First Nations Cancer Survivorship Care Plan

This plan is prepared for:

[Patient name]

on:

[Today’s date]

by:

[Name of overseeing HCP]

[Contact information]
Acknowledgments:

This care plan was created for First Nation cancer survivors living in rural and remote communities in northern British Columbia. The purpose of this care plan is to provide information to survivors and improve communication between health care professionals and patients. This care plan does not substitute health care services or advice provided by professionals.

Thank you to the survivors, health care professionals and expert key informants whose insight and knowledge made the development and validation of this care plan possible. Your expertise has helped to address unmet needs in your communities and the stories you have shared have been very empowering.

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Disclaimer
The views expressed in this publication do not necessarily represent the views of the Public Health Agency of Canada.

This care plan links to third-party information. As of April 13 2012, all links to other websites are correct. It cannot be guaranteed that links to external sites will work at all times.

The pictures used in this care plan were taken in Northern First Nation communities in Canada; the cover page is a picture of Takla Lake, British Columbia.

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+ Indicates words defined in the Glossary at the end of this care plan
Part 1: Medical & Treatment History

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MY PATIENT INFORMATION

MY HEALTH CARE TEAM

MY TREATMENT HISTORY

Surgery

Systemic Therapy (Chemotherapy, hormonal therapy, or targeted therapy)

Radiation Therapy

Radiation Site

Traditional Medicine Therapies
# Part 1: Medical & Treatment History

You and your health care team should fill out this section together. Keep a copy to help you and your team to ensure you are well looked after. **Health care professionals should copy pages 3-5 for their records.**

## My Patient Information

<table>
<thead>
<tr>
<th>Name</th>
<th>DOB:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHN:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Status Card Number:</td>
<td></td>
</tr>
<tr>
<td>Cancer Diagnosis:</td>
<td></td>
</tr>
<tr>
<td>Centre(s) that treated:</td>
<td></td>
</tr>
<tr>
<td>Date of diagnosis:</td>
<td>Age at diagnosis:</td>
</tr>
</tbody>
</table>

Have you filled out a health care directive:  □ Yes  □ No  
If yes, where is it kept?  

Disease status at the end of treatment:  
(choose all that apply)  
□ All evidence of disease was gone  
□ Possible recurrence based on Imaging  
□ Evidence of persistent/recurrent disease*  

<table>
<thead>
<tr>
<th>Next of Kin:</th>
</tr>
</thead>
</table>

| Emergency Contact Information: |
| Name:     |
| Phone Number: |
| Address: |

## My Health Care Team

<table>
<thead>
<tr>
<th>My Health Care Team</th>
<th>Name</th>
<th>Phone Number</th>
</tr>
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<tbody>
<tr>
<td>Family Physician</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Representative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Nurse Contact</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal Patient Liaison</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal Cancer Care Coordinator</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditional Healer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GP- Oncology (GPO)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radiation Oncologist</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Pharmacist</td>
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<tr>
<td>Dietitian</td>
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<td>Psychologist</td>
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<td>Physiotherapist</td>
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<tr>
<td>Occupational Therapist</td>
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<tr>
<td>Massage Therapist</td>
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<tr>
<td>Counsellor (i.e. mental health)</td>
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<tr>
<td>Social/Support Worker</td>
<td></td>
<td></td>
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<tr>
<td>Advocate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interpreter</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>My Treatment History</strong></td>
<td>Treatment was: □ Intent to cure □ Palliative</td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>---------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Surgery</strong></td>
<td>Date (yyyy/mm/dd)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><em><em>Systemic Therapy (Chemotherapy, hormonal therapy</em>, or targeted therapy)</em>*</th>
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</thead>
<tbody>
<tr>
<td>Pre-operative treatment: □ Yes □ No</td>
</tr>
<tr>
<td>Post-operative treatment: □ Yes □ No</td>
</tr>
<tr>
<td>Treatment on clinical trials: □ Yes □ No</td>
</tr>
<tr>
<td>If yes, name(s):</td>
</tr>
<tr>
<td>BCCA Chemotherapy protocol(s): Dose Delays □ Yes □ No</td>
</tr>
</tbody>
</table>

Did you receive hormonal therapy? □ Yes □ No If yes, which one(s):

☐ [drug name] Start date: [yyyy/mm/dd]: End date: [yyyy/mm/dd]:

Systemic Therapy Notes:

Were any of the above stopped early because of toxicity*?

[ ] Yes [ ] No

Were you hospitalized for toxicity?

[ ] Yes [ ] No

<table>
<thead>
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<th><strong>Radiation Therapy</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you receive radiation? □ Yes □ No</td>
</tr>
<tr>
<td>Radiation intents: □ Curative □ Adjuvant □ Palliative</td>
</tr>
<tr>
<td>□ Other: ________________</td>
</tr>
<tr>
<td>Completion date [yyyy/mm/dd]:</td>
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</table>

Radiation notes:

Radiation Site

<table>
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<td>Dose</td>
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</tbody>
</table>
Traditional Medicine Therapies

Other medications and procedures:

Additional medical information:
<table>
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<th>Navigation team</th>
<th>Contact Information</th>
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Part 2: Cancer Follow-up and Side Effects

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WHO PROVIDES CARE?

MEDICAL FOLLOW-UP

Your Cancer Follow-up Schedule

Medical Side Effects

Fatigue

Memory, Concentration and ‘Chemo-Brain’

RECURRENCE

GENETIC COUNSELING

RESOURCES
Part 2: Cancer Follow-up and Side Effects

After cancer treatment many survivors experience a wide range of emotions, thoughts and concerns both medical and otherwise. Excitement, for example, can be mixed with anxiety and uncertainty about your future. You may also have many questions about your health and other issues. This care plan will make this time of transition easier – helping you know what to expect in the months and years ahead.

This information is not specific to your type of cancer, but references to resources for specific cancer types are available in Part 5.

Who Provides Care?

Changing health care providers once treatment is over can be challenging and unsettling. Many patients come to rely on their oncologist, for example, and are nervous about leaving his or her care. This transition is necessary, however, to ensure you are cared for in a timely manner. Depending on the situation, you may continue to see an oncologist for follow-up visits, but your long-term care should be managed by your local health care team.

Medical Follow-up

Medical follow-up includes appointments with medical professionals, physical exams, and various tests (such as CT scans or blood tests). The main goal is to detect new or recurrent disease. Another goal is to determine the effectiveness of the treatments you have already had, or look for side effects. Follow-up provided to patients depends on type of cancer, and the stage.

The BC Cancer Agency provides recommendation for follow-up on their website: www.bccancer.bc.ca

Follow-up should be discussed with your health care professional and often consists of three main categories, though depends on the type of cancer and stage:

Your follow up may include:

- Physical examination (e.g. breast and armpit exam, colonoscopy)
- Blood work (e.g. tumour markers such as CEA)
- Diagnostic imaging (e.g. mammogram)
**Your Cancer Follow-up Schedule**

The schedule should be based on BCCA follow-up guidelines – use the list on the left-hand side to navigate ([www.bccancer.bc.ca/HPI/CancerManagementGuidelines/default.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/default.htm)), and advice from your oncologist. The dates are a suggested timeline, which your physician may adjust to fit your needs.

**Stage and recurrence risk level:** ____________________________

<table>
<thead>
<tr>
<th>Procedure/Test</th>
<th>Recommended Schedule</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td></td>
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<td>Year 2</td>
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<td>Year 3</td>
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<td>Year 4</td>
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<tr>
<td>Year 5</td>
<td></td>
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<tr>
<td>Beyond</td>
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</tbody>
</table>
Medical Side Effects

Treatment for cancer is rapidly changing. With the development of new medications and therapies, it is hard to keep up with all the long-term side effects. Further, every person is unique and so is the side effects that each will experience. Be an active participant in your care and share news of any changes in your health with any member of your health care team. This section covers common side effects, and provides a location for your health care provider to enter anticipated side effects.

Treatment-Specific Side Effects

Most cancer patients and survivors experience mild, short-term side effects – rarely all of them. Below is a list of the potential side effects from surgery, radiation and/or chemotherapy. To determine if you are at risk of developing these, or other side effects, talk to you health care provider or refer to the BC Cancer Agency Website.

Surgery: side effects depend on location and type of surgery, but some general risks include:

- Infection
- Bleeding
- Pain
- Nerve damage*
- Functional change (e.g. change in bowel movements, decreased arm mobility)
- Cosmetic change (e.g. breast removal, neck scar)

Chemotherapy: side effects depend on type and dose of chemotherapy, but may include:

- Tiredness
- Risk of infection
- Hair loss
- Nausea/vomiting
- Organ damage (e.g. kidney, heart)
- Very rare risk of second cancer (e.g. leukemia)

Radiotherapy: side effects depend on where radiotherapy is targeted and the dose, but may include:

- Skin irritation
- Hair loss in area of treatment (e.g. armpit)
- Pain
- Fatigue
- Very rare risk of second cancer
Fatigue

Fatigue is the feeling you may experience when you are mentally or physically tired. Fatigue is one of the more common side effects of cancer treatment. Friends and family may expect your energy levels to return to normal once treatment is over. Fatigue can have many causes and you should be aware of changes in your energy level. If you experience new or worsening symptoms talk them over with any member of your health care team. Fatigue can also be caused by dehydration, diarrhea, anemia, fever, infection, nausea, vomiting, pain and depression.

To help manage your fatigue, try planning your days in advance and avoid busy schedules. If you are going to have a full day, be sure to set time aside to eat and rest between activities. Light exercise can also help improve energy levels and enhance your quality of life. Most instances of fatigue will improve with time.

Sudden or severe fatigue can be caused by an infection or it could be due to the cancer treatment you received. If you suffer from this type of serious fatigue, be sure to discuss it with your health care team.

Resources

Getting Help for Fatigue


Fatigue www.nlm.nih.gov/medlineplus/ency/article/003088.htm

Memory and Concentration

Memory or concentration problems are less common side effects of cancer treatment. Some survivors do notice minor changes. Trouble remembering can also be due to the fatigue and stress caused by the cancer treatments. These issues should be discussed with any member of your health care team.
Possible Causes of Memory Problems:

Medications
Chemotherapy drugs that weaken your immune system* (Immunosuppressive drugs), antibiotics, steroids*, pain management drugs, nausea/vomiting drugs, and other cancer-related symptoms can affect your memory and ability to think clearly. Symptoms caused by these medications can improve over time.

