FALL 2014

LIVING YOUR BEST LIFE AFTER CANCER

Chemo Brain

How to cope with brain fog after treatment

Fear of Recurrence

Sound advice on keeping your worries in check

Lost Your Sex Drive?

You're not alone, but there is help

Bif Naked

Rock star Beth Torbert opens up about the challenges of rocking on during and after breast cancer



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JENNIFER WAH, ABC, MC

Principal Consultant
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ANGELA WILSON, ABC

Communications Manager, BC Cancer Agency PHSA

PATSY WORRALL

Vice President, Marketing and Communications BC Cancer Foundation

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EDITOR ANN COLLETTE
CONTRIBUTING EDITOR ANGELA WILSON

CREATIVE DIRECTOR SUSAN MINTON GREEN

ART DIRECTOR FELICE BISBY

CONTRIBUTING PHOTOGRAPHERS

PAUL JOSEPH, CHUCK RUSSELL

CONTRIBUTING WRITERS MONICA BISAL, SUE BUGOS, ALLAN JENKINS, CLAUDIA KWAN,

JENNIFER WAH, KATE ZIMMERMAN

ELECTRONIC IMAGING MANDY LAU, LAURA MICHAELS

PRODUCTION MANAGER KRISTINA BORYS

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If you have a topic that you would like to see covered in a future issue of *Forward*, please let us know by emailing us at *forward@bccancer.bc.ca*.







contents

features

10 The Naked Truth

Rock star Beth Torbert, a.k.a. Bif Naked, speaks candidly about her experiences with breast cancer and the challenges of returning to the rock scene.

16 Fear of Recurrence

Worried cancer will come back? Learn some practical tips to keep worry at bay.

18 Lost Your Sex Drive?

If sex is the last thing on your mind, you're not alone. Dr. Lori Brotto shares some ways to help you get your mojo back.

departments

4 Message

Dr. Max Coppes, vice president, provincial cancer care and research, head of BC Cancer Agency, PHSA

5 Living Well

Bisphenol A: Worth watching. Worth understanding; Walk Your Way to Better Health.

8 Journeys

How a cancer diagnosis opened Dan St. Andrews' eyes to the joys of giving back by volunteering.

13 Advances

A new Canadian-made app is helping doctors predict lung cancer with 97 per cent accuracy.

14 In Focus

Helpful advice on preventing and managing lymphedema after breast cancer.

15 Ask An Expert

Dr. Elaine Drysdale discusses the "brain fog" or "chemo brain" that many experience after chemotherapy.

20 Foundation

In the midst of a cancer diagnosis Mark Watson learned to focus on the moment.

22 What's On

A guide to informational seminars and special events around British Columbia.

23 Resources

Recommended online relaxation resources and CDs.

COVER PHOTO BY PAUL JOSEPH; ABOVE PHOTO BY CHUCK RUSSELL

We're Listening!



As we move into the fall and look ahead to a new year, we also celebrate our first year and three full issues of *Forward* magazine! Similar to a New Year's resolution, we want to look at this past year to see what resolutions we should make to further improve for 2015. To do that we need *your* feedback!

Feedback from the people we serve is very important to us. We strive to get feedback in many different ways, including through comment cards at our centres, patient satisfaction surveys, and program evaluations. And we use the responses and compliments/complaints that we hear to continually improve the programs and services that we provide to the people of British Columbia and the Yukon.

Forward was created in response to feedback. We know that once people finish their cancer treatment and return to their regular way of life, some feel like they no longer know where to go to get their questions and needs addressed. We created this magazine to provide information, inspiration and support to those living beyond cancer, and we hope that it is serving that purpose. As we are

now on our third issue, we want to hear from you – how are we doing?

I hope you will take the time to fill out the survey included within this issue, or online at www.bccancer.bc.ca/readershipsurvey. Let us know if you find this information useful and relevant or what you'd like to read more of in the pages of Forward.

Included in this fall issue is information about issues that we know many who have had cancer deal with. What is encouraging is there is help, resources and things you can do to resolve or manage matters such as: Fear of Recurrence (pages 16-17), Loss of Sex Drive (pages 18-19), Lymphedema (page 14) or Chemo Brain (page 15). Also in this issue, Bif Naked (page 10), Dan St. Andrews (page 8) and Mark Watson (page 20) share their inspiring personal experiences with cancer with us. And even though the temperatures are starting to drop and the days are getting shorter, Kristin Campbell reminds us of the importance of regular walking or activity all year-round (pages 6-7).

I hope you enjoy this issue, and I wish you and your family a wonderful holiday season — all the best for 2015!
Sincerely,

Dr. Max Coppes

Vice President Provincial Cancer Care and Research,

Head of BC Cancer Agency, PHSA

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Bisphenol A: Worth watching. Worth understanding.

Bisphenol A (BPA), a synthetic chemical that's a key ingredient in the polycarbonate plastics used to make water bottles and epoxy resins to line tin cans, has been in the news a lot over the past few years.

"BPA is an endocrine disruptor that mimics certain hormones," explains Cheri Van Patten, a registered dietitian and researcher. "This interferes with the regulation of our body's systems and is a particular concern related to certain types of hormone-dependent cancers, like breast and prostate."

Recent assessments of BPA indicate that the risk of exposure to BPA is lower than initially determined, yet it is still worth studying.

To reduce the risk of BPA exposure:

- Avoid plastics with the recycling symbol "7" and "PC," and limit canned foods
- Use glass, stainless steel and non-BPA plastics to store food
- If you do use plastics containing BPA, avoid exposing them to extreme temperatures; don't put them in the microwave, dishwasher or freezer
- Some canned foods (such as beans and vegetables) are highly nutritious, so choose those over ones with added sugar and sodium.

Over the past 10 years, concerns about the potential for BPA to leach into food and cause health issues, especially when containers are heated, has led to much research and debate.

Canada has been proactive about the issue, and was actually the first country to ban baby bottles containing BPA. Health Canada's current position is that exposure to BPA through food packaging does not pose a health risk to the general population. Even so, "BPA-free" is now seen on many products as manufacturers and regulators take precautions to ensure it is removed when possible.

"It is important to look at a concern like this carefully," says Van Patten. "I think a key consideration is that there are easy and affordable alternatives available, allowing people to control their exposure [to BPA] from food containers.

"People with cancer already have a lot to think about, so I encourage my patients to focus on what they *can* control. Increasing physical activity, a healthy weight, a balanced diet and quitting smoking are all things we know can significantly lower risk factors for disease. The nutritional value of some foods may outweigh the risk of BPA exposure. For example, if a person enjoys beans from a can, I think it can be a good choice.

"There are glass containers and many BPA-free-plastic options for storing and carrying food," she adds. "It is good to be aware of potential health risks, but it is important to keep them in perspective."





One of the keys to staying healthy could lie in something as simple as going for a brisk walk every day. In fact, Kristin Campbell, assistant professor within the Department of Physical Therapy at UBC, is currently studying the important connection between regular physical activity and reducing the risk of developing cancer.

