

SPRING 2013
Oncology Issue

the latest from
**koshland
pharm**

**Insurance Billing
at Koshland Pharm**

Koshland Pharm is now accepting two pharmacy benefit plans, Caremark and Express Scripts, which allows us to process prescriptions for several common insurance plans including Anthem Blue Cross, Health Net, and Aetna. Please call the pharmacy to see if we can bill your specific insurance plan.

Save the Date:

**HORMONES:
Can't Live With Them,
Can't Live Without Them!**

When: Thursday evening, July 18th, 2013
Where: Menlo Park, CA

What: A joint presentation by Peter Koshland, Pharm.D and Patricia Baldwin, NP on treating menopausal symptoms through evidence-based and individualized hormone therapy.



Help Us Reach 1,000 Likes!

Do you "like" Koshland Pharm? Here's your chance to show it! Help us reach our goal of 1,000 likes on Facebook, where we post up-to-date notices about health-related Bay Area events as well as tips for health and well-being.

Prescriptions for Health

A Newsletter from

Koshland Pharm
Custom Compounding Pharmacy

featured PRACTITIONER

Each issue of **Prescriptions for Health** features a Bay Area practitioner with a unique approach to health and healing.



Dr. Garrett Smith is a medical oncologist who practices at Smith Integrative Oncology in San Francisco.

into your living room, and that you're welcome as a resident in somebody's house?"

We knew that we needed plenty of space for complementary practitioners, including a nutritionist, a massage therapist, a psychotherapist, an exercise physiologist, and an acupuncturist. Our nutritionist, Natalie, needed enough room so that she could have conferences with more than one person, because when someone comes to talk about nutrition, they often bring a buddy or a partner. We set up the space so that most rooms have views that overlook the bay. We can watch the tide come in and out twice a day, with its changing colors, going from smooth to rough, the boats going by. This dynamic, living view helps patients, who often are nervous when they come in, to take a deep breath and relax.

Practice Approach

The dream for our practice was to be more than just a doctor's office where patients come get their chemotherapy. We also wanted to be a community center based upon an integrative approach to healing, evolving over time to reflect what patients tell us they need.

When we designed our clinic space 2 ½ years ago, we knew that the cancer experience can be awful, stressful, fearful. We asked ourselves, "How can we make this not a scary place? What can we do, with a blank slate, to make it feel like you are walking

The idea of our center is that you can get all of your oncology care, if you choose, in the same building. I am a UCSF trained oncologist who can give you standard medical care. Yet you don't have to apologize to me about wanting to do Chinese herbal care; in fact, Deb (our acupuncturist) is right here, and you could talk with her during the two hours you're getting your drip. On the other hand, patients could also come here just to work with our complementary practitioners. Not all patients see all of us. Sometimes that is simply too overwhelming.

The best part of my day as an oncologist is when I am in the room with patients

our pharm FAMILY

When you call Koshland Pharm, one of our four pharmacists will answer the phone to assist you. To help you get to know the person on the other end of the line, we thought we'd tell you something you might not know about each one. Did you know that...



...Hoda Iraninezhad, Pharm.D, worked for three months last summer on a farm in Oregon that grows medicinal plants?



...Lauren Honda, Pharm.D, recently celebrated her one year wedding anniversary? (Congratulations!)



...Maryam Tabatabaei, RPh, has good meditation tips from her class at Stanford's Continuing Studies program?



...Peter Koshland, Pharm.D usually spends one day mid-week as a stay-at-home dad with daughters Sophia (3) and Linden (6) ?

featured PRACTITIONER (continued)

administering their chemotherapy. There's a collective energy and spirit to the room. Sam Spivack, a colleague at UCSF, taught me that administering chemotherapy yourself ultimately serves the relationship between patient and doctor. He taught me that no matter how much you use your brain as a doctor, to get to touch one more time is invaluable. Let's say you've just talked with a patient for thirty minutes about cancer, she's made this great decision, and now you're going to go start her IV; you're getting it all ready, and then you get to come back, and you get to reach out to her with a reassuring touch to the arm, and she finally tells you the last thing that she didn't tell you before.

