



Mary Duke Biddle Trent Semans; Durham Mayor Bill Bell; Duke University Chancellor for Health Affairs Victor Dzau, MD; North Carolina Governor Bev Perdue; Duke University President Richard Brodhead; and Durham County Board of Commissioners Vice-Chairman Ellen Reckow were among the 15 dignitaries who broke ground on the new Duke Medicine Cancer Center.

Duke to Transform Patient Care with New Cancer Building

Duke University Health System has embarked on plans to construct a new building that will transform cancer patient care.

North Carolina Governor Bev Perdue and Duke University President Richard Brodhead joined Victor Dzau, MD, chancellor for health affairs at Duke University, and numerous other dignitaries and special guests on November 6 to celebrate the groundbreaking of the new 267,000 square foot Duke Medicine Cancer Center dedicated solely to the care of patients with cancer. The new building, which will open in 2012, will consolidate all cancer-related services including imaging, diagnostics,

support resources, and clinical research in one convenient location.

“When patients walk into a Duke facility, they expect the very best, and it’s our responsibility to deliver that,” says Bill Fulkerson, Jr., MD, senior vice president for clinical affairs of Duke University Health System. “Our patients come to Duke at one of the most vulnerable points in their lives. It’s our job to provide not only world-class, multi-specialty, technology-enhanced care, but a warm, nurturing environment and the best doctors and nurses anywhere.”

Ranked among the top hospitals in the nation providing cancer care and one of only 40 cancer centers designated “comprehensive” by the National Cancer Institute, Duke has planned this new facility with an eye toward enhancing its ability to conduct outstanding multidisciplinary care and state-of-the-science clinical research. Patients will find their health care providers strategically located to improve convenience and collaboration among all of their specialists and to facilitate communication among clinicians and researchers.

“At Duke, we want to provide the best care for all the people who need us,” says Dzau.

Each year, more than 42,000 patients
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Fast Facts

Number of Floors:	7
Square Footage:	267,000
Construction Begins:	2009
Construction Complete:	2012

Components

- 3 clinical floors
- 140 clinical exam rooms
- 75 infusion stations
- Radiation oncology services
- Imaging

Notable Features

- Consolidates cancer services into one location
- Provides new multidisciplinary team spaces
- Connects to 14,000 square feet of renovated space in the Morris Cancer Clinic
- Includes a concourse connection to new Duke Medicine Pavilion

Patient and Family Amenities

- Outdoor rooftop terrace
- Retail pharmacy
- Café
- Dedicated, private space in which patients can speak with research nurses and learn about clinical trials offering new therapeutic options and treatment strategies



North Carolina Governor Bev Perdue talks with Duke Comprehensive Cancer Center Director H. Kim Lyster, MD, prior to the Groundbreaking Ceremony on November 6.



Images courtesy of the Medical Center and Health System Architect's Office

A rendering of the new Duke Medicine Cancer Center.

NEW BUILDING Continued from Page 1

with cancer seek treatment at Duke. Experts predict that more than 1.5 million new cancer cases will be diagnosed in the United States in 2010. They predict a 14 percent increase in

RN, FAAN, chief executive officer of Duke University Hospital.

The new facility also will include dedicated, private space in which patients can speak with research nurses and learn about the more than 700 clinical trials at Duke that offer new therapeutic options and treatment strategies.

“Duke’s innovation is legendary and its reputation for translational research and whole-person care extends across the nation and around the world,” says H. Kim Lyerly, MD, director of the Duke Comprehensive Cancer Center. “Duke clinicians and staff combine evidence-based medicine and state-of-the-art technology with compassionate care for patients with all forms of cancer, both common and rare.”

Harry Rhoads, Jr., is a four-time metastatic melanoma survivor who has been traveling from Washington, DC, to Durham on and off for the last three years. “I know beyond a shadow of a doubt that the Duke Cancer Center is where I

need to be and I am genuinely excited about the commitment that Duke has made, not only to me but to every cancer patient, with this new building,” says Rhoads. He is currently enrolled in a clinical trial of a vaccine designed to boost his immune system.