Metabolic Problems
Certain cancers can produce hormones* that affect the brain. The thyroid gland, liver and kidneys can affect mood and mental ability if they are not working properly. Pay attention to your body and discuss any concerns you have with your health care team so that they may help alleviate some of these symptoms.

Unhealthy Diet
A well balanced diet is an important part of feeling well and being healthy. Making sure you are eating well can help eliminate some factors that contribute to memory and concentration problems.

Symptoms of Memory Problems in Cancer:
- Difficulty understanding complex information
- Easily distracted
- Exhausted by tasks requiring concentration
- Not remembering what you are talking about
- Forgetting what you are doing
- Forgetting phone numbers
- Asking questions only to repeat them 15 minutes later

For information and tips on memory & concentration see Appendix A

All of the above side effects are just examples of potential side effects. Your health care provider will provide a list of side effects you could experience, and we encourage you or your health care provider to fill out the tables below. You can also refer to Part 5 of this document to find resources specific to your type of cancer.
**Recurrence**

It is important to discuss recurrence and/or attend follow-up appointments with a member of your health care team. If you are concerned about cancer returning, your health care team member will answer your questions or you can call the health link BC line that is available 24 hours a day, 7 days a week. Dial **8-1-1**.

If you experience a second cancer in the same area as the first, this is called a recurrence. When a recurrence of the original cancer occurs in a new area, it is called a metastasis. If the recurrence shows up in multiple areas, it is known as metastases.

Cancer can reoccur in different areas, depending on the type and stage of your cancer. You may ask your health care provider to discuss your risk.

**What is the chance I will have a recurrence?**

Your oncologist, or another member of your health care team, will evaluate your risk for recurrence which depends on factors such as your age, the stage of your cancer, and the treatment you received. Discuss these risks with a member of your health care team. Signs and symptoms of recurrence depend on the location, which you should discuss with your health care provider, and then fill out the following:

<table>
<thead>
<tr>
<th>Current Side-Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>My current side effects</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
</tr>
<tr>
<td>Sign/Symptom</td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
</tr>
</tbody>
</table>
**Genetic Counseling**

Some tumors are considered as hereditary cancer meaning they can be passed down from family member to family member. Talk with your doctor about hereditary cancer and whether genetic testing is needed for you or your family.

**The following criteria indicate the possibility of a hereditary cancer:**

- Unusually early age of cancer diagnosis
- Multiple cancers in a single individual
- The same cancer type diagnosed in close relatives
- Cancers occurring in multiple generations of a family
- Occurrence of rare tumors
- Uncommon tumor histology
- Rare cancers associated with birth defects
- Geographic or ethnic populations known to be at high risk of hereditary cancers

For information on Genetic Counselling please visit: BC Cancer Agency - [www.bccancer.bc.ca/PPI/Prevention/Hereditary/default.htm](http://www.bccancer.bc.ca/PPI/Prevention/Hereditary/default.htm)
Resources

(Hard copies of these resources should be available from your health care team)

Treatment Specific Side Effects

➢ BC Cancer Agency – [www.bccancer.bc.ca/PPI/CancerTreatment/default.htm](http://www.bccancer.bc.ca/PPI/CancerTreatment/default.htm)

➢ BC Cancer Agency (By Cancer Type) – [www.bccancer.bc.ca/PPI/TypesofCancer/default.htm](http://www.bccancer.bc.ca/PPI/TypesofCancer/default.htm)

➢ BC Cancer Agency – Drug Index

Additional Websites

➢ Native American Cancer Research – [www.natamcancer.org](http://www.natamcancer.org)

➢ Canadian Partnership Against Cancer – [www.cancerview.ca](http://www.cancerview.ca)

➢ Canadian Partnership Against Cancer – [www.partnershipagainstcancer.ca/](http://www.partnershipagainstcancer.ca/)

➢ Canadian Partnership Against Cancer – First Nations, Inuit and Métis Resource - [www.cancerview.ca/cv/portal/Home/FirstNationsInuitAndMetis?_afrLoop=481720985412000&_afrWindowMode=0&_adf.ctrl-state=9m8hdh00q_4](http://www.cancerview.ca/cv/portal/Home/FirstNationsInuitAndMetis?_afrLoop=481720985412000&_afrWindowMode=0&_adf.ctrl-state=9m8hdh00q_4)

Part 3: Quality of Life and Healthy Living After Cancer

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LIVING BEYOND CANCER
Stress, Anxiety and Depression
Returning to Community

FAMILY RELATIONSHIPS

SPIRITUALITY

HEALTHY EATING
Managing Some of the Side Effects of Cancer and its Treatment
Alcohol

PHYSICAL ACTIVITY

SUN EXPOSURE

CLEANSING CEREMONIES
Part 3: Quality of Life and Healthy Living After Cancer

This section includes information on factors that affect your quality of life including the emotional and psychological effects of cancer and cancer treatment and lifestyle factors such as diet, physical activity and tobacco use. Additional information on this subject is included in the resource section.

Living Beyond Cancer

You finally made it! You survived your treatment and are ready to continue with your ‘normal’ life. Many patients and their loved ones expect life to return to normal. You may have gone through a physically, emotionally, and perhaps spiritually changing experience. As time passes, your side effects and symptoms will lessen and you will be able to start returning to a more normal routine.

It is important for you, and for those around you, to realize, however, that this takes time. As time goes on you will continually gain your strength. You may have to make some changes to daily living, work or how you spend your free time, but this is not necessarily a bad move. You are not alone and there are many resources and support services to help.

Stress, Anxiety and Depression

Stress
Stress can affect you in many different ways - physically, emotionally, spiritually and/or mentally. Review the list of symptoms on the next page and ask yourself if any of the listed symptoms are having a negative effect on your life. When they affect your day-to-day living, you should speak with a member of your health care team.

“There are other people who went through cancer: How did they live their life? Because, I know some people have these kinds of things like me and I just want to know how did they do it? How and what did they do? Did they go back to work? Did they go back to their normal way of life? Stuff like that. Things like that I want to know.”

Cancer drains you physically, mentally, emotionally and spiritually. It's very stressful. You deal with it for long and when you come back to the community there’s nothing or no one there to help you.”

For information on how to deal with stress see appendix B
<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional</th>
<th>Mental</th>
<th>Spiritual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Muscle tension</td>
<td>Anxiety</td>
<td>Misuse of alcohol/drugs</td>
<td></td>
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<tr>
<td>Cold sweaty hands</td>
<td>Fear</td>
<td>Misuse of caffeine</td>
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<tr>
<td>Facial ticks</td>
<td>Irritability</td>
<td>Misuse of tobacco</td>
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</tr>
<tr>
<td>Fatigue</td>
<td>Hopelessness</td>
<td>Use of addictive methods of coping such as:</td>
<td></td>
</tr>
<tr>
<td>Tension headaches</td>
<td>Helplessness</td>
<td>Gambling</td>
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<td>Indigestion</td>
<td>Impatience</td>
<td>Hoarding</td>
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<td>Social withdrawal</td>
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<td>Back pain</td>
<td>Feeling overwhelmed</td>
<td>Frustration</td>
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<tr>
<td>Jaw tension</td>
<td>Loss of concentration</td>
<td>Loss of connection</td>
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<td>Nervous stomach</td>
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<td>Physical violence</td>
<td>Indecisiveness</td>
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</table>

**Anxiety**

Ongoing physical problems associated with cancer can result in anxiety. Anxiety often stems from feelings of loss of control, feeling alone and uncertain about your health. These feelings can be handled by using helpful tools and seeking support when needed. Many survivors experience problems with scheduling appointments when travelling out of community, causing anxiety and stress. It is helpful to work with your health care team to develop and confirm a plan before leaving the community for appointments. You may find the table below helpful when organizing your follow-up appointments.

**Travel Planning**

<table>
<thead>
<tr>
<th>Travel Items</th>
<th>Description</th>
<th>Confirmed? (Yes/No) Who confirmed travel?</th>
<th>Date Needed (dd/mm/yy)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Appointment</td>
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<tr>
<td>Accommodation</td>
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<tr>
<td>Transportation</td>
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</table>
Feelings of anxiety during treatment may continue into survivorship. Survivors can feel frustrated with travel, isolation, accommodation, financial strain, and other stressors. A member of your health care team is able to help with these problems.

We all experience anxiety at some time in our lives and there are ways to reduce and manage it. Identifying anxiety is the first step. From there, you can learn the cause of your anxiety and decide on ways to cope. Counseling, support groups and relaxation techniques can also be helpful. Anti-anxiety medication may be another option to talk over with your health care team.

**Sadness**

Your views on how your cancer has affected aspects of your life may create feelings of sadness. It is important to work through your emotions and express them rather than keeping them to yourself. Identify supportive people in your life whom you feel will be helpful in sorting through your emotions with you.

**Normal Sadness**

- Is common during your illness as you experience losses
- Can impact sleeping and eating
- Comes and goes
- Doesn’t stop your ability to look forward to the future and enjoy life
- May create temporary isolation from friends and family
- May create temporary loss of identity

For information on self-esteem see appendix C
Depression
You may experience symptoms of depression. It can last longer than usual sadness. If so, speak with a member of your health care team. If you experience any number of these symptoms, contact your health care professional or call the CRISIS LINE 1-800-784-2433.

Symptoms of Depression
- Persistent sad, anxious, or ‘empty’ mood
- Feelings of guilt, worthlessness, helplessness
- Don’t feel like your usual self
- Nothing cheers you up or lifts your mood, feelings of hopelessness
- Loss of interest or pleasure in hobbies, activities and relationships you enjoy
- Decreased energy or increased fatigue
- Difficulty concentrating, remembering, making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite and/or weight changes
- Restlessness, irritability
- Thoughts of death or suicide, suicide attempts

Depression can reduce your quality of life. The stage at which you were diagnosed with cancer and treatment you received both have an effect on your risk of depression.

If you feel any of these symptoms, see any one of your health care team to learn how you can better manage them. You may just need someone to talk with who will help you explore your emotions and provide suggestions to help you cope. The BC Crisis Line is also available for 24 hours a day, 7 days a week 1-800-784-2433.

“Then I can share my stories, like, what I’m going through. Maybe when I’m going through a hard time they could tell me, “No, you could do it this way” or “try this”.”