"For instance, we see lower incidences of cancer in women who report being more physically active and have healthy BMIs [body mass indexes]," says Campbell. "The drop in risk on average is 30 per cent. I want to know the mechanism behind it to help tailor a public health message for lowering cancer risk."

A recent report from the World Cancer Research Fund and the American Institute for Cancer Research indicates that 30 minutes of moderate intensity exercise, five days a week, can deliver big benefits. However, how do you know you're exercising at the right level of intensity? Campbell says

the "talk test" makes it simple.

"If you're doing an activity and can talk in a full sentence, you're in the right range," says Campbell. "If you can sing a song, it's too easy, and if you can't get out a full sentence – you're breathing too hard to talk – you've moved into the vigorous zone.

"If you're approved by your doctor to be at that level, that's fine," adds Campbell, "but if you want to stay in the moderate zone, the talk test is a common way to evaluate that."

Previously, the range of recommended activities involved brisk walking, swimming or dancing, but Campbell says any activity that elevates the heart rate and breathing rate to the appropriate level qualifies – even vigorous vacuuming. While the recommended amount is 30 minutes per day, the activity must take place in 10-minute periods before any health benefits are shown. However, Campbell cautions that it's not enough to just do the bare minimum.

"Research shows that staying healthy is

all about moving more and decreasing sedentary periods," says Campbell. "Even 30 minutes of daily exercise isn't going to help much if you're sitting for 12 hours a day. That's where short exercise breaks, scattered throughout the day, can be beneficial."

Happily, Campbell says it's never too late to reap the benefits of exercise. For instance, studies have shown there are reductions in breast cancer risk for post-menopausal women who become more active.

Campbell is also involved in a study that is assessing whether exercise can help colon cancer survivors reduce the risk of cancer recurrence.

The joint Canadian-Australian research project will assess 962 people over a three-year period. The first trial of its kind, the study will see the subjects assigned randomly to different levels of activity.

"The goal is to follow up on observational or population-level research, to look for a decrease in the recurrence of cancer and an increase in survivorship," says



Campbell. "The research will also look at improvements in physical fitness, quality of life and feelings of well-being."

In addition to cancer prevention work, Campbell and her colleagues are interested in assessing the physiological benefits of exercise. Since the study will be assessing subjects before and after they go through chemotherapy, it creates an opportunity to examine the phenomenon known as "brain fog."

"Post-chemo, some patients report differences in their ability to do complex multi-tasking, to concentrate and to remember things. It wasn't well-understood that it even existed, so it was hard to measure – and there wasn't much advice that clinicians could offer patients."

However, Campbell says emerging evidence indicates that exercise can help slow age-associated cognitive decline. Now, the three-year trial will allow researchers to investigate if exercise could have a similar effect on minimizing brain fog.

While Campbell acknowledges that people cannot control their genetic risk factors, she believes there are things they can do to help minimize their risks. It's this search that has propelled her work.

So take Campbell's advice, and go for a walk or join the gym at your local community centre. Even though the exact relationship between exercise and reducing cancer risk is still being examined, many other benefits are known – something Campbell calls an insurance policy for the future.

Getting Started

- START SMALL. If you've been inactive, start by going for a short walk every day. Get up for a brief walk to break up long periods of sitting.
- FIND AN ACTIVITY you like to do, and find a friend to keep you company during the activity. An exercise buddy is the best way to commit to an activity and stay on track.
- BUILD UP SLOWLY. Gradually do the activity for longer periods of time, or ramp up the level of activity. Changing it up

mentally and physically. • SCHEDULE YOUR ACTIVITY. Set aside time in your calendar for activity, otherwise it probably won't happen. First thing in the morning may be best, rather than when you may be exhausted at the end of the day.

challenges you





"Dan is Santa personified," says Ellen Suarez, regional coordinator, volunteer services. "He's known around here as Santa Dan. His ability to really understand what patients are going through and how to support them is quite phenomenal."

Dan would have scoffed if you had told him five years ago that he would be such a committed volunteer. However, that was before a diagnosis of stage 3 throat cancer set him on a new course.

Before the diagnosis, Dan had been enjoying his retirement after a long career in auto parts: "One of the first things I did was buy a drum set, but that didn't last long," he laughs. "Then I turned my attention to acting, and I loved it!"

He played the father of the groom in the popular stage play *Tony and Tina's Wedding* and landed roles in Vancouver-filmed studio movies, as well as in commercials and independent films.

However, things changed in July 2009 when, after enduring severe headaches for several months, Dan suddenly began to cough up blood. Tests revealed he had cancer.

"It was mind-numbing," says Dan. "I'd never even really been sick before and here I was being told I might die."

The news that there was a 40 per cent survival rate also shook him to the core: "There was actually only 20 per cent [survival rate] if I just had radiation treatment, but it doubled by having chemotherapy as well."

Although deeply worried, he clung to encouraging words from a radiology technician.

"She simply said, 'Well, I guess you're in the 40-per-cent group then," says Dan,

"and that changed my perspective on things."

He quickly realized how important attitude would be for his healing and vowed to stay as positive as he could throughout treatment.

While the cancer treatments were hard on his body, they worked, and he hopes he will soon be considered cancer-free. The experience has made him deeply grateful.

"After everything I'd been through, and the unbelievable care I received, I knew I had to give back," says Dan. "I had benefitted from the support of volunteers during my treatment, so I decided to try it. It has actually made a huge difference in my life."

Dan enjoys volunteering with the Chemo Teach program and occasionally wheeling around the Comfort Cart, but he spends most of his volunteer time in the chemotherapy room providing patient support. Ellen says he is often heard asking patients, "Can I offer you something from the bar?"...the juice bar that is, bringing levity to the room.

"Many people are by themselves, so if I can sit and chat and take their mind off their troubles, that is time well spent," says Dan. "Even though people may feel sad going to the cancer centre, there is actually so much happiness and positive energy there that you come away feeling really hopeful."

Each week, as Dan drives back to Langley after a volunteer shift – to his wife of 36 years, Annette, and his beloved dog, Holly – he feels fulfilled: "It is incredibly satisfying to know that I am helping patients get through a tough time and supporting staff by doing things that allow them to focus on caring for patients."

Despite scarring that has left him with a raspy voice and unable to eat solid food, Dan is happy to be alive and doing the things he loves most. While he still acts, the newest addition to his schedule will be another weekly volunteer shift at the new Ronald McDonald House in Surrey.

"Volunteering awakens something inside of you," he says. "I had never volunteered, and now it's such a big part of my life.

"It's hard to predict if you're going to get a role after an audition or if you're going to close a sale after a big pitch, so you can't get too up or too down. You just have to keep plugging along. It's kind of funny how that applies to getting through cancer, too," Dan reflects.