“At Duke, they treat the whole person, not just the disease,” says Betty Lamar, who recently contributed the first gift toward construction of the building. “The new cancer center will really make you feel that way. Where you’re cared for is a very important part of your treatment.”

Architects have incorporated thoughtful features into the new cancer center to enhance the patient experience. Large windows will let in

sunlight, and patients may choose to receive chemotherapy in an outdoor rooftop garden. Clinical areas have been designed to ensure that exam rooms, pharmacy, and CT, MRI, and PET imaging are in close proximity, minimizing the need for patient transport. The new facility will have more spacious rooms, areas designed for privacy and meditation, a cafe, and conveniently located support and education services including nutritional counselors.

The total projected budget of the facility is \$222 million. In addition to the traditional means of financing, the goal is to raise \$75 million to offset the cost of construction and equipment. ■



Renderings of the lobby of the new Duke Medicine Cancer Center are pictured here and at right.

new cancer cases in North Carolina from 2006 to 2011 and a 21 percent increase in the Raleigh-Durham-Chapel Hill area during that same time period. In addition, there are more than 11 million cancer survivors in the United States, most of whom will need long-term support and care.

“We know that the number of cancer patients and survivors who need our services is only going to continue to increase, so we are making plans to ensure that our staff can provide the most advanced care, innovative research, and comprehensive support services to each and every patient in an environment especially designed with private areas and quiet space to promote healing,” says Kevin Sowers, MSN,

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"Our patients come to Duke at one of the most vulnerable points in their lives. They expect the best care from Duke, and it's our job to provide not only world-class, multi-specialty, technology-enhanced care, but a warm, nurturing environment and the best doctors and nurses anywhere."

WILLIAM J. FULKERSON, JR., MD
Senior Vice President for Clinical Affairs
Duke University Health System

"Fighting breast cancer wasn't easy, but my doctor really challenged me to fight for my life. Ultimately, I feel it was God who healed me, but I also feel that the knowledge of the doctors and the caliber of people at Duke saved my life."

MARCIA WILLIAMS
Breast Cancer Survivor



"After my first visit to Duke, I knew that I was at the right place for my treatment and in very capable hands. When I heard about plans for the new Cancer Center, I was excited about the level of importance being placed on future needs and services."

WILLIE COVINGTON
Prostate Cancer Survivor

"At Duke, they treat the whole person, not just the disease. The new Cancer Center will really make you feel that way. Where you're cared for is a very important part of your treatment."

BETTY LAMAR
Member, Citizens Advisory Council
Duke Comprehensive Cancer Center



"Our new facility is all about improving the patient experience. In this building, patients will find their physicians strategically located to improve convenience and to facilitate discussion and collaboration among all of their specialists."

KEVIN SOWERS, MSN, RN, FAAN
Chief Executive Officer
Duke University Hospital

"Cancer touches all of us. It's great to see Duke's ongoing commitment with this enhanced facility. It will benefit patients from all over the world."

MYLES WITTENSTEIN
Chair, Board of Overseers
Duke Comprehensive Cancer Center



TRANSLATING LABORATORY RESEARCH INTO INNOVATIVE PATIENT CARE



"The new Duke Medicine Cancer Center will bring this type of innovative science into the clinic more efficiently."

H. KIM LYERLY, MD
DIRECTOR OF THE DUKE
COMPREHENSIVE CANCER CENTER

"What distinguishes Duke from community hospitals, private clinics, and other cancer centers are our groundbreaking research and our ability to bring these discoveries to our patients," says H. Kim Lyerly, MD, director of the Duke Comprehensive Cancer Center.

Take for example, the story of Duke student Josh Sommer. In 2006, Sommer was diagnosed with a rare form of cancer called chordoma. Only about 300 new cases are diagnosed each year in the United States, and the average survival time is seven years. Determined to fight, Sommer searched diligently for information about his rare disease. Coincidentally, he found Duke physician-researcher Michael Kelley, MD, in a laboratory just blocks away from his dorm. Kelley was the only physician-researcher in the country who held a federal grant to study chordoma.

