

CoastLines physician newsletter

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DIM Supplementation and Estrogen Metabolism

By Caroline Conner, M.D.

Do your patients take DIM? What is DIM and what is it used for? DIM stands for Diindolymethane and is a plant chemical that promotes healthy balance of female and male sex hormones. DIM can be found in cruciferous vegetables such as broccoli, cabbage, brussel sprouts, and cauliflower. This compound has been studied for over 10 years but has become a hot topic in the world of science and cancer prevention. Multiple new studies show potential benefit of DIM supplementation on breast, uterine, prostate and cervical cancer prevention and treatment (1-4).

DIM promotes healthy estrogen metabolism. Active estrogens include estradiol and estrone and these compounds are converted to 4 different estrogen metabolites. The "good" metabolites include 2-hydroxy and 2-methoxyestrogens and are powerful antioxidants that remove damaged cells from the body. The "bad" metabolites, 16-hydroxy and 4-hydroxyestrogens, oxidize and damage DNA which may lead to cancer. DIM has shown to be effective in altering estrogen metabolism by increasing production of 2-hydroxyestrogens. Pharmacologic studies have proven there is an increased ratio of 2OH/16OH metabolites in the urine following supplementation with microencapsulated DIM ⁽⁵⁻⁷⁾.

Women and men can both benefit from DIM supplementation to obtain better hormonal balance. Patients who are poor estrogen metabolizers tend to develop benign and malignant hormonal health issues. Benign conditions include fibrocystic breast disease, endometriosis, menstrual migraines, fibroids, and menorrhagia. Malignant conditions caused by unhealthy metabolites of estrogen include breast cancer, endometrial cancer, prostate cancer, and cervical cancer. Multiple studies have been published examining the anti-cancer and metabolic effects of DIM supplementation (1-7). Most of the published

Administrator's Corner



Marcia Manker, CEO

At Orange Coast, I am so gratified by the unique opportunity we are given to save and improve lives with the care and services we provide. We provide our services in line with the unique characteristics of our community using various education, outreach and community partnership programs. As we develop each new service and program, we are deeply mindful of our community's needs and social determinants of health.

MemorialCare Orange Coast Medical Center receives guidance from our Community Benefit Oversight Committee (CBOC) which includes community leaders, including those who represent targeted populations, and Orange Coast staff members. The CBOC has prioritized the following areas for Orange Coast Medical Center to focus resources towards:

Access to care, preventive practices, mental health/substance use and misuse, chronic diseases, overweight and obesity. Special needs within the senior and Vietnamese communities were also identified.

Orange Coast Medical Center collaborates with many community partners to help impact the health of our community. With guidance from the CBOC, the hospital has continued our Community Grant Program.

Community Grant Program Provides Funding to:

- Support the City of Fountain Valley Senior Transportation Program
- The Meals on Wheels Orange County's COVID-19 Relief program to support nutrition to home-bound seniors,
- The Vietnamese American Cancer Foundation's cancer education and patient navigation program for the Vietnamese community.

Thank you for your continued partnership with Orange Coast Medical Center as we strive to provide exceptional and essential care to the people of our community.

Byline From The Chief Of Staff



COVID

Throughout the spring and summer, even into the fall of 2020, Orange County seemed to be navigating the Covid-19 pandemic relatively well in comparison to other populous areas of the country. But the forewarned "surge" did not spare our county, and in December the numbers began to rise with alarming velocity. Orange County Health Care Agency reports 244,000 cumulative cases and 3770 deaths to date in Orange County due to Covid-19. While these statistics are formidable, they do not begin to represent the largely unquantifiable toll extracted from each one of us during this challenging season.

At the height of the surge our hospital and ED were inundated, operating at full capacity with an overflow tent providing beds for the onslaught of patients. Increasing numbers of acutely ill Covid-19 patients were being housed in the ED. We shut down all elective procedures and converted multiple areas once reserved for surgical pre-op-post-op, and GI procedures to Covid-19

purple areas. Emily Randle and Shela Kaneshiro led daily briefings to effectively adapt with the crisis, making necessary changes to allocate resources. Countless others contributed their efforts to meet the challenges of the ever-changing landscape of the pandemic.

