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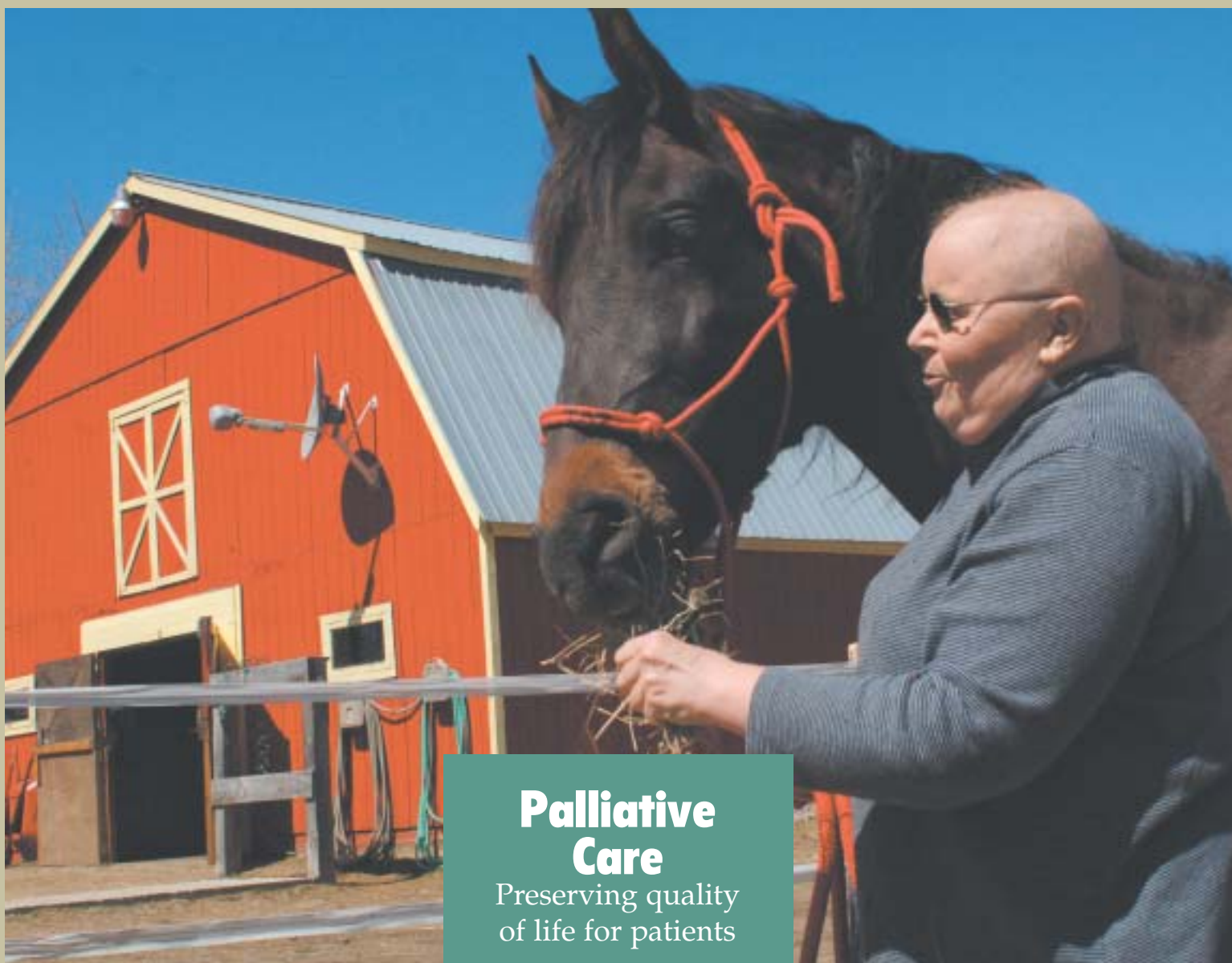
Billions of images influence teens

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## Friends of Norris Cotton Cancer Center

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## Palliative Care

Preserving quality of life for patients

# Palliative Care: Preserving Quality of Life

Ellen Ryan has decided that she isn't going to sit around waiting to die. After a fall from her horse sent her to the emergency room, she learned she had breast cancer that had spread to her spine. She was given two months to live. It's been two years now, and at the age of 50 she still has plenty of things she wants to do. "You don't want to spend your time thinking about dying because there's too much happening right now that you don't want to let go of," she says.

Ryan, who had a horse farm in New Hampshire before her illness, is like a lot of people trying to live their lives as normally as possible after a cancer diagnosis. Her sister and two daughters have been by her side, but she's thankful for an unexpected advocate—the palliative care team at Norris Cotton Cancer Center. "They're wonderful," she says. "That's how I met Dr. Ira."