Sommer befriended Kelley and began working in his lab. Soon, a group of scientists at Duke teamed with Kelley and Sommer with the goal of finding a cure for chordoma. Their work, which continues today, has already led to discoveries that could lead to new treatments for chordoma.

Fast forward to 2009, when Kelley led a group of researchers to the discovery of a novel genetic alteration—a second copy of an entire gene—that is a cause of familial chordoma. Inherited differences in gene copy number, known as copy number variation (CNV), have been implicated in some hereditary diseases, but none of the previously discovered familial cancer genes has had CNV as the genetic change.

"This alteration is unlike anything we have ever seen before in families that tend to develop the same kind of cancers," says Kelley, senior author of the study that appeared in *Nature Genetics*. "We are not talking about a mutation in a single gene, but the duplication of an entire gene. This discovery is a classic example of where science answers one question but raises many, many more." According to Kelley, what researchers learn from the study of a rare tumor like chordoma can likely be relevant to

tumors that affect thousands or hundreds of thousands of people.

The new Duke Medicine Cancer Center will bring this type of innovative science into the clinic more efficiently, according to Lyerly.

"With the new building, we will have additional space to educate patients about clinical trials and accrue individuals to participate in these trials," says breast oncologist P. Kelly Marcom, MD. "Clinical trials are what drive discoveries into cancer care practice, and the studies are fundamentally intertwined with clinical care."

And Duke is a leader of translating research into new therapies for patients. In 2003, a national clinical trial led by researchers at Duke was the first to show that the anti-angiogenesis drug Avastin shrinks tumors by choking off their blood supply. Six years later, Duke researchers were instrumental

in the U.S. Food and Drug Administration's (FDA) approval of Avastin to treat glioblastoma, a deadly form of brain tumors. Researchers at Duke also were leaders in the development of TyKerb, a drug approved by the FDA in 2007 to treat advanced metastatic breast cancer.

"When you participate in a study, you're getting involved in promising

research that has the potential to improve your health," says Gordon Cole, who was diagnosed and treated for stage IV colon cancer by Duke oncologist Michael Morse, MD. "I'm a strong believer in cancer research. It gives me hope that one day we'll find a cure."

Allan Friedman, MD, neuro-oncologist and deputy director of The Preston Robert Tisch Brain Tumor Center at Duke, explains Duke's commitment to the patient: "At Duke we are committed to delivering hope, one patient at a time, and this is how we advance care for all cancer patients." ■



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Generous Donors Support Cancer Research and Care Initiatives at Duke

MORE THAN 14,000 donors generously gave to the Duke Comprehensive Cancer Center (DCCC) during fiscal year 2009 (FY09) to support innovative research and patient care initiatives to ensure that patients with cancer continue to receive the most outstanding care possible.

Gifts and pledges during FY09 totaled \$18.5 million. Among the gifts received in FY09 was a \$4 million gift from the family of Preston Robert Tisch to support brain tumor research. This is the second multi-million dollar gift from the Tisch family, who provided a donation of \$10 million in 2005 to honor Mr. Tisch, who received treatment for a brain tumor at Duke before passing away in 2005.

In addition, Fred and Alice Stanback continued to support the Stanback Environmental Fund for Cancer Research, donating \$1 million each to the DCCC and Duke’s Nicholas School of the Environment during FY09. The Stanbacks donated an additional \$1 million in October 2009 to support each institute’s study of the link between the environment and cancer. The Stanbacks have donated a total of \$3 million to each entity since 2005.

Among the other generous gifts received during the past year was a \$1 million gift from Mindy and Ross Deutsch to The Preston Robert Tisch Brain Tumor Center. The Deutsch family has given a total of \$3 million to support brain tumor research at Duke. Also in FY09 Gary Hock gave \$500,000 that was divided equally to support the lung cancer research of Thomas D’Amico, MD, and neurosurgery research of Allan Friedman, MD.

