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Does Talcum Powder Cause Ovarian Cancer?

Millions of women grew up using talcum powder or “baby powder” after a shower or when diapering their babies. For them, the news that this popular product could cause cancer is shocking. Here’s what you need to know.

A growing body of evidence suggests that using talc in the genital area can increase a woman’s chances of developing ovarian cancer. And the more years she used talc, the more likely she is to develop ovarian cancer.

Fortunately, “significant” increase in the chances of developing ovarian cancer is not a large increase for any one individual woman. One in every 75 women will develop ovarian cancer in her lifetime – just over 1%.

Based on dozens of research studies on thousands of women, women who use talcum powder are about 30% more likely to be diagnosed with ovarian cancer than women who did not use talcum powder. This means that over her lifetime, a woman who uses talcum powder increases her individual chances of developing ovarian cancer from 1.3% to 1.7%. This is a low risk for each woman, but a big overall increase in the U.S. For example, if one million women used the powder, 4,000 more of them will develop ovarian cancer than otherwise would have if they hadn’t used talcum powder.

In 2017, there were over 20,000 new cases of ovarian cancer in the U.S. and over 14,000 deaths. When ovarian cancer is found early, a woman has nearly a 93% chance of surviving at least 5 years after she is diagnosed. Those chances drop off to about 30% if the cancer is found after it has spread to other parts of her body.



How Good Is the Evidence?

Most of the evidence comes from a type of study known as the case-control study. For these studies, researchers compare two groups of women– women with ovarian cancer (“cases”) and women without ovarian cancer (“controls”). All the women in the study are asked to recall whether they used talcum powder in the past, and if so, how often and how it was used. Of course, there is no guarantee that the women’s memories are 100% accurate. However, using talcum powder is a somewhat memorable experience, and many women are very sure of whether they did or not. Most of the case-control studies of talcum powder in the U.S. and in other countries show similar increases in ovarian cancer among the powder users, which adds a great deal of credibility to the study results.

The International Agency for Research on Cancer (IARC) is a well-respected agency within the World Health Organization (WHO). IARC concluded that there was an “unusually consistent” increased chance of developing ovarian cancer in studies of women who reported using talcum powder in the genital area.

Some of the most convincing evidence comes from two studies published in 2016, the African American Cancer Epidemiology Study and the New England study.

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Jackson Troubles Shine Light on a Fact of Washington Life: Sleeping Pills
Politico, April 25, 2018

FDA Worried Drug Was Risky; Now Reports of Death Spark Concern
CNN, April 9, 2018

U.S. FDA Puts Restrictions on Essure Birth Control Implant but No Recall
The Associated Press, April 9, 2018

Patient Advocacy Groups Take in Millions from Drugmakers. Is There a Payback?
Kaiser Health News, April 6, 2018

At White House Meeting, Video Game Industry Denies Role in Gun Violence
WJLA, March 8, 2018

FDA and Opioids: Too Much Regulation or Not Enough?
MedPage Today, January 31, 2018

Big Pharma Greeted Hundreds of Ex-Federal Workers at the "Revolving Door"
Washington Post, January 25, 2018

Ronny Jackson, the White House physician nominated to be the Secretary of Veterans Affairs, regularly handed out sleeping pills and potentially addictive "alertness" drugs to officials traveling on overseas flights. NCHR president Dr. Diana Zuckerman told **Politico** that if a doctor hands out pills to people who aren't officially their patients, that person "should not be considered acceptable for a high-level position in the federal government — and certainly not for the VA, where the quality of health care is an essential responsibility." Dr. Jackson withdrew his nomination the next day.

The FDA announced that they would require that Essure patients receive a patient booklet with risk information. NCHR's president told the **Associated Press** that the 22-page booklet is too long and technical and "will be confusing to many consumers."