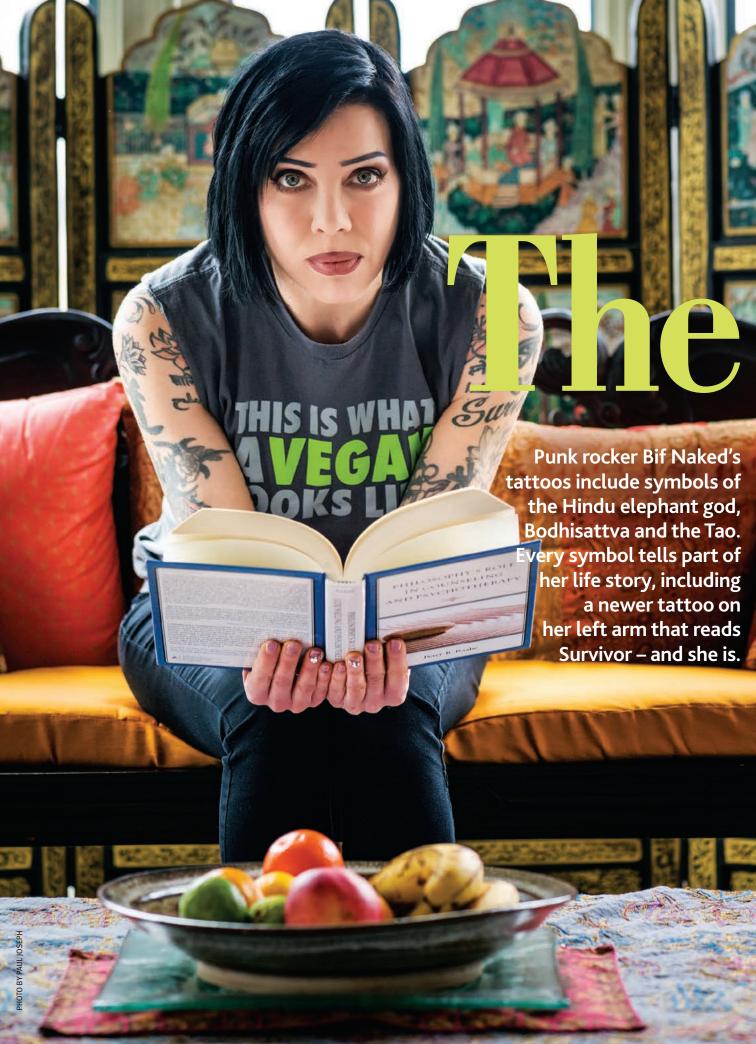
As he laughs at his own thoughtful insight, Dan's inner Santa shines through the twinkle in his eyes.

Interested in volunteering?

To find out about volunteering with the BC Cancer Agency, go to www.bccancer.bc.ca and click on the cancer centre nearest you under Regional Services. It is recommended that patients wait at least a year post-treatment before volunteering.

There are more than 700 volunteers across BC who support the BC Cancer Agency's six Centres, of which 52 per cent are former patients or family members.





Naked Truth

You may think you have nothing in common with Bif Naked: a tattooed larger-than-life punk rocker. But you'd be wrong. It's impossible to imagine a more gracious, warm and authentic individual. The artwork adorning her muscular body tells one part of her story; her interchangeable first names – Bif or Beth – tell another; and her goth-black hair, daily KISS makeup and luminous eyes, yet another.

It only takes a few minutes of conversation to realize the truth in not judging a book by its cover. Bif Naked is many things: recording artist; animal lover; illustrator and painter; Bodog fighter; and vegan. She is also a cancer survivor. She'd be the first to tell you that none of these things define her.

Born in India to teenaged expat students and adopted by Methodist church missionaries, Beth Torbert was raised first in Kentucky, and then in Winnipeg. After 25 years of touring as Bif Naked, both on stage as a musician and as a martial arts fighter, she married *Vancouver Sun* sports writer Ian Walker in a very public ceremony in 2007.

A few months after her wedding, Bif found a chickpea-sized lump in her breast; a surprise to the then-36-year-old vegan athlete. In fact, the lifestyle factors for the self-described "skinny little rock singer" made her such an unlikely candidate that her mammograms and ultrasounds were repeated multiple times, just to be sure. They confirmed the worst.

Despite the looming diagnosis Bif kept her irreverence, humour and Buddhist perspective strong: "I'm going to croak sometime. Maybe it's now. I thought, 'It's not bad timing; good lookin' corpse! I'm happy with that. What a romantic story. I did everything I could do in my life. I was on Jay Leno, I've been to Russia, I performed at Nuremberg.' I was like, 'Hey, I'm cool. My parents love me, I love them, I'm good, no problem."

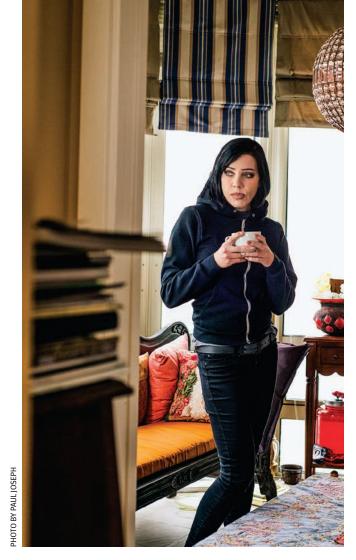
She even scooped her own GP when he said, "I have something to tell you." She played her hunch: "But I have something to tell you first! I have cancer!"

Throughout the coming months and years, a big part of Bif's healing revolved around her larger-than-life personality.

Describing the cone biopsy that came early during her diagnosis, Bif (who had her wisdom teeth pulled with no freezing) quips, "It was worse than getting your lady-parts pierced!"

When she started chemotherapy after a lumpectomy, Bif thought she was ready. "I got the mandatory short – in my case Mohawk – haircut and thought, 'This is great!'" Given her public persona, this was also the time the media started to figure out that Bif Naked was sick.

Bif and her publicist decided to go public through an interview with CBC Radio personality George Stroumboulopoulos. An irreverent and cavalier Bif showed up on air, prompting a caller to challenge her. "My mother has breast cancer she's fighting,"



Somewhere along the way, Bif discovered a special calling. "There's a need for this [supporting others]," she thought. Her public image also drew people to her. Requests came like, "My aunt is going for

chemo on April 2nd. Would you mind going by and taking a picture

Like many of her sister breast cancer survivors, Bif feels transformed by

her experience.

signed for her?"

At the time Bif remembers thinking, "I don't have time for this," and yet she went. "I would sit with them, and that became something."

With a nurse for a mother and a dentist for a father, Bif is comfortable in hospitals, and harbours a fascination with all things medical. In visiting with cancer patients Bif discovered she had a gift for talking to people, and that it meant something to them. "It wasn't just about the patients, but more about the families. Often, they can't keep themselves together in front of a patient.

"Let's go get a cup of coffee in the hall," she would say to families, in response to her own growing love of these moments. In fact, she's now considering a future career in nursing or health care.

