

FORWARD

SPRING 2015

LIVING YOUR BEST LIFE AFTER CANCER

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the cycle of insomnia

Cancer & Body Image

Learning to love the new you

Managing Your Emotions

Dealing with the highs and
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Corky Evans

The colourful BC politician, now a certified
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journey through prostate cancer



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*Principal Consultant
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CHAIRMAN CEO PETER LEGGE, OBC, LLD (HON)

PRESIDENT SAMANTHA LEGGE

SENIOR VICE-PRESIDENT – CUSTOM PUBLISHING KATHLEEN FREIMOND

EDITOR ANN COLLETTE

CONTRIBUTING EDITOR JENN CURRIE

ART DIRECTOR FELICE BISBY

CONTRIBUTING PHOTOGRAPHERS

JEREMY ADDINGTON, TRACEY AYTON, BRUCE IRVING,
CHUCK RUSSELL, HELEN SEBELIUS

CONTRIBUTING WRITERS BREDNA BOUW, SUE BUGOS,
JANE DOUCET, ALLAN JENKINS, JENNIFER WAH

ELECTRONIC IMAGING MANDY LAU, LAURA MICHAELS

PRODUCTION MANAGER KRISTINA BORYS

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COVER PHOTO BY JEREMY ADDINGTON; ABOVE PHOTO BY CHUCK RUSSELL

Moving *Forward*



Every life is a journey, and if you are reading this, chances are that for you – or a friend or loved one – this has included an unexpected journey through cancer. It is for you that the BC Cancer Agency has created *Forward*. Now in its fourth issue, this magazine was developed specifically to provide information, support and inspiration.

In our last issue, we included a readership survey to get your responses to the content of the magazine to date and to elicit your ideas on future subjects that might be of interest or value. I'd like to take this opportunity to thank everyone who responded to the survey. Your feedback has been invaluable and will help us to bring you even more great stories in the future.

Once again, this edition of *Forward* brings a real-life perspective to life after cancer treatment. In our cover story (page 10), former BC MLA (now organic farmer) Corky Evans speaks with remarkable honesty and candor about his experience with prostate cancer. His story reminds us that no one said the journey would be easy.

Linda Day of the Oneida First Nation (page 8) speaks about her journey with breast cancer and how she called upon her aboriginal heritage to help her heal – knowledge which she now shares with other aboriginal cancer patients.

Cancer treatment, while healing, can also create changes. In this issue, we answer some of the most-asked questions about coping with changes in body image. We also look at approaches to dealing with insomnia (page 18) and managing the roller coaster of emotions that sometimes lingers long after treatment has ended (page 16). In addition, we're pleased to introduce a new nurse practitioner program that has been developed to provide primary care to patients after cancer treatment (page 5).


True to its name, *Forward* is always looking ahead. In that vein, we're pleased to highlight some of the exciting BC Cancer Agency-led advances in the treatment of lymphoid cancers using new drugs and drug combinations (page 13).

I hope you enjoy this issue, and that you feel the hope, joy and optimism with which it was created.

A handwritten signature in black ink that reads "Nick Foster." The signature is fluid and cursive, with a large, sweeping "F" and "S".

Dr. Nick Foster
Interim Head
BC Cancer Agency, PHSA

www.bccancer.bc.ca

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Care from Nurse Practitioners

Cancer survivors can now receive primary care from NPs through a new program

A 2013 survey published in a Health Council of Canada report states that between three and 15 per cent of Canadians don't have a primary health-care provider (usually a family doctor) depending on the province where they live. In BC alone, it is estimated that more than 100,000 people who would like a primary care provider don't have one; instead, they access health services through walk-in clinics or emergency departments.

However, establishing a long-term relationship with a health professional is important, especially for people who have had cancer and often need to navigate issues resulting from their cancer. That's where the BC Cancer Agency Provincial Survivorship Program plays a key role.

"Oncologists have a very particular function for a person dealing with cancer," explains Jill Matheson, a nurse practitioner (NP) with the Provincial Survivorship Program, who is based at the Jim Pattison Outpatient Care and Surgery Centre in Surrey, BC.

"As primary care providers, NPs offer patients services that include diagnosing, treating, screening, monitoring, prescribing medications, specialist referrals and overall health education, while working closely with oncologists and other health-care professionals," says Matheson. "We provide people without a family doctor a way to access the health services they need, ensuring patients get the followup care required after cancer and enabling oncologists to focus on their specialty."

The program, which also provides NP care to the family members of cancer survivors, is located in Vancouver and



How to access the BC Cancer Agency Provincial Survivorship Program

Nurse practitioners are available in Vancouver and Surrey for oncology patients of all ages.

To make an appointment at the Vancouver clinic, contact:

UBC Family Practice
Suite 400, 750 West Broadway,
Vancouver
Phone: 604-829-2570

To make an appointment at the Fraser Valley clinic, contact:

Jim Pattison Outpatient Care and
Surgery Centre, Primary Care Clinic
9740 140 Street, Surrey
Phone: 604-582-4550, local 764181

Surrey, and plans to expand throughout the province.

"We are well equipped to help people in various stages of dealing with cancer and their families by offering resources, specific support and care to help them enjoy a better quality of life," says Matheson.

NPs with the Survivorship Program have extensive training, including graduate degrees and post-graduate training. They have also completed the BC Cancer Agency's Lecture Series in Oncology Education for Primary Care Practitioners and have spent numerous hours working in patient clinics.

"People live a long time now with cancer and we can beat it like never before, yet there are many health issues associated with that," says Matheson. "Our training and experience enable us to deal with both the physical and emotional aspects that result from cancer, along with the everyday ailments and issues people face." ■

Choose Foods Wisely to Help Stay Healthy

Food, nutrition and physical activity play an important role in staying cancer-free, according to a 2007 report released by the World Cancer Research Fund and the American Institute for Cancer Research.

"If you're able to follow the report's cancer prevention guidelines for nutrition and physical activity, you should," says Satnam Sekhon, a registered dietitian with the BC Cancer Agency.