The FDA approved the "breakthrough therapy" drug Nuplazid in 2016 for Parkinson's disease patients with hallucinations. NCHR had testified against approval. Less than two years later, there have been hundreds of deaths reported as well as complaints that the drug doesn't work. NCHR's president told **CNN** that so many reported deaths are "almost unheard of, so you have to take it seriously." NCHR senior fellow, Dr. Stephanie Fox-Rawlings, added, "If we don't even know that it does work," how much risk is acceptable?

After the Parkland shooting, President Trump held a meeting with video game executives and experts to discuss the connection between violent video games and violent behavior. NCHR's president told **WJLA** that independent research shows a correlation between aggressive behavior and exposure to violent video games, but that "the most harm is done when kids have access to weapons."

Many cabinet secretaries and key players in the Trump Administration have made a job hop from industry. The revolving door goes both ways — from Congress to industry to federal agencies and back. NCHR's president explained how effective this is for Pharma in the **Washington Post**.

NCHR's president explained to **Kaiser Health News** that patient lobbying is a relatively recent development. Now it's big business. KHN created a new database that shows how pharmaceutical companies gave at least \$116 million to patient advocacy groups in 2015 alone, and these groups are lobbying.

NCHR told **MedPage Today** that the FDA should not use of the term "abuse deterrent" to describe highly addictive opioids. We urged that the drugs be relabeled "crush-resistant" if that's the more accurate adjective. If the FDA fails to do that, she urged the FDA to require physicians to be educated about the highly addictive potential of abuse-deterrent drugs.



Is Sex Discrimination in the Workplace a Health Issue?

When Lynn Povich was one of 46 women suing *Newsweek* for sex discrimination in 1970, it was almost impossible for women to be hired as reporters, no matter how well-educated and qualified they were. Their success was followed by a tsunami of other successful sex discrimination lawsuits at magazines, newspapers, and TV news stations across the country.

These lawsuits have clearly improved career and economic opportunity for women. Before 1973, "Help Wanted" job listings were separate for women and men, with most of the "women's jobs" in fields like teaching, secretarial work, retail, and social work. In 1973, this became illegal.

Sex discrimination still exists in the workplace, but tends to be less blatant than it used to be. In addition to the economic ramifications, researchers are beginning to focus on the impact of discrimination on health.

Gender and Discrimination

What used to be called sex discrimination is now called gender discrimination, recognizing that identifying as a man or woman is not the same as being born biologically male or female.

Historically, society has linked certain behavior, culture, and personality traits to either being a man (*men play sports; they are strong*) or a woman (*women cry; they are nurturing*). These traditional gender norms and concepts are more fluid than they used to be, but are still influential.

In the United States and many other countries, men have had more power than women. In the workplace, this means more leadership and high-status positions, a more influential voice, and more pay. This power difference has made women feel less respected and under-appreciated, which has affected their mental health.

What does this look like in the workplace? Women may have their ideas ignored, may be passed over for opportunities, or harassed by a boss or co-worker. In a 2017 Pew Research Center study, 42% of women reported that they had experienced discrimination at work because of their gender compared with 22% of men. A 2017 *ABC News/Washington Post* survey found that 54% of women reported receiving unwanted sexual advances from men.

Effects of Discrimination on Mental Health

It is well-known that when individuals are treated differently, unfairly, or badly over a long period of time, it can have negative mental health consequences, including low self-esteem and a higher risk for stress-related disorders such as anxiety and depression. When women face discrimination in their work environments, they can be more susceptible to these mental health issues compared to men.

One 2017 study found that gender discrimination had a big impact on women's internalized reaction to stress, such as feeling anxious and withdrawing from social relationships. A recent review of many studies looked at how work-related stress contributes to mental health issues. Feeling less valued and respected in the workplace was a major contributor to anxiety and depression.

Bottom Line

Gender discrimination is a mental health and social justice issue. Researchers at Columbia University found that wage inequity can contribute to women's higher rates of depression and anxiety. Of course, sexual harassment causes enormous stress. Experts point out that depression, stress, and anxiety can affect physical health as well. When a person feels stress, his or her body makes stress hormones that can increase blood pressure and heart rate. Exposure to stress over a long period of time can contribute to numerous physical and mental health problems, including physical aches and pains.



