygiene
 - J. Richard Lilly, MD, Chair, Maryland State Council on Cancer Control
- 9:00 – 10:00: The Burden of Tobacco and Lung Cancer on Society**
- Jonathan M. Samet, MD, MS, Professor and Chairperson, Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health
- 10:00-10:10: Morning Break**
- 10:10 – 11:00: Lung Cancer Screening Treatment and Future Directions**
- Christine Berg, MD, Chief Investigator, Early Detection Research Group, National Cancer Institute
- 11:00 - 11:50: Emerging Issues in Cancer Control: The Cancer Center Perspective**
- **Martin Abeloff, MD**, Director, Sidney Kimmel Comprehensive Cancer Center
 - **Kevin Cullen, MD**, Director, Marlene and Stewart Greenebaum Cancer Center
- 11:50 – 1:00: Networking Lunch**
- 1:00 – 3:00: Tobacco Use Prevention in Maryland**
- **CRF Overview and Program Highlights**
 - **Joan Stine**, Director of the Center for Health Promotion, Education, and Tobacco Use Prevention, Maryland Department of Health and Mental Hygiene
 - **Penny Borenstein, MD, MPH**, Health Officer Howard County, Maryland Department of Health and Mental Hygiene
 - **Judith Sensenbrenner, MD, MPH**, Health Officer Wicomico County, Maryland Department of Health and Mental Hygiene
 - **Cessation**

- Carlo DiClemente, PhD, Professor and Chair, Department of Psychology, University of Maryland Baltimore County
- **Policy**
 - Kathleen Dachille, JD, Asst. Professor and Director, The Legal Resource Center for Tobacco Regulation, Litigation and Advocacy, University of Maryland School of Law

3:00 - 3:30: Summation and Adjournment



The 13th Maryland State Council on Cancer Control Conference

November 15, 2006

Calculations based on responses from 218 participants. Responses do not necessarily add to 100%, as some participants gave more than one response to a question.

Facility Evaluation

I. Conference Status:	
I am a Registrant	214/ 99%
I am a Presenter	2/ .09%
No response	2/ .09%
II. Please Indicate:	
Member of Local Government	11/ 5%
Healthcare Provider	28/ 13%
Health Education/Community Outreach	66/ 30%
Local Health Department staff	55/ 25%
DHMH	26/ 12%
Researcher	12/ 6%
Administrator	4/ 2%
Student	3/ 1%
Cancer Council Member	9/ 4%
Other	
Not specified	6/ 3%
Clinical Research (Oncology)	1/ .4%
Minority-Based Community	1/ .4%
Non-Profit Organization	2/ 1%
JHU	1/ .4%
MOTA	2/ 1%
Navigator	1/ .4%
Nurse	1/ .4%
UMB	1/ .4%
BCCP	1/ .4%
Fitness	1/ .4%
Miss Maryland '06	1/ .4%
Cancer Registrar	1/ .4%
Cancer Support Center	1/ .4%
Komen MD	1/ .4%
American Cancer Society	2/ 1%
Education	1/ .4%
NGO Health Programs (CBHO)	1/ .4%
Dental	1/ .4%

III. Have you previously attended a Maryland State Council on Cancer Control event?

Yes		142/ 65%
	If yes, how many times?	
	1	27/ 12%
	2	29/ 13%
	3	28/ 13%
	4	12/ .06%
	5	12/ .06%
	6	5/ 2%
	7	1/ .5%
	8	1/ .5%
	9	1/ .5%
	10	1/ .5%
	11	0/ 0%
	12	2/ 1%
No		74/ 34%

IV. What is your overall evaluation of this program?

CONFERENCE FACILITIES

Accessibility:

Excellent	107/ 49%
Good	66/ 30%
Fair	19/ 3%
Poor	4/ 2%

Convenient Location:

Excellent	116/ 53%
Good	74/ 34%
Fair	19/ 9%
Poor	5/ 2%

Luncheon:

Excellent	117/ 54%
Good	66/ 30%
Fair	11/ 5%
Poor	0/ 0%

Time of event:

Excellent	112/ 51%
Good	80/ 43%
Fair	11/ 5%
Poor	2/ 1%

Audio/visual set-up:

Excellent	133/ 61%
Good	65/ 30%
Fair	12/ 6%
Poor	1/ .4%

Learning Objectives

- 1. Identify approaches and strategies for lung cancer prevention, detection, and treatment**

Strongly Agree	77/ 33%
Agree	101/ 46%
Neutral	16/ 7%
Disagree	2/ 1%
Strongly Disagree	0/ 0%