“I feel the support team helped in that way. And that way people don’t get down and depressed because we’re able to talk about it. And we can laugh and talk about what we’re going through and realize it’s normal. And when you have a doctor sitting in there or a, a trained nurse who would know and be able to reassure us, “Yes, it is all part of it”.”
Returning to Community

For some cancer survivors, returning to their community is the most important part of their cancer journey. Patients and family have been through a difficult experience and it is important to acknowledge them as they transition back to their everyday lives.

Although many communities will honour their cancer survivors and families in different ways, suggestions have been made such as hosting a community gathering or feast to acknowledge the family and to give them the opportunity to discuss their journey. Speaking with your local health care team about opportunities to organize such an event is a great place to start.

A few things to consider before organizing a community event are:

1) Ensure that the cancer survivor and family are ready to participate in an event. There may be physical or mental challenges that the family is going through that should be respected.

2) Ensure that the event is flexible and held at a time that is appropriate for the cancer survivor and family.

3) Ensure healthy foods are provided.

4) Ask the family the best time of day to host an event as energy levels for the cancer survivor may vary throughout the day.

5) Have fun! This is a great opportunity to acknowledge an individual, family and community and to empower everyone to come together to support one another during a difficult time.
Family and Community Relationships

You may find support with your survivorship needs through relationships with your family and community. These relationships are quite commonly a source of strength for survivors. In some cases, family members do not talk about the effects of the treatment in an effort to protect their loved ones. It is important that you talk openly about your experience. This will help your relationships so that you can work towards recovery together. The BCCA Centre for the North Patient and Family Counseling are also available at 1-855-775-7300. Cancer Chat is another resource for you and they can be reached at 1-800-663-3333 extension 4965 or 4966.

How to move forward every day:

- Be honest and caring with each other, laugh often
- Keep a regular time and place or outing when you don’t discuss cancer
- Talk about each other’s goals and dreams
- Find ways to exercise together
- Relax together and do activities that you both enjoy
- Try something new

“"I needed help for my little girl because it was really hard for her to see me going through my treatment. I'm glad that I could connect with someone over the phone to talk with. It helped us a lot.”

Spirituality

Cancer may leave you with a new outlook on life. You might find yourself searching for meaning and wanting to make the best of your life. There are many ways to bring new meaning to your life and to help make sense of what you have gone through. Some people find spirituality helpful. Reconnecting with your culture, traditions and getting out on the land can help survivors move forward. Expressing yourself through Potlatch and/or traditional ceremonies is helpful for some survivors.
**Healthy Eating**

Making positive changes to your lifestyle and diet are important to help you better manage the side effects of cancer treatment, improve your energy and quality of life and gain more personal control. Healthy eating also helps prevent or manage health conditions such as heart disease and diabetes and decreases your risk of cancer recurrence. Research shows that the most important lifestyle changes you can make include achieving and maintaining a healthy body weight, increasing physical activity, and limiting or avoiding alcohol.

Many people question whether their diet played a role in their cancer diagnosis. Cancer is a complicated disease – and the risk of developing it is related to many factors some of which may be dietary. Certain cancers have been linked to obesity, alcohol consumption and possibly a higher fat diet from processed foods. At the same time, diet does not account for all of the cancer risk factors. Individuals with healthy diets can still develop cancer.

This section includes an overview of the healthy eating habits you can use to reduce the risk of cancer returning and to improve your overall health. These suggestions are intended for people who have recovered from treatment and are interested in healthy eating. If, however, you are dealing with side effects that limit what you can eat, the suggestions below may not be the right choice until your symptoms are gone.

Some side effects of cancer treatment include a change in appetite or taste in food, nausea, vomiting, and trouble digesting or eating certain foods. If you are dealing with side effects that affect your ability to eat a healthy diet, talk with your doctor or local health clinic (also see the resources below). You may also want to call a dietitian at HealthLinkBC (Dial 811) or read the Canadian Cancer Society’s “Eating Well When You Have Cancer” for help in regaining your appetite right after treatment. Their publication, “Eat Well, Be Active, What You Can Do” provides advice for when you are feeling well enough to start improving your diet. You can also speak with one of their Cancer Information Specialists (1-888-939-3333).

Many of these resources do not talk about traditional food and the health benefits of eating a traditional diet. It would be useful to review the “Eating Well with Canada’s Food Guide: First Nations, Inuit and Métis” for information on culturally appropriate foods.

**Resources:**

Eating well with Canada’s Food Guide: First Nations, Inuit and Métis
The following suggestions are not intended to replace advice from your health care team. Do not hesitate to discuss nutrition related concerns with your health care team or dietitian.

Food First
Some foods are rich in anti-cancer qualities such as vitamins, minerals and dietary fiber. Include the following as part of your diet one at a time so it is easier to manage. The following are a few examples, and does not include all recommended traditional foods.

- Eat less processed foods
- Eat more berries, plants and root vegetables which are high in vitamins
- Eat healthy fats that are found in fish such as salmon, trout, halibut and cod
- Fish heads and bones are an excellent source of calcium
- Fish skin and eggs are good sources of protein and vitamins
- Save smoked or dried fish for snacks for travelling
- Moose meat is an excellent source of protein and B vitamins and a good source of iron
- Moose meat and other wild animals are lower in fat than domestic animals such as beef, pork and chicken
- Small animals such as beaver, ground squirrel, groundhog (marmot) and rabbit meat are an excellent source of protein, iron and B vitamins
- Wild duck, ptarmigan and geese are a good source of iron
- Eat whole wheat baked bannock instead of fried, enriched flour bannock
- Use seaweed and ooligan grease

About one-third of all cancers are linked to diet. Early research suggests that some of the same foods that protect against cancer are also the best choices for cancer survivors.
We recommend using *Eating Well with Canada’s Food Guide: First nations, Inuit and Métis*. This guide lists the number of servings and portion sizes for foods within each food group - according to age and gender to meet the nutritional needs for good health. Using the Internet, you can create your own food guide using the "my food guide" feature of *Eating Well with Canada’s Food Guide: First Nations, Inuit and Métis*.

The Dietitians of Canada website also features the *EatTracker* tool (See [www.eattracker.ca](http://www.eattracker.ca)) which allows you to enter your daily food intake to help track your food choices and exercise to help meet your goals. A dietitian can also help you create a specific plan to meet your specific needs (call 811 or you may want to visit [www.healthlinkbc.ca](http://www.healthlinkbc.ca)). If you do not have internet access, any member of your health care team can provide you with hard copies of these resources.

Although you may not have a dietitian directly in your community, there are tele-health services available and registered dietitians will work with you to create a plan to improve your health. There is also a cancer dietitian based in Prince George that provides tele-health services throughout Northern BC. Any member of your health care team can put you in contact with these dietitians. If you have internet access, you can also use the ‘find services tool’ within HealthLinkBC ([www.healthlinkbc.ca/servicesresources](http://www.healthlinkbc.ca/servicesresources)) to contact these dietitians.
Managing Some of the Side Effects of Cancer and its Treatment

Body Weight

Achieving and maintaining a healthy body weight is important for all Canadians not just cancer survivors. A healthy body weight lowers your risk of cancer recurrence and reduces the risk for many other diseases including heart disease, diabetes, stroke, high blood pressure, arthritis and dementia. Excess body fat is also associated with higher levels of the hormone insulin, and insulin resistance, which can increase risk for some types of cancer recurrence.

For an outline of the food journal see Appendix D

Resources:
Traditional Food Fact Sheets.
http://www.fnhc.ca/pdf/Traditional_Food_Facts_Sheets.pdf
Healthy Food Guidelines for First Nations Communities.
Food and Nutrition - Nutrition Labelling
http://www.hc-sc.gc.ca/fn-an/label-etiquet/nutrition/fni-pni/nutri-kit-trousse/fn_int-.

For information on the big picture of healthy eating see appendix E and recommended cookbooks see appendix F

Alcohol

Research shows that alcohol increases the risk of cancer specifically in the mouth, throat, larynx (voice box), esophagus (swallowing tube from mouth to stomach), liver and breast. As the amount of alcohol a person drinks increases, the risk of developing cancer increases. The link between alcohol consumption and certain cancer type recurrence is not as strong.
Physical Activity

Physical activity is an important part of healthy living. It can improve how your body works, build your strength and fitness and add to your quality of life. It can also help you better manage symptoms and reduce anxiety, depression, and fatigue. Further, physical activity can also help with stress and weight management and give you with a more positive body image.

Check with your health care team before increasing your physical activity. If you have anemia (low blood count), a weakened immune system or problems with nerves that affect your balance, you may need to take special precautions. You should be aware that pain medications, such as anti-inflammatory medications, can mask pain related to physical activity. Injuries should be taken seriously and looked after right away.

Use the resource below for information on funding for some supplies that can help you get physically active.

Resources:
http://www.fnhc.ca/index.php/initiatives/community_health/physical_activity/

When beginning any form of physical activity, consider your starting level and set a timeframe with short and long-term goals. Exercise for Health recommends at least 30 minutes per day of moderate exercise, 5 days a week. People who have been inactive for some time, however, should start with 10 minutes per day (or less) and increase as fitness improves. As your fitness improves, you can increase your activity 10 minutes at a time.

Measure your level of exertion based on your breathing. In moderate exercise, you should be able to talk in full sentences. In vigorous exercise, you will only be able to talk in short phrases. If you feel that you are working, you probably are. It is important to listen to your body and be aware of your how much it can take.
Exercise and Healthy Living
You might find yourself anxious to return to good health after treatment. The recommendations for cancer survivors are the same as those for anyone wanting to live a healthier lifestyle.

Small changes such as berry picking, setting snares or traps or going for a walk instead of driving are great ways to introduce more activity into your routine. Make sure you get your doctor’s okay before doing any exercise.

Benefits of Exercise:
- Improved sense of well-being, mood and self-esteem
- Improve memory
- Quicker recovery and may lower chance of recurrence
- Improved strength, endurance, muscle and bone strength
- Increased life expectancy
- Decreased depression, anxiety and fatigue
- Decreased symptoms of menopause and arthritis

Research shows that exercise benefits the heart, lungs and other organs and can reduce the risk of cancer recurrence. Ease into any new routines to allow your body to adjust. This will also ensure that the changes become a part of your life and not just a phase.

When we are not well we tend to separate ourselves from our traditional way of knowing and participating in traditional activities. On our path to healing, it is important to incorporate traditional activities into our daily lives.