The surge made great demands on our physical resources, but perhaps even more so on the men and women who labored intensively at patient care and administration. The entire Emergency Department led by Dr. Hubert Wong daily put their lives at risk to deliver care to the sickest of our Covid patients. Dr. Zuabi, ED physician and much loved colleague, passed January 8, 2021 having contracted this deadly disease while caring for our community. Similarly, the hospitalists and intensivists continue to deliver care despite the risks. Our nursing staff daily endure cumbersome PPE and work exhaustively to care for their patients. I have personally treated nurses ill with the virus themselves, and heard their weary voices as they shared their experiences.

At this time there has been a five week downward trend in cases. Hospitalizations and deaths lag slightly but are on a similar trajectory. The Pfizer-BioN Tech and Moderna vaccines are now available, bringing new hope to the fight against Covid-19. The Pharmacy Department, led by Stan Hill, have done a phenomenal job implementing vaccine delivery to our medical staff, hospital staff, seniors, and now teachers in our community. We are now seeing light at the end of the tunnel.

It has been gratifying to see the courage, resilience and dedication of our entire hospital and physician staff during this challenging time. Thank you all for your commitment to our patients and your courage to fight in this battle. I am personally grateful, and our community is grateful.

Thank you, Stan Arnold, M.D. Chief of Staff

Shawki Zuabi, M.D. – "E.R. Dad"

By Roxana Kopetman | rkopetman@scng.com | Orange County Register PUBLISHED: January 26, 2021 at 6:45 p.m. | UPDATED: January 28, 2021 at 7:30 a.m.

For much of the past year, as the pandemic brought in patient after patient with COVID-19 and the odds of catching the disease remained high, emergency room physician Dr. Shawki Zuabi continued tending to the sick.

"He worked tirelessly, without complaints," said his daughter, Vanessa Zuabi.

"He was everyone's protector. He was everyone's fighter."

Last month, the man known as the "E.R. Dad" of Orange Coast Medical Center caught the virus. And on Jan. 8, after a month-long hospital stay, he died at the age of 64. One of his four daughters, a resident doctor at UCI Medical Center, cared for him in his final weeks.

Family, co-workers and friends offered accolades to the man with the booming voice many described as "larger than life."

"He was a true hero who dedicated his life to serving his patients, especially during this crisis," Vanessa said.

It's unclear if Zuabi is the first emergency physician to die of COVID in Orange County. Data from the California Dept. of Public Health shows that as of Sunday 327 health care workers have died statewide and another 83,113 have tested positive.

Jim Peterson, executive director of the Orange County Medical Association, noted that doctors and nurses, especially those in emergency rooms and intensive care units, regularly confront COVID-19. And though there is more protective gear and better protocols in place than in the early days of the pandemic, he said the risk of contracting the disease is a potential workplace hazard.

"It's a contagious virus. And it kills," said Peterson, whose group represents some 3,500 local physicians, medical students and medical residents.

For Zuabi, the emergency room was a second home. He had worked at Orange Coast Medical in Fountain Valley hospital since 1992, when he settled in Orange County. And he was a partner of Vituity, a company that provides hospital emergency physicians.

Zuabi was born on Sept. 12, 1956, in the Israeli city of Nazareth, the eldest of seven siblings in a large Palestinian family. At the age of 17, he moved to Italy to attend medical school at the University of Padova.

"My dad learned Italian in a couple of months because he had to do the oral exams in Italian," Vanessa Zuabi said.

"One of the unique factors about my dad is that he was so adaptable and flexible to his environment."

Zuabi worked his way through medical school, including stints as a night desk clerk at a small hotel, a laborer in an upholstery shop and a cook in pizzerias. He graduated from the University of Bologna, and spent 11 years in the country.

"He loved Italy," his daughter said.

That's where he met his future wife, Vincenza.

She was originally from New Jersey, but was studying in Italy as part of a study-abroad program at UC San Diego. The couple married and, in 1992, moved to Laguna Niguel. They are parents to four

"He was a true hero who dedicated his life to serving his patients, especially during this crisis,"
Vanessa said.

grown daughters. One of them, Nadia Zuabi, is following in her father's footsteps. After graduating from UC Irvine medical school, she works an emergency medicine resident doctor at UCI.