However, Bif's own journey is still not over, even after having her ovaries surgically removed (a proactive choice made on the possibility that her cancer was estrogen-receptor positive) and heart surgery to repair a hole (which, she says, was her most frightening health crisis). Even with everything she's been through, Bif still sees her cancer experience as a blessing.

By the end of her treatment Bif had released a new record with a tour pending. But things were different. Like many breast cancer patients, Bif's body had changed.

The Bif Naked of before was this tiny jumping bean with tattoos and a half-top. "Here I was. I turned 40 and I had gained weight – I finally had boobs and curves. I felt really special because I had gone through this magical experience of surviving breast cancer with all my other sister breast cancer patients and I felt like a different person. Breast cancer made me a woman," she says.

"But I also recognized that my mosh pit, iPhone audience didn't want a different person – they were there to see the previous Bif Naked. So, that was something that really affected my self-confidence; I didn't identify with that person anymore."

Against her better judgment, Bif, whose last single, The Only One, which is more of a love pop song than her typical punk rock sound, sometimes lets herself read comments and blog posts after performances. She bites her tongue at fan comments accusing her of changing.

"What happened? She's gone soft!" her critics have posted. Bif walks away from her keyboard at those remarks, but wants to write "I f@*%ing got cancer. That's what happened." But the anger never lingers long for Bif. Her defiant optimism always has her focused on the next adventure.

he said. "You don't represent this." It was here Bif realized that cancer can be public but also intensely private and personal for each person.

Despite this experience, Bif packed humour in her bag every time she went for treatment, showing up outrageously dressed, and inspiring everyone from the young Italian kid from East Vancouver (who opened up to tell stories of dating with an ostomy bag), to the non-English-speaking elderly Taiwanese woman (who finally broke a smile).

"I would look at them all and think, 'I am onto something here – laughter is all it takes for people to start talking. And, before you know it, the treatment is done."

Like many going through cancer treatment, Bif had other things going on in her life as well. Not only was her marriage falling apart, ("It was a doomed union," she says), but she also had the pressure of completing a new record on deadline, although, she says, it proved a valuable escape from her chaotic home life.

She counts herself lucky to have been part of a clinical trial at the BC Cancer Agency that measured the effectiveness of exercise on bone density during chemotherapy.

"All of us were bald, everyone was yellow and we had the same things happening because we were all new patients," she remembers. There, with no husband to support her at home, Bif says she found the acceptance she needed.

Even after she finished chemotherapy, Bif kept going to the clinic once a week to meet with newly diagnosed patients, who would say, "You're 18 months ahead of me. I can do it, if you did."

More Accurate Diagnoses

Canadian oncologists, with the help of the BC Cancer Agency, have developed software that accurately predicts whether nodules found in CT scans of the lung are cancerous or benign.

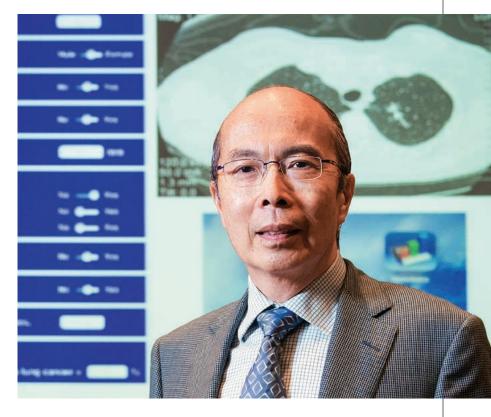
The program facilitates faster diagnosis, makes it easier for the patient and physician to discuss next steps, and reduces the number of unnecessary follow-up CT scans and biopsies.

Dr. Stephen Lam, chair of the provincial lung tumor group of the BC Cancer Agency, says screening low-dosage computed tomography (CT) scans for lung cancer in smokers reduces mortality by about 20 per cent. However, initial CT scans often indicate false positives.

"In CT screening for lung cancer, we will discover many small nodules," says Lam. "Most are benign, so the challenge is how to differentiate between the cancerous or precancerous, and those that are just scars or inflammation.

"The program is a calculator that predicts the risk of lung cancer for a given nodule with over 97 per cent accuracy," says Lam, who adds that this has reduced the need for follow-up CT scans by up to 55 per cent, and has also reduced the number of invasive biopsies.

The radiologist inputs basic data about the patient (such as age, gender, presence of emphysema and family history of lung cancer), and then adds data from the CT scan about the nodules (type, location and count) into the program, which then immediately calculates the probability of nodule malignancy.



The program was developed by a team of Canadian physicians led by Dr. Martin Tammemagi, a professor at Brock University.

The team first "trained" the program using data from the Pan-Canadian Early Detection of Lung Cancer Study. In the development phase, CT scans were used from 1,871 persons presenting 7,008 nodules, of which 102 were malignant.

To ensure the program had not been "over trained," it was tested against a completely different set of CT scans supplied by the BC Cancer Agency. Of 1,090 persons with 5,021 nodules, 42 were malignant. Again, the program was able to predict

A new app lets doctors predict lung cancer with 97 per cent accuracy

malignancy with 97 per cent accuracy.

The nodule calculator is now in use by clinicians all over the world.

Lung cancer is the second most commonly diagnosed cancer in Canada and the leading cause of death from cancer for both men and women. Although BC has the lowest incidence of lung cancer in Canada, in 2011, 2,855 people were diagnosed with lung cancer and 2,219 people died from the disease.

lymphedema

Preventing and managing this side-effect of breast cancer treatment

Lymphedema, the accumulation of lymph fluid in the body, is an uncommon, but serious side-effect of breast cancer treatment. Women with this condition experience swelling of the arm that can present significant quality-of-life issues.

"Normally, lymph fluid flows from our hands and feet, through the lymph nodes, and then to the large veins in the chest area," says Dr. Lorna Weir, a BC Cancer Agency radiation oncologist. "But if something happens to impede that flow, the lymph fluid backs up and you get swelling."

Lymphedema of the arm can be caused by surgical removal of lymph nodes under the arm, damage to the nodes or lymph channels by radiation treatment, or both.

The risk of lymphedema is about one per cent when only selected lymph nodes under the arm are removed. This is down from five per cent a few years ago, thanks to less-invasive new surgical techniques. However, radiation therapy increases the risk of lymphedema to about five per cent.

"Although usually not painful, lymphedema can become a disability," says Weir. "Because of the swelling and additional weight, hand and arm mobility can be decreased, and it could certainly interfere with work, depending on the type of work you do." Lymphedema may not occur for years, but is usually permanent if it does occur.

Weir emphasizes that taking steps



to prevent the development of lymphedema is the best bet to avoid it.

"We know arm or hand trauma and infection are triggers for lymphedema, so we always counsel women to be careful to avoid both," says Weir. "For example, we recommend wearing gloves while gardening, to try to avoid cuts, bites and burns, and applying antibiotic ointments if injured."

You should always consult a physician at the first sign of infection.

The most common treatment for lymphedema is a special massage technique called manual lymphatic drainage. The massage is done by specially trained therapists and works fairly well for some women, although it must be repeated regularly.