Begin by seeking support from others and establishing connections with family members and friends who are hunters, trappers, fishers or gatherers.

Re-establish your spiritual connections to the land.

Focus on living and maintaining a healthy life that includes traditional activities that includes being on the land and participating in hunting, fishing, trapping or gathering in any capacity that you are comfortable with.

Strengthening your emotional, spiritual, mental and physical well being is important for improving your overall health.
**Sun Exposure**

Avoid overexposure to the sun and sunburns. Skin that has been radiated may remain sensitive to the sun after radiation treatment has ended.

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**Be Sun Smart:**

- Use sunscreen of at least SPF15. Check the expiry date on the bottle as old sunscreen will not protect you from sun damage
- Re-apply at least every two hours or after swimming or sweating
- Seek shade especially between 10 a.m. and 3 p.m.
- Cover yourself with clothing and wear a hat
- If you are outdoors on a sunny day in the winter, you still need sunscreen

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**Cleansing Ceremonies**

Historically, sweet grass and sage have been used for traditional ceremonies such as Smudging, although it is recognized that not all communities participate in this activity. However, in recent years commercial tobacco use (including smoking and chewing tobacco) has increased significantly.

Commercial tobacco is the single most preventable cause of death, disease and disability. All tobacco users have a higher risk of numerous chronic diseases and tobacco use is responsible for 30% of all cancer deaths.

The harmful effects of smoking on health is widely known and there are several programs to help you quit.

If you smoke, and would like information on quitting, please contact a member of your health care team.

Provincial programs (British Columbia) exist to provide you with different stop smoking products free of charge.

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**Resources:**
Dial 8-1-1 and ask for smoking cessation help
What kind of lifestyle changes can you think about making?

<table>
<thead>
<tr>
<th>Healthy Living After Cancer</th>
<th>Suggested Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifestyle change suggestions (ie. quit smoking, active living, traditional activities)</td>
<td></td>
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<td>1.</td>
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<td>2.</td>
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Part 4: Resources Specific to Northern BC and Financial Information

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- Rural and Remote Survivorship
- Oncology Clinics in Northern BC
- Tele-health Locations
- Health and Healing Service Providers
- Community Services and Friendship Centers
- Financial Information
Part 4: Resources Specific to Northern BC and Financial Information

The BC Cancer Agency Centre for the North
The new Centre for the North in Prince George provides services such as medical oncology, radiation oncology, pharmacy, patient and family counseling, oncology nutrition and volunteer services. The centre is located beside the University Hospital of Northern BC. More information on the centre can be found online by visiting the website at: www.bccancer.bc.ca/RS/north/default.htm the Centre for the North switchboard can be reached at 1-250-645-7300.

The Centre for the North also has an Aboriginal Cancer Care Coordinator who is available to assist you and your family through their cancer journey. She can be reached at 250-645-7300 extension 687553 or ask for her at the Information Desk.

For more information on the difference between the BC Cancer Foundation, the BC Cancer Agency, and the Canadian Cancer Society please see Appendix I

Rural and Remote Survivorship
Individuals living in rural, remote and northern regions of Canada can face different cancer survivorship issues than urban populations including higher travel costs and distances, challenging terrain and/or weather, less access to services and social support, cultural differences, loss of income, lifestyle risks, and other issues related to being away from home. The following outlines some specific helpful resources:

Northern Health Website: www.northernhealth.ca
Northern Health Connections
Medical transportation: www.northernhealth.ca/nhconnections
Telephone: 1-888-647-4997

Aboriginal Cancer Care Strategy (ACCS)
The ACCS and the Aboriginal Cancer Care Advisory Committee work to develop and ensure strategies that are specific and respectful of the Aboriginal population in Northern BC. Interested individuals can become involved in the committee to help guarantee that Aboriginal needs are being heard and addressed in each community across the North.

http://www.northerncancerstrategy.ca/AboriginalHealth/AboriginalCancerCareStrategy.aspx

Aboriginal Cancer Care Advisory Committee:
http://www.northerncancerstrategy.ca/AboriginalHealth/AboriginalCancerCareAdvisoryCommittee.aspx

The Northern Cancer Control Strategy
The Northern Cancer Control Strategy is focused on enhancing support programs throughout the North for cancer patients and their families www.northerncancerstrategy.ca
The Northern Cancer Control Strategy- Aboriginal Health Brochure:

Regional Oncology Social Work Program

This program provides counseling, information about resources, and support with practical matters for patients and their families across Northern BC. Additionally, it focuses on helping communities with knowledge of the emotional and mental aspects people living with cancer face. They can be reached at (250) 645-7342.

Mental Health and Addictions
Northern Health Interior Mental Health and Addictions Screening: Community Response Unit (CRU) Call 250-565-2668.

Oncology Clinics in Northern BC:

**Dawson Creek** and District Hospital
11100 13 Street,
Dawson Creek, BC V1G 3W8
Phone: (250) 782-8501

**Fort St John** Hospital and Health Centre
9636 100 Avenue,
Fort St. John, BC V1J 1Y3
Phone: (250) 262-5200

**Haida Gwaii**, Queen Charlotte Islands General Hospital
3209 Oceanview Drive, BC
V0T 1S0
Phone: (250) 559-4300
Fax: 250-559-4312

**Kitimat** Hospital
Kitimat General Hospital,
920 Lahakas Blvd Kitimat, BC
Phone: (250) 632-2121

**Prince George** University Hospital of Northern BC
1475 Edmonton S. Prince George,
British Columbia V2M 1S2
Hospital switchboard: (250) 565-2000

**Prince Rupert** Regional Hospital
1305 Summit Ave,
Prince Rupert, BC V8J 2A6
Phone: (250) 624-2171
Fax: (250) 624-2195

**Quesnel**: GR Baker Memorial Hospital
543 Front Street,
Quesnel, BC V2J 2K7
Phone: (250) 985-5600

**Smithers**: Bulkley Valley District Hospital
3950 8th Avenue, PO Box 370.
Smithers, BC V0J 2N0
Phone: (250) 847-2611
Fax: (250) 847-2446

**Terrace**: Mills Memorial Hospital
4720 Haugland Ave, Terrace, BC
Phone: (250) 635-7630
Fax: (250) 635-7639

**Vanderhoof**: Ruby Ellen Van Andel Cancer Clinic
3255 Hospital Road
Vanderhoof, BC
V0J 3A2
Phone: (250) 567-2211
Fax: (250) 567-5684
Tele-health Locations

The following communities have Tele-health equipment available in their local hospital. If you would like to consider using Tele-health, please talk to your Health Care Provider to discuss whether or not you are eligible to use Tele-health. This could reduce travel time.

Chetwynd  Fort St. John  Prince George  Terrace  Dease Lake  Hazelton  Prince Rupert  Vanderhoof  Fort Nelson  Kitimat  Queen Charlotte  Masset  Smithers

Tele-health is currently being piloted by Carrier Sekani Family Services (CSFS) in the following First Nations communities:

Takla Landing  Stellat’en  Yekooche
In the near future, all 11 member communities of CSFS will have tele-health capacity. These communities include:

- Tachet
- Cheslatta Carrier Nation
- Nee Tahi Buhn
- Skin Tyee
- Fort Babine
- Nadleh Whut’en
- Saik’uz
- Stellat’en
- Takla Landing
- Wet’suwet’en
- Yekooche

**Health and Healing Service Providers**

**Atlin Outpost Hospital**
PO Box 330
Atlin, BC VOW 1A0
Phone: (250) 651-7677

**Central Interior Native Health Society (Medical Clinic)**
1110 Fourth Ave
Prince George, BC V2L 3J3
Phone: (250) 564-4422

**Fort Nelson First Nations Health Clinic**
RR #1, Mile 295 Alaska Highway
Fort Nelson, BC V0C 1R0
Phone: (250) 774-7257
Email: lorrainebehn@fnnation.ca

**Gitanmaax Health Station**
PO Box 223
Hazelton, BC V0J 1Y0
Phone: (250) 842-6320
Email: dorthylattie@gitsxan.net

**Gitmaxmak’ay Nisga’a Prince Rupert/Port Edward Society**
301-860 3rd Ave West
Prince Rupert, BC V8J 1M6
Phone: (250) 627-1595
Toll-Free: 1-866-627-1590
Fax: (250) 627-1575
Email: gitnispr@citytel.net
Website: www.nnkn.ca

**Gitsegulka Health Centre**
165 Howe Street St
Hazelton, BC, V0J 2R0
Phone: (250) 849-5231

**Gitwangak Health Centre**
149 Bridge Street
Kitwanga, BC, V0J 2A0
Phone: (250) 849-5555

**Gitwanga Health Clinic**
PO Box 223
Hazelton, BC V0J 1Y0
Phone: (250) 842-5165
Toll-Free: 1-800-663-9935
Email: ehg@gitsxan.net

**Hagwilget Health Station**
Po BIX 460
New Hazelton, BC, VOJ2J0
Phone: (250) 842-5272

**Gitxsan Health Society**
PO Box 223
Hazelton, BC V0J 1Y0
Phone: (250) 842-6320
Toll-Free: 1-800-663-9935
Email: ehd@gitsxan.net

**Hartley Bay Nursing Station**
341 Wee Xaa Ave
Hartley Bay, BC, VOV 1A0
Phone: (250) 841-2556
Email: hbnshd@citytel.net

**Iskut Valley Health Services**
PO Box 90, Iskut, BC, V0J 1K0
Toll free: 1-866-667-6607
Phone: (250) 234-3511
Email: Info@ivhs.ca

**Kispiox Health Centre**
2515 Mary Blackwater Avenue
Kispiox I. R. No. 1
Phone: (250) 842-6320

**Kitamaat Village Health Centre**
PO Box 1049
Kitamaat Village, BC, VOT 1KO
Phone: (250) 639-9361
Email: Imorrison1@uniserve.com
Kitkatla Nursing Station  
PO Box 150  
Kitkatla, BC, V0V 1C0  
Phone: (250) 848-2254  
Email: dmoody@gitxaala.com  
Email: bgamble@gitxaala.com

Kitselas Health Station  
2225 Gitaus Road  
Terrace, BC, V8G 0A9  
Phone: (250) 635-5084  
Toll-Free: 1-888-777-2837  
Website: www.kitselas.com