The nutrition recommendations include eating more whole grains and non-starchy plant foods that are high in nutrients and dietary fibre, such as green leafy vegetables, broccoli, cabbage, tomatoes and carrots. While fruits are also good for you, evidence suggests that vegetables are even more healthful.

"The key is to eat a wide variety of fruits and vegetables because each brings something different to the table," says Sekhon. "The best choice is fresh, local and in-season, followed by frozen." (Canned fruits and vegetables are often high in sugar or salt.)

Baby steps to better nutrition

Another step on the road to wellness is limiting or eliminating processed foods that are high in fat and nitrites (chemicals used to cure meat), which may increase cancer risk, as well as sugary drinks; too much of both can lead to obesity, which increases the risk for certain cancers. It's also important to eat less red meat (beef, pork, lamb and goat) which, in large quantities, has been linked to an increased risk of colorectal cancer.

Alcoholic drinks should be kept to two a day for men and one

for women: "If you can eliminate alcohol altogether, it's even better," says Sekhon.

That's because alcohol consumption has been linked to cancers of the head, neck, esophagus, breast, liver, colon and rectum. For the record, alcohol includes beer, wine and liquor or distilled spirits, such as gin, rum, vodka and whisky.

If all of these steps sound daunting, start by making small changes. Sekhon offers this simple solution: "Take your favourite chili recipe, cut the meat by 25 per cent and increase the vegetables and kidney beans – that way it's still a familiar





meal but more nutritious.”

For more information, you can consult with a registered dietitian through the free HealthLink BC service by calling 8-1-1. On weekdays, a dietitian specializing in cancer care can assess your eating habits and suggest improvements. For the most part, it's common sense: “Nutrition guidelines for cancer survivors are similar to general good nutrition guidelines,” says Sekhon. ■



RECIPE – Red Lentil Soup

Low in calories and high in iron, folate and dietary fibre, lentils are a cheap source of lean protein that help reduce bad cholesterol, stabilize blood sugar and increase energy. This hearty vegetarian soup, served with a whole-wheat pita and green salad, makes for a warm, flavourful meal on a cool spring day. Serves 4 to 6.



Ingredients

1 cup	red split lentils	1 tsp.	turmeric
2 Tbsp.	vegetable oil	¾ tsp.	salt, or to taste
1 tsp.	cumin seeds	½ tsp.	chili powder (optional)
2 to 3	garlic cloves, minced	4 cups	water
¼ cup	onion, diced	¼ cup	fresh cilantro, chopped, for garnish
1 Tbsp.	fresh ginger, minced		

Directions

Sort through the lentils to remove any foreign particles, and then wash them under running water until water runs clear. Set aside. Heat oil in a medium-sized pot. Add cumin seeds and garlic; sauté for 30 seconds or until seeds are sizzling. Add onion and sauté for 5 minutes, until onions are slightly browned. Add ginger, turmeric, salt, chili powder, lentils and water. (Note: You can add diced vegetables as desired.) Bring to a boil, reduce heat and simmer for 20 to 25 minutes, or until lentils are cooked.

A Healing Culture

Linda Day is using her own experience as a breast cancer survivor to inspire other First Nations people to get tested and help take the fear out of a cancer diagnosis

When Linda Day was diagnosed with breast cancer in May 2012, she was surprised, and somewhat in denial.

"We don't get breast cancer," says Day, an aboriginal woman from Ontario's Oneida First Nation, who is now deputy executive director for the Vancouver Native Health Society (VNHS). VNHS is an organization that delivers medical counselling and social services for Vancouver's Downtown Eastside aboriginal community.

"I never knew any other aboriginal woman who had breast cancer. I asked around my relatives and we don't have a family history of it."

Day even had a screening mammogram a few months earlier as part of a BC Cancer Agency screening program held at the Positive Outlook Program at VNHS, and the test came up negative.

While she was in some physical pain from a fibromyalgia diagnosis, Day didn't even suspect cancer until she was at home recovering from the first of two hip replacements. It was during that time that she noticed a lump above her left breast.

Day didn't give it much thought until a couple of weeks later, when she noticed the lump had grown and changed shape. She immediately went to her family doctor, who sent her for a diagnostic test at the BC Cancer Agency.

That began the difficult process of testing and waiting for results, and more testing and waiting, before a breast cancer diagnosis was confirmed.

"The time between the diagnosis and

waiting for surgery and treatment was the hardest part, because this cancer tumor was in me and I wanted it out, stat!" says Day.

At the end of May 2012, Day underwent a lumpectomy on her left breast. The test results showed good news; the cancer had not spread.

Two months later, Day began the first of 17 chemotherapy treatments to help rid her body of the disease, together with a month of radiation therapy. While in chemotherapy, she also had her second hip replaced.

Day is cancer-free today and credits her recovery to her traditional beliefs and the medical system, including her oncologist, with whom she developed a close bond, as well as traditional healing and teachings from her First Nations community.

Day wanted to use her experience to help others. In February 2013, she started the Aboriginal Cancer Care Program (ACCP) at VNHS. The ACCP helps to raise awareness, not just about breast cancer but other common forms of the disease, such as prostate and colorectal cancer. The goal of the ACCP is to build a community of support for individuals who receive a cancer diagnosis, as well as their families and loved ones. It's a culturally supportive cancer program that utilizes the Medicine Wheel's four quadrants – spiritual, mental, physical and emotional – in cancer education.

Day says First Nations people need to gain more awareness about cancer, treatments and support programs, and draw on their traditions, resiliency and cultural

strengths while dealing with the disease.

When she was fighting breast cancer, Day participated in healing circles and various traditional healings, where her family and friends gathered to express their love and support for her. There was also a "brushing off" ceremony, where feathers were used to symbolically and literally brush off and cleanse her body.

"It was very powerful and helped so much in my healing," Day recalls.

Her battle with cancer was, of course, difficult at times. There was the pain, but also losing her long hair was hard to deal with at first. Day says it wasn't about vanity, but that she always had long hair. Over time, it became a part of her identity as an indigenous woman.

