



Department of Surgical Oncology

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Advanced Melanoma Care Program

- Consultations for all stages of melanoma
- Surgical resection, sentinel node(s) and lymph node dissection
- Isolated Limb Infusion/ Perfusion (ILI/ ILP) for in-transit melanoma
- Management of high risk resected melanoma including stage III
- Management of early stage Class 2 phenotype by the DecisionDx-Melanoma assay
- Clinical Trials at Karmanos Cancer Institute
 - A Multi-Center Phase 2 Open Label Study to Evaluate Safety and Efficacy in Subjects with Melanoma Metastatic to the Brain treated with Nivolumab in Combination with Ipilimumab followed by Nivolumab Monotherapy
 - A Study to Evaluate the Safety and Efficacy of the CD40 Agonistic Antibody APX005M Administered in Combination with Nivolumab in Subjects with Nonsmall Cell Lung Cancer and Subjects with Metastatic Melanoma
 - A Randomized Phase III trial of Dabrafenib + Trametinib followed by Ipilimumab + Nivolumab at Progression vs. Ipilimumab + Nivolumab followed by Dabrafenib + Trametinib at Progression in Patients With Advanced BRAFV600 Mutant Melanoma
 - Molecular Analysis for Therapy Choice (MATCH)
 - A Randomized, Phase II Trial of Intermittent Versus Continuous Dosing of Dabrafenib (NSC-763760) and Trametinib (NSC-763093) in BRAFV600E/K Mutant Melanoma

For appointments, please have patients call: (810) 342-3801.

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BOARD CERTIFIED
SURGICAL ONCOLOGIST

I've been told I have cancer. Should I seek a second opinion?

Most people will look at more than one house before buying one – it's a long-term commitment. Similarly, cancer care is a long-term commitment – not only for the patient, but also for the whole team that is treating the patient.

When a loved one is diagnosed with cancer, it is not only frightening, but also very confusing.

There are a million things that go through the mind. Is it curable? What stage is it? How long will I live and what are my options?

During this time of stress it is often hard to make decisions, and we rely on our doctor to help make those decisions? While our doctor has our best interest in mind, questions may arise, such as:

- Should I seek a second opinion?
- Will it really help?
- How will my doctor feel?

In my practice as a surgical oncologist, I have spoken to many patients who are struggling with these questions. What I share with all of them is this - yes, it is very important that you know about your cancer and your options. There is no harm in seeking a second opinion as treatments are continually changing and improving. Seeking a second opinion is a very common practice and your doctor should have no reason not to support it.

A second opinion helps patients seek knowledge and advice of more than one doctor to not only confirm the diagnosis, but also to evaluate treatment options.

In fact, this practice has been in existence since the 70's. At that time, a second surgical opinion was mandated in an effort to reduce unwarranted elective surgeries. Studies showed that the need for elective surgery was not required in 11–19% of cases after a second surgical opinion.

The financial benefit was also tremendous. For every 1 dollar spent on obtaining a second opinion, an average of 2–4 dollars were saved.

Second opinions decrease unnecessary treatments including surgery, chemotherapy and radiation. A study published on breast cancer showed that a second opinion altered surgical treatment in 10% of cases at a major cancer center.

So, how do second opinions help?

- Provides confirmation of diagnosis and cancer type
- Increases knowledge about the stage and prognosis
- Empowers patients with information
- Allows an opportunity to find doctors that you really like
- Perspective from experts in different disciplines including medical oncology, radiation oncology, and surgical oncology – get to now latest treatment options
- Gives peace-of-mind that you are choosing the right treatment for yourself based on a broader collection of information.

Don't feel uncomfortable about seeking a second opinion. This is a common practice and most insurance companies pay for the second opinion.

At Karmanos Cancer Institute in Flint, we evaluate your complete cancer care needs – be it nutrition, exercise, family support, home care needs, and what ever you may need during your treatment. You will have a dedicated team that includes your surgeon, oncologists, registered dietitian, nurse navigator and more, we communicate regularly and work together to develop a common treatment plan keeping ONLY you in mind.





Rx: Prehabilitation

What is that?