Lake Babine Health Services  
PO Box 297  
225 Sus Ave  
Burns Lake, BC V0J 1E0  
Phone: (250) 692-4720  
Toll-Free: 1-877-692-0039  
Website: www.lakebabine.com

Lax-Kw’alaams Health Centre  
1602 Legaic Street  
Laxkwalaams, BC V0V 1H0  
Phone: (250) 625-3331  
Email: healthdr@citytel.net

Metlakatla Health Station  
PO Box 459  
Prince Rupert, BC V8J 3R2  
Phone: (250) 628-3234

Moricetown Health Centre  
204 Beaver Rd  
Smithers, BC V0J 2N1  
Phone: (250) 847-9328  
Toll-Free: 1-800-881-1218  
Email: juanita.nikal@moricetown.ca  
Website: www.moricetown.ca

Nak’azdli Health Centre  
PO Box 1238  
Fort Saint John, BC V0J 1P0  
Phone: (250) 996-7400

Nisga’a Valley Health Authority  
PO Box 234  
4920 Tait Ave  
New Aiyansh, BC V0J 1A0  
Phone: (250) 633-5000  
Toll-Free: 1-888-233-2212  
Fax: 250-633-2512  
Website: www.nisgaahealth.bc.ca

Old Masset Village Council/Haida Health Centre  
PO Box 176, 347 Eagle Ave  
Masset, BC V0T 1M0  
Phone: (250) 626-3911  
Email: allison.russ@omvc.ca

Port Simpson Nursing Station  
1602 Legaic Street  
Laxkwalaams, BC V0V 1H0  
Phone: (250) 625-3331

Skidegate Health Centre  
PO Box 1348  
Skidegate, BC V0T 1S1  
Phone: (250) 559-4610

Sik-e-dakh Health Station  
P.O.box 223  
Hazelton, BC V0C 1Y0  
Phone: (250) 842-6876

Tahltan Health and Social Services Authority  
PO Box 59  
Telegraph Creek, BC V0J 2W0  
Phone: (250) 235-3805 or (250) 235-3350  
Email: info@thssa.ca  
Website: www.thssa.ca

Takla Nursing Station  
General Delivery  
Takla Landing, BC  
V0J 2T0  
Phone: (250) 996-7780
**Telegraph Creek Nursing Station**  
PO Box 112  
Telegraph Creek, BC V0J 2W0  
Phone: (250) 235-3211

**T’azt’en Health Centre**  
PO Box 1899  
Fort Saint John, BC V0J 1P0  
Toll-Free: 1-866-648-3294  
Phone: (250) 648-3350

**Treaty 8 Tribal Association**  
10233 100th Ave  
Fort St John, BC V1J 1Y8  
Phone: (250) 785-0612  
Toll-Free: 1-877-785-2021  
Fax: (250) 785-2021  
Email: reception@treaty8.bc.ca  
Website: www.treaty8.bc.ca

**Tsay Keh Dene Health Clinic**  
10 Main Street  
Tsay Keh Dene, BC V0J2C0  
Phone: (250) 993-2181

**Gya Wa Tlaab Healing Centre Society**  
PO Box 1018  
322 Haisla Ave  
Haisla, BC V0T 2B0  
Phone: (250) 639-9817  
Email: gyawatlaab@haislanetwork.ca  
Website: www.firstnationstreatment.org

**Yinkadinee Neytsi Jegh Be Wellness Centre**  
PO Box 297  
Burns Lake, BC V0J 1E0  
Phone: (250) 692-0039

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**Community Services and Friendship Centers**

**Carrier Sekani Family Services (Prince George)**  
987 Fourth Ave  
Prince George, BC V2L 3H7  
Phone: (250) 562-3591  
Toll-Free: 1-800-889-6855  
Fax: (250) 562-2272  
Website: www.csfs.org

**Carrier Sekani Family Services (Vanderhoof)**  
PO Box 1219  
240 W Stewart St  
Vanderhoof, BC V0J 3A0  
Phone: (250) 567-2900  
Toll-Free: 1-866-567-2333

**Carrier Sekani Family Services (Burns Lake)**  
PO Box 1475  
485 Hwy 16  
Burns Lake, BC V0J 1E0  
Phone: (250) 692-1800  
Fax: (250) 692-1877

**Fort Nelson Aboriginal Friendship Society**  
PO Box 1266  
Fort Nelson, BC V0C 1R0  
Phone: 250-774-2993

**Keeginaw Friendship Centre**  
10208 95th Ave  
Fort Saint John, BC V1J 1J2  
Phone: (250) 785-8566  
Email: friendship@solarwinds.com

**Nezul Be Hunuyeh Child & Family Services Society**  
PO Box 1180  
700 Stuart Dr W  
Fort St James, BC V0J 1P0  
Phone: (250) 996-6806

**North Cariboo Aboriginal Family Program Society**  
#2-423 Elliott St.  
Quesnel, BC V2J 1Y6  
Phone: (250) 992-9160  
Fax: (250) 992-9157  
Email: ncafps@longname.ca
North East Native Advancing Society (NE)
PO Box 6847
10328 101 Avenue, Fort St. John, BC V1J 2B5
Fort St John, BC V1J 4J3
Phone: (250) 785-0887
Fax: (250) 785-0876
Email: nenas@nenas.org
Website: www.nenas.org

Northwest Inter-Nation Family & Community Services
4562 Queensway Dr
Terrace, BC V8G 3X6
Phone: (250) 638-0451 or 250-622-2514 (Prince Rupert)
Toll-Free: 1-888-310-3311
Fax: (250) 638-8930
Email: info@nifcs.org
Website: www.nifcs.org

Dawson Creek Aboriginal Family Resources Society
14-1405 102 Ave
Dawson Creek, BC V1G 2E1
Phone: (250) 782-1169
Toll-Free: 1-866-782-1169
Fax: (250) 782-2644
Email: general@aboriginalfs.net

Dze L K’ant Friendship Centre - Houston Program Office
PO Box 2920 (Smithers)
3383 11th St
Houston, BC V0J 2N0
Phone: (250) 845-2131
Email: ecd@hscf.ca

Dze L K’ant Friendship Centre
PO Box 2920 Smithers
1188 Main Street
Smithers, BC V0J 2N0
Phone: (250) 847-5211
Fax: (250) 847-5144
Website: www.dzelkant.com

Nawican Friendship Centre
1320 102nd Ave
Dawson Creek, BC V1G 2C6
Phone: (250) 782-5202
Fax: (250) 782-8411
Email: nfcoffice@nawican.ca

Quesnel Tillicum Society, Native Friendship Centre
319 N Fraser Dr, Quesnel, BC V2J 1Y9
Phone: (250) 992-8347
Website: www.quesnel-friendship.org

Tansi Friendship Centre Society
PO Box 418
5301 S Access Rd
Chetwynd, BC V0C 1J0
Phone: (250) 788-2996
Fax: (250) 788-2353
Email: tansifcs@persona.ca

Prince George Native Friendship Centre
1600 3rd Ave
Prince George, BC V2L 3G6
Phone: (250) 564-3568
Fax: (250) 563-0924
Email: info@pgnfc.com
Website: www.pgnfc.com

Kermode Friendship Society
3313 Kalum St
Terrace, BC V8G 2N7
Phone: (250) 635-4906
Fax: (250) 635-3013
Email: execassist@kermode-fs.ca
Website: www.kermodefs.ca
Financial Information

Programs and resources are available through the federal and provincial governments to lessen the financial impact of cancer. Provincialy insured services should cover the majority of encountered medical expenses. For health-related goods and services that are not covered provincially, Health Canada’s First Non-Insured Health Benefits (NIHB) Program may provide coverage.

Non-Insured Health Benefits
First Nations and Inuit Health, Health Canada
757 West Hastings Street, Suite 540
Vancouver, BC V6C 3E6

Telephone: (604) 666-3331
Toll-free: 1-800-317-7878 Fax: (604) 666-3200
Fax (toll free): 1-888-299-9222

The NIHB Guidebook, outlining eligibility and covered services can be accessed at:

Prescription Drug Expenses
Provincial and federal programs exist to help lower the cost of prescription drugs. For more information contact:

NIHB Drug Benefits:

How do I access NIHB pharmacy benefits?
If you are eligible under Health Canada’s Non-Insured Health Benefits Program, as specified in the NIHB handbook, your prescription drug costs may be covered. You must first obtain the prescription from a physician or other licensed prescriber. You then must have the prescription filled at a pharmacy. If you have already done this you can be reimbursed using the above form. If you inform the pharmacist, and the pharmacy is registered with the NIHB Program, they will likely bill health Canada directly at no expense to you.

Application: https://pharmacare.moh.hnet.bc.ca
Telephone: 1-800-554-0250

Fair Pharmacare: Telephone: 1-800-663-7100 (Patients must self-register)
Financial Support Drug Program:
www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Emergency+Aid+Drug+Program/default.htm

BCCA Financial Information Pamphlet: available online and hard copy

Travel Assistance and Medical Transportation Benefits
Health Canada’s NIHB Program assists those eligible with transportation. Unless the medical visit is a result of an emergency, most medical transportation benefits must be approved prior to travel. The NIHB Program will help with all transportation expenses, potentially including assistance with meals and accommodation, to access medically necessary health services not available on reserve or in the community of residence. This can include accessing traditional healers and providing escorts for those requiring support.

More information is available at the above listed telephone numbers or on pages 12-16 of the NIHB Guidebook: http://www.hc-sc.gc.ca/fniah-spnia/pubs/nihb-ssna/yhb-vss/index-eng.php

The federal government of Canada also offers Canada Revenue Agency’s Travel Expenses Tax Credit and Medical Deductions - for those with receipts from travel expenses incurred during or as a result of treatment such as meals and vehicle expenses (gas, km).

Canada Revenue Agency:
Telephone: 1-800-959-8281

The Ministry of Health Medical Travel Assistance Program (TAP) - helps to alleviate the cost of certain travel expenses with a medical referral and by completing a Travel Assistance form stating the need for out-of-town treatment.
Telephone: 1-250-952-1587 or 1-800-661-2668
Visit: www.health.gov.bc.ca/cpa/1-800.html#travel

The provincial government of British Columbia offers a Medical Travel Accommodation Listing of hotels and inns in regions of B.C. that provide discounted rates of medical-related travel available at: http://csa.pss.gov.bc.ca/medicaltravel/

Northern specific, there is the Northern Connections bus:
www.northernhealth.ca/YourHealth/NHConnectionsmedicaltravelservice.aspx
The Canadian Cancer Society (CCS) also helps with financial assistance for certain medications and travel as well as information on wigs and prosthetics. www.cancer.ca or call 1-888-939-3333.