NCHR Foremother Lynn Povich at a Newsweek story conference with all men.

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Honoring Those Who Inspire Policy Changes after the Parkland Tragedy

We are so glad to honor our 2018 Health Policy Heroes for their effective efforts to improve policies that affect gun violence. Susan Rioux and Kai Koerber will be representing the activist teachers and students from Parkland, Florida, at our annual Awards luncheon in May 2018.

Susan Rioux is a teacher and Peer Counselor Coordinator at Westglades Middle School, located next to Marjory Stoneman Douglas High School. Parents have thanked her for having taught their children the skills needed to improve their chances of survival, which were urgently needed when the shooter opened fire on students at the high school on February 14.

Ms. Rioux has been with Broward County's Peer Counseling program since 1992, usually teaching between 180-200 students each year.



Susan Rioux (2nd from right) at the March for Our Lives

Kai Koerber, 17, Marjory Stoneman Douglas H.S.

Kai Koerber did not attend middle school in Parkland, so he did not benefit from the training provided by Susan Rioux. As a student at Marjory Stoneman Douglas H.S., Kai is a survivor of the tragic February 14 shooting and has become a prominent activist for gun control and mental health legislation.

Kai was part of the group of 100 students who met with legislators in Tallahassee to discuss legislation to reduce gun violence. The students watched as an assault rifle ban and other bills were defeated on February 20, but they didn't give up. As pressure to "do something" increased, on March 9, the Florida legislature passed the *Marjory Stoneman Douglas High School Public Safety Act*, which raised the minimum age for a firearm purchase to 21, instituted a 3-day waiting period, banned bump stocks, and made other policy changes.

Kai has appeared on numerous TV shows on the topic, including *The View*, *The Daily Show*, *NBC 6 Impact*, *NBC 6 Voices*, *CNN Wolf Blitzer*, *CNN Don Lemon*, and *CNN New Day*. He has been interviewed for *CNN.com* and *Teen Vogue* and was featured by the *Miami Herald* as a leading activist embodying the spirit of Martin Luther King Jr. He is one of the organizers of the *March For Our Lives* campaign.

Kai was a featured guest at the King Center in Atlanta, for an event commemorating the 50th anniversary of the assassination of Martin Luther King Jr.

A 4.0 student at MSD, Kai was recently an invited guest of the Washington Education Association, speaking to more than 1,000 teachers on the topics of mental health in schools and supporting student advocacy. During that trip, he also supported the local student rally in Spokane and addressed hundreds of students about gun control and violence in support of National Walkout Day.

Kai has dedicated himself to pushing forward an agenda for a Public Safety Tax and a mental health curriculum for grades K-12. While working to form two non-profits on these issues, he is still keeping his focus on pursuing a college education, planning to study Aerospace Engineering.

Susan Rioux in Her Own Words:

"No parent should fear that their child will not come home from school due to something like the tragedy that happened at Marjory Stoneman Douglas High School. This generation of student leaders and activists have challenged our leaders to change policy, or they will do it themselves.

"We are not defined by what happens to us, but how we respond. I am fortunate to teach in a school system and neighborhood in Parkland, Florida, that provides excellent resources and support to our students. After the MSD shooting, most students have seen licensed therapists who specialize in dealing with trauma. For many of the children, becoming an activist to prevent this from happening again is very empowering. Fortunately, the parents and community members are extremely caring and supportive.

"Most people do not realize that the MSD tragedy has affected far more than the student population of Douglas High. In addition to the 3,000 high school students who were affected, there are almost 2,000 faculty, staff and students at Westglades Middle School, where they were also locked down, hearing shots, and wondering about the welfare of loved ones and former students."

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Susan Rioux in Her Own Words (cont'd)

“Peer Counseling should be in every school in the nation. Health education is not mandated in all schools, leaving a void in basic health education for many students.