Overall, having cancer and the treatment was "very hard on my psyche," says Day, who adds that she never felt bitter about having the disease, and feels blessed to have survived.

"I never thought, 'Why me?' Instead I thought, 'Why not me?' I was meant to get through it and to tell other people that it doesn't have to take you down. Sometimes it may feel that way, but you can get through it."

Day's goal now is to help take some of the fear out of a cancer diagnosis: "I believe that the fear that cancer is a death sentence is preventing some people from getting screened. I want to offer those people hope.

"I've had people come to me and say, 'I saw how you handled it, and if it happened to me I could get through it too.' That's empowering." ■



Corky Evans

The colourful longtime BC MLA, now certified organic farmer, speaks candidly about his journey through cancer

As he sits by the fireside of his home on the edge of the Slocan River, Corky Evans, one of the more memorable characters in British Columbia's political history, prepares to tell a story he hasn't told before – his experience with prostate cancer.

He was in his late 40s when he was sent for a routine prostate exam. Corky's results were flagged, and further testing was suggested. But he was at the start of a busy decade in his political career; coming in a close second for the leadership of the province's New Democratic Party (first against Glen Clark, and then against Ujjal Dosanjh, both of whom went on to become premier), and subsequently serving in various ministerial positions in both cabinets.

Ten years went by, and with his prostate-specific antigen (PSA) numbers still rising, the man who didn't want to talk about cancer or his prostate now had to undergo a biopsy. At Kootenay Boundary Regional Hospital in Trail, he was told he had a moderately aggressive form of prostate cancer, and that he needed surgery. Somewhat begrudgingly, he agreed to a surgical consult with Dr. Larry Goldenberg at the Vancouver Prostate Centre, and it was there Corky got clear on his options.

"He [Goldenberg] was really straight with me," Corky recalls. "We talked about possible side-effects of surgery, including having to have to pee in a bag, or not wanting sex again. But what are you going to do?"

What Corky did do, on Goldenberg's advice, was explore prostate brachytherapy. A type of radiation therapy, brachytherapy involves the insertion of radioactive seeds next to the cancer cells, allowing the radiation to kill the cancer cells while causing less damage to nearby healthy tissue.

During a subsequent appointment at the BC Cancer Agency's Sindi Ahluwalia Hawkins Centre for the Southern Interior in Kelowna, Corky was impressed by Dr. David Kim, who surprised both Corky and his partner, Helen Sebelius, with his willingness to talk through every question the couple had about brachytherapy as an alternative to surgery. In 2010, research backed up Corky's desire to continue to wait and see, so another year went by before his PSA spiked again, and then it was time to take action.

He was soon headed back to the Okanagan to undergo the brachytherapy procedure. Helen couldn't get away to come with him at the time, and Corky remembers spending a

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PHOTO BY JEREMY ADDINGTON



Corky (below left) is quite at home at his Against the Wind Farm in Winlaw, BC, where he's often seen with a trail of turkeys waddling behind him (below right).



PHOTOS: JEREMY ADDINGTON (LEFT), HELEN SEBELIUS

“I was trying to decide what to do in my last years as MLA...I think I could be elected until I’m dead. But, I’d really like to farm or garden.”

because he was in pain and miserable.

“I certainly wasn’t going to quit that night,” he says, of what he describes as his addiction and his failure, although he points out that he hasn’t had a drink since 1986.

As he looks out over the fields of the farm where he has spent the past 45 years, Corky’s memories of the year after his procedure are not happy ones: “I pissed blood and I hurt for a long time, although Helen says it was because I got on my tractor too soon.”

He is frank about the other downsides of the procedure, including lost libido and reduced bladder control.

“Beautiful women and sexual activity are a driver of real life,” he observes. “For me, that part of my heart is somewhat severed.”

Corky is equally candid as he reflects on how he feels he handled

continued from page 10

desolate night in a Kelowna hotel after the treatment.

“A neighbour from home was passing through and brought me a bowl of soup,” he recalls, still moved years later by the kind gesture. “It was one of those moments where you see a person’s face, and you’re not quite sure if it’s a person, or it could be an angel.”

Corky, a lifelong smoker, is matter-of-fact, too, about having a cigarette at midnight in the hotel parking lot

the experience: “I didn’t go through this process well. Not only did I not follow doctor’s advice, I didn’t even read about it. I didn’t even know the questions that I might ask. I was a failure when it came to learning and thinking about cancer and my prostate.”

What changed after his cancer experience in 2011 was what he chose to do moving forward.

“I was trying to decide what to do in my last years as MLA. There was another election ahead, and I thought about the people and the fact that they like me, and I like them, and I think I could be elected until I’m dead. But I’d really like to farm or garden.”

He recalls how Helen – his farming collaborator, life partner and a former arts administrator – helped him make up his mind with a simple question: “Do you want to die on your tractor or die in the legislature?” she asked.

Corky says the answer was clear: “I’d like to be here, in this place.”

This place is his and Helen’s Against the Wind Farm in Winlaw, BC. As a farmer of certified organic garlic, blueberries, potatoes and turkeys, it’s here where Corky can be seen, during the growing season, with a trail of turkeys waddling behind him or a touse of dried organic garlic in hand.

He is quietly and deservedly proud of a respectable career in politics, overseeing important local and provincial projects, including the creation of the Columbia Basin Trust and the BC Sharing charitable food program, which helps lower income families enjoy BC agricultural products, not to mention important community projects in the Slocan Valley.

“You know, I have a wonderful life,” says Corky. “I got to log for 20 years, and then I was in politics for 20 years. But, all my life what I really wanted to do was grow food.” ■

Leading in Lymphoma

Lymphoid cancers account for about 9.8 per cent of new cancer cases in Canadian men and about 8.3 per cent of new cancer cases in Canadian women. Non-Hodgkin lymphoma is perhaps the best known; other types of lymphoma include leukemia, multiple myeloma and Hodgkin lymphoma.

While patient outcomes in the past were uncertain, research focused on new drugs and drug combinations is cause for great optimism. The BC Cancer Agency Centre for Lymphoid Cancer is a world leader in this type of research focused on lymphoid cancers.