Last month, when her father was transferred from Orange Coast to the UCI Medical Center, his daughter Nadia stopped working to be at her father's side.

"She stayed with him day and night," said Vincenza Zuabi. "She became his protector and advocate."

Vincenza Zuabi said she's "still in disbelief" that her husband is gone.

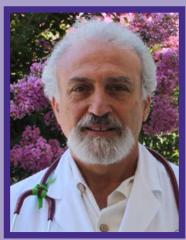
Physicians of the Month



November
Matthew Janssen, M.D.



December Nancy Hanna, M.D.



January Shawki Zuabi, M.D.

New Physicians/Allied Health Professionals Appointed In JANUARY – MARCH, 2021

Department of Emergency MedicineAngela Ullon, PA-C

Department of Medicine

Hazel Abaya, M.D.
Benjamin Addicott, M.D.
Eric Cheung, D.O.
Jane Conlin, M.D.
Farhad Farjoudi, M.D.
Dilruba Haque, M.D.
Peyman Kabolizadeh, M.D.
Kiin Kim, M.D.
Dan Le, M.D.

John Link, M.D. Nawid Sarwari, M.D. Louis Scarcella, M.D. Larry Simmons, D.O. Ashley Wong, D.O. Frank Xing, M.D.

Department of Pediatrics

Asif Ahmad, M.D.
Saar Danon, M.D.
Monica Molina, M.D.

Department of Surgery

Valentina Bonev, M.D.
Sunny Cheung, M.D.
Arash Esmailzadegan, M.D.
Ellen Nong, PA-C
Scott Peifer, D.D.S.
Alexander Richter, M.D.
Jesse Tan, M.D.
Courtney Vito, M.D.

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studies are in animals but human studies are currently ongoing to further define DIM's role in medical practice.

Early experiments in animals showed that dietary supplementation of cruciferous vegetables prevented chemically induced cancers. Later studies using pure DIM in animals showed prevention of breast and colon cancer and was found to be nontoxic ⁽⁸⁻¹⁰⁾. The mechanism by which DIM prevents cancer in animals was also discovered. DIM functions by reducing the activity of the estrogen receptor system, promoting beneficial estrogen metabolism, and activating "programmed cell death". This alteration in metabolism prevented cancers in animals ⁽⁸⁻¹⁰⁾.

Human studies have proven that DIM increases production of 2-hydroxy metabolites by approximately 75% and decreases 16-hydroxy metabolites by 50% ⁽⁵⁻⁷⁾. Multiple case control studies have shown that low levels of 2-hydroxy metabolites in humans are associated with breast cancer in women and men, uterine cancer, cervical cancer and lupus ⁽¹²⁻¹⁴⁾. Diets high in fat, obesity, and diets low in omega 3 fatty acids are established risk factors for breast cancer and in turn have been correlated with low 2-hydroxy production. DIM is the only dietary supplement capable of performing these actions ⁽¹⁵⁾. Human research continues to further delineate the correlation between DIM supplementation and reduction/prevention of hormonally induced cancers.

Pre-and Post-menopausal women may benefit from daily DIM supplementation. Increased production of the 2-hydroxy metabolites balances out women hormonally in many ways. This increase can also lead to increase production of progesterone from the ovaries. As women approach menopause ovulation can be interrupted and progesterone levels may decrease. This can lead to menstrual irregularities, difficulty sleeping, irritability and heavy periods. The increase in progesterone that DIM promotes potentially provides relief with symptoms of fibrocystic breast disease, breast pain, endometriosis and other estrogen related disorders.

HRT in postmenopausal patients has many benefits but also side effects and risks associated with daily therapy. For women who have not undergone hysterectomy, estrogen replacement must be balanced by progesterone therapy. Progesterone is a large compound and is poorly absorbed orally. Progesterone is typically taken at night due to side effects such as somnolence. This can lead to issues with patient compliance and imbalances in estrogen to progesterone ratios. These imbalances can increase risks for endometrial cancer. DIM potentially assist in the balance of those risks and may decrease breast cancer risk by increasing 2-hydroxy metabolites (5-7).