"Dr. Ira" is Ira Byock, MD, associate director of cancer survivorship and palliative care. Only 30% of hospitals nationwide have a palliative care program, but since 2003, Byock, a national leader in palliative care, has been integrating palliative care services at the Cancer Center into the medical care of seriously ill cancer patients. He finds that palliative care is sometimes misunderstood; patients often associate it only with hospice and dying. But at the heart of palliative care is

the patient's quality of life. Byock calls it delivering "patient-centered care."

The Palliative Care team at the Cancer Center includes specially trained medical professionals, a social worker, a pastoral care provider, a therapist trained in Reiki and massage, and volunteers, all of who work with the patient's primary medical providers to harmonize the disparate physical and emotional needs of a patient with a serious illness. When Ellen Ryan experienced a persistent swelling in her arm, a palliative care nurse stepped in. "They kept saying to me, Let's try this, let's try that," she says. "They're really on your side 100%, and they'll go to bat for you."

Palliative Care can provide medications to control pain and oxygen to ease breathing, but it also offers less conventional solutions. Ellen Ryan's treatment includes neck and foot massages, along with her chemotherapy. Palliative Care also attends to a patient's emotional, social and spiritual well-being, issues that might fall through the cracks when the clinical focus is on a patient's serious medical challenges. A cancer patient having difficulties with employment can work with an occupational therapist or a social worker. Patients juggling doctors' appointments and family responsibilities may find themselves feeling depressed or angry. Palliative Care can refer

them to a counselor or the pastoral care provider, or help them with writing in a journal or learning to meditate. Illness can be hard on the entire family too. "While one person carries the diagnosis, everyone carries the impact," says Byock. Palliative Care can help family members with practical advice and emotional support.

Palliative Care is available around the clock, every day, for both hospitalized and home-based patients, to assist with issues such as pain management and difficult treatment decisions, or just to touch base. "A lot of time is spent just talking," says Peggy Bishop, ARNP, a nurse practitioner who has worked with Ellen Ryan.



Healing arts therapist Briane Pinkson gives Ellen Ryan a neck massage before her chemotherapy appointment. Massage and Reiki are among the complementary therapies offered to patients.

### Teaming Up with the American Cancer Society

Norris Cotton Cancer Center and the American Cancer Society have signed a new agreement designed to coordinate their efforts toward common goals in support of cancer patients and their families. The agreement expresses a shared commitment to comprehensive patient care, and to cancer prevention and early detection at all levels in the community. The collaboration focuses on joint efforts to provide cancer information services, patient support programs, community cancer education, pioneering research, state-wide cancer planning, and advocacy.



### New Endowment Helps Fight Pediatric Cancer

The CG Fund for the Celebration of Life is not only a tribute to the man who established the fund at Norris Cotton Cancer Center, it is a wonderful reminder of the way he lived. Because even as Chip Gilroy, who passed away in July last year, was battling cancer, he continued to approach life with energy, passion, and generosity. An avid skier, Gilroy coached young ski racers at Mount Sunapee Resort for years. Outgoing by nature, he remained committed to his family and involved with friends of all ages. And in the end, he called on his family and friends to help those facing an even tougher battle than he—children struggling to beat cancer.



In June of 2005, Gilroy and his wife, Dee, hosted a party at the Mount Sunapee Resort to thank their friends for their support throughout his illness. The gathering, which was attended by hundreds of friends and neighbors, launched the CG Fund for the Celebration of Life. The CG Fund provides support for research, prevention, treatments, and cure of childhood cancer. Today, the endowment has reached more than \$100,000, with gifts from Gilroy's family and business associates, and numerous gifts from his Hopkinton neighbors, friends, and ski students.

Marie Bakitas, DNSc, ARNP, a palliative care researcher, firmly believes that the most important issues to deal with are the issues the patient thinks are most important. "We determine their priority list by listening," she says. Bakitas arranged for third-year medical students to do the listening when she invited Ryan to talk with them about living with a life-threatening illness.

"We are focused on cure and prolonging life—we celebrate life and want to preserve it," says Byock, "but we realize that people live their lives with this diagnosis. So the quality of their life is also extremely important during their treatment, and beyond."

Ellen Ryan credits "Dr. Ira" and Palliative Care with helping her overcome the numerous physical challenges of her illness, but also with a new enthusiasm for life. Now she plays with her two dogs, goes to book sales, and sells items on eBay. "It's very hard to live each day as if it's your last. Life is too enticing," she says.