Prehabilitation is the process of ensuring your body is strong and healthy before surgery. Your surgeon wants you to spend your time before surgery working on the following areas: Physical activity, Nutrition, Relaxation and Stress Relief. It has been shown that poor physical performance capacity and poor nutrition increases the risk of complications during and after surgery and can prolong recovery. Taking an active role in preparing for surgery is an excellent way to feel more in control of your body during a time when you may be feeling anxious. Below are guidelines to follow.

Physical Activity:

Many patients who are scheduled for surgery lead a sedentary lifestyle. Your surgeon may discuss ways to increase aerobic capacity and muscle and core strength. You will be provided instructions for moderately intense exercise to be performed 3-4 times a week before surgery. Preoperative physical exercise has been shown to reduce postoperative complications and reduce the length of the hospital stay for abdominal surgery patients.

Nutrition:

The primary goal of nutrition therapy before surgery is to build up nutrient stores before surgery and provide your body with the extra nutrients it will need to heal and restore energy following surgery. Your surgeon may provide guidance on how to prevent losing lean body mass during this time. The following nutritional supplements may be suggested.

- 1. Whey protein consume one ounce daily
- 2. Vitamin C 1000mg daily
- 3. Fish oil 1000mg daily
- 4. Multivitamin 1 daily

These nutritional supplements can be purchased at most grocery or drug stores over the counter.

Reducing Stress and Anxiety:

The effects of anxiety can be wide ranging and impact the recovery process. We offer several programs to patients and their caregivers that are intended to relieve stress, increase physical health and mental clarity. Ask any staff member at the Cancer Institute or look to the monthly cancer newsletter for a listing of upcoming classes offered; such as yoga, tai chi, art therapy, meditation, and gentle Zumba. Classes are held at the beautiful Hospitality House at McLaren and the cost for attending is free. Just show up and try something new!

In addition to trying one or more of the classes offered, there are many ways to reduce anxiety. Do healthy things that you enjoy and make you feel relaxed like taking a walk, playing with your pet, listening to music, reading a book for pleasure, or visiting with a favorite friend or family member.

Exercise, proper nutrition and stress relief are good for anyone, not just someone preparing for surgery. Finding someone to partner with and support your Prehabilitation may improve your success and be more enjoyable.





McLaren Surgeons Perform Regionalized Therapy for Late-Stage Abdominal Cancer

Now at McLaren Flint, a regional chemotherapy treatment, conducted in conjunction with tumor-removal surgery, is being performed to advance the outcomes for many patients with late-stage cancer involving the lining of the abdominal cavity.

Smit Singla, MD, assisted by his colleague Tolutope Oyasiji, MD, performed the first HIPEC procedure in the region on a 79-year-old Michigan man with advanced stage colon cancer.

"The patient's colon cancer was quite advanced, having spread from the primary site in the colon to include multiple tumors throughout the peritoneum," stated Dr. Singla. "Given the large tumor burden, his situation is considered very difficult to treat

with conventional chemotherapy. Fortunately, because the cancer was contained within the peritoneal cavity, he was a candidate for HIPEC."

What is HIPEC?

Hyperthermic Intraperitoneal Chemotherapy (HIPEC) is a groundbreaking therapy to treat Peritoneal Carcinomatosis. This is a broad description of a variety of tumors that present with extensive metastasis throughout the peritoneal cavity such as appendix, colon, gallbladder, ovaries, mesothelioma, sarcoma, stomach and pseudomyxoma peritonei.

HIPEC is the second part of a two-part procedure. First, all visible tumors within reach in the abdominal cavity are removed. Then the surgeons administer the therapy by bathing the abdominal cavity with a heated chemotherapy solution. The solution is washed out after approximately 90 minutes with the intent of killing any remaining cancer cells. HIPEC treatment provides surgeons with the ability to apply high doses

of chemotherapy directly into the peritoneal cavity without significant toxicity to the remainder of the body. The effects of the heat may increase the efficacy of the treatment. In this way the normal side effect of chemotherapy can be avoided.

"I am happy to see that four months after surgery, the patient is doing very well and I expect him to exceed the average prognosis as a result of the HIPEC procedure." Dr. Singla reported.

The surgical oncology practice of Dr. Singla and Dr. Oyasiji is located at Karmanos Canner Institute at McLaren Flint. They can be reached at (810) 342-3801.



Smit Singla, MD, stands by to agitate the solution periodically during the HIPEC treatment to assure a thorough distribution.