“What we are seeing now is the result of 30 years of effort at developing a large research program focused on building a significant database of lymphoma samples and patient information,” says Dr. Joseph Connors, clinical director, BC Cancer Agency Centre for Lymphoid Cancer.

These data inform further, targeted research and development of the best treatments possible for each type of lymphoma.

“The major way we have improved survivorship has been by curing patients with less-toxic treatment, which has been a major focus of our research,” says Connors. “In addition, better molecular dissection of malignant cells is helping us discover new, more effective treatments.”

Non-Hodgkin lymphoma

The most common form of non-Hodgkin lymphoma is diffuse large B-cell lymphoma, which has two forms: germinal centre B-cell (GCB), and activated B-cell (ABC).

The biology of these two cancers differs substantially. Connors observes

that this may explain why GCB-type lymphoma has been quite responsive to standard chemotherapy, while ABC lymphoma has been far more difficult to cure.

“But the exciting thing is that new drugs have come along,” says Connors. “And these drugs are selectively more effective against the ABC type.”

The drug ibrutinib is one of the most promising says Connors, and international trials are being conducted to test the effects of using ibrutinib alongside the standard chemotherapy treatment.

B-cell chronic lymphocytic leukemia

B-cell chronic lymphocytic leukemia is the most common type of leukemia in adults.

“About 15 per cent of people with B-cell chronic lymphocytic leukemia have a genetic mutation affecting chromosome 17, which has meant no treatment was effective,” says Connors. “But we have found that ibrutinib is also particularly effective in that subset, so it is giving us a way to treat these patients.”

Multiple myeloma

“With multiple myeloma, once again the real excitement is around newer drugs that are more effective than the ones we had previously,” says Connors. “The most exciting right now is a third-generation proteasome inhibitor called carfilzomib.

Dr. Joseph Connors, clinical director, BC Cancer Agency Centre for Lymphoid Cancer.



“All cells have proteasomes, whose job is to digest no-longer-wanted proteins – sort of a garbage disposal. We can use carfilzomib to stop the proteasome from working, making myeloma cells sick and eventually causing them to die.”

For many survivors of lymphoid cancers in British Columbia, research done right here at home means an improved quality of life thanks to improved treatments. For more information on research being done in this area, visit the Centre for Lymphoid Cancer online at www.bccancer.bc.ca. ■

power of pets

Wagging tails make for lighter hearts among cancer patients and survivors

Kinnegoe and Duffy, a golden retriever and a bearded collie, are about as friendly a pair of dogs as you could meet – so much so that they have a special job. Every Wednesday morning, the two spend a couple of hours at the BC Cancer Agency’s Vancouver Island Centre, and then the afternoon at the Gorge Road Hospital in Victoria, bringing smiles and calm to patients and staff as “therapy pets.”

“We’ll walk into a waiting room and see the faces light up with big smiles,” says Bruce Irving, Kinnegoe and Duffy’s owner.

“The patients and families comment on how beautiful the dogs are, and they start putting their hands on them and petting them. They really have a soothing effect on the people who are waiting and anxious about their health.”

Bruce and his wife Bonnie, along with “the boys,” have volunteered at the Vancouver Island Centre since 2011. Bonnie is a 15-year breast cancer survivor, and the couple knew they wanted to give back when the BC Cancer Agency set up the pet therapy program. Happily, the couple had already been involved in pet therapy.

“We got into pet therapy when Bonnie’s mom went into care about seven years ago,” says Bruce. “We would visit the dementia ward of the Gorge Hospital, and it was very rewarding. So, when the opportunity arose to do the same thing at the cancer clinic, we jumped at it.”



Like other therapy pets, Kinnegoe and Duffy were screened by a veterinarian, who not only checked their general health, but also tested their manners. By watching how prospective therapy pets react to sudden noises, being grabbed or having their tails pulled, the veterinarian decides if they would be good at the job. If the tails keep wagging, they pass and earn their therapy-pet kerchief.

Bruce says Kinnegoe and Duffy have a sense of where they are needed.

“We walked up to a family group in the cancer clinic gathered around a young man who was obviously the patient, and they were crying,” says Bruce. “The dogs immediately went through the family group, straight to the young man. He started petting them and pretty soon the whole family was



Bruce and Bonnie Irving, along with “the boys,” have volunteered at the Vancouver Island Centre since 2011.

laughing. It just changed the whole atmosphere.”

Patients aren’t the only ones who appreciate seeing Kinnegoe and Duffy at the door.

“The cancer clinic staff look forward to the visits, too,” says Bruce. “They are in very stressful occupations and are always dealing with people who are very ill. Getting to pet the dogs eases their stress.” ■

Coping with Changes to Body Image

Myrna Tracy,
regional professional
practice leader with
Patient & Family
Counselling at the
BC Cancer Agency
Sindi Ahluwalia
Hawkins Centre
for the Southern Interior,
answers some of the
most-asked questions
about changes to
body image after
cancer treatment.

Q: When do people ask about body image issues?

A: It depends. Some people have body image concerns before starting treatment. Others first bring it up with a counsellor while they are undergoing treatment. It can also emerge in survivorship. For example, someone might develop a lymphedema that becomes troubling, and thus the body image issue arises.

Q: How can a survivor address body issues?

A: Many people worry about other people's reactions to them. This can include concern about how people on the street will react to, for example, the effects of facial surgery, but body changes that are not visible, like a mastectomy,

Then, have a cake to welcome the new image. It's about acknowledging the emotion. What a person thinks about their changed image is also crucial. They should consider what sort of messages they are telling themselves – pay attention to self-talk and focus on what you love about your body. The support of partners is, of course, extremely useful.

Q: How should people prepare for questions from other people?

A: Think about it ahead of time. Have a practised response that is comfortable for you. This is private information, so you don't need to say more than you want. When asked about hair loss, some might say, 'Yeah, isn't it great? My cancer is getting better.' Others might sidestep the issue with 'I am just glad my eyes are still blue!' It depends on how comfortable you feel.