### Genetics Researcher Elected to Elite National Academy

Victor Ambros, PhD, was elected to the prestigious National Academy of Sciences, a organization of the nation's top scientists and engineers. His election to the Academy is in recognition of his groundbreaking studies of gene regulation, and is considered one of the highest scientific honors. The Academy's 2,000 members and foreign associates include more than 200 Nobel Laureates. Abraham Lincoln created the National Academy of Sciences in 1863, and it has remained an important resource for independent advice to the government on issues of science, technology and medicine.

# Tanning and Teenagers:

Parents would like to see their teenagers stop baking in the sun, or at least cover up or use sunscreen. But harangues about skin damage, and what they'll look like thirty years from now, often fall on deaf ears. Caution is a hard sell to teenagers.

Blame it on Cary Grant. One theory suggests that when the American film industry moved

from New York to Hollywood, a tan became the new standard of beauty. Screen idols suddenly sported the California look.

While to many a tan implies good health, to pediatrician Ardis Olson, MD, it's a sign of injury. "People think looking buff means looking tan," she says. But a tan is just a sign of skin damage that can lead to cancer. Rates of skin

cancer in the U.S. are on the rise, increasing 3-5% every year, with malignant melanoma, the most lethal type, leading the way.

The immediate and long-term effects of childhood sun exposure are particularly troubling. Most of our lifetime exposure to sun happens by the age of 18, and the rates of skin cancer due to sun exposure early in life are rising. While slathering on plenty of sunscreen, wearing a hat, and covering up when outside are proven ways to decrease skin damage, try telling a teenager what to wear. According to Olson, a sea change happens during early adolescence, when kids become more independent. "They start making their own health choices," she explains.

To help them make the right choices, she developed a unique program called SunSafe. "Teenagers focus on the here and now," she says, so SunSafe mobilizes the

entire community to deliver a consistent message about sun protection. The program provides schools, athletic and recreation facilities, physicians' offices, and other community venues with convincing and fun materials that promote sun safety.

Ten communities in Vermont and New Hampshire agreed to take part in a research

project testing SunSafe's effectiveness with sixth to eighth graders.

SunSafe relies on adults and peers to deliver a message about sun safety not just once, but repeatedly and in different ways over a period of time. Enlisting the help of schools is key. SunSafe provides relevant classroom materials to teachers as diverse as English, science, math and physical education. A science teacher presents a lesson about UV light one period, while an athletic coach hands out sunscreen the next. During the day kids might encounter a poster with sun safety tips and a friend sporting a stick-on SunSafe tattoo.

At one middle school, students broadcast a daily UV rating over the public address system. At a swimming pool, lifeguards instituted periodic breaks for reapplying sunscreen. SunSafe also provides schools with a portable device the size of a computer monitor that shows kids their own facial skin damage, which appears as spots and blotches. It has proven to be a very effective "here and now" tool for convincing teenagers that sun damage is not just something that happens to their parents.

After two years observing almost 2000 kids, Olson was able to show that blanketing a community with information and fun, easy ways to stay safe in the sun worked. Kids who took part in the SunSafe program



# Changing a Way of Life

were better protected (by sunscreen, clothing, or shade) than kids in other communities. Her results were published in the January 2007 issue of *Pediatrics*.

The challenge ahead, Olson says, is tanning booths. Studies show that 56% of high school students have used a tanning booth, which also contributes to the risk of developing skin cancer. She's now hard at work adjusting the SunSafe message once again to speak to older teenagers. Clearly, she has her work cut out for her. It's no small task changing our image of health, and our relationship to the sun.

*SunSafe materials for middle school and younger children are available free online at: [www.cancer.dartmouth.edu/melanoma/sunSAFE](http://www.cancer.dartmouth.edu/melanoma/sunSAFE)*



## Myth vs Fact

**MYTH:** A tan protects your skin from getting burned.

**FACT:** A dark tan gives about the same protection as sunscreen SPF 2.

**MYTH:** People with darker skin do not sunburn.

**FACT:** While the rates of skin cancer are higher in Caucasians, skin damage due to excess sun exposure and burns can also affect Asians, Hispanics and African-Americans.

**MYTH:** Getting older is the major cause of wrinkled skin, not sun exposure.

**FACT:** Exposure to ultraviolet rays from the sun, not simply age, damages our skin and causes premature aging and wrinkling.

**MYTH:** You only get skin cancer when you're older.

**FACT:** Melanoma is the most common cancer among people ages 25-29.

**MYTH:** You don't have to worry about sun exposure unless you live somewhere that is hot and sunny.

**FACT:** Vermont and New Hampshire have abundant sunshine. Rates of skin cancers here have tripled in the past 20 years.