"Some women set up a maintenance massage every two weeks or so, and that keeps it under reasonable control," says Weir.

Another common treatment is the use of a compression sleeve that applies pressure to keep fluid from building up in the arm. However, swelling of the hand can be a side-effect, and some wearers find them uncomfortable.

Ultimately, the best way to minimize the effects of lymphedema is to protect yourself, recognize symptoms early and get treatment immediately. With good ongoing management, the vast majority of women who have had breast cancer treatment can look forward to leading normal, happy lives without this complication.

Chemo Brain - Coping with Cognitive Change

Elaine Drysdale,
BA, MD,
FRCPC, consultant
psychiatrist,
BC Cancer Agency
and Vancouver
General Hospital,
and clinical professor,
Faculty of Medicine,
UBC, discusses
chemotherapy
"brain fog."

Q: What is "brain fog" or "chemo brain?" **A:** Chemo fog, brain fog or chemo brain, all refer to symptoms of thought impairment that can occur as side-effects from chemotherapy.

Sometimes people report that they feel that their thinking is just not as sharp or as fast. Others may find it tiring to study, read or watch an entire movie.

Q: What causes it?

A: Experts used to think chemo brain was the direct effect of the chemotherapy drug on the brain cells, and some types of chemotherapy can have a direct effect. But, we don't fully understand the causes.

We believe "chemo brain" symptoms may be caused by cytokines, or travelling proteins. When the chemotherapy destroys cancer cells, cytokines are the by-products. They can cross the blood-brain-barrier into the brain, and cause slowed thinking, depressed mood and fatigue. Fatigue, sleep difficulties, low blood sugar, etc., may intensify a person's experience of chemo brain, and women often experience chemo brain more intensely when they take concurrent estrogen-blocking medications.

Q: How many of those treated with chemotherapy have symptoms?

A: We believe fewer than half, but it hasn't been measured.

Q: What treatments are available?

A: Physician assessment. A simple cognitive test can document if cognition is impaired to a noticeable degree. Depending on the symptoms, further assessments might be in order, or referrals to a neurologist or psychiatrist.

Exercise. We used to believe damage to the brain was irreversible. We now know that exercise releases chemicals that help the brain regenerate.

Pace yourself. Avoid concentrating for long periods. It can lead to headaches, fatigue and cognitive exhaustion.

Cognitive exercises can stimulate brain activity. Scrabble, playing cards, video games, crossword puzzles, sudoku, tongue-twisters and listening to music all stimulate brain activity.

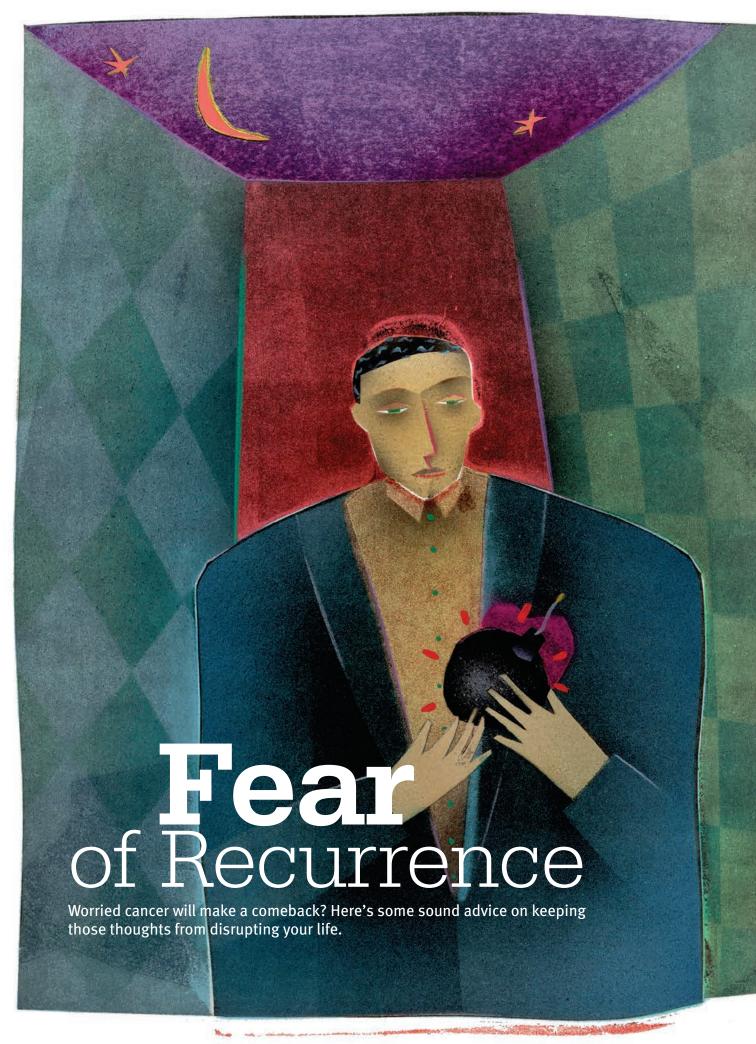
Minimize stress and anxiety. Join local relaxation groups, or mindfulness-based stress reduction classes.

Remain optimistic that the cognitive processes will improve. Enjoy life as much as possible, even given the limitations of any given day.

Q: How long do the effects last?

A: Generally, the symptoms are mild and disappear or decrease in the days and months following treatment. However, some people do experience symptoms that persist for several years. It is uncommon for patients to have symptoms that do not improve substantially over time.





The greatest fear many people face after cancer treatment is fear of recurrence – that lingering, anxiety-inducing worry that the cancer will come back. And it's no wonder.

"Most of these people are fatigued and in pain, and suffering from side-effects like nerve damage and weight fluctuations," says Heather Rennie, clinical coordinator of the provincial psychosocial oncology program. Emotions are raw, she explains, and some find they can't stop crying.

"The big loss of cancer is a loss of innocence regarding death and mortality," says Rennie. "There's more of a sense that life is very precious."

The dark side of that cancer-inspired awareness is fear. Rennie says most people's consciousness of death is like listening to a train whistle in the distance. However, for a person who's been diagnosed with cancer, it's like hearing a train bearing down on you.

While finishing treatment may be a huge relief, some people feel panicked when they leave the security of their treatment centre. Then they must wait three or six months to be tested again. Rennie says one former cancer patient referred to her extreme stress waiting for test results as "scan-xiety."

Rennie doesn't think the intensity of people's fear of recurrence has much to do with their genuine likelihood of risk. Often, they showed no overt sign of having cancer to begin with, and are therefore afraid that they won't know if it has returned. And just as they have no idea what caused it, they don't know how to stop it from coming back.

"When the word 'cancer' has been used in relation to your body, your limbic system kicks in," Rennie says, noting that the limbic system is the body's adrenaline-fuelled response to perceived threats. Once that survival instinct kicks in, it's a challenge to persuade the limbic system to settle down. However, it's very important, because being in such a high-stress mode long-term is bad for the body.