In order to do what I do in a way that is rewarding and fulfilling, I need to spend a lot of time with a patient. I need to get answers to a lot of questions. It's not uncommon for me to ask fifteen questions about a patient's family, her work, her kids, and her daily stresses. If I'm going to do chemotherapy on a Tuesday, then I need to know she's got to pick kids up from school at 3:30. Or if a patient can't miss any more work because she used up all of her sick time last year – all of that tells me who she is, as a person and as a decision-maker.

Choosing a treatment approach is the most important decision many patients will ever make in their lives, and they've honored us by letting us participate with them and help them make these decisions. I can't do that in a way that is superficial or just data-driven. Data will give us recommendations, but each patient has to make a decision that is solid, with no regrets, that makes sense for her. For example, a patient might say, "I don't want to do any chemotherapy, I only want to do Chinese herbal medicine." And I say, "Okay,

that's fine, but I need to know where that comes from. If you think you can cure your stage 4 lymphoma with Chinese herbs, I've got a lot of data that says you probably can't. But there's this drug Rituxan® which is not chemotherapy, have you heard about that?" By talking in-depth with patients, I get to enter patients' fears, and learn where their line has been drawn, and they raise it, and they move it to a different place, and suddenly, they are interested in possible treatment approaches.

Current Inspirations

Our patients are our continual inspiration. A qi gong class that a patient organized here at the clinic provides a good example of what I gain by listening to my patients. The time patients wanted the class was from 11:00 am to 12:30pm. I kept thinking, "What a horrible time of day! I'm going to trip over all these people on the floor; it's going to be really inconvenient for me because my office is in the back, and I go back and forth all day long." But I said, "Okay, let's try it," and it was such a contagious energy. I didn't know how amazing that would be for my own mental health and attitude. My 2:30 appointment arrived early every week so that she could do this class, and I was able to watch the group form a community. Without a doubt, what makes our center integrative is not us; it's the people that come here, and use these services, and then share that. It's viral. "I met with Natalie last week. You haven't met with Natalie? Why didn't Garrett mention Natalie? You've got to get with Natalie." That is really what is exciting.

For more information about Smith Integrative Oncology, see:

koshlandpharm.com/smith



Patients and practitioners in the infusion center at Smith Integrative Oncology

nutrition counseling at SMITH INTEGRATIVE ONCOLOGY

In our experience, nutrition counseling must be highly individualized. Every patient has different needs. For example, if a patient is eating a vegan diet, but is also drinking 3 glasses of wine a day, alcohol is likely the biggest risk factor; for body fat metabolism and estrogen production, the number one problem is still on her menu. Or, if a patient has adopted a no carb, no sugar diet, she may think from what she has read that she is doing something really good for cancer. However, she may be 20% below her ideal fighting weight for cancer. Calories may be what's more relevant to her struggle.

When a patient comes in for nutrition counseling, I tailor my approach based on each person's specific needs. With a newly diagnosed patient, I often look at the metabolic terrains in the body that cancer may like to grow and proliferate upon. I can then measure

those terrains as biomarkers and use them as a baseline to monitor and assess outcomes over time. These biomarkers might include glycemic management, inflammation, or stress chemistries and adrenals. On the other hand, if a patient is already in the midst of treatment, I may first deal with symptom management. If a patient is starting chemotherapy the next day, I start with ways to decrease side effects and enhance the therapy.

In order to give patients specific recommendations, I will often do three day diet analyses. Patients write down what they're eating, and I write reports on it, looking at specific numbers, such as how much zinc is in



Natalie Ledesma, MS, RD, CSO Dietitian

their diet. I will make suggestions of two priorities for the patient to focus on for the next month or so, and then add to those as time goes on.