## Tips for Sun Safety

- If you swim, sweat or rub your skin with a towel, you decrease your sunscreen's effectiveness.
- Reapply sunscreen every two hours. The ingredients in all sunscreens stop working after a couple of hours.
- Keep sunscreen in convenient places, such as in the car and by a sink.
- Wear a broad-brimmed hat, UV-blocking sunglasses, and cover up when outside.
- Use a sunscreen of SPF 15 or higher, even on cloudy days.
- Seek shade if your shadow is shorter than you are.
- Don't use indoor tanning booths or lights. Try self-tanning lotions.

# What is a clinical trial?

A clinical trial is one of the final steps in cancer research looking for better ways to prevent, screen for, diagnose, or treat cancer. A clinical trial tests a new medical approach in people, and is designed to answer a specific question. For example, does taking a certain vitamin lower the risk of developing a particular type of cancer? If we screen for and find a certain cancer before it causes symptoms, do we keep people from dying from the disease? Is a new drug better than the one that is currently being used to treat a particular cancer? *Cancer treatment* clinical trials are conducted with people who have cancer, and are designed to answer specific questions about a new drug or therapy, or a new way of using an existing treatment. Cancer treatment clinical trials test many types of therapies, such as drugs, cancer vaccines, new approaches to surgery or radiation therapy, or new combinations of treatments.



## How is a new therapy tested in clinical trials?

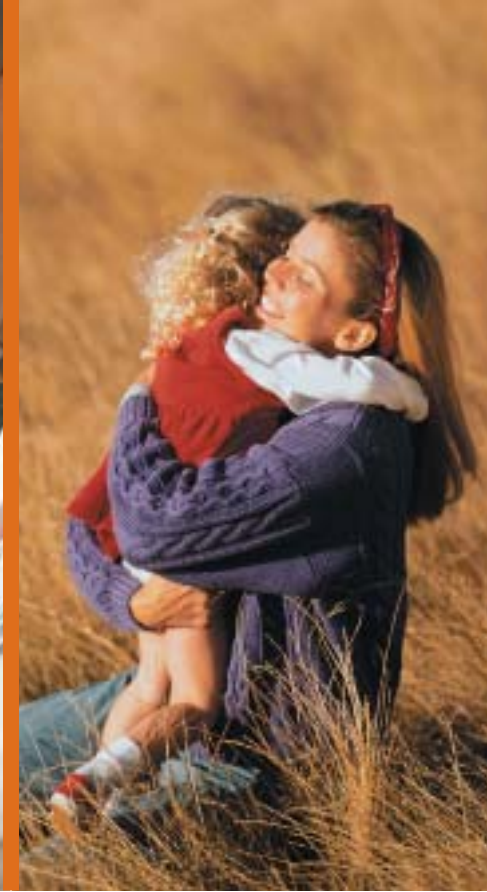
A clinical trial is a careful and controlled process conducted in a series of steps, called phases. A Phase I trial is the first step in the process, and answers basic questions about how a new drug or treatment should be used: What dose is safe for patients? In what form should it be given and how often? In a Phase II trial, the treatment is tested for safety and effectiveness. A Phase II trial usually focuses on one type of cancer and looks at how the new therapy affects the cancer as well as the rest of the body. Treatments that show promise in Phases I and II move on to a Phase III trial, where the new therapy is compared with the commonly used, “standard therapy.” A phase IV trial further evaluates the long-term safety, effectiveness, and best use of a treatment that has been approved for standard use.

## Are there risks in participating?

Treatments enter clinical trials because they have shown strong promise in the laboratory. Results in the clinic, however, may be different. The new therapy may not be better than the standard treatment or it may have unexpected or more difficult side effects. If the study is comparing different treatments, participants cannot choose which one they receive because they are randomly assigned to one treatment or the other. Also, participants should discuss costs before participating, to be sure that costs are covered by health insurance or the study sponsor.

## Are there benefits?

As a part of a clinical trial, participants receive extensive and careful medical attention from a team that can include doctors, nurses, researchers, and clinical trial coordinators. They also have access to promising new therapies, which in some cases may be the best current option for treatment. A new therapy tested in a clinical trial may prove to be more effective than the current treatment, and even become the new standard treatment. Ultimately, people who take part in clinical trials contribute to progress against cancer—helping to shape promising new approaches in the fight against cancer.



## How are participants protected?

Clinical trials are conducted according to strict scientific and ethical principles. Every clinical trial has a plan, called a protocol, which describes what will happen in the study and why it is necessary. Before a clinical trial begins, the protocol is reviewed and approved by Dartmouth's Institutional Review Board (IRB) and the Cancer Center's Clinical Cancer Review Committee. They make sure the study has a strong scientific basis and that participants are not likely to be harmed. They can stop a clinical trial that is not following the protocol or is causing unexpected harm to participants. They also can halt a clinical trial if the new therapy is very effective, in order to make it available to patients who are not on the trial.