DIM supplementation is also important for men's health. "Andropause" for men is becoming a more accepted term and men are seeking hormone replacement therapy in the form of testosterone. Testosterone replacement can increase estrogen levels and cause bloating, headaches, flushing, mood changes and nausea. Men receiving testosterone replacement therapy may benefit from daily DIM. DIM will likely reduce unwanted side effects from testosterone therapy and inhibits aromatization. Newer studies suggest DIM may also slow the progression of atherosclerosis and prostate cancer in men (16-17).

Standard dosing of DIM for women is usually 150mg daily. If breast tenderness, bloating or headaches occur patients may increase to 300 mg per day. Men typically need about 300mg daily but may also need twice a day dosing. Patients will experience a change in the color of their urine due to the increase in estrogen metabolites. DIM is generally considered safe and is tolerated well by most patients.

DIM supplementation for estrogen metabolism and cancer prevention is an emerging field of research. Women and men alike can both benefit from this daily supplement especially those taking hormone replacement therapy. Future human research will evaluate the relationship between cancers and DIM supplementation however the preliminary research is promising.

CME Zoom Lectures

(emails will be sent with the Zoom links)

March 18, 2021 Migraines Andrew Charles, M.D..

April 1, 2021Eating Disorders
Terry Schwartz, M.D.

April 15, 2021 Ovarian Cancer John Li, M.D.

April 29, 2021 Current Update in ARDS Nitin Seam, M.D.

May 13, 2021
Cardiac Considerations
in the Context of
COVID-10
Matthew Budoff, M.D.

May 27, 2021Transgender Patients:
 Unique
 Consideration *Jennifer Hastings, M.D.*

Epic

In an effort to improve security and reduce the number of passwords physicians need to remember, MemorialCare is implementing a new protocol which will utilize the same password for both Epic and Secure Remote Access (SRA/Citrix/Email). This is the first step toward a single sign-on solution.

In preparation, we are asking that you please change your Citrix/SRA password to match your current Epic password. Once complete, you will be able to change your password in Epic, Password Manager, or on the Citrix application page. Moving forward, when your password expires after 180 days, your new password will work for both Epic and SRA.

To change your password, please follow one of the options below before *April 7th, 2021.*

- Stop by the Doctors' Dining Room at lunchtime and meet with a CTS Team member.
- Call the CTS Team at 866-405-3742, M-F 8 a.m.-8 p.m.

Shawki Zuabi, M.D. - "E.R. Dad" Cont'd. from page 4

She described him as someone who deeply cared for his family, colleagues and patients.

"He made you feel like you were safe."

During a Zoom memorial earlier this month, colleagues and friends described Zuabi as a physician who could be counted on by patients and medical staff alike.

Dr. Hubert Wong, chairman of emergency medicine at Orange Coast, said his colleague was "very much the anchor of our group." And Dr. Robert Realmuto said Zuabi "had the confidence and ability to put people at ease."

"His patients trusted and respected him," Realmuto said during the Zoom memorial. As he spoke, Realmuto sat next to a Tuscan landscape that Zuabi had painted for him.

Described by several as "Renaissance man," Zuabi was more than a physician – a gifted painter, avid fisherman, and frequent traveler. He was well-versed in history and religion, among other topics, and he spoke five languages.

His daughter Vanessa said her father was more than a sum of his accomplishments. She cited his integrity, his kindness, his loyalty, his compassion. When he caught the virus and became a patient, she added, "nurses were telling us he was always comforting them."

"He always put other people before him."

Zuabi is survived by his wife, Vincenza Zuabi, and their daughters, Vanessa, Rena, Nadia and Adriana Zuabi. In lieu of flowers, the family suggests donations to the Palestinian Children's Relief Fund.

Our Providers are Simply Better!

By Nika Carlson, MSN, RN – Director, Clinical and Quality Improvement Catie Helias – RN, Clinical Quality Analyst

One hundred percent of our inpatient population is mailed a survey within two weeks of their hospital discharge. Our patients can access our Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) inpatient surveys scores on CMS's Hospital Compare website to see how we compare to other hospitals. CMS provides each hospital with a Star Rating from 1-5 Stars, a higher star rating is better. Orange Coast's goal is to receive a 5-star rating in the composite topic "Doctor Communication" which includes three inpatient survey questions:

- 1. How often did doctors treat you with courtesy and respect?
- 2. How often did doctors listen carefully to you?
- 3. How often did doctors explain things in a way you could understand?