Rennie has some useful suggestions to calm the limbic system. She recommends one book in particular – *Picking Up the Pieces: Moving Forward After Surviving Cancer* by Sherri Magee and Kathy Scalzo, which discusses the post-cancer experience from a professional perspective.

Body-mind approaches to stress like meditation, yoga and relaxation exercises may offer great benefits

"A person who's finished treatment needs to take some time to physically recover from the treatment," says Rennie, who adds that this is a time to be "gentle with oneself" and reject any urge to self-blame. After that, body-mind approaches to stress like meditation, yoga and relaxation exercises may offer great benefits.

"One thing that helps is focusing on sensation," says Rennie. For example, slowing down your breathing and paying attention to the weight of your body as you lie in bed helps induce a relaxation response in the body. Prayer is another practice that can have the same physiological effect as meditation.

Rennie says positive self-talk is another useful strategy. Here a person might choose to think, "There's a 50/50 chance that I'm fine. I'm going to go with the 50 per cent that's okay," or, "I'm just going to deal with this moment," rather than forever looking ahead.

Alternatively, she suggests putting a time limit on worry. A person might give him- or herself 10 minutes to write down all his or her worst fears in a journal, but must then set them aside for the rest of the day. Rennie also recommends distractions like movies and socializing.

Post-treatment is often the time when cancer survivors need to talk to others who have been through a similar experience. Participating in a support group (like the online support groups offered through *CancerChatCanada.ca*) can be very helpful and reassuring. Also, this is often a time when people reach out for counselling support.

Chris Saunders, who went through colon cancer treatment more than three years ago, dealt with his post-treatment anxiety and depression by participating in a program called Bounce Back: Reclaim Your Health, led by the Canadian Mental Health Association, BC Division.

Saunders says the program offered him excellent suggestions to relieve his worries, like writing down what was giving him the blues. He also learned how to take better care of himself.

"I have a stationary bicycle in my living room. I walk. I don't have a car, so I use public transit. I get out and about with my volunteering and committee work as well – keeps my brain active," says the 67-year-old New Westminster retiree.

Another important aspect of life after cancer? "Don't worry alone," says Saunders. "You need to talk to people about it.

"I'm feeling pretty good," says Saunders, who recently took a Laughter Yoga Break at a Burnaby Hospital celebration for volunteers. "I've even got a clown nose that they gave us at the end of the session and I'm going to put it on my nose when I go in for my volunteering on Friday, just for fun."

Lost your SEX

You're not alone, and cancer is only partly to blame. But there is help.

Life is busy. You constantly feel tired, and between juggling family and work, you're stressed, too. You are also a cancer survivor. Any one of these factors could easily help explain why you're feeling little, if any, sexual desire these days, although chances are, if you've been through cancer, you are likely to be among the majority of those who experience a loss of interest in sex.

If you're like most people, after you completed your treatment and started feeling better, both you and your partner assumed that life in the bedroom would also begin to return to normal. But what if that hasn't happened?

You are not alone. Many cancer survivors experience some form of sexual dysfunction after treatment. In fact, according to the US National Cancer Institute, estimates of sexual dysfunction after cancer treatments across *all* cancer types, for men *and* women, range from 40 to 100 per cent. But there is help.

Sexual dysfunction often manifests itself as a physiological problem: erectile dysfunction in men; vaginal dryness or loss of sensation for women. However, while these conditions can often be mitigated with medications, topical lubricants and local estrogen, it's been found that most sexual

Helpful Online Resources

Dr Lori Brotto's Website -

www.obgyn.ubc.ca/SexualHealth Twitter@DrLoriBrotto

Sexuality and U -

www.sexualityandu.ca
Provides accurate, credible and up-todate information and education on
sexual health.

Young (Cancer) Spouses -

www.youngcancerspouses.com
Brings together young spouses of
adults with cancer to share information,
support and experiences.

dysfunction has a psychological dimension that might have nothing to do with cancer.

"Cancer is often the catalyst that brings people in for treatment for sexual complaints, but then you run the risk of attributing the sexual difficulties only to the cancer," says Dr. Lori Brotto, director of the University of British Columbia Sexual Health Laboratory, as well as a psychologist and researcher.

"Sometimes cancer can be the trigger, but multi-tasking, fatigue, other medications, relationship strain – all these things can impact sexual functioning as well."

During her residency in psychology, Brotto had the opportunity to work with cancer survivors. She was struck by how often the most common and distressing side-effects of their treatment involved long-term sexual problems, and that these side-effects were often psychological.

According to Brotto, women rarely discuss significant desire difficulties with their doctors. They feel much more comfortable talking about physical side-effects, such as changed sensations or physical pain during sex, than about the loss of sexual desire.

"However, the research finds that low desire is much more common than physiological symptoms," says Brotto. "[Eventually patients say] 'I am just not interested in sex anymore. I have no desire. I decline my partner's invitations. We avoid it altogether."

According to Dr. Richard Wassersug, co-lead of the Vancouver Prostate Centre's Prostate Cancer Supportive Care Program, loss of desire has a major impact on both the survivor and his or her partner. Although his research focuses on a male cancer (prostate), he notes that when one partner loses libido, either through physical or psychological dysfunction, the other partner carries a heavy psychological burden as well.

Brotto uses mindfulness-based stress reduction (MBSR) techniques to help women cope with and reverse the loss of desire. MBSR, developed by Dr. Jon Kabat-Zinn at the University of Massachusetts, is widely practised as a way of coping with the psychological stresses of cancer. In MBSR, participants gather for two hours each week for eight weeks to practise meditative exercises, and also learn to practise MBSR at home. (see Mind Your Stress in the Fall/Winter 2013 issue of *Forward* for more information on the MBSR program).

Brotto's research led her to add a new component to the standard MBSR practice.

"Once people established a solid mindfulness practice in their life, we then tried to pair it with common sexual arousal tools," explains Brotto. "For example, they might watch a bit of soft erotica for five or 10 minutes and then practise a 10- or 15-minute body scan mindfulness practice.