Q: Why is it important to face body image issues with the help of others? What happens if you try to keep it all in?

A: It is never a good idea to hold it in as the pain is not going anywhere and you can become unable to move on. My advice would be to go to counselling, and take your partner, a friend or family member. Don't suffer in silence.

Q: What resources are available for survivors with body image issues?

A: BC Cancer Agency Patient and Family Counselling departments will see survivors up to 18 months after treatment. If more intervention is needed, we make an effort to connect the person to a long-term resource.

- Mindfulness-based stress reduction classes are available in many cities and through the BC Cancer Agency in some areas.
- If body image issues are seriously affecting your intimate life, you may want to consider counselling from a certified sex therapist. ■

can cause deep concern as well. The best place to start is acknowledging the grief and feeling of loss about the change in your body. Sometimes a ritual helps. You can release a balloon to thank and say goodbye to the previous body image.



PHOTO BY CHUCK RUSSELL

Managing

Tips on dealing with the emotional roller coaster after treatment ends

Finishing cancer treatment is a huge milestone, and now that it's done you might think the roller coaster of emotions you've been experiencing will finally start slowing down. However, for many people it is just rounding another curve on the ride.

"Any time someone has a major life change, many emotions can show up," says Sandy Faulks, regional professional practice leader with Patient and Family Counselling at the Fraser Valley Centre. "People often experience grief over the losses they have experienced as a result of cancer, and anxiety and depression are commonly a part of it."

Faulks explains that when someone finishes cancer treatment, their routine of seeing the health-care team, sometimes on a daily basis, ends, and they don't anticipate that it can be a difficult adjustment to transition back into their former lives and establish a "new normal."

"During treatment it's like you're in a cocoon, being attended to by the health-care team," says Faulks. "When treatment ends you may start asking, 'What now?' Some people need to talk about what they have been through as it is life-changing and the things they did before no longer fit or work for them. They see the world in a different way and they recognize that they have experienced many losses."

"I've had to realize that I don't get to be 'old Diane' anymore," says 58-year-old Diane Hamson, who marked the one-year anniversary of the end of treatment for stage three throat cancer in June. "I can't do some things I could before cancer, but there are many things I can. I'm just grateful to be here and be who I am today."

Hamson appreciates the time she has spent at the Patient and Family Counselling

Centre in Surrey; it has been invaluable for her, in addition to support from her husband and three adult children.

"Sandy has been so wonderful. I realized that my family was really affected by what was happening with me and that my attitude set the tone for them," says Hamson. "It helps to have someone to talk to. Sandy reassures and gives me confidence in how I am coping."

Practise Deep Breathing

- Put one hand flat on your stomach and the other on your chest
- Imagine your stomach is a balloon
- Take a slow, deep breath through your nose and feel the air go down through your chest as it inflates the balloon
- Hold your breath for a few counts, and then slowly release the breath as you feel the balloon deflate
- Do this for several breaths until you feel yourself begin to calm down and relax.

"I think it could be easy for a family to break apart due to the stress of dealing with cancer if they didn't have someone to serve as a sounding board. Counselling really should be part of the treatment process for everyone."

Coping with a major life change can induce a downward spiral of depression and trigger anxiety, so finding healthy ways to prevent or stop that is important.

"I'm a huge proponent of practising mindfulness and deep breathing," says Faulks. "When you are experiencing stress, a physical response takes place in your body that causes you to take shallower,

quicker breaths, so the oxygen and blood don't flow through your body as effectively."

Deep breathing is an effective technique widely used to calm that physical stress response, and mindfulness is a way to consciously create a sense of focus in the present moment.

"Practising mindfulness takes a regular, conscious effort, but it gives us the power to focus on the present where we do have control," says Faulks.

Faulks says a good way to practise mindfulness is to go for a 20-minute walk alone each day, and notice and describe to yourself what you are seeing and experiencing, utilizing all of your senses.

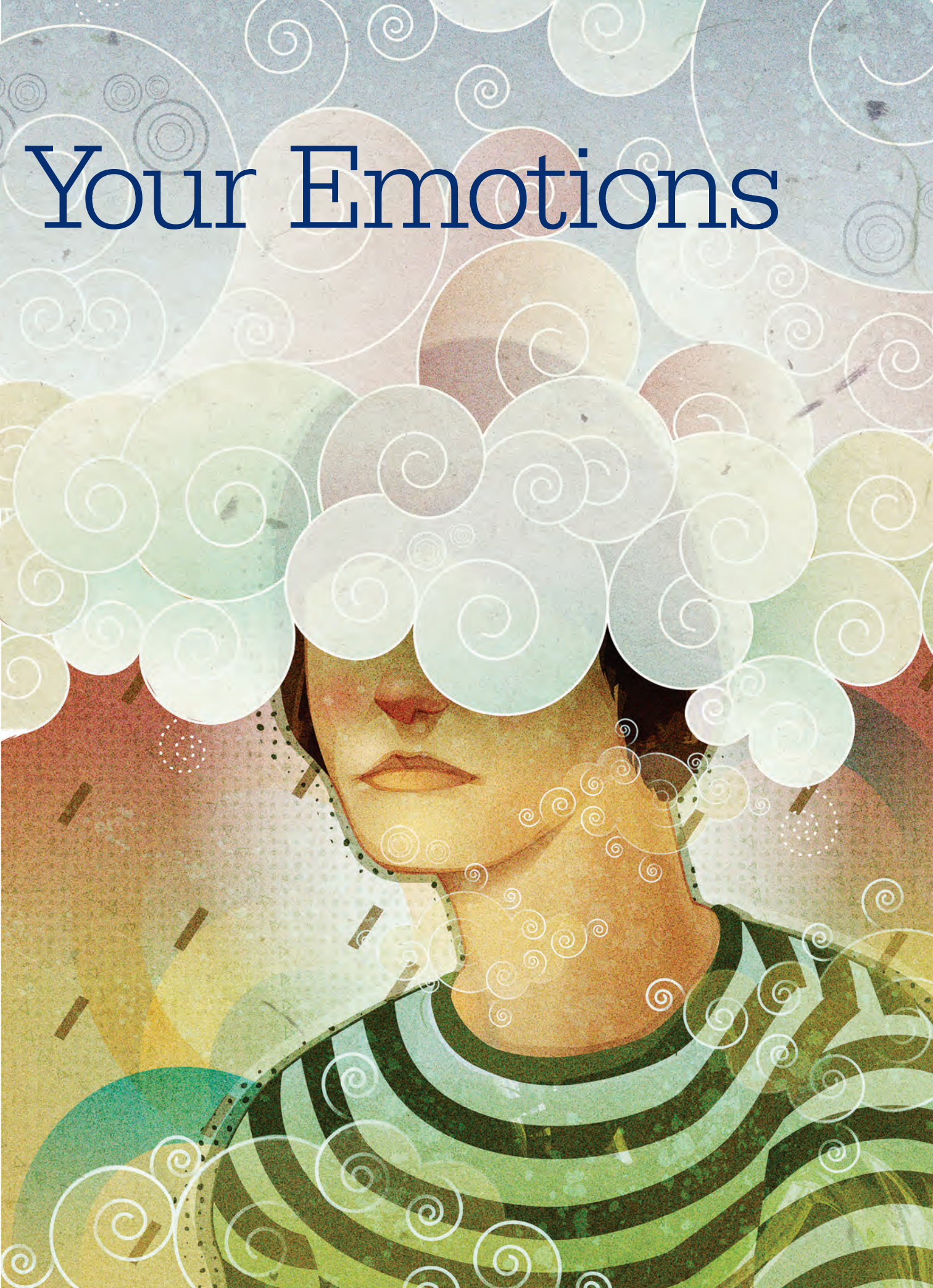
"It really is important to recognize that you are still on a journey of healing after treatment ends, and that you may benefit from talking to a counsellor about your experience to make sense of it, so you can carry on more easily," says Faulks.