**Medical Supplies and Equipment Benefits**
Also under the Health Canada NIHB Program, eligible individuals and NIHB approved providers may be reimbursed for approved medical supplies and equipment. This may include mobility aids, ostomy supplies and devices, lifting and transfer aids, and several other general medical supplies and equipment. For a complete list please the NIHB website at: http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/med-equip/index-eng.php

**Child Care Benefits and Assistance**
The federal government of Canada offers *The Universal Child Tax Benefit* - a tax credit paid on a monthly basis for child care related expenses specifically for children under the age of six. www.cra-arc.gc.ca/bnfts/uccb-puge/menu-eng.html


The provincial government of British Columbia offers *The Child Care Subsidy* - a monthly payment offered to families based on their circumstance such as income, family size and children’s ages. This services is available by telephone at 1-888-338-6622 or online www.mcf.gov.bc.ca/childcare/subsidy_promo.htm

**Employment and Pension Plans**
The federal government of Canada offers *Employment Insurance Sickness Benefits* - available to those who are unable to work due to an illness, have 600 insured hours of accumulated work over the last year (previous to diagnosis) and have medical confirmation (from a doctor) regarding their illness. This program will provide 55% of your average insured earnings.

www.servicecanada.gc.ca/eng/sc/ei/benefits/sickness.shtml

*Canada Pension Plan Disability Benefits* - available to those who have contributed four out of six years to CPP with a ‘severe’ and ‘prolonged’ illness as deemed by a select medical adjudicator.


The provincial government of British Columbia offers *BC Employment Assistance* - to help those who are ‘temporarily or permanently’ unable to acquire basic necessities due to financial hardship. This program is available based on the individual’s income and asset levels.
*Hardship Assistance* can be accessed on a month to month basis if one is denied BC Employment Assistance.

*BC Employment and Assistance for Persons with Disabilities* can be accessed if an individual is significantly restricted in their ability to perform daily activities as documented by an authorized health care practitioner.

Available from the *BC Ministry of Housing and Social Development* at: 1-866-866-0800 or www.hsd.gov.bc.ca/bcea.htm

The information found in this subsection of the care plan was taken in part from: Canadian Breast Cancer Network. (2011) *Breast Cancer Survivor to Financial Survivor Rural and Remote.* www.cbcn.ca/index.php?pageaction=content.page&id=6582&lang=en
Part 5: Resources Specific to Common Cancer Diagnoses

Table of Contents

- Testicular Cancer
- Ovarian Cancer
- Uterine / Cervical Cancer
- Breast Cancer
- Leukemia
- Colorectal Cancer
- Thyroid Cancer
- Prostate Cancer
- Hodgkin Lymphoma
- Non-Hodgkin Lymphoma
- Lung
Part 5: Resources Specific to Common Cancer Diagnoses

The following list of websites have been compiled and reviewed by BC Cancer Agency librarians according to their established Inclusion/Removal Policy. This section outlines common cancer diagnoses and provides information on follow-up guidelines, resources, support websites, and available books and pamphlets. Some of the follow-up information sources and guidelines may be complicated, therefore be sure to discuss follow-up with your health care provider.

**General Information** on most tumour types, including: risk factors, screening, diagnosis, treatment, side-effects, and follow-up can be found at: [http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/default.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/default.htm)

(Hard copies of these resources should be available from your health care team)

### Testicular Cancer

#### Follow-up Guidelines

<table>
<thead>
<tr>
<th>Resource</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>BC Cancer Agency Follow-up Information and Guidelines</td>
<td><a href="http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Genitourinary/Testis/Management/Followup.htm">www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Genitourinary/Testis/Management/Followup.htm</a></td>
</tr>
</tbody>
</table>

#### Good places to start:

| Testicular Cancer Resource Centre (US) | [tcrc.acor.org/](http://tcrc.acor.org/) |

#### Support websites:

| Testicular Cancer: Health Talk Online | [www.healthtalkonline.org/Cancer/Testicular_Cancer](http://www.healthtalkonline.org/Cancer/Testicular_Cancer) |

#### Books and Pamphlets:

| ASCO Answers Testicular Cancer: Cancer.net | [www.cancer.net/sites/cancer.net/files/asco_answers_testicular.pdf](http://www.cancer.net/sites/cancer.net/files/asco_answers_testicular.pdf) |
**Ovarian Cancer**

**Follow-up Guidelines**

| BC Cancer Agency Follow-up Information and Guidelines | Epithelial: [www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Gynecology/OvaryEpithelial/Followup.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Gynecology/OvaryEpithelial/Followup.htm)  
   Non-Epithelial: [www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Gynecology/OvaryNonEpithelial/Followup.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Gynecology/OvaryNonEpithelial/Followup.htm) |

**Good places to start:**


**More Ovarian websites:**

| National Ovarian Cancer Coalition | [www.ovarian.org/](http://www.ovarian.org/)  
   Ovarian Cancer Canada | [www.ovariancanada.org/](http://www.ovariancanada.org/)  
   OvCaRe BC | [www.ovcare.ca/](http://www.ovcare.ca/) |

**Genetics websites:**

| Hereditary Breast and Ovarian Cancer Society of Alberta | [hbocsociety.org/](http://hbocsociety.org/) |

**Support websites:**

| Support and Information for Gynecological Cancer | [www.eyesontheprize.org/](http://www.eyesontheprize.org/) |

**Uterine / Cervical Cancer**

**Follow-up Guidelines**


**Good places to start:**

### Uterine sarcoma websites:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
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### Support websites:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support and Information for Gynecological Cancer</td>
<td><a href="http://www.eyesontheprise.org/">www.eyesontheprise.org/</a></td>
</tr>
</tbody>
</table>

### Breast Cancer

#### Follow-up Guidelines

| BC Cancer Agency Follow-up Information and Guidelines                  | [www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Breast/Followup/default.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Breast/Followup/default.htm) |

#### Good places to start:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Cancer, Now What?</td>
<td><a href="http://www.breastcancernowwhat.ca">www.breastcancernowwhat.ca</a></td>
</tr>
<tr>
<td>What is Breast Cancer?: Canadian Cancer Society</td>
<td><a href="http://www.cancer.ca">www.cancer.ca</a></td>
</tr>
</tbody>
</table>

#### More breast cancer websites:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
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</thead>
<tbody>
<tr>
<td>Breastcancer.org</td>
<td><a href="http://www.breastcancer.org">www.breastcancer.org</a></td>
</tr>
<tr>
<td>Breast Cancer: University Health Network</td>
<td><a href="http://wwwuhn.ca/Patients_Visitors/health_info/topics/b/breast_cancer.asp">wwwuhn.ca/Patients_Visitors/health_info/topics/b/breast_cancer.asp</a></td>
</tr>
<tr>
<td>Canadian Breast Cancer Foundation</td>
<td><a href="http://www.cbcf.org/">www.cbcf.org/</a></td>
</tr>
<tr>
<td>Canadian Breast Cancer Network</td>
<td><a href="http://www.cbcn.ca">www.cbcn.ca</a></td>
</tr>
<tr>
<td>Susan Love Research Foundation</td>
<td><a href="http://www.dslrf.org/">www.dslrf.org/</a></td>
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#### Inflammatory breast cancer websites:

<table>
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<tr>
<th>Website</th>
<th>URL</th>
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</table>
### Male breast cancer websites:

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<th>Title</th>
<th>URL</th>
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### Genetics and biology websites:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biology of the Mammary Gland</td>
<td>mammary.nih.gov/</td>
</tr>
</tbody>
</table>

### Support websites:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inflammatory Breast Cancer Research Foundation</td>
<td><a href="http://www.ibcresearch.org">www.ibcresearch.org</a></td>
</tr>
<tr>
<td>Willow Breast Cancer Support</td>
<td><a href="http://www.willow.org/">www.willow.org/</a></td>
</tr>
</tbody>
</table>

### Decision tools:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment Decision Tools: American Cancer Society</td>
<td><a href="http://www.cancer.org/treatment/findingandpayingfortreatment/treatmentdecisiontoolsandworksheets/index">www.cancer.org/treatment/findingandpayingfortreatment/treatmentdecisiontoolsandworksheets/index</a></td>
</tr>
</tbody>
</table>

### Practice guidelines:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questions and Answers on Breast Cancer- A Guide for Women and their Physicians</td>
<td><a href="http://www.cmaj.ca/content/suppl/2007/06/14/158.3.DC1">www.cmaj.ca/content/suppl/2007/06/14/158.3.DC1</a></td>
</tr>
</tbody>
</table>

### Clinical trials:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Surgical Adjuvant Breast and Bowel Project</td>
<td><a href="http://www.nsabp.pitt.edu/">www.nsabp.pitt.edu/</a></td>
</tr>
</tbody>
</table>

### Magazines

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abreast and the Rest</td>
<td><a href="http://www.abreastandtherest.ca">www.abreastandtherest.ca</a></td>
</tr>
<tr>
<td>Artemis - Johns Hopkins Breast Centre e-journal</td>
<td><a href="http://www.hopkinsbreastcenter.org/artemis">www.hopkinsbreastcenter.org/artemis</a></td>
</tr>
</tbody>
</table>

### Leukemia

#### Follow-up Guidelines

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
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</thead>
<tbody>
<tr>
<td>BC Cancer Agency Follow-up Information and Guidelines</td>
<td><a href="http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Leukemia/default.htm">www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Leukemia/default.htm</a></td>
</tr>
</tbody>
</table>

#### Good places to start:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>US National Cancer Institute</td>
<td><a href="http://www.cancer.gov/cancertopics/types/leukemia">www.cancer.gov/cancertopics/types/leukemia</a></td>
</tr>
<tr>
<td>Canadian Cancer Society (What’s Leukemia?)</td>
<td><a href="http://www.cancer.ca/en/cancer-information/cancer-type/leukemia/overview/?region=on">www.cancer.ca/en/cancer-information/cancer-type/leukemia/overview/?region=on</a></td>
</tr>
</tbody>
</table>