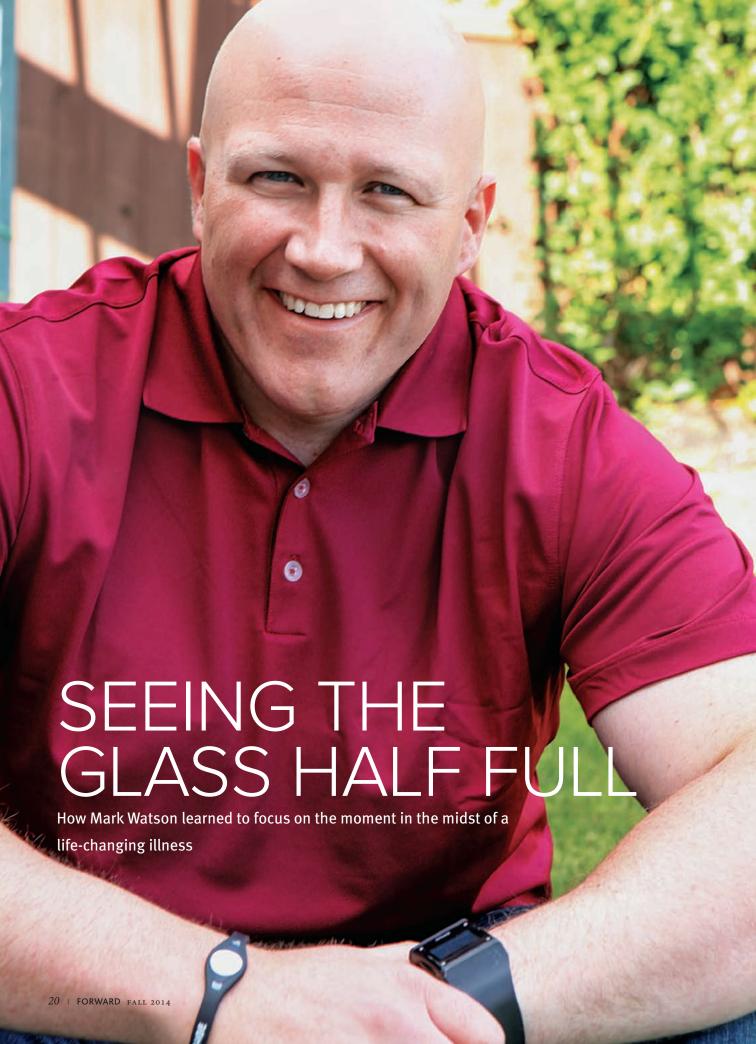
"The idea is that if we can first boost the sexual response, mindfulness is a way of noticing those sensations even more so that the brain begins picking up those cues from the body," says Brotto, who's approach is now being applied by other teams and is widely viewed as a success.

Brotto urges couples addressing loss of libido or hypoactive sexual drive disorder (HSDD) to work through therapy together.

"Because sexuality tends to occur within a couple, it's ultimately a much better outcome if we can involve both partners," says Brotto. "It is not about highlighting what a partner isn't doing right, but about working together to improve the situation. After we have that conversation, there tends to be fairly good compliance by the partners."

Most of Brotto's patients are from the Vancouver area. However, she is looking forward to the possibility of developing online interventions: "This is an emerging area of psychosocial treatment, so there is a lot of potential in moving interventions online through webinars and that sort of thing." •





Having a positive outlook on life comes naturally to Mark Watson. It's a strength that has helped him succeed in the field of learning and disabilities, as a CEO at the Eaton Educational Group and as a husband and father to two young boys.

Just one year ago, Mark's attitude was put to the test when he was diagnosed with cancer. The experience of being diagnosed with Non-Hodgkins Lymphoma, a cancer that affects primarily middle-aged men, was both shocking and surreal for the 38-year-old. It caused Mark to retreat into his own world.

"I literally went quiet for a week to process everything that was going on," says Mark. "It took my patient wife, Britney, to finally say, 'Hey, let me in,' for me to understand that I didn't need to handle this on my own."

Creating a game plan for success

As an athlete, Mark has used visualization techniques like cultivating a positive mind-set and increasing mental awareness to help enhance his physical performance in sports. He credits this same methodology with helping him move beyond the paralyzing fear of cancer to a step-by-step, goal-oriented plan for coping with his cancer journey.

"I saw cancer as a challenge, and just like any challenge, I wanted to wrap my head around it and move forward. That's why I set out to create a monthly 'game plan' around my treatments. It helped me stay positive and deal with the delusional thoughts that we can all be preoccupied with," says Mark.

Mark's game plan also involved being open to trying different therapies to supplement the treatment he was receiving, such as energy healing and daily meditation.

"These things came into my life that I wasn't expecting at all, but I found a lot of comfort in them," Mark laughs.

The ripple effect

In the weeks following his diagnosis, Mark went through a battery of tests at the BC Cancer Agency, and then started treatment a month before Christmas 2013. During the course of his treatments, Mark's colleagues at the Eaton Educational Group wanted to do something special to support him.

Long before his own diagnosis, Mark had been drawn to athletic fundraising events and supported cancer research at the BC Cancer Agency. He participated in the BC Cancer Foundation's *Ride to Conquer Cancer* three years in a row. With this in mind, Mark's colleagues came up with the idea to join the BC Cancer Foundation's newest fundraising event, *Workout to Conquer Cancer*, as part of "Team Inspire."

Encouraged by the enthusiasm of his colleagues, Mark began fundraising in the midst of his treatments. While Mark's initial personal fundraising goal was \$1,000, he surpassed it in a matter of weeks to raise more than \$11,000 by event day on March 8. Mark believes this achievement reflects the wonderful people he works with, who not only supported him during his cancer journey, but also at *Workout to Conquer Cancer*, just a few days after one of his treatments.

"It was so inspiring and humbling to see my colleagues rallying around me during a difficult time," says Mark.

Collectively, "Team Inspire" raised more than \$21,000 for breakthrough cancer research at the BC Cancer Agency, becoming the top team fundraiser for the event.

"The ripple effect overwhelmed me when the fundraising got going for *Workout to Conquer Cancer*. I didn't realize we would raise so much. It just goes to show when you have a group of like-minded people, watch out, because amazing things can happen," says Mark.

Next steps

After finishing what he hopes to be his last treatment in April, Mark remains a steadfast optimist, grateful for the care he received at the BC Cancer Agency.

"I was continually amazed by the collaborative approach at the BC Cancer Agency," says Mark. "I knew I was in very good hands with people that really knew what they were doing."

In sharing his story, Mark hopes to express that there is strength in vulnerability: "If my experience can help someone else going through cancer in any way, then I feel a responsibility to share my story. If I can help one person, it's definitely worth it."

The BC Cancer Foundation is the fundraising partner of the BC Cancer Agency and the largest funder of cancer research in this province. By connecting philanthropy and research, we support the revolutionary advances that will help us achieve our vision of a world free from cancer. To learn more, visit: www.bccancerfoundation.com

On April 25, 2015, the 2nd annual Workout to Conquer Cancer, benefitting the BC Cancer Foundation, will harness the power of hundreds of people who are ready to lunge, stretch and sweat their way toward a world free from cancer. Featuring a full day of eight upbeat group workout activities taking place at the Richmond Olympic Oval, Workout to Conquer Cancer offers something for everyone. Participants will be making a difference for those diagnosed with cancer in every community of BC by supporting leading-edge research at the BC Cancer Agency with the most promise to improve cancer outcomes.

Join us for the most meaningful *Workout* of your life! Find out more at www.workouttoconquercancer.ca or call 604-675-8245.

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What's On



go to www.bccancer.bc.ca and click on Coming Events under About BCCA.