Hamson wisely acknowledges, "Is life perfect once you finish treatment? No. But I'm scared to become a hypochondriac and let worry rule my life, so I'm learning that I only need to be upset about things if I decide to be upset by them." ■

Resources to help cope with emotions after cancer treatment

- **Patient and Family Resource Centres are at all BC Cancer Agency regional centres**
- **Cancer Chat Canada**
1-800-547-3777, ext.645234 or www.cancerchatcanada.ca
- **Picking Up the Pieces: Moving Forward after Surviving Cancer**
by Sherri Magee and Kathy Scalzo

Your Emotions



A high-angle, top-down photograph of a woman lying on her back in a bed. She is wearing a white tank top and has her hair pulled back. She is holding a large white pillow with both hands. The bed has white sheets and pillows. The overall tone is calm and serene.

COUNTING SHEEP

COUNTING SHEEP
COUNTING SHEEP
COUNTING SHEEP
COUNTING SHEEP

Are worries and concerns keeping you awake? Learn how to overcome insomnia to get the regular sleep you need.

Chances are you have experienced it: a night when sleep just doesn't come, no matter how many sheep you count; or you awaken at 3 am and simply cannot go back to sleep because of the thoughts swirling around in your head.

Occasional sleeplessness is an irritant. Unfortunately, insomnia often becomes a way of life for cancer patients and survivors. Those who have had cancer are twice as likely as others to suffer from sleep-wake disturbances, with 30 to 75 per cent of cancer patients and survivors experiencing them – particularly insomnia.

That's a concern, because persistent insomnia is distressing for cancer patients and survivors and can adversely affect their well-being in many ways, says Nancy "Surya" Absolon, a radiation therapy RN at the BC Cancer Agency's Vancouver Centre.

"Over time, sleep-wake disturbances can

lead to disrupted cognitive function, decreased quality of life and functional status (such as daytime sleepiness)," says Absolon. "Moreover, insomnia rarely occurs by itself. It frequently occurs as part of a symptom cluster with pain, fatigue, anxiety and depression."

Absolon adds that despite their prevalence and seriousness, sleep-wake disturbances are under-reported.

"Patients don't mention it because they often frame it as a temporary thing, or something that can't be treated. And after cancer treatment, survivors may feel it is part of their normal life, and there is nothing that can be done. As health-care professionals, we need to ask patients, 'How is your sleep?' and then follow up with them."

Elizabeth Rich began having trouble sleeping after her diagnosis of melanoma. She brought it up with the BC Cancer Agency nurses at the recommendation of her family

doctor: "[BC Cancer Agency nurses] have a different approach. They don't take your concerns lightly; about sleeplessness or the demons you face at night.

"Surya was a big help as a nurse who addressed my sleep," says Rich. "Some of what she told me reminded me of what we practise in yoga, especially the breathing exercises. So when I had those thoughts at night, I just did the breathing exercises and found it helped me relax. In half an hour, I was able to go to sleep. It worked better than any medication."

Absolon recently led a study at the BC Cancer Agency evaluating a brief innovative sleep intervention that combined cognitive behavioral therapy and mindfulness-based stress reduction. The pilot found the intervention helped improve sleep quality and was easy to teach and use. Absolon and a team are now starting a larger study to further evaluate the intervention. ■

What to do when sleep won't come to you

BC Cancer Agency has some suggestions to "train" your mind to overcome insomnia. But if your health-care professional recommends a different approach, be sure to follow their directions.