“Peer Counseling has been able to fill the void to some degree, by training students in social issues which focus on mental health, prevention, and intervention.

“We teach children how to avoid dangerous or frightening situations by being aware of their surroundings. If students find themselves in danger, we teach them to take a breath, assess the situation, and then think and act quickly to seek safety. We realize that kids didn’t know what to look for and be aware of. We combine training from different sources to focus on personal safety and awareness of their surroundings. This includes training on dating violence, school violence, or being followed while walking home or shopping at the mall. Unfortunately, the focus on standardized testing has reduced the time we can spend on the social emotional needs of students. Good mental health and physical health go together.

“Are we now reaping what we have neglected? Mental health services are available, but somewhat restricted. Our psychologists and social workers patient loads have increased greatly because they have so many schools to service now.

“I see more anxiety and stress from students than ever before, and that was true even before the shooting. Thank goodness our students are used to rigorous schedules, because now those very students have taken on the mantle to fight for a just cause: Safe schools, reformed gun laws, and the availability for mental health screening and services.

“The outreach from nearby towns and communities has been heart-warming and extraordinary. The banners that line the fence from our school to the high school carry messages from all over the country. Messages of hope, strength and unity. I am lucky to have the opportunity to teach in this community, and to be supportive of this movement by our MSD students.”

Continued from Page 1

The African American study compared 584 African American women in 11 different geographic regions in the U.S. who had been diagnosed with ovarian cancer to 745 women of the same age and geographic location who had not developed ovarian cancer. About 63% of women with ovarian cancer said they had used talc and 53% of the healthy women said they had used it. The study found that the women who used talc anywhere in their body were more likely to have been diagnosed with epithelial ovarian cancer. Instead of a 1.3% lifetime risk, the women who used talc had almost a 2% lifetime risk of developing ovarian cancer.

Similarly, the New England ovarian cancer study was conducted by researchers from the prestigious Brigham and Women’s Hospital in Boston, supported by a grant from the National Institutes of Health. They compared more than 2,000 women living in Massachusetts and New Hampshire who had been diagnosed with ovarian cancer, with more than 1,500 women of the same age and geographic location who did not have cancer.

Like the African American study, the New England study found that the women who used talc in the genital area, whether or not they used it elsewhere in their body, were significantly more likely to have been diagnosed with epithelial ovarian cancer. Most reported using Johnson & Johnson Baby Powder or *Shower to Shower* powder.

Many body powders are now made with cornstarch instead of talc. Women who used those same brand name powders made with cornstarch were not considered talc users in these

studies, and there are no known risks for powders made with cornstarch instead of talc. However, talc-based powders remain on the market, promoted by Johnson & Johnson as "iconic" and "safe". In contrast, other companies that sell talcum powder have issued safety warnings on their products.

What Have the Courts Decided?

Since 2014, Johnson & Johnson has defended its talcum powder in several law suits. In 2016, the courts ruled in favor of the family of a woman who died of ovarian cancer at the age of 62. Particles of talc were found in her ovaries, which she had removed after her cancer diagnosis. However, the courts overturned the ruling just a few months later due to jurisdictional issues, not safety issues. A woman in California who won a \$70 million dollar against the company continues to fight for fair warning labels on the powder.

In a related lawsuit, a New Jersey court ruled in favor of a man who claimed the powder had caused an asbestos-related lung cancer known as mesothelioma. In that case, the talcum powder was likely contaminated with asbestos, a chemical that is known to cause cancer in humans.

Bottom Line

While the scientific evidence has shown a consistent link between talcum powder and ovarian cancer, many questions remain. The most important question for you is: Why take the risk?



Opioids and College Students

Caroline Halsted, Spring 2018 Intern, National Center for Health Research

Despite media attention and efforts to reduce opioid addiction, overdoses and deaths are still occurring at an alarming rate. Between July 2016 and September 2017, opioid overdoses increased by 30% across the United States and 70% in the Midwest. The impact on 18-25 year olds is particularly dramatic: The graph on the right shows that 18-25 year olds are much less likely to be prescribed opioids compared to other adults, but misuse painkillers at the highest rate.