More than \$1.2 million of the total amount raised during FY09 was designated to the Cancer Center’s Annual Fund. These funds are used at the discretion of the Cancer Center Senior Leadership to help recruit outstanding faculty, provide seed money as a catalyst for new ideas to be explored, and leverage additional funding for young investigators and innovative research.

“Philanthropic gifts of all kinds and all levels empower us to fulfill our mission to improve and extend the lives of all patients with cancer, and we are indebted to everyone who has given so generously,” says H. Kim Lyerly, MD, director, Duke Comprehensive Cancer Center. “In the coming years, philanthropic support will be more important than ever because it will allow us to leverage our existing resources so that we can continue to support research and patient care initiatives while we move forward to construct our new, patient-centric Duke Medicine Cancer Center.”

The Honor Roll list of donors includes individuals, foundations, and corporations who have given at least \$1,000 in support of research and patient care initiatives at the Duke Comprehensive Cancer Center during FY09. ■

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ask the expert

VICTOR J. DZAU, MD,
is Duke University's Chancellor
for Health Affairs and
President and CEO of Duke
University Health System.



"We worked with our faculty and staff as well as our patients and their families when designing this new building to make sure it will be truly patient-centric."

Why does Duke Medicine need a new building dedicated solely to the fight against cancer?

Dr. DZau: The answer is really all about people—the thousands of patients we serve each year and the hundreds of physicians, scientists, and caregivers at Duke who are driven to cure cancer. At Duke we want nothing less than to transform the way cancer is treated. Our vision for this new building is much bigger than expanding Duke's medical campus. We want to advance cancer research and care locally and globally.

Is now the right time to construct this new building?

Dr. DZau: Yes. We recognize that this is a significant undertaking given the current economic and financial times and the likelihood of some form of health care reform. However, the primary factor in our decision to move forward with this project is our sense of responsibility and conviction to ensure that we meet the current and projected demands for the high quality health care services that patients have come to expect from Duke.

We know that the demand for our services will soon outstrip our current capacity. At Duke University Hospital and the Morris Cancer Clinic we are already seeing this, and the estimates for population growth and new cancer diagnoses in our region are only expected to increase. Therefore, we are confident that this is the right decision for our patients, employees, clinical and research faculty, local communities, and the state of North Carolina.

What distinguishes Duke from other clinics and hospitals that provide cancer care?

Dr. DZau: Almost any hospital or medical center would say that they treat cancer, but there is a quality and sophistication of care that can only be

provided by specialists and subspecialists who have received specific training and who focus all of their time—24/7, every day—on continually refining clinical practice based on the latest in clinical research translated from our own laboratories.

How is this new cancer center related to the other construction happening at the medical center?

Dr. DZau: The Duke Medicine Cancer Center will connect via a new pedestrian concourse to the new eight-story Duke Medicine Pavilion for inpatient care and surgery. The pavilion will add 16 new operating suites and 160 critical care and intermediate care beds and is expected to open in 2013.

What will the new Duke Medicine Cancer Center mean for patients?

Dr. DZau: We worked with our faculty and staff as well as our patients and their families when designing this new building to make sure it will be truly patient-centric. We paid close attention to both the physical and emotional needs of our cancer patients. Clinical areas have been designed to ensure that exam rooms, pharmacy, and CT, MRI, and PET imaging are in close proximity, minimizing the need for patient transport and providing an environment that enhances multidisciplinary care among physicians, nurses, and other caregivers. Our architects have incorporated thoughtful features such as large windows to let in sunlight and an outdoor rooftop garden.

Ultimately, what is your wish for this new facility?

Dr. DZau: Our goal is to continually look for ways to improve our ability to offer the best care to our patients and to those patients who will seek treatment here in the future. ♥

CONSTRUCTION WEB SITE

From now until the new Duke Medicine Cancer Center opens in 2012, a Web cam atop the School of Nursing will capture construction activity every five minutes

so you can watch the medical center campus grow before your eyes.

Visit <http://dukemedicine.org/construction> to see the Web cam snapshots.