## What are eligibility criteria?

Eligibility criteria define who may participate in a clinical trial. In order to answer a specific question about a new approach to cancer care, variables such as age, gender, medical history, stage, and type of cancer need to be kept the same. Eligibility criteria define common characteristics, and help researchers achieve accurate and meaningful results. Eligibility criteria also minimize the risk of a person's condition becoming worse by participating in the study.

## What is informed consent?

The process of informed consent gives people the information they need to decide if they want to participate in a clinical trial. Topics such as the purpose of the study, the tests and procedures involved, and the possible risks and benefits, are discussed and included in an informed consent document that is signed by the participant. Participants may be asked to sign new consent forms as new benefits, risks, or side effects are discovered. People can leave a study at any time—before the clinical trial starts or at any time over the course of the trial.

### For More Information

General information about clinical trials can be found through the National Cancer Institute at [www.cancer.gov/clinicaltrials](http://www.cancer.gov/clinicaltrials) and the American Cancer Society at [www.cancer.org](http://www.cancer.org). Brochures and videos also are available in the Cancer Center reception areas in Hematology/Oncology and Radiation Oncology. Information about clinical trials being conducted at Norris Cotton Cancer Center can be found online at [www.cancer.dartmouth.edu/clinicaltrials](http://www.cancer.dartmouth.edu/clinicaltrials) or by calling the Cancer Help Line at 800-639-6918.

## Smoking on the Big Screen: Affecting Teens Worldwide

Two new studies by Dartmouth Medical School pediatrician researchers are setting off smoke alarms in movie theatres from Hollywood to Germany. Previous research by James Sargent, MD, and his colleagues, researchers at Norris Cotton Cancer Center, has shown that movie smoking recruits up to half of all new young smokers in the U.S. each year. Their most recent study documents just how significant American-made movies are in influencing teens to smoke.

In a report published in *Pediatrics* in May 2007, Sargent and his co-authors estimate that U.S. adolescents are exposed to billions of smoking images each year. Sixty-one percent of those images are shown in movies rated for children ages 10-14, an age when they are most likely to be experimenting with cigarettes.

Three out of four of the 534 popular box office hits surveyed depicted actors smoking. Some 30 of the movies delivered more than 100 million smoking impressions alone. Many of these high-impact movies were rated PG-13.

More than 3,000 actors appeared in the movies, and 500 of them smoked on screen. Thirty of the top mostly male stars delivered more than a quarter of the total smoking images. "If just one of these popular stars decided to quit



smoking in movies, it would make a major difference on adolescent exposure," says Susanne Tanski, MD, one of the study's authors.

A second study of German adolescents, which Sargent co-authored, tested whether teens in a society where tobacco advertising remains prevalent are as influenced by seeing their screen idols smoking. Investigators found that teens who had seen the most smoking in films (mostly American blockbusters) were nearly twice as likely to have tried smoking than those who saw the least amount.

Sargent likens the effect of these internationally distributed movies to greenhouse gas emissions "delivering massive amounts of favorable smoking impressions to adolescents all over the world."

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Norris Cotton Cancer Center combines advanced cancer research at Dartmouth Medical School with patient-centered cancer care at Dartmouth-Hitchcock Medical Center in Lebanon, NH and regional locations in St. Johnsbury, VT, and Manchester and Nashua, NH. It is one of 39 Comprehensive Cancer Centers designated by the National Cancer Institute (NCI).

Learn more about Norris Cotton Cancer Center research, programs, and clinical trials online at [www.cancer.dartmouth.edu](http://www.cancer.dartmouth.edu)

Please address all inquiries and comments regarding this newsletter to Mary Hawkins, Norris Cotton Cancer Center, One Medical Center Drive, Lebanon, NH 03756, or by email [Mary.S.Hawkins@Dartmouth.edu](mailto:Mary.S.Hawkins@Dartmouth.edu)

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CANCER CENTER**

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The Friends of  
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CANCER CENTER