- ▶ **Wake up at the same time each day:** Patterns and schedules affect your sleep. Have a regular routine, and go to bed and wake up at regular times.
- ▶ **Find a relaxation technique that can help promote sleep:** Meditation, guided imagery, mindfulness, massage, yoga, aromatherapy and breathing techniques are a few examples. Use what works for you and be consistent.
- ▶ **"Clear your head" before bedtime:** Sometimes our worries trouble us as we are trying to fall asleep. Set a time in the early evening to plan, solve problems and make decisions. This will help keep your concerns at bay at bedtime.
- ▶ **Have a pre-bedtime "buffer" routine:** Set up a 90-minute time before bed to unwind and relax to prepare your body and mind for sleep. Dim the lighting and engage in pleasant, slower activities, such as reading, music or a warm bath.
- ▶ **Avoid the following close to bedtime:** Intake of stimulants (e.g., caffeine, nicotine or alcohol within six hours of bedtime), sugary or spicy foods, or a heavy evening meal.
- ▶ **Go to bed only when sleepy:** If you are still wakeful, trying to force yourself to go to sleep is counterproductive.
- ▶ **Use your bedroom for sleep and intimacy:** It is important to keep the bed as a strong signal for sleep. Avoid unnecessary time in bed during the day, and don't read or watch TV in bed.
- ▶ **If you are not asleep within 20 to 30 minutes, get out of bed and return when sleepy:** If you find you can't sleep, go back to your buffer activity. Once you feel sleepy, go back to bed and repeat the process as necessary.
- ▶ **Restrict napping:** Daytime naps may interfere with nighttime sleep. If you must nap, a short (20- to 30-minute) nap in the early afternoon is refreshing and may be helpful and less likely to interfere with sleep at night.
- ▶ **Consult** with your family doctor, nurse or health-care professional to help manage insomnia.

REFERENCE: Symptom Management Guidelines for Sleep-Wake Disturbances: www.bccancer.bc.ca.

A portrait of a smiling woman with dark, curly hair, wearing a thick, grey, chunky-knit scarf. She is positioned in front of a light-colored brick wall. The text 'The Power of POG' is overlaid on the lower right of the image.

The Power of POG

Groundbreaking cancer
research is providing
hope – here and now

Over countless hours of training for the Ride to Conquer

Cancer, and throughout the course of the two-day cycling journey, Zuri Scrivens never imagined that she would soon find herself part of a clinical cancer research study supported by the BC Cancer Foundation event in which she had just participated.

Zuri's commitment to take part in the 2011 Ride was an outlet to "do something" in the wake of too many close family and friends being diagnosed with cancer. It was only a cruel twist of fate that mere weeks after she jubilantly crossed the finish line in Seattle, cancer became Zuri's own personal nemesis.

It was exactly one month to the day of completing her second Ride, and just months after the birth of her son Michael, when Zuri noticed a lump in her right breast. It was quickly determined she had breast cancer.

"Honestly, my world just crumbled," says Zuri. "I thought my life was over and I really wondered if I'd even be here two months from that point.

"Within a week, I underwent a unilateral mastectomy and my life changed permanently and completely."

Grappling with the immediate impacts of the disease, she was challenged by no longer being able to breastfeed her son, the physical and emotional toll of treatments, and the fear of mortality. During this time, Zuri also watched as cancer's reach continued to spread within her family as two uncles received their own diagnoses while she was undergoing chemotherapy.

"I wish I could say that was it," says Zuri of her too-long list of loved ones impacted by the disease. Unfortunately, in December 2012, she was hit with another shock. Her cancer had managed to stick around after chemotherapy and radiation treatments, and it had spread. "It was in my lymph system and my liver."

A pivotal moment in time

Unbeknownst to Zuri, her involvement in fundraising for the BC Cancer Foundation through the Ride to Conquer Cancer, and her own cancer diagnosis, coincided at a pivotal point in time, when science and treatment planning were about to intersect like never before.

In the research labs and clinics of the BC Cancer Agency, scientists and clinicians had begun to collaborate on a new program, exploring the practicality of introducing genomic sequencing into cancer care for rare and hard-to-treat varieties of the disease. And, in less than two years, this idea blossomed into the Personalized Onco-Genomics Program (POG) at the BC Cancer Agency, which has already proven that genomic sequencing can be a critical tool in real-time cancer care.

Zuri can now personally attest to the value of POG. Enrolled in the program after her cancer had spread, today Zuri is on two medications that were identified as potentially useful with insight from the genomic sequencing data. Most importantly, Zuri is cancer-free.

By mapping the DNA of cancer cells and those of a patient's normal cells, BC Cancer Agency scientists can then read out the long sequence of letters from each sample and compare the cancer data to the normal cells to find the "spelling mistakes." It's those mistakes that point to the root cause of an individual's cancer and potential pathways to treat the spelling mistakes through targeted drug therapies.

What POG really boils down to is that more information in cancer care means better diagnosis, better drugs and better outcomes. The BC Cancer Agency is a frontrunner in the immediate translation of research data into treatment plans, allowing oncologists to make truly informed clinical decisions for their patients.

With an ongoing funding commitment from the BC Cancer Foundation, POG is expanding, which will see more than 300 patients enrolled in the program. While most cancer institutions around the globe focus on genomic sequencing or clinical care, the BC Cancer Agency is one of the only places currently doing both. The link between genomic data and results from ongoing patient care and outcomes is unparalleled.

"I believe in it fully," says Zuri of the POG program. "It's so important and I honestly don't know if I'd be here without it."

The committed Rider, cancer survivor and POG participant says she is living, breathing proof of where BC Cancer Foundation donor dollars go.

For more information about POG or the Ride to Conquer Cancer, visit www.bccancerfoundation.com ■

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.

Ride to Conquer Cancer

The 6th Annual Ride to Conquer Cancer, presented by Silver Wheaton, is a powerful movement of hope, healing, celebration and optimism. This year's ride will take place on August 29-30, 2015. To register, or to find out more, go to www.conquercancer.ca or call 1-888-771-BIKE (2453)

Facebook www.facebook.com/bccancerfoundation Twitter [@bccancer](https://twitter.com/bccancer) RSS www.bccancerfoundation.com/blog

FOR A CURRENT LISTING OF EVENTS...

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

Relaxation Program

DATE: Weekly

TIME: 10:00 am to 11:30 am

LOCATION: Cluculz Room, Patient and Family Counselling area,

BC Cancer Agency – Centre for the North (1215 Lethbridge Street, Prince George)

DESCRIPTION: This is a group session facilitated by a counsellor experienced in relaxation techniques.