Orange Coast sends HCAHPS surveys to 100% of our inpatients and our response rate is about 30%, which is higher than the national average. For calendar year 2020 Orange Coast received an overall rating of 3-stars and the composite topic for Doctor Communication received a 2-star rating.

It takes the entire hospital team to help us achieve our 5-star goal, and improve our patients' experience. COVID-19 has significantly changed the way we have delivered healthcare in the hospital over the past year by not only changing our protocols and procedures around infection prevention, but also our communication techniques with both patients and their family members. As the pandemic continues, and we start our road to recovery it provides us a unique opportunity to re-explore how we can personally enhance our patient's experience and improve overall communication. Some techniques may include:

- Coordinating a Facetime call with your patient's family to explain a new diagnosis or plan of care/treatment
- Utilizing the teach-back methodology with your patients to ensure they fully understand your explanations and care instructions
- Asking "Is there anything I can do for you" prior to leaving a patient's room

We sincerely appreciate the outstanding care everyone is providing our patients during these challenging times and appreciate you sharing opportunities for how we can improve our patient's perception of doctor communication.

In our October, November, and December 2020 Patient Satisfaction surveys, several providers were mentioned by name. We would like to recognize the following providers for their roles in making Orange Coast Simply Better:

- Mir Ali, M.D.: "Thank you Dr. Ali...for your guidance and treatment in the hospital and post hospitalization.
- **Dena Amr, M.D.:** "The emergency staff called Dr. Dena Amr who decided to proceed for operation. She is a very caring doctor & more than excellent."
- Sarah Bartulis, CNM: "Sarah was an amazing midwife."
- Devin Binder, M.D.: "I had had several surgeries with Dr. Binder at this hospital. All excellent."
- Israel Chambi Venero, M.D.:
 - "Dr. Chambi Venero & all the anesthesiologists were exceptional"
 - "Very good experiences with Dr. Chambi Venero...Dr. Chambi Venero & his staff were very polite & professional."
- David De Haas, M.D.: "Dr. David De Haas was amazing! He was dealing with a lot but still made me feel cared for."
- Sara Ghazi, D.O.: "Dr. Ghazi was amazing along with the staff. Above and beyond service."
- Timothy Gibson, M.D.: "My surgeon Dr. Gibson, FANTASTIC!"

Our Providers are Simply Better! Cont'd. from page 8

- Rachel Hargrove, M.D.: "Dr Hargrove was excellent as the surgeon"
- **Tim Horttor, NP:** "I'm very impressed with the cardiovascular team (Tim, Michelle, Laura...) They made me feel confident that I would not be left alone with questions or concerns before & after heart surgery."
- Atif Iqbal, M.D.: "I was very pleased with my visit, surgery, staff and Dr. Iqbal. Just a great job by all involved."
- Jane Kakkis, M.D.: "Dr. Kakkis, anesthesiologist and staff were all very courteous to me.
- Tuan Lam, M.D.:
 - "Dr. Lam my cardiac surgeon is very caring to his pt" and made sure that I am really taken care of."
 - "Dr. Lam best heart surgeon cares a lot with his pt".
- Minal Mehta, M.D.: "Dr. Mehta my favorite."
- Christen Mellano, M.D.: "Dr. Mellano is an accomplished orthopedic surgeon, I would refer him to anyone requiring a hip replacement."
- **Meagan Moore, M.D.:** "I have selected my OBGYN Dr. Moore and Orange Coast Memorial as I'm very happy with overall care, knowledge, friendliness of all staff."
- **Kim-Tan Nguyen, M.D.:** "I was very impressed with my experience in the ER. Dr. Kim Nguyen... excellent care! In a very frightening situation, they were able to put trust in and I felt I was being taken well care of."
- Jennifer Oman, M.D.: "Dr. Oman...excellent!"
- Laura Perez-Aoki, NP: "I'm very impressed with the cardiovascular team (Tim, Michelle, Laura...)
 They made me feel confident that I would not be left alone with questions or concerns before & after heart surgery."
- Robert Realmuto, M.D.: "I absolutely loved Dr. Realmuto. So precise and informative."
- Richard Reitherman, M.D.: "I would...like to thank Dr. Reitherman for his perseverance for finding my tumor."
- Marvin Reyes, M.D.: "Thank you...Dr. Reyes...for your guidance and treatment in the hospital and post hospitalization."
- Brian Rhee, M.D.: "Dr. Rhee and staff were excellent."
- G. Thomas Ruiz, M.D.: "I would like to thank Dr. Ruiz...made me feel comfortable before and after surgery."
- **Michelle Taylor, NP:** "I'm very impressed with the cardiovascular team (Tim, Michelle, Laura...) They made me feel confident that I would not be left alone with questions or concerns before & after heart surgery."
- Yen Tran, D.O.: "My doctor that did the survey Dr. Tran was great."
- My-Le Truong, M.D.: "I would like to thank...Dr. Truong (anesthesiologist) that made me feel comfortable before and after surgery."
- Lindsey Urquhart, PA-C: For my visit I interacted most with Lindsey the PA and...RN. Both were amazing in the care they provided and are amazing assets for Orange Coast Memorial! They were both impressive and I really appreciate all that Lindsey did for me."
- Hubert Wong, M.D.: "Dr. Wong was very professional and personable...I like him."
- John Yee, M.D.: "Dr. Yee at the ER is great."