#### Survivors’ Stories:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leukemia and Bone Marrow Transplant Program (BC)</td>
<td><a href="http://www.leukemiabmtprogram.org/patients_and_family/survivors_stories/index.html">www.leukemiabmtprogram.org/patients_and_family/survivors_stories/index.html</a></td>
</tr>
</tbody>
</table>
### Leukemia websites:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leukemia and Lymphoma Society of Canada (BC/Yukon)</td>
<td><a href="http://www.llscanada.org/#/aboutllsc/chapters/bc/">www.llscanada.org/#/aboutllsc/chapters/bc/</a></td>
</tr>
<tr>
<td>Leukemia Research (UK)</td>
<td>leukaemialymphomaresearch.org.uk/</td>
</tr>
<tr>
<td>Adult Chronic Leukemia: American Cancer Society</td>
<td><a href="http://www.cancer.org/cancer/leukemia-acutelymphocyticallinadults/index">www.cancer.org/cancer/leukemia-acutelymphocyticallinadults/index</a></td>
</tr>
</tbody>
</table>

### Books and Pamphlets:

<table>
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<th>Title</th>
<th>URL</th>
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### Colorectal Cancer

#### Follow-up Guidelines

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#### Good places to start:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colon/Rectum Cancer: American Cancer Society</td>
<td><a href="http://www.cancer.org/cancer/colonandrectumcancer/index">www.cancer.org/cancer/colonandrectumcancer/index</a></td>
</tr>
<tr>
<td>Colon and Rectal Cancer: National Cancer Institute</td>
<td><a href="http://www.cancer.gov/cancertopics/types/colon-and-rectal">www.cancer.gov/cancertopics/types/colon-and-rectal</a></td>
</tr>
<tr>
<td>What is Colorectal Cancer?: Canadian Cancer Society</td>
<td><a href="http://www.cancer.ca/en/cancer-information/cancer-type/colorectal/overview/?region=on">www.cancer.ca/en/cancer-information/cancer-type/colorectal/overview/?region=on</a></td>
</tr>
</tbody>
</table>

### Genetics websites:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Familial Gastrointestinal Registry</td>
<td><a href="http://www.zanecohencentre.com/fgicr">www.zanecohencentre.com/fgicr</a></td>
</tr>
</tbody>
</table>

### Ostomy Websites

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Ostomy Association of Canada</td>
<td><a href="http://www.ostomycanada.ca/">www.ostomycanada.ca/</a></td>
</tr>
</tbody>
</table>

### Practice Guidelines

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detection of Colorectal Cancer for Patients (BC Medical Assc)</td>
<td><a href="http://www.bcguidelines.ca/pdf/col_pat.pdf">www.bcguidelines.ca/pdf/col_pat.pdf</a></td>
</tr>
</tbody>
</table>
# Thyroid Cancer

**Follow-up Guidelines**

|------------------------------------------------------|---------------------------------------------------------------------|

**Good places to start:**

<table>
<thead>
<tr>
<th>Thyroid Cancer: American Cancer Society</th>
<th><a href="http://www.cancer.org/cancer/thyroidcancer/index">www.cancer.org/cancer/thyroidcancer/index</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Thyroid Cancer: Cancer.Net</td>
<td><a href="http://www.cancer.net/cancer-types/thyroid-cancer">www.cancer.net/cancer-types/thyroid-cancer</a></td>
</tr>
<tr>
<td>Thyroid Cancer: National Cancer Institute</td>
<td><a href="http://www.cancer.gov/cancertopics/types/thyroid">www.cancer.gov/cancertopics/types/thyroid</a></td>
</tr>
</tbody>
</table>

**More Thyroid Cancer websites:**

| Thyroid Cancer Canada | [www.thyroidcancercanada.org/](http://www.thyroidcancercanada.org/) |

# Prostate Cancer

**Follow-up Guidelines**

<table>
<thead>
<tr>
<th>BC Cancer Agency Follow-up Information and Guidelines</th>
<th><a href="http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Genitourinary/Prostate/Management/Followup/default.htm">www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Genitourinary/Prostate/Management/Followup/default.htm</a></th>
</tr>
</thead>
</table>

**Good places to start:**

|----------------------------------------|---------------------------------------------------------------------|

**Support websites:**

<table>
<thead>
<tr>
<th>Support Group Listing (Prostate Cancer Foundation of BC)</th>
<th><a href="http://www.prostatecancerbc.ca/support/listing.php">www.prostatecancerbc.ca/support/listing.php</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>PSA Rising</td>
<td><a href="http://www.psa-rising.com/">www.psa-rising.com/</a></td>
</tr>
</tbody>
</table>
## Decision Tools and Practice Guidelines

| Treatment Summaries: Prostate Cancer (NCCN) | [www.nccn.com/index.php](http://www.nccn.com/index.php) |

## Hodgkin Lymphoma

### Follow-up Guidelines

| BC Cancer Agency Follow-up Information and Guidelines (Please refer to Section 2.4) | [www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Lymphoma/HodgkinDisease.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Lymphoma/HodgkinDisease.htm) |

### Good places to start:


### Books and Pamphlets:


## Non-Hodgkin Lymphoma

### Follow-up Guidelines

| BC Cancer Agency Follow-up Information and Guidelines | [www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Lymphoma/FU.htm](http://www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Lymphoma/FU.htm) |

### Good places to start:

Books and Pamphlets:


Lung

Good places to start:

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<td>Lung Cancer small cell: American Cancer Society</td>
<td><a href="http://www.cancer.org/cancer/lungcancer-smallcell/index">www.cancer.org/cancer/lungcancer-smallcell/index</a></td>
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Books and Pamphlets:


For a listing of resources other survivors have found helpful see appendix G, for a recommended reading list see appendix H
Appendix

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BC CANCER AGENCY, BC CANCER FOUNDATION, CANADIAN CANCER SOCIETY
Appendix

A. Tips on Memory & Concentration

Both daily mental and physical activity will increase memory and other mental functions. Training your brain by reading, doing puzzles, learning new skills and hobbies all help to strengthen your brain (think of it as mental housekeeping - unused brain power will collect ‘dust’). Physical activity is also important as it increases your blood flow and triggers muscle groups and their various control centers in the brain.

You can cope better with symptoms of memory and concentration by making sure you are well rested, paying attention, organizing yourself and writing reminder notes. Support groups can also help by learning of others’ experiences by sharing your own.

B. Ways to Deal with Stress

Start the day by putting yourself on your To-Do list. Make you a priority! Spend time doing the activities you love. Deep breathing and active relaxation are healthy and helpful techniques for dealing with stress.

Deep Breathing

Use deep breathing for a calming effect before an event that makes you anxious. Deep breathing is a simple and effective way to relieve tension and increase comfort. It can make you more comfortable if you are experiencing episodes of pain, fatigue or nausea. This method can be used before you go to bed to help ease you into a restful sleep. You can practice deep breathing anywhere.

**Deep breathing technique:**

1. Place yourself in a comfortable position with legs and arms uncrossed
2. Take the palm of one hand on your chest; place the other on your abdomen
3. Breathe normally. Notice how your hands rise and fall with your breathing
4. Picture your stomach as a balloon as you do this
5. Concentrate on breathing from your stomach silently keeping count
6. Say to yourself ‘relax’ each time you exhale

Try to practice this method for 5 minutes every day

Muscle Relaxation

By learning how to relax your muscles, you can actively lower your blood pressure, heart rate and breathing rate. Progressive muscle relaxation is the tensing and then relaxing of each muscle group of the body, one group at a time. In a comfortable position, breathe slowly taking deep breaths. The idea is to tense one muscle group at a time and hold for 5-10 seconds (if a part of the body is painful or tender, do not tense in that area). Release the
tension and stay relaxed for 10-20 seconds. You can tense the areas of the body in any order and as much as you like. There are also tapes available that can guide you through this process. Examples of this method: clench hands into fists, flex biceps, tense abdomen, eyes (close tight, hold, and release), and arch your back to name a few.

C. Self Esteem

Low self-esteem can have a negative effect on all aspects of your quality of life. People who think poorly of themselves for long periods of time can still make simple changes to improve their self esteem. Here are four steps to start recovering your positive sense of self.

**Step 1: Identify the main sources**
What lowers your self-esteem? A troubling environment at work or home? Problems in certain relationships? Once you identify the root of the problem you can start targeting your action plan for success.

**Step 2: Awareness of your inner voice**
Pay attention to your inner voice as you come across situations which make you say negative things about yourself. You will need to decide if you are being reasonable or if you are thinking about it in an unrealistic way. Were you thinking about any positive points or was your inner conversation mostly negative?

**Step 3: Challenge negative or unrealistic thoughts**
The first thought that comes to your mind in these situations needs to be checked as to whether it makes sense. Your thought process may be so set that it will be difficult at first. You need to question whether your view of situations that leave you with thoughts that lower your self-esteem are based on facts or just your own opinion.

**Step 4: Changing the way you evaluate yourself**
Now that you have identified the root of your self-esteem issues, your increased awareness of your inner voice and negative thought processes, it is time to start taking a positive outlook.
Thought processes that are counterproductive:

- **All-or-nothing thinking.** Pass or fail style of thinking: “If I can’t do this, I am a complete failure”.
- **Mental Filtering** perceiving only the bad side of every situation: “I made a mistake and now everyone will think I’m incompetent”.
- **Converting positives into negatives.** You are unable to accept compliments or achievements: “I only succeeded because it wasn’t hard to do”.
- **Jumping to negative conclusions.** In the absence of any evidence, you still reach a negative conclusion: “My friend didn’t return my call so they must be mad at me for something I did”.
- **Mistaking feelings for facts** Confusing your own opinion with facts: “I feel useless therefore I am useless”.
- **Self put-downs.** Combination of overreacting to a situation and undervaluing yourself: “I am not worthy of succeeding”.

Thought processes that are realistic and constructive:

- **Hopeful statements.** Treat yourself how you would treat others. If you feel confident you are capable of the task at hand, you are more likely to succeed: “This isn’t easy, but I can do it”.
- **Forgive yourself.** Nobody is perfect and mistakes happen, but you shouldn’t change your opinion of yourself: “I didn’t do it right the first time, but that doesn’t mean I am incapable of getting it right the second time”.
- **Avoid unrealistic goals.** If you are constantly placing demands on yourself and others that are not possible, you are only setting yourself up to fail.
- **Focus on the positive.** If you doubt your abilities and self-worth, remind yourself of your accomplishments and other aspects of your life of which you are appreciative.
- **Re-label upsetting thoughts.** If your inner voice is saying you can’t do something, think of a way to change the situation to make it more manageable: “How can I make this less stressful?”
- **Encourage yourself.** You need to compliment yourself. If you feel that something went well, take a moment to acknowledge yourself and use it to inspire your next task.