- 2. Discuss new strategies for reducing lung cancer burden**

Strongly Agree	62/ 28%
Agree	98/ 45%
Neutral	30/ 14%
Disagree	3/ 1%
Strongly Disagree	1/ .5%

- 3. Identify the emerging issues and potential obstacles to effective cancer control in Maryland**

Strongly Agree	71/ 33%
Agree	94/ 43%
Neutral	9/ 4%
Disagree	1/ .5%
Strongly Disagree	1/ .5%

- 4. Provide information about tobacco cessation programs and resources**

Strongly Agree	75/ 34%
Agree	82/ 38%
Neutral	20/ 9%
Disagree	2/ 1%
Strongly Disagree	0/ 0%

- 5. Describe the key role health professionals play in cancer control policy and cancer burden reduction**

Strongly Agree	64/ 29%
Agree	92/ 42%
Neutral	26/ 12%
Disagree	6/ 3%
Strongly Disagree	3/ 1%

- 6. Improve the network of health professionals interested in education and reform in Cancer Control in Maryland**

Strongly Agree	69/ 32%
Agree	86/ 39%
Neutral	30/ 14%
Disagree	5/ 2%
Strongly Disagree	1/ .5%

Conference Evaluation

- 1. The conference met my predetermined expectations**

Strongly Agree	72/ 33%
Agree	105/ 48%
Neutral	17/ 8%
Disagree	1/ .5%
Strongly Disagree	0/ 0%

- 2. The content of this conference was useful in my current position**

Strongly Agree	73/ 33%
Agree	105/ 48%
Neutral	25/ 11%
Disagree	3/ 1%
Strongly Disagree	0/ 0%

- 3. The *Burden of Tobacco and Lung Cancer on Society* presentation was informative and useful**

Strongly Agree	103/ 47%
Agree	87/ 40%
Neutral	16/ 7%
Disagree	1/ .5%
Strongly Disagree	0/ 0%

- 4. Dr. John Samet communicated the material in an effective manner**

Strongly Agree	126/ 58%
Agree	80/ 37%
Neutral	13/ 6%
Disagree	0/ 0%
Strongly Disagree	0/ 0%

- 5. The Lung Cancer Screening and Future Directions presentation was informative and useful**

Strongly Agree	78/ 36%
Agree	89/ 41%
Neutral	44/ 20%
Disagree	4/ 2%
Strongly Disagree	0/ 0%

- 6. Dr. Christine Berg communicated the material in an effective manner**

Strongly Agree	70/ 32%
Agree	89/ 40%
Neutral	52/ 24%
Disagree	7/ 3%
Strongly Disagree	1/ .5%

- 7. Information gained from the Emerging Issues in Cancer Control: The Cancer Center Perspective was informative and useful**

Strongly Agree	81/ 37%
Agree	96/ 44%
Neutral	22/ 10%

Disagree	4/ 2%
Strongly Disagree	0/ 0%

8. Dr. Martin Abeloff communicated the material in an effective manner

Strongly Agree	113/ 52%
Agree	83/ 38%
Neutral	18/ 8%
Disagree	0/ 0%
Strongly Disagree	0/ 0%

9. Dr. Kevin Cullen communicated the material in an effective manner

Strongly Agree	95/ 44%
Agree	88/ 40%
Neutral	27/ 12%
Disagree	1/ .5%
Strongly Disagree	0/ 0%

10. Information gained from the Tobacco Use and Prevention presentation was informative and useful

Strongly Agree	77/ 35%
Agree	92/ 42%
Neutral	16/ 7%
Disagree	3/ 1%
Strongly Disagree	0/ 0%

11. Ms. Joan Stine communicated the material in an effective manner

Strongly Agree	70/ 32%
Agree	96/ 44%
Neutral	28/ 13%
Disagree	3/ 1%
Strongly Disagree	0/ 0%

12. Dr. Penny Borenstein communicated the material in an effective manner

Strongly Agree	102/ 47%
Agree	82/ 38%
Neutral	15/ 7%
Disagree	0/ 0%
Strongly Disagree	0/ 0%

13. Dr. Judith Sensenbrenner communicated the material in an effective manner

Strongly Agree	95/ 44%
Agree	76/ 35%
Neutral	21/ 10%
Disagree	3/ 1%
Strongly Disagree	0/ 0%

14. Dr. Carlo DiClemente communicated the material in an effective manner

Strongly Agree	100/ 46%
Agree	70/ 32%
Neutral	13/ 6%
Disagree	3/ 1%

Strongly Disagree 1/ .5%

15. Ms. Kathleen Hoke-Dachille communicated the material in an effective manner

Strongly Agree	104/ 48%
Agree	45/ 21%
Neutral	4/ 2%
Disagree	0/ 0%
Strongly Disagree	1/ .5%