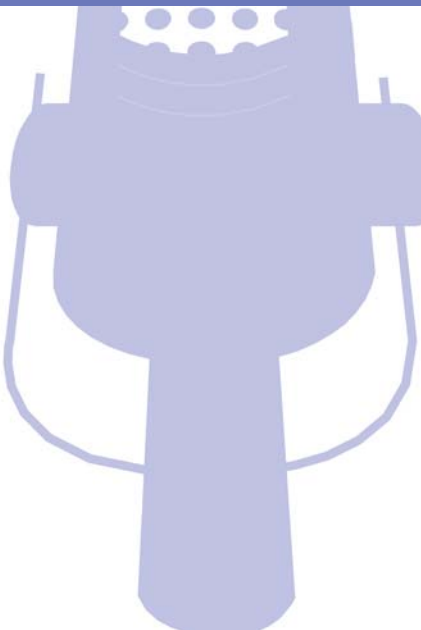




ASTRO MEDIA GUIDE

YOUR GUIDE TO SPEAKING WITH THE
MEDIA ABOUT RADIATION ONCOLOGY



DEAR COLLEAGUE,

Speaking with the media is a great way to promote your work and your facility while helping ensure that people in your area are aware of the lifesaving treatments you and your colleagues provide. It's also a great way to promote our specialty.

To help make your interactions with reporters more efficient, we have compiled this brief Media Guide. It should assist you in preparing for interviews with reporters. This information can also help you convey your message to elected officials and regulators.

If you are contacted by a reporter, please contact ASTRO's Communications Department at 1-800-962-7876 before your interview. ASTRO staff can provide reporters with background information on the specialty and visuals. They can also help prepare you for the interview.

Sincerely,

ASTRO's Communications Committee



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ASTRO

AMERICAN SOCIETY FOR THERAPEUTIC
RADIOLOGY AND ONCOLOGY



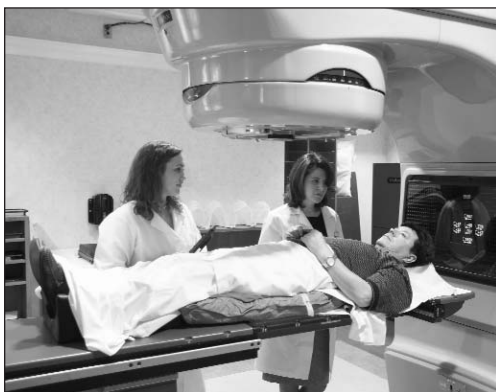
ASTRO TALKING POINTS

ASTRO recently conducted two focus groups and a national survey to better understand the public's knowledge of and attitude toward radiation therapy. When you speak with the public or the media, please try to keep this information in mind.

1. Do not assume that the public understands what you do or how you do it. In general, the public is not well-versed on radiation therapy or radiation oncology. Be sure to explain that you are a radiation oncologist – a doctor who specializes in delivering high doses of radiation to specific parts of the body to treat cancer and other diseases. You may also need to explain that you are not a radiologist – a doctor who uses radiation to diagnose disease and detect other health problems.
2. When explaining a procedure, be sure to explain in the most basic terms what each treatment does and how it differs from the others. Although you know the differences between the various types of treatments (external beam, IMRT, brachytherapy), reporters and the public usually don't understand the differences.
3. The public likes the concept of a team approach with a strong leader (a radiation oncologist) at the helm. Talk about the extensive training you have undergone to become a radiation oncologist as well as the combined expertise of the other members of the treatment team.



4. The public wants to know that a physician is in charge of their treatment, not a machine. When you're talking about equipment and techniques, be sure to discuss them in terms of how the doctor and the team use them to improve treatment. Avoid the impression that the machine and software do all the work and planning.
5. It is important to emphasize that radiation therapy is a safe and effective cancer treatment. The public needs to know that this is not a new treatment, rather it has been used safely and effectively for more than 100 years.
6. The public likes the concept that the body naturally eliminates the cancer cells after the radiation therapy damages them. The idea of the body working with the cancer treatment is a powerful image.



IT IS IMPORTANT TO EMPHASIZE THAT A HIGHLY TRAINED DOCTOR IS IN CHARGE OF GIVING RADIATION TREATMENTS – NOT A MACHINE.



7. Lay people like that radiation therapy spares healthy tissue. Also mention that any healthy cells affected can repair themselves naturally in a way cancer cells can't.
8. Be sure to differentiate how these treatments impact the body as most people believe that hair loss, nausea, weakness and weight loss are automatically side effects of all radiation therapy treatments. To the public, the side effects from chemotherapy and radiation therapy are the same.
9. Many people are afraid radiation hurts. Be sure to emphasize that radiation therapy treatments themselves are painless and noninvasive, much like getting an X-ray.
10. Try to emphasize that radiation therapy is effective in curing cancer, sometimes alone or in combination with other treatments. Radiation is sometimes perceived as a treatment of last resort – something that is used after all other treatments have failed.