# *the* friends

SUMMER 2007

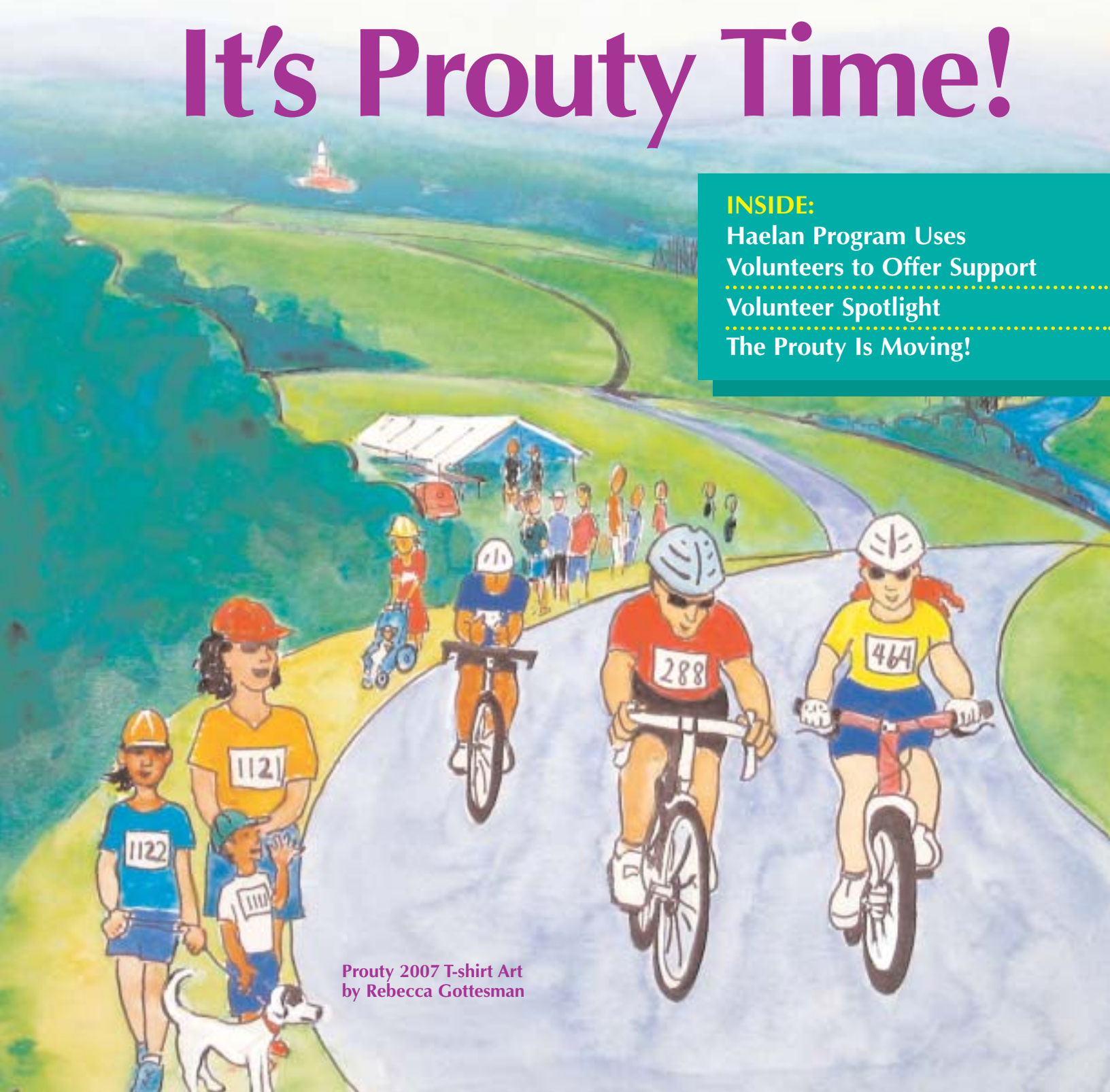
## It's Prouty Time!

### INSIDE:

Haelan Program Uses  
Volunteers to Offer Support

Volunteer Spotlight

The Prouty Is Moving!



Prouty 2007 T-shirt Art  
by Rebecca Gottesman

# The Summer Season Is Here, So Let's Prouty!

Warmer weather, longer days and endless to-do lists let us know that the Friends summer event season is upon us! Filled with bike rides and walks, half-marathon runs, motorcycle events, and polo matches, the next few months remind us of just how important our volunteers are to the success of the Friends. Without them, we would never be able to fulfill our mission of supporting cancer research and patient services at Norris Cotton Cancer Center. Join us in celebrating all the ways our volunteers make it all possible.

The signature event of the Friends (and by far our biggest!) is The Prouty Century Bike Ride & Challenge Walk. Each year, people from all over Northern New England and more than 15 other states bike and walk our beautiful Connecticut River Valley to raise money for our nationally recognized Comprehensive Cancer Center. This year, The Prouty is on Saturday, July 14, and starts from its new home, the Richmond Middle School in Hanover, NH.