Thank you for providing our community with Simply Better care!

For questions regarding Simply Better, you may contact Charlene Freeman,
Patient Relations Director, at ext. 7919.

Ethics Committee March 21

By Kiarash Noorizadeh, M.D.

What is an Ethics Consultation?

Ethical issues can arise in healthcare. The Ethics Consultation Service and Ethics Committee support patients, families and caregivers as they work together to find solutions to these difficult issues.

Who can Request an Ethics Consultation?

If an ethics question arises, anyone directly involved in the patient's care - including family members, friends, staff, or the patient him/herself - may request an ethics consultation. An ethics consultant will usually respond within 24 hours (or less).

What is the Purpose of an Ethics Consultation?

An ethics consultation helps patients, families, health professionals, and other staff reach a consensus on the patient's plan of care consistent with the patient's values, organizational ethics, and good medicine.

Why Would Someone Request an Ethics Consultation?

- A family member may be struggling with decisions about the care plan, wondering if what they are deciding is ethical or "right" for the patient.
- There may be confusion about what has been stated in a Living Will or A Durable Power of Attorney for Health Care, and how it affects the plan of care.
- The appropriate person to make decisions for a patient who lacks decision-making capacity may not be clear, or there may be disagreement among the decision-makers.
- A physician may want support from the Ethics Committee in making recommendations to the patient or family.
- A nurse may observe confusion about the patient's plan of care and want to help draw together the parties involved to arrive at a consensus.

What Happens During an Ethics Consultation?

The ethics consultant assists patients, physicians, nurses, family members, and others involved in the patient's care to assess the patient's personal values and wishes.

- The consultant helps those involved step back and assess the patient's illness and treatments' realistic outcomes.
- The consultant facilitates a discussion of the "next steps" in the patient's plan of care.
- The consultant helps those involved evaluate ethical issues and options.

How Do I Ask for an Ethics Consultation, and What Happens When I Do?

- Requests for an ethics consultation from a patient or their appropriate decision-maker may
 be made to any healthcare team member caring for the patient. A member of the healthcare
 team will then contact the Ethics Consultation Service through PerfectServe (Listed as
 Bioethics), and one of the on-call clinical ethicists will contact the person placing the request.
- The ethics consultant will contact the relevant parties and assess the situation with those involved.
- If appropriate, the ethics consultant will facilitate a discussion among the people involved to clarify values and reach a consensus on an ethical plan of care.

Levels of Ethics Support: What If Someone Has a Question For An Ethics Consultant?

Anyone may call the ethics on call for a consult through PerfectServe (listed as Bioethics). An ethics consultant will usually respond within 24 hours (or less) and offer different support levels.

- **Informal Consultation** the ethics consultant responds to the request for a consultation, usually by telephone, and answers questions about the case.
- **Family Meeting** the ethics consultant may be asked to attend a family meeting and offer in put on the team's ethical issues and concerns.
- **Formal Consultation** the ethics consultant facilitates consultation with all the relevant parties regarding the ethical issues and decisions in the case to find an appropriate consensus about the plan of care and ways forward.

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