Radiation may initially conjure up some negative images, but the public is receptive to learning more about radiation therapy. Emphasizing these points will help the public feel more positive toward radiation therapy and the specialists that use it.



GENERAL MEDIA TIPS

So a reporter has just asked to interview you. Say yes! Then don't panic! Just follow these simple tips and you'll do fine.

- 1. Do your homework.** If a reporter calls you for a story, find out as much as you can about what the story is about. For example, is it a general article on Breast Cancer Awareness Month? Has a public figure been diagnosed with prostate cancer? Is the article about a new technology? Once you find this out, ask the reporter for five minutes to collect your thoughts and then call him or her back. Be sure to actually call the reporter back in five minutes like you promised. Never keep a reporter waiting if you can help it.
- 2. Learn about the medium.** There are thousands of media outlets in existence — daily and weekly newspapers, monthly magazines, Internet health sites, and radio and television stations. Find out what type of media outlet it is so you can phrase your answers for the audience. ASTRO can help by providing photos or video footage to help illustrate the specialty. Call ASTRO's Communications Department at 1-800-962-7876 for help gathering the appropriate materials.
- 3. Keep it short.** Once you know the topic and type of media outlet, think about what your answers will be and develop short take-home message points. Jotting down your messages first will help you stay on track during the interview and help keep you from becoming flustered. ASTRO can also help you create message points.



4. **Practice your thoughts.** No matter what the media outlet, it's important to have short sound bites that are easy to put into a story. Practice ahead of time so you are able to say your main message in a few seconds.
5. **Bridge your message.** During the interview, the reporter may drift off topic. Be able to "bridge" your message back to the subject you want to talk about. If you sense you're getting off track, refer to your notes to find a way to get back to your main message.
6. **Keep it simple.** Radiation therapy is a very complicated specialty so try to avoid using technical terms if you can help it. If the terms are important to the story, work hard to explain them in language regular people can understand.
7. **Avoid distractions.** It's important to focus on the interviewer to avoid distractions. If you are interviewed in person, try to maintain eye contact with the interviewer. If you are interviewed over the phone, standing during the interview may help you stay focused. Always use the handset for a phone interview – never use a speakerphone. For television interviews, don't look at the camera unless instructed.
8. **Dress conservatively.** If you are going to be interviewed in person, dress conservatively and avoid flashy jewelry. If you look professional, the interviewer is more likely to focus on what you're saying.
9. **Don't lie or guess.** If you don't know the answer to a question, answer honestly. It's always okay to say, "I don't know." This gives you much more credibility than lying or guessing.



10. Never go "off the record." It can be easy to lapse into being more open with a reporter than you might be otherwise if you go off the record. Unfortunately, there is no guarantee that the information you provide won't end up in the story later.

If you have a question about an interview, call ASTRO's Communications Department at 1-800-962-7876. They will be happy to help you prepare.



ASTRO CAN HELP YOU WITH YOUR INTERVIEW BY PREPARING YOU FOR THE MEETING AND PROVIDING VISUALS.



FAST FACTS ABOUT RADIATION THERAPY

For your interview, these fast facts about radiation therapy may help the interviewer better understand our specialty. Reporters are also welcome to use these statistics in their piece as long as they cite ASTRO.

- Nearly two-thirds of all cancer patients will receive radiation therapy during their illness.
- In 2002, nearly 1.3 million patients were treated with radiation therapy, up 13 percent from 2001.
- Sixty-five percent of the patients treated with radiation in 2002, or 846,400 individuals, had not previously received radiation therapy.
- In 2002, patients made about 26.4 million radiation therapy treatment visits to 2,010 hospitals and freestanding radiation therapy centers. This is an 8 percent increase in radiation therapy visits from 2001.



THE VAST MAJORITY OF PATIENTS TREATED WITH RADIATION RECEIVE IT FROM A LINEAR ACCELERATOR.



SEVEN PERCENT OF PATIENTS TREATED WITH RADIATION RECEIVE BRACHYTHERAPY.

- Three cancers – breast cancer, prostate cancer and lung cancer – make up more than half (53 percent) of all patients receiving radiation therapy.
- For most cancer types treated with radiation therapy, at least 75 percent of the patients are treated with the intent to cure the cancer, rather than control the growth or relieve symptoms like pain. For lung cancer and brain tumors, that number is somewhat lower, with 59 percent of lung cancer patients and 50 percent of brain tumor patients being treated with the goal of curing the cancer.
- In 2002, 90 percent of patients treated with radiation therapy received external beam radiation therapy treatments from a linear accelerator.
- An average linear accelerator is used for 4,500 to 6,500 treatments per year.
- The average patient receiving external beam radiation therapy receives 28 treatments.
- In 2002, 7 percent of the patients treated with radiation therapy received brachytherapy treatments.