And talk about volunteers! To support the growing popularity of this 26-year tradition, more than 400 volunteers will organize, serve, deliver, register, massage, treat, entertain, watch over, and otherwise support 3,500 bikers and walkers to help us meet our \$1.5 million goal. Online registration is open and the weather is perfect to start training, so if you'd like to participate, donate or volunteer, please join us online at [www.theprouty.org](http://www.theprouty.org) or call 800-226-8744 to ask for our 2007 Prouty brochure.

The Prouty's not the only place volunteers will make a difference this year. They'll serve continental breakfast and give out water to our Friends Team at the Covered Bridges Half Marathon in Pomfret, VT, on June 3. They'll cheer on local runners and give out fruit, snacks and T-shirts at the Skip Matthews Father's Day Run in Lebanon, NH, on June 17.

Later in the summer, volunteers will chill champagne, serve hors d'oeuvres, and root for the Quechee Polo Club at its 14th Annual Benefit Match on August 18 in Quechee, VT. And then they'll register motorcyclists, give out raffle prizes, and serve lunch on the road for the Green Mountain Motorcycle Ride on August 26, which starts and ends at the Cancer Center.

We think our volunteers are incredible. And we're sending out a big thank you to each and every one!

## Haelan Program Uses Volunteers to Offer Support

Through a generous annual grant from the Friends of Norris Cotton Cancer Center, the Haelan Program for Patient Support Services has been able to combine paid and volunteer services to expand its offerings in the Cancer Center. The program is now able to offer more Reiki, a soothing form of body and energy work (enjoyed by more than 300 patients), and chair massage, another form of relaxing support (used by 400 patients).

Other programs made possible through the Friends and Haelan Program volunteers include: Celtic harp music; free knit hats, scarves and yarn; wig and personal product resources; new patient information packets; and new printed materials on cancer. Additionally, Haelan Program coordinator Deb Steele manages nine support groups serving close to 90 people.

The Haelan Program will continue to expand as more volunteers join the program. If you have a skill and the time to volunteer, please call Deb Steele at 800-639-6918. For information on special events and programs, check online at [www.cancer.dartmouth.edu/support](http://www.cancer.dartmouth.edu/support).

## Join Us for Champagne, Dinner, and Silent Auction at Quechee Polo Match

On August 18, 2007, the Friends of Norris Cotton Cancer Center and the Quechee Polo Club once again join forces on the polo fields in Quechee, VT. This annual polo benefit event, now in its 14th year, will feature a champagne reception and elegant dinner, a pre-game riding demonstration, a silent auction, and a polo match. Tracy Lombardi, Friends board member and chair of the Polo Committee, can be contacted at [tracy.lombardi@ledyardbank.com](mailto:tracy.lombardi@ledyardbank.com) for more information or to volunteer. Tickets for the benefit will be available in late June online at [www.CancerFriends.dartmouth.edu](http://www.CancerFriends.dartmouth.edu)





## An Artisan Volunteer

Some volunteers spend time in the Cancer Center, some volunteers help at events, and some are artisans whose creative pursuits raise money for Norris Cotton Cancer Center. Rolande Andrews, better known as "Ron," is just such an artisan. Although by day she is the director of Harvest Hill Retirement Home in Lebanon, her true love is jewelry design and creation. Inspired by her daughter Christie's brush with cancer, Ron's Beachcombers Studio (with help from her husband, Don, and Christie) created our beautiful HOPE bracelets and necklaces. "We knew that Christie's life had been saved by the care she received at Norris Cotton Cancer Center," says Ron, "and we wanted to say thank you."

The HOPE sterling silver jewelry, available online at [www.CancerFriends.dartmouth.edu](http://www.CancerFriends.dartmouth.edu) and at Hanover stores such as Brambles, has been the Friends most successful sales item.

**Here's our thanks to you, Ron, Don and Christie!**



**Madeline Boughter**

Madeline became a participant in the NH Leadership Program sponsored by the Institute on Disability through the University of New Hampshire. After her challenging classes end, she hopes to be a savvy advocate for people with mental illness, disabilities, and financial struggles.

For Madeline, volunteering has its own rewards. Recently, she helped a patient without a caregiver to locate and print information from the Internet about his cancer. With appreciation and a twinkle in his eye, he wondered aloud if Madeline had angel wings growing from her shoulders.