TO REGISTER: Call 250-645-7300

For information on relaxation programs at other BC Cancer Agency Centres, please consult our website at www.bccancer.bc.ca

Job Search Group

DATE: March 25, 2015

TIME: 9:00 am – 12:00 pm

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

DESCRIPTION: Are you a cancer survivor who is looking for a new job? This group is intended for people who are returning to the workforce after a diagnosis of cancer. The session will include addressing common concerns that arise during the post-cancer job search process, interview preparation and the



question of when or whether to disclose that you've had cancer.

FOR MORE INFORMATION OR TO REGISTER:
Call 604-877-6000 ext 672194

Lymphoid Cancer Education Forum

DATE: May 22

TIME: 9:00 am to 2:30 pm

LOCATION: Jewish Community Centre (950 West 41st Avenue, Vancouver)

DESCRIPTION: This forum will present information on the latest in research and

care for non-Hodgkin lymphoma, Hodgkin lymphoma, multiple myeloma and chronic lymphocytic leukemia (CLL).

FOR MORE INFORMATION OR TO REGISTER: Call 604-877-6000 ext 672196 or 1-800-663-3333 ext 672196. Registration is required by May 8. The cost is \$20 per person (includes refreshments and lunch), payable by cash or cheque. Please make your cheque payable to: BC Cancer Foundation and mail to: BC Cancer Agency – Patient & Family Counselling, 600 West 10th Avenue, Vancouver, BC, V5Z 4E6

Workout to Conquer Cancer

DATE: Saturday, April 25, 2015

TIME: All day

LOCATION: Richmond Olympic Oval, Richmond, BC

DESCRIPTION: Get ready to lunge, stretch and sweat towards a world free from cancer! Join Workout for a full day of fun fitness sessions to raise funds for breakthrough research. TV fitness trainer Tommy Europe's SHRED boot camp will once again be a highlight of this event. Register as an individual or as a team at: www.workouttoconquercancer.ca

FOR MORE INFORMATION: Call 604-877-6040 or 1-888-906-2873

Ride to Conquer Cancer

DATE: August 29-30, 2015

LOCATION: Vancouver start

DESCRIPTION: The Ride to Conquer Cancer® presented by Silver Wheaton benefiting the BC Cancer Foundation is a unique two-day cycling event, which will take place on an exciting new weekend: August 29-30, 2015. During this bold cycling journey, you will ride for two days through picturesque scenery. Our vision is clear – A World Free From Cancer.

FOR MORE INFORMATION OR TO REGISTER: Visit http://va15.conquercancer.ca/site/PageServer?pagename=va15_homepage or call 1-888-771-BIKE(2453) ■



(BOTTOM RIGHT) PHOTO COURTESY OF BC CANCER FOUNDATION

Support for the Whole Family

Although going through your cancer treatment was a solo journey, you were never really alone, because standing there next to you were your loved ones and your friends.

Now that you've completed treatment, you're entering a new leg of the journey – and so are your family and friends. Like you, they may have questions or concerns about what to expect now that your treatment has ended. Here are some excellent information and support resources to help you *and* your family.

1. BC Cancer Agency

www.bccancer.bc.ca

The BC Cancer Agency offers comprehensive information on a wide range of topics related to life after cancer treatment as it pertains both to patients and their family members. Here is a quick overview:

• Life After Cancer

This link provides access to information specific to caregivers as well as information on life after cancer treatment ends. It also provides links to additional resources of relevance to both patients and family members.

• Cancer and the Family

Topics here include tips on talking to children and teens, talking to children about living with uncertainty, and tips on getting through school amidst worry for a loved one.

• Facts and Feelings about Cancer for Teens

Specifically directed at the needs of teens with a loved one facing cancer, this site

features stories shared by other teens, tips on talking to teens and links to online resources.

• Coping with Cancer – Counselling Services

The anxieties associated with cancer can linger long after cancer treatment ends. This site offers advice on when you or a loved one may benefit from counselling services. Counselling services are available at BC Cancer Agency Centres throughout BC.

• Support Programs

All six BC Cancer Agency Centres offer a range of support programs for patients and family members. These include educational events, relaxation and stress reduction workshops and other services. Contact your local Centre for information.

• Support Resources

The BC Cancer Agency has produced an array of downloadable fact sheets, relaxation CDs and booklets that can be very helpful to both patients and family members (Tip: See *Forward*, Fall 2014, page 23 for a full listing of relaxation resources).

2. CancerChatCanada

www.cancerchatcanada.ca

This site features professionally led online support groups for patients affected by cancer and their family members. Groups meet weekly in an online “chat” room over 10 to 12 weeks. Registration is required to match you with the most relevant group.

3. Cancer Connection

www.cancerconnection.ca/

This trusted online community for cancer patients, their families and friends provides an excellent place to share and connect with



others. It features discussions, sharing of personal stories, news, groups, events and other relevant resources.

4. National Cancer Institute

www.cancer.gov/

The National Cancer Institute has produced educational publications directed specifically at supporting family members and caregivers, including *Caring for the Caregiver*, and *Facing Forward: When Someone You Love Has Completed Cancer Treatments*.

5. Canadian Cancer Society

www.cancer.ca

Among the many valuable resources for cancer patients who have completed treatment and their family members is a section on life after cancer treatment and related topics. Click on Cancer Information and then go to Cancer Journeys.

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. ■

An elderly couple, a man and a woman, are walking together outdoors. The man is on the left, wearing a light-colored button-down shirt and dark trousers, with his hands in his pockets. The woman is on the right, wearing a light-colored jacket over a ruffled blouse and a dark skirt. They are both smiling and looking at each other. The background is a soft-focus landscape with hills and trees under a bright sky.

I'm still here
to hold her hand

I'm still here because of cancer research.

The BC Cancer Foundation is the largest funder of cancer research in BC.
To learn more or to make a donation, please visit
www.bccancerfoundation.com or call 604.877.6040.

The logo consists of a stylized circular emblem made of two overlapping arcs, one green and one purple, followed by the text "BC CANCER FOUNDATION" in a bold, sans-serif font, with "BC" in purple and "CANCER FOUNDATION" in green.

**BC CANCER
FOUNDATION**
partners in discovery

Supporting the BC Cancer Agency