RADIATION THERAPY CENTERS EMPLOY NEARLY 30,000 PEOPLE IN THE UNITED STATES.

- In 2002, 18 percent of patients receiving radiation were treated with more than one type of radiation therapy.
- In 2003, radiation therapy centers in the United States employed an estimated 29,000 people full time. The number of employees has increased 10 percent since 2001.
- This includes about 4,200 radiation oncologists (physicians); 9,300 radiation therapists/technologists; 3,200 nurses; 2,600 radiation physicists; 2,500 dosimetrists (treatment planners); 4,400 clerical employees; 2,100 administrative staff; and 1,000 other full-time employees, such as block cutters, tumor registrars and social workers.
- The average radiation oncologist sees between 200 and 300 new patients annually.
- Medicare/Medicaid is the predominant source of payment for radiation oncology procedures.

*Sources: IMV Medical Information Division
2003 SROA Benchmarking Survey*



FAST FACTS ABOUT CANCER

When you are talking about cancer, these statistics from major cancer organizations may help illustrate a point.

- In 2004, about 1,368,000 new cases of cancer were diagnosed.
- In 2004, about 555,500 Americans died of cancer – more than 1,500 people a day.
- Cancer is the second leading cause of death in the United States, exceeded only by heart disease.
- In the United States, one out of every four deaths is attributed to cancer.
- Over the course of a lifetime, one in three women and one in two men will develop cancer.
- More than 75 percent of all cancers are diagnosed in patients aged 55 or older.
- The leading cancer for men of all races is prostate cancer, followed by lung cancer and colorectal cancer.



THE LEADING CANCER FOR MEN OF ALL RACES IS PROSTATE CANCER.



- Breast cancer is the most prevalent cancer among women, regardless of race.
- Among white women, lung cancer is the second most common cancer followed by colorectal cancer.
- For black and Asian/Pacific Islander women, colorectal cancer is the second most common cancer and lung cancer is third.
- Among children aged 19 and younger, the most common cancers are leukemias.
- Overall, cancer rates are higher for whites and blacks than for Asians/Pacific Islanders.
- Approximately 5 percent to 10 percent of cancers are hereditary.
- Since 1990, more than 18 million new cases of cancer have been diagnosed.
- About 76 percent of all cancers are diagnosed in people aged 55 or older.
- The five-year relative survival rate for all cancers is 63 percent. That means that 37 percent of all patients diagnosed with cancer survive less than five years.
- In 2003, the overall cost of cancer was an estimated \$189.5 billion, including \$64.2 billion in direct medical costs.
- Although clinical trials are an important way to evaluate new treatments, only 2 percent of all adult cancer patients participate in a trial.

*Sources: American Cancer Society
Centers for Disease Control
National Institutes of Health*

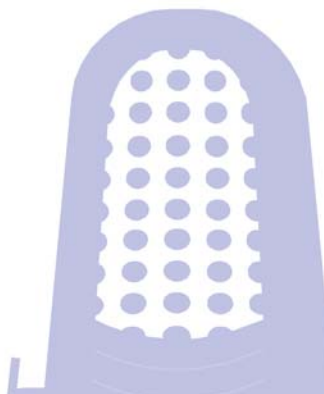


FACTS ABOUT ASTRO

- Founded in 1958, the American Society for Therapeutic Radiology and Oncology is the largest radiation oncology society in the world, with 8,000 members who specialize in treating patients with radiation therapies.
- As a leading organization in radiation oncology, biology and physics, ASTRO's mission is to advance the practice of radiation oncology by promoting excellence in patient care, providing opportunities for educational and professional development, promoting research and disseminating research results, and representing radiation oncology in a rapidly evolving socioeconomic healthcare environment.
- ASTRO's members are physicians, nurses, biologists, physicists, radiation therapists and other scientists who specialize in treating patients with radiation therapies and making advances in cancer treatment. ASTRO's membership consists of healthcare professionals from distinguished community medical centers as well as major academic research facilities.
- Each year, ASTRO holds an Annual Meeting where top cancer researchers present the latest data and technology companies show the latest innovations in the specialty. More than 10,000 healthcare professionals attended the 2004 meeting.

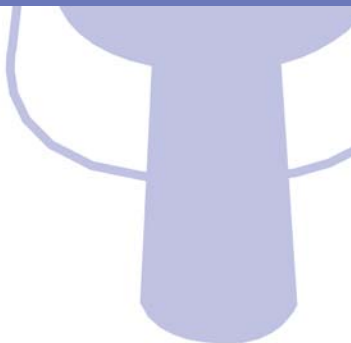


ASTRO HAS MORE THAN 8,000 MEMBERS WHO SPECIALIZE IN TREATING PATIENTS WITH RADIATION THERAPIES.



ASTRO

AMERICAN SOCIETY FOR THERAPEUTIC
RADIOLOGY AND ONCOLOGY



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