**Note:** The Friends would like to extend heartfelt thanks to Marj Aptakin, who recently retired from serving lunches in the Infusion Suite. We appreciate all that Marj has done for the patients of Norris Cotton Cancer Center.

the  
friends

SPOTLIGHT  
ON  
VOLUNTEERS

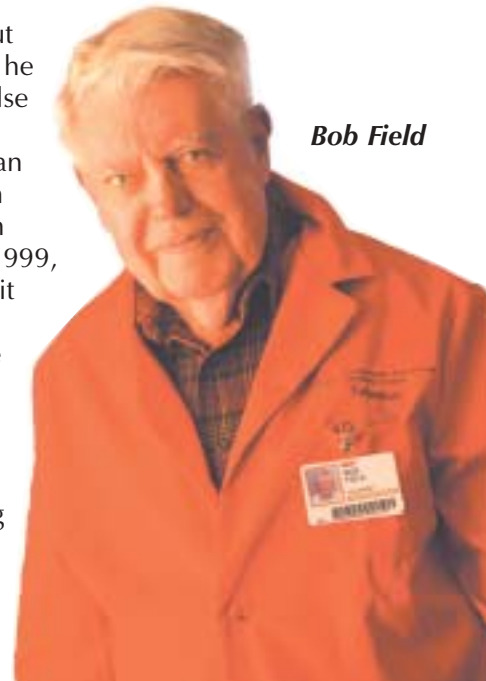
Since November 2001, every Tuesday morning Madeline Boughter's smile has lit up the Patient and Family Resource Library in Norris Cotton Cancer Center. Madeline enjoys the variety of tasks she handles each week, from entering new books into the library database to replenishing cancer-related booklets in the Hematology/Oncology and Radiation Oncology waiting rooms.

Volunteering is not all Madeline does. In 2006,

Bob Field is no stranger to volunteering. It has been an integral part of his life for many years. In addition to volunteering in the Cancer Center's Infusion Suite, where he has served lunch every Friday for the past eight years, this Dartmouth grad ('43) and former Vice President and Treasurer of Dartmouth College—serves on numerous boards in the Upper Valley, including the Humane Society, the Upper Valley Hostel, and the widely respected Bonnie Clac organization.

When the Friends first contacted Bob about being highlighted in the Volunteer Spotlight, he demurred, "Surely there must be someone else who is more deserving." We think not. This 12-year prostate cancer survivor developed an appreciation for the Cancer Center's infusion program when his wife was treated for colon cancer. Sadly, she passed away in 1998. In 1999, Bob began volunteering in the very same unit where his wife received her treatment. The same supportive and comforting care that he and his wife experienced nearly a decade ago continues today in the Infusion Suite through the efforts of Bob and his fellow volunteers.

Hats off to this very engaged and engaging volunteer.



**Bob Field**

## The Best Half-Marathon in New England!

That's what New England Travel & Life has to say about the Covered Bridges Half Marathon in Pomfret, VT. For the third year, we're proud to say the Friends Team is running this nationally known event, which takes place on Sunday, June 3. Team members raise money for the Cancer Center, and receive prizes, a reception, and an amazing experience in return. Email [michelle.r.schembri@dartmouth.edu](mailto:michelle.r.schembri@dartmouth.edu) to reserve a place in next year's run!

## Get on Your (Motor) Bike and Ride!



Join the Green Mountain Motorcycle Ride on Sunday, August 26, 2007, to raise money for cancer research and patient services at Norris Cotton Cancer Center. Bike through the gorgeous mountains of Vermont and New Hampshire, and enjoy lunch, raffles, door prizes, and a barbecue. Hit the open road while helping to find a cure! For more information and to register, go online to [www.greenmountainride.org](http://www.greenmountainride.org).

## Winter Social Fundraisers a Big Success!

A small committee of Friends arranged four fundraising events in March that boosted wintry spirits and raised \$6,000 for Norris Cotton Cancer Center. Three dinner parties—one hosted by Shelley Gilbert, another by Lili and Michael Mayor, and a third by Mary and Brian Kennedy and Sandra Hoeh—and a cocktail party hosted by Linda Mackay and Kathryn Stearns, entertained seventy-five guests with food, drink and good company, all generously supplied by the hosts. Sound like fun? Please email [Sandra.Hoeh@yahoo.com](mailto:Sandra.Hoeh@yahoo.com) if you'd like to be involved next winter. And thank you to our gracious hosts and their generous guests!

### Summer Season Is Here!

## Let's Prouty

Saturday, July 14, 2007

At our new site: Richmond Middle School, 63 Lyme Road (Rte. 10) Hanover, NH

For more information or to register go to [www.theprouty.org](http://www.theprouty.org)

Bike 25, 50 or 100 miles – Walk 5K, 10K, 15K or 20K

Raise money for cancer research and patient services at Norris Cotton Cancer Center

### Summer Season Dates

Friends Team at Covered Bridges Half Marathon ....	June 3
Skip Matthews Memorial Run .....	June 17
Eastman Golf Tournament .....	June 21
Prouty Century Bike Ride & Challenge Walk .....	July 14
Quechee Polo Benefit Match .....	August 18
Green Mountain Motorcycle Ride .....	August 26

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