Returning to Work

DATE: October 2, 9; February 19, 26 Time: Mornings

LOCATION: BC Cancer Agency Vancouver Centre (600 West 10th Avenue, Vancouver)

DESCRIPTION: This program includes vocational assessment, resource referral, information, advocacy assistance and counselling related to rehabilitation issues for patients and family members.

To REGISTER: Call Patient and Family Counselling at 604-877-6000 ext 672194

Mindfulness-Based Stress Reduction Program

DATE: Starting October 9 (8 weeks)
LOCATION: Sindi Ahluwalia Hawkins Centre for
the Southern Interior (399 Royal Avenue,
Kelowna)

DESCRIPTION: Based upon the work of Dr. Jon Kabat-Zinn, this program will teach you how to incorporate mindfulness practice into your daily life through a variety of means, including body scan, sitting and walking



meditation, and gentle yoga. This program has been shown to improve people's resilience to stress.

To REGISTER: Call 250-712-3967 Space is limited.

Arts-Based Support Group for Young Adults with Cancer

DATE: October 24, 30;
November 6, 13, 20, 27
TIME: Varying times
LOCATIONS: BC Cancer Agency Vancouver (600
West 10th Avenue, Vancouver)
and Abbotsford Centre (32900 Marshall
Road, Abbotsford), connected through

DESCRIPTION: The group will be led though different arts-based exercises facilitated by an art therapist. Those present will have the time to connect with other group members. No previous art experience is necessary. You are eligible to participate in this research project if you are registered with the BC

Cancer Agency and are between the ages of 19 and 40. You may be newly diagnosed, undergoing treatment or post-treatment.

To REGISTER: Call 604-877-6000 ext 672184

Memory and Attention Adaptation Training (MAAT)

DATE: January 19 – March 16, 2015
LOCATION: BC Cancer Agency Vancouver Centre (600 West 10th Avenue, Vancouver)
DESCRIPTION: MAAT is a brief, behavioural skills program developed for cancer survivors who self-report problems with attention and memory associated with cancer-related chemotherapy. Suitable for those who have:

- Had a decline in memory and attention since chemotherapy
- Had chemotherapy in the last two years
- · Finished chemotherapy
- No other medical condition that affects memory and attention (e.g., Alzheimer's, brain injury, learning disability, etc.)
 TO REGISTER: Call 604-877-6000 ext 672194



2014 Inspiration Gala, 10th Anniversary

DATE: Saturday, November 1, 2014

LOCATION: The Fairmont Pacific Rim Hotel, Vancouver

DESCRIPTION: The BC Cancer Foundation's 2014 Inspiration Gala celebrates 10 years of funding leading-edge research at the BC Cancer Agency that has a direct impact on improvements to cancer care for patients in our province. This year's Gala aims to "crack the cancer code" by funding Personalized Onco-Genomics, a unique, world-first program that could shift the existing paradigm of cancer care through personalizing treatment strategies for individual patients.

FOR MORE INFORMATION: Visit www.bccancerfoundation.com/inspirationgala



BC Cancer Foundation's 8th Annual Jingle Mingle

DATE: Thursday, December 4, 2014

Time: 5:00 pm - 8:00 pm

Location: The Fairmont Empress, Victoria

DESCRIPTION: The anticipation is running high for Jingle Mingle, Victoria's premier fundraising event – a sophisticated holiday cocktail party and auction for 300 guests that features a number of Winter Wonderland surprises! Funds raised support life-saving cancer research projects at the BC Cancer Agency's Trev & Joyce Deeley Research Centre that are shaping the future of cancer care on Vancouver Island and beyond.

For more information: Visit www.bccancerfoundation.com/jinglemingle •

Relaxation Aids

Columnist George Matthew Adams once said, "a cheerful frame of mind, reinforced by relaxation, is the medicine that puts all the ghosts of fear on the run." It's a thought that will certainly resonate with those who have had cancer.

Happily, research consistently shows that practising simple relaxation techniques can have a dramatic effect on diminishing stress and worry, greatly improving a person's health and well-being. Here are some BC Cancer Agency recommended online resources to help you learn to relax:

Online guides

Access the following resources through the BC Cancer Agency website, www.bccancer. bc.ca. Input "Managing Stress" into the top search bar and press go. Once on the Managing Stress page, click on the Fact Sheets link in the left-hand menu bar.

Progressive Muscle Relaxation

This simple yet highly effective four-step relaxation technique can be done anytime and anywhere.

Deep Breathing Exercises

Controlled breathing, using five easy steps, dramatically reduces tension.

Positive Thinking Strategy

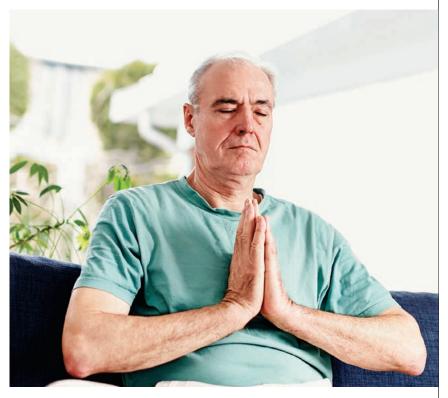
Addressing your frame of mind plays a key role in helping you feel more relaxed.

Strategies to Help with Sleep

Sleep disorders can interfere with your ability to relax. These simple tips help support better sleep.

Tips for Managing Stress

Learning to manage your stress will greatly enhance your ability to relax.



Mayo Clinic - Stress Management

This site provides good information together with a broad view of the various relaxation techniques.

http://www.mayoclinic.org/healthy-living/ stress-management/in-depth/relaxationtechnique/art-20045368

Video

Mindfulness: Stress Reduction Tools for Healthier, Happier Living By David Greenshields (2011) - 97 minutes http://learn.phsa.ca/bcca/publicforum/greenshields/Greenshields_flv_loader.html

The BC Cancer Agency has produced 11 CDs - each a creative combination of comforting, inspiring narrative coupled with soothing music - to help you learn how to relax. Guided visualization, pro-

gressive muscle relaxation, deep breathing technique and positive imagery all figure prominently in these uplifting and empowering guides to achieving a more relaxed state.

For a complete description of each of the CDs, input Relaxation CDs - BC Cancer Agency into your web search browser, then click on the PDF of the same name.

CDs are available for purchase online, at http://edreg.cw.bc.ca/BookStores/public/ bookstore/. These items are also available for loan from the BC Cancer Agency Library, call 1-888-675-8001 ext 8001.

For more information and resources, go to the BC Cancer Agency Library page, www.bccancer.bc.ca/PPI/Library, which has created a number of excellent pathfinders on a variety of topics.





JOIN US for the most meaningful workout of your life!





Conquering cancer isn't easy, but that doesn't mean supporting BC's cancer researchers can't be fun!

Join us for Workout to Conquer Cancer on April 25, 2015 at Richmond Olympic Oval for a full day of upbeat workouts for people of all fitness levels.

Register Today at workouttoconquercancer.ca