Misuse is defined as taking a prescription in a way other than it was prescribed, taking someone else's prescription, or taking a prescription with the goal of getting high. Most people who use prescription opioids for non-medical reasons initially get the medication from a friend or family member for free. However, 80% of heroin users started by misusing a prescription opioid. This raises the question: Where do these free opioid samples come from, and how can access to opioids be curtailed?

Adolescents and young adults are commonly prescribed opioids after procedures such as wisdom teeth removal and surgeries following sports injuries. Since side effects from these prescriptions are common and more pills are prescribed than needed, patients who do not take the full prescription often don't know what to do with the extra pills. It can be easier to keep the pills around or give them to a friend than it is to dispose of them properly. Young adults tend to take more risks than older adults and are sometimes unaware of how easy it can be to become addicted to opioids.

Personal Stories

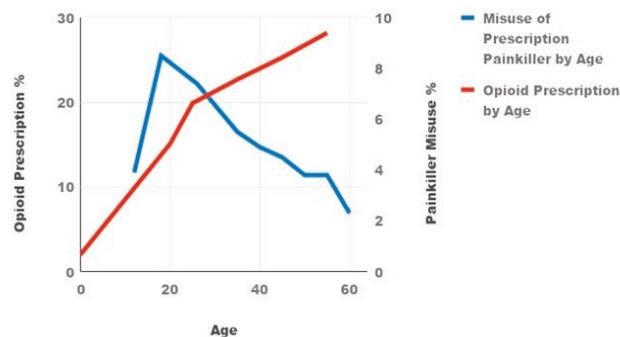
Research indicated that about 100 million opioid pills prescribed for wisdom tooth removals and about half of them are not used by that patient. To learn more about this issue, I interviewed 16 young adults aged 19-23 who have used opioids for medical reasons in the last two years, almost all of whom were left with excess pills.

Here are a few responses:

- One 19-year-old said that he was prescribed 25 codeine pills after his wisdom teeth removal. Although he did not feel as though he needed them, he ended up taking two and gave the remaining 23 pills to a friend.
- A 21-year-old woman returned for a refill of painkillers after complications with her tonsil removal. She was given a 20-day supply of hydrocodone without even showing her ID.
- A 23-year-old was prescribed 40 oxycodone pills following her wisdom teeth removal. She only took 12 and kept the pills around until she had time to properly discard them. Meanwhile, 28 pills were in her medicine cabinet.

In addition to the question of what happens to leftover pills, it is important to find out whether these opioids are dangerous when used by the patients as prescribed. Two 21-year-olds said they could feel themselves becoming dependent on the prescribed opioids after only a few days of taking them.

Opioid Prescription and Painkiller Misuse by Age



- A young man said: "I could totally feel myself becoming dependent and wanting to take more of the medication. However, I pushed myself to wean myself off the medication and was fine thereafter."
- A college woman had a similar experience with opioids: "By the end of things, I could recognize that I wanted to take the pill because I could, not because I needed it for pain. I was afraid of feeling pain and I was maybe a little too proactive with taking my pills."

Most of the young adults I interviewed did not have positive experiences with the pills. Many felt nauseous, uncomfortable, and complained that the pills were not effective in helping their pain. One 20-year-old decided to take ibuprofen instead of the pills she was prescribed, saying, "It worked better, didn't put me in a fog, and got rid of the inflammation in my face."

What Happens to Leftover Pills?

Even though most of these young adults had bad experiences with opioids after their procedures, almost all of them either kept the pills around or gave them to a friend or family member. Unused opioids sitting in medicine cabinets can be extremely dangerous and could lead to a highly addictive pill falling into the hands of someone who could misuse the drug.

Though not a scientific study, these interviews suggest that at least for some young adults, too many doses are being prescribed for wisdom teeth and other procedures, and the leftover pills are being misused.