Dr. Smith adds: "A common problem with nutrition and cancer is that a patient might read an expert's very convincing nutritional recommendation, and then read another that says something completely different, and then another; eventually, she might feel like there's nothing left for her to eat. Natalie is our true expert at deciphering all this information. She works with patients regarding their cancer, but also with their immune function, energy, and quality of life."

For more information about nutrition counseling with Natalie, see:

koshlandpharm.com/ledesma

ask the PHARMACIST



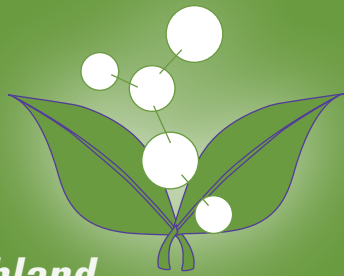
What is shingles, and what medication alternatives can a compounding pharmacy offer for a patient who is not responding well to standard treatment approaches for this condition?

Shingles is a condition that is commonly seen in seniors and people who are immuno-suppressed, such as patients undergoing chemotherapy. It can be extremely painful, and can severely diminish a person's quality of life. Shingles comes from the varicella virus, the same virus that causes chicken pox. After a person is infected with the chicken pox, the virus goes dormant in the nerve endings for years or even decades and can re-emerge as shingles, typically in specific parts of the body, such as the torso, neck, or face.

Manufactured medications for shingles are limited. Typically, oral anti-viral and oral pain medications (like Vicodin[®]) are prescribed. However, they can have limited effectiveness and undesirable side effects.

A compounding pharmacy can formulate topical pain-relieving gels that can include anti-viral ingredients. Shingles is a condition that lends itself well to this type of topical treatment because it can be applied directly to the site of the shingles outbreak.

To speak with a pharmacist about a formulation to treat shingles, or another condition that is not responding well to a conventional treatment, call us at (415) 344-0600.



Koshland Pharm makes prescription medications tailored to a patient's specific needs. For example, sometimes a patient could benefit from customized thyroid capsules that are taken once rather than multiple times a day. To address this kind of specialized need, Koshland Pharm makes high-quality, customized prescriptions and works closely with both patients and their doctors to ensure optimal treatment.



did you KNOW...

...Koshland Pharm's website includes a page about thyroid treatments, including a downloadable checklist to help evaluate symptoms of low and high thyroid? See:

koshlandpharm.com/thyroid



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thyroid HEALTH

When we interviewed Dr. Garrett Smith and dietician Natalie Ledesma of Smith Integrative Oncology for this issue of *Prescriptions for Health*, we learned that they often think of Koshland Pharm in terms of customized thyroid treatments for their patients.

Hypothyroidism (low thyroid hormone production) is a common endocrine problem, affecting approximately 11 million people worldwide, and twice as many women as men. Symptoms of hypothyroidism include low energy, fatigue, cold in the extremities, and constipation.

The conventional treatment for hypothyroidism starts a patient off on the hormone levothyroxine (T4). T4 is one of two types of hormones produced by the thyroid gland. For many patients, this is an effective treatment, but it assumes that T4 is efficiently being converted to the active form of the thyroid hormone, liothyronine (T3). T3 is the form of the hormone that exerts its effects on the body's cells.

Koshland Pharm has innovative treatment options for addressing thyroid issues, particularly when a patient has not responded well to conventional approaches. Each compounded medication can be customized to a strength that perfectly suits a patient's profile. Possible treatments include:

- compounded sustained-release T3/T4 capsules
- compounded desiccated porcine thyroid capsules (which contain T3 and T4 in roughly physiologic ratios)

For patients taking any type of thyroid medication, it is important to know that these drugs interact with most foods, drugs, and supplements. Therefore, it is important to take thyroid capsules one hour before any food or drug, and four hours before any supplement containing minerals like iron, calcium, or zinc.