



INTRAOP

Case Study – Arleen Sharwell

Frustrated by Her Family Doctor’s Disinterest in Innovative Treatments, “Nana New York” Fights and Wins Breast Cancer on Her Own

Arleen Sharwell’s message to women with breast cancer: Don’t let one doctor’s opinion get in the way of the treatment you know you deserve

Arleen Sharwell, 65, is a resident of New York and a mother of two. When the self-proclaimed “Nana New York” isn’t with family, she is helping to spread awareness about the innovative treatment that helped her beat breast cancer.

The Diagnosis

Arleen was already scheduled for a routine mammography when she felt a lump in one of her breasts. Despite having no other symptoms, Arleen suspected something wasn’t right. She immediately called her doctor. Preparing for the worst, they scheduled an emergency diagnostic screening. On a Wednesday, Arleen went in for her sonogram and biopsy. The following Friday, Arleen was diagnosed with breast cancer.

After the initial shock of the diagnosis, Arleen discussed her options with a breast surgeon in Long Island. He advised her that she needed lumpectomy surgery followed by five to six weeks of radiation therapy, a common course of treatment recommended across the country. Arleen had reservations and concerns about the procedure her doctor had recommended because she had seen how hard this type of cancer radiation treatment had been on her friends. She was frightened by the thought of going through daily radiation, and the side effects associated with week after week of radiation therapy, such as nausea, hair loss and fatigue.

The Mobetron: A Treatment Option that Felt Right

Luckily, through a family connection, Arleen had heard about IntraOp Medical’s device, the Mobetron. The Mobetron allows doctors to administer a single dose of radiation at the time of surgery, a procedure that can eliminate weeks of costly, post-operative radiation treatment and allow patients to get back to their lives more quickly. This procedure is known as intraoperative electron beam radiation therapy (IOERT).

As the first OR-ready, fully mobile, self-shielded, electron-beam linear accelerator, the Mobetron provides patients and their doctors with a potential alternative to a full course of post-operative radiation and gives them hope for a fast recovery. The Mobetron’s enhanced local tumor control makes for shorter treatment times, better cosmetic results and fewer side effects.

Recent clinical studies, including one from renowned breast surgeon Dr. Umberto Veronesi of Milan’s European Institute of Oncology, have shown that a single dose of radiation at the time of surgery could be equivalent to a full six week course of traditional post operative radiation treatment. This treatment is being widely adopted in many international health centers, as it provides a cost effective way to treat breast cancer, while offering patients better quality of life.

Doctor Insists: “We Have Better Things Here”

After researching the Mobetron and the single dose treatment, Arleen became more optimistic about her situation and eagerly passed along the information to her doctor. As the date of surgery approached, she knew it was time to openly share the reservations she had about the lengthy, post-operative course of radiation her doctor was prescribing. Armed with the information about IOERT, and

the Mobetron's ability to replace six weeks of radiation with a single dose at the time of surgery, she assumed her doctor would take an active role in helping her to connect with a hospital that offered the treatment.

But Arleen's doctor was uninterested in hearing about the Mobetron. More than that, he openly questioned its effectiveness. "Arleen," he said, "We have better things here." Arleen pressed, referring to the clinical studies she had read about. But her doctor wouldn't relent. In that moment, Arleen knew she had a choice to make. Should she stay with the doctor and hospital she had trusted for years? Or should she listen to her gut, and strike out on her own to find a facility that offered the treatment she desired?

The Procedure

During her research on the Mobetron, Arleen came across an article in a 2006 US Oncology Review by Doctors' David Ollila and Carolyn Sartor from the University of North Carolina in Chapel Hill regarding single fraction intraoperative radiotherapy and decided to contact Dr. Ollila directly. With the unwavering support of her family and friends, "Nana New York" arranged a meeting at UNC's Lineberger Comprehensive Cancer Center. There she met with Dr. David Ollila, associate professor and surgical director for the multidisciplinary breast program and multidisciplinary melanoma program, and Dr. Joel Tepper, a radiation oncologist, to see if she was a candidate for the device. They were quickly able to confirm that Arleen was a candidate, and the doctors scheduled her surgery to be conducted just a few days after the initial meeting.

The day of her operation, Arleen arrived at the hospital at 7am and finished her surgery and two minute single dose of radiation from the Mobetron that same day. Dr. Tepper used the Mobetron to deliver a single dose of radiation to the tumor bed, pinpointing the exact area that required radiation so that healthy tissue was left unharmed. Dr. Ollila then safely removed the lump from Arleen's breast.

Arleen never imagined that she would be treated as an outpatient for breast cancer. "The next day my family came in for lunch and I was shopping in Chapel Hill. I felt fine," Arleen said.

Life after Cancer

Today, Arleen is healthy and busy providing information to patients about the machine that she feels saved her life. "The Mobetron made what seemed to be a dreadful situation something that I could overcome," Arleen said. "I've been trying to get the word out so that other patients can benefit from this fast and remarkable treatment." Arleen is also impressed with the way her breast has healed since the surgery. "I couldn't imagine going to a plastic surgeon and having it look any better," she said.

Looking back on her experience, Arleen has a new perspective on why her original doctor was so insistent in downplaying the effectiveness of the Mobetron. "The medical field, like anything else, is a business," Arleen said. "When provided information about a technology that they don't have access to, some doctors will immediately denounce it. It's difficult to admit, but hospitals don't only see you as a patient. They also see you as a source of revenue."

Arleen wants women to know that they should never just accept what their doctor tells them. Cancer patients must conduct their own research -- and always get a second opinion.

At the end of the day, Arleen could not be more pleased with the results of her one day breast cancer treatment. "It's a miracle, it truly is a miracle," she said. "There's no comparison whatsoever. As far as breast surgery is concerned, it was a piece of cake!"

About IntraOp

IntraOp Medical Corporation provides innovative technology solutions for the treatment and eradication of cancer. Founded in 1993, IntraOp is committed to providing the tools doctors need to administer intraoperative radiation therapy safely and effectively – for all cancer patients. The company's flagship product, the Mobetron, is the first fully mobile, self-shielding intraoperative electron radiation therapy device designed for use in any operating room. Key Mobetron benefits include: increased survival rates, better local tumor control, shorter treatment cycles, and fewer side effects. Leading hospitals, from university research centers to specialized cancer clinics in

North America, Europe and Asia, use the Mobetron as a vital part of their comprehensive cancer program.

For more information on IntraOp Medical Corporation, please visit: www.intraopmedical.com