What you can do:

- The next time you or your child is prescribed opioids, ask the doctor if acetaminophen or ibuprofen might work instead.
- Try to avoid filling the prescription until you know that you need it. Filling the prescription could mean that you end up with excess pills, which someone could easily misuse.
- Check your medicine cabinet for opioids and other potentially dangerous pills.
- Dispose of opioids properly. Pharmacies often have pill drops where you can dispose of your extra prescriptions. The FDA has tips for disposing of prescription drugs at home (www.fda.gov).

What Does the Tribeca Film Festival Have to Do with NCHR?

Diana Zuckerman, President, National Center for Health Research

I always thought it would be interesting to attend a film festival but never did anything to make that happen. But when the world premiere of a documentary on medical devices was scheduled for Tribeca in April 2018, I decided to go.

The *Bleeding Edge* is a documentary about the risky side of “cutting edge” medical devices. It tells heartrending stories of people whose lives were devastated by medical devices that were intended to help them. It’s made by Academy Award-nominated filmmakers Kirby Dick and Amy Ziering.

The heart and soul of the film are the personal stories, which include people whose health suffered for years as a result of various popular medical devices, including metal-on-metal hip implants, surgical mesh, Essure permanent contraceptive device, and the da Vinci surgical robotic system. The film includes several women who we have worked with for years, helping to train them at our free Patient Workshops, and going to meetings in Congress and the Food and Drug Administration (FDA). Our mutual goal was to make sure that Congress and FDA hear from patients who can share their personal experiences. Those experiences remind policymakers that when FDA doesn’t require solid scientific evidence of a product’s safety, patients can be harmed, and so is our healthcare system.

I had a supporting role in the film, as one of many medical and public health experts interviewed on camera. For example, I helped to explain that the safety standards are much lower for medical devices than they are for prescription drugs, and how those weaker standards are true even for implanted devices that are intended to save lives. I was glad to see Rep. Rosa DeLauro, Rep. Jan Schakowsky, the late Rep. Louise Slaughter, and so many of our other friends and colleagues in the film, all trying to answer the same questions: “Why are so many untested and poorly tested medical devices on the market? Who thinks that’s a good idea?” By the end of the film, the audience is just as shocked as we are that the “gold standard” of FDA approval doesn’t mean what we thought it did.



Leaving a Legacy



Janice Bilden

We’re proud to announce the Janice Bilden Cancer Prevention Internship, thanks to a generous donation from her daughter Holly Bilden-Stehling.

Holly tells us that her Mom “loved to laugh, have fun, and help her family in any way she could. Mom worked hard all her life starting when she was very young with paper routes, babysitting, and even setting pins at the bowling alley. Mom grew up in a 3-room house with 6 siblings, never even having indoor plumbing until she was married. She never complained. Instead she freely gave of herself to her family, friends and church. She was my best friend and my Matron of Honor.

“Cancer took a devastating toll on her family. She lost 2 sisters and 2 brothers to cancer — all different types of cancers, but all with the same outcome. Mom also died from cancer — NK/T-cell lymphoma, nasal type. That type of cancer is very rare — only 1% of the people affected are Caucasian, the median age is 40 – 50, and most are male. My Mom was Caucasian, 76, and obviously female. Cancer doesn’t care about statistics.

“I am glad to have the opportunity to have an internship named in honor of my Mom that will help train a young professional to help others to prevent cancer. I believe wholeheartedly that prevention is the only sure way to save lives and prevent the type of pain my Mom felt, and in losing her the type of pain we feel everyday.”

Is there someone you would like to honor? Internships and fellowships provide training that can result in a lifetime of good work. Honor a loved one through a donation of cash or stock, a distribution from a retirement plan or life insurance policy, or a will.



Janice Bilden as the baby of the family with her brothers and sisters, 5 of whom died of cancer

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Learn about Kai Koerber, the #NeverAgain movement, and how Parkland, FL, students are helping to prevent gun violence.

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