Don’t feel discouraged if you need to return to step one. Do this as often as you need to. Habits can be hard to break, but if you work at it, you will notice your self-esteem begin to improve and benefit from increased confidence in all aspects of your life. If you are unable to resolve self-esteem issues on your own, or if your self-esteem interferes with your daily functioning, seek professional help.
D. **Food Journal**

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<th>Current emotions/mood</th>
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E. The Big Picture on Healthy Eating

This section provides suggestions and tools to help with changes toward healthier eating plus lists ways to identify and remove challenges.

Time
Many people wonder where they will find time to look for recipes, make grocery lists, or go shopping. Having a plan for what you are going to eat for several days or even a week in advance can make this process much easier.

Feeding Others at Home
If you have others in your household, they may not understand or want to change their eating habits in the same way you do. Try involving them in making healthy choices by inviting them to take part in the meal planning by picking a meal or adding a recipe or dish suggestion. While not all suggestions will be healthy choices, there is room for the occasional treat.

Fatigue
If the thought of cooking a meal, making a grocery list, or shopping sounds exhausting, you are not alone. Fatigue can be a side effect of cancer treatment that may last for some time. Try breaking tasks into smaller, more manageable steps. People who helped out along your cancer journey are often still available, but may not know how they can help now. Ask friends and family to help with planning meals, picking up groceries or preparing meals.

At the Store
Check the “Nutrition Facts” label on products you are choosing and avoid items that are high in trans fats (common in processed and packaged foods). Also, be aware of the ingredients. If you are buying an item because it is described as ‘whole grain’, for example, that should be one of the first ingredients listed. Don’t buy unhealthy items. If you don’t bring them home, you are less likely to eat them.

Meal Preparation
As much as possible, prepare meals using low-fat cooking methods such as broiling, baking, steaming, and poaching. When your meal requires frying, use healthy unsaturated fats such as olive oil or canola oil. Also, add herbs and spices for flavoring in place of salt or rich dressings and sauces which may have extra fat, salt and sugar. Keep smoked, half smoked and dried meat and fish as snacks for traveling.

Staying on Track
Whether you are trying to be more active, eat more vegetables, or watch your fat intake, setting SMART goals can help you to stay focused.

1 Specific: Have one focus for each goal rather than a general idea.
2 Measureable: Set quantities for your goal.
3 Attainable: Set goals that you can reach! Small goals are more achievable.
4 Relevant: Stay motivated with a goal that matters to you.
5 Time based: Set a timeline for this goal be it daily, weekly or monthly.
F. Recommended Cookbooks

Recommended Cookbooks:
  http://www.naho.ca/metis/research/health-promotion/

Other cookbooks you may find of interest:
- **Lighthearted at home**: The Very Best of Anne Lindsay by Anne Lindsay, 2010
- **Choices Menus**: Cooking for One or Two, by Margorie Hollands, 2011
- **Dieticians of Canada**: Cook! 275 Recipes Celebrate Food from Field to Table, by Mary Sue Waisman, 2011
- **HeartSmart**: The Best of Heartsmart Cooking by Bonnie Stern, 2006
- **Rose Reisman’s Family Favorites**: Healthy Meals for Those that Matter Most, by Rose Reisman, 2010

Recommended Websites:
- **Canadian Living - Nutrition and Recipes** www.canadianliving.com/health/nutrition
- **Heart Healthy Recipes** www.heartandstroke.com/site/c.ikIQLcMWJtE/b.3484019/k.6437/HeartHealthy_Recipes.htm
- **Mayo Clinic - Heart Healthy Recipes** www.mayoclinic.com/health/heart-healthy-recipes/RE00098

G. Listing of Resources Other Survivors Have Found Beneficial

<table>
<thead>
<tr>
<th>Services and Resources</th>
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<tr>
<td>The Pharmacist and/or The BC Cancer Agency ‘phone the pharmacist’</td>
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<td>Naturopath</td>
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<td>Dietitian</td>
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<tr>
<td>Physiotherapy and/or Massage therapy and/or deep tissues massage (scar tissue)</td>
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<tr>
<td>Vocational rehabilitation</td>
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<tr>
<td>Emotional Freedom technique</td>
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<tr>
<td>Home care nurses</td>
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<tr>
<td>The Canadian Cancer Society</td>
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<tr>
<td>Cancer Connections</td>
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<tr>
<td>Cancer Navigator</td>
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<tr>
<td>Counseling and/or the use of Spiritual Healers</td>
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<tr>
<td>Healing Touch and/or Relaxation sessions</td>
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<tr>
<td>Support groups</td>
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<td>Relay for Life</td>
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**H. Recommended Reading List**

**For Survivors:**


“Offers inspiration, affirmation, and straight-from-the heart talk about the questions that haunt cancer survivors.”

**Love, medicine and miracles: lessons learned about self-healing from a surgeon’s experience with exceptional patients** by Bernie Siegel (1986).

“Unconditional love is the most powerful stimulant of the immune system. The truth is: love heals. Miracles happen to exceptional patients every day – patients who have the courage to love, those who have the courage to work with their physicians to participate in and influence their own recovery.”

**Picking up the pieces: moving forward after surviving cancer** by Sherri Magee & Kathy Scalzo (2006).

“Reassuring, insightful and practical, this book presents a unique four-phase process with useful daily practices to support you along your recovery journey.”


“Researchers have been investigating how food choices can help prevent cancer and, when cancer has been diagnosed, how nutrition can improve survival...Certain dietary patterns seem to have a major effect, helping people diagnosed with cancer to live longer, healthier lives”

**Your brain after chemo: A practical guide to lifting the fog and getting back your focus** by Dan Silverman and Idelle Davidson (2009).

“Calling on cutting-edge scientific research and the inspiring stories of survivors, this groundbreaking book will forever change the way you think about your brain after chemo - and give you the coping skills to move on with your life.”

**100 questions & answers about life after cancer: a survivor’s guide** by Page Tolbert (2008).

“Answers questions survivors might have about life after cancer on topics such as communicating with friends and family, workplace concerns, intimacy, spirituality and staying healthy.”
For Family Members of Survivors:

Help me live: 20 things people with cancer want you to know by Lori Hope (2005).
“When we hear that someone close to us has been diagnosed with cancer, we want nothing more than to comfort them with words of hope, support, and love. But sometimes we don’t know what to say or do and don’t feel comfortable asking. With sensitive insights and thoughtful anecdotes, Help me live provides a personal yet thoroughly researched account of words and actions that are most helpful.”


What is the BC Cancer Agency?
The BC Cancer Agency is part of the Provincial Health Services Authority and is responsible for BC/Yukon population-based cancer control program. The agency is concerned with all aspects of care ranging from prevention and screening, to diagnosis, treatment, and survivorship. The BC Cancer Agency’s mandate to reduce the incidence of cancer, reduce the mortality rate of people with cancer and to improve the quality of life of people living with cancer.

Resources:
www.bccancer.bc.ca/ABCCA/default.htm

What is the BC Cancer Foundation?
This is the fundraising partner of the BC Cancer Agency and also the largest charitable funder of cancer research in BC. Contributions go to leading-edge research that impacts the revolution of cancer care in British Columbia.

Resources:

What is the Canadian Cancer Society?
The CCS is a national, community-based organization of volunteers. Their goal is to eradicate cancer and enhance the quality of life for people who are already living with cancer. The CCS exists by the generosity of donors and the work of volunteers and staff. Their mandate is to control, actively prevent, cure and manage cancer. Their particular focus is allocating donations to research, advocacy, prevention, information and support.

Resources:
My Care Plan Review

My Initial Care Plan Review
My Care Plan Delivery Appointment Reflection
My Referrals
Next Steps
My Second Care Plan Review
My Third Care Plan Review
My Fourth Care Plan Review
My Fifth Care Plan Review
Glossary of Words
Quotes by Survivors for Survivors
**My Initial Care Plan Review**

During my review we have identified these areas of concern to work on:

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Goals to achieve before second assessment:
My Care Plan Delivery Appointment Reflection...

Please use this space provided to write down questions that you wish to remember to ask in your next care plan appointment along with any other thoughts, or information that you would like to have in this care plan that was not included.
### My referrals (if required)

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<tr>
<th>Complementary Therapies</th>
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<td>Smoking Cessation</td>
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<td>Psychologist</td>
<td>Dietitian</td>
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<td>Work and Finance</td>
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<td>Social Worker</td>
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<td>Others:</td>
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### Next Steps

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<th>Outcome of today’s care plan appointment:</th>
<th>No further face-to-face required:</th>
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<td>Follow-up telephone call required:</td>
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<td>Other:</td>
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<td>Care plan is ready to be sent to my family physician:</td>
<td>YES / NO (Please circle)</td>
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<td>Date of next review (if required):</td>
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<td>My review was carried out by:</td>
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Goals to achieve before fourth assessment:
## My Third Care Plan Review
During my review we have identified these areas of concern to work on

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**Goals to achieve before fifth assessment:**
My Fourth Care Plan Review
During my review we have identified these areas of concern to work on

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Reflection on goals achieved and long term goal setting:
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Reflection on goals achieved and long term goal setting:
Glossary of Words

**Histology**: The study of cells or tissues types by viewing through a microscope. This method can be used to classify tumour types and best treat each individual cancer.

**Hormone**: A chemical produced by the body that is released by a gland or cell in an area of the body that signals and affects cells in another region of the body. Responses to hormones depend on the signal sent and can involve, but are not limited to, mood, immune function, metabolism, and reproduction.

**Hormonal Therapy**: A common method of medical treatment for certain cancers and other conditions that involves the use of hormones for management of the illness.

**Immune system**: The organization of structures and processes within the human body that protect the body against infection or invasion by a variety of agents that potentially cause diseases.

**Nerve damage**: Damage to nerves or the nervous system resulting in a variety of symptoms.

**Recurrent disease**: The return of a disease after remission.

**Steroid**: Examples of steroids include cholesterol, estradiol, testosterone and anti-inflammatory drugs.

**Toxicity**: The extent or degree to which a substance can damage an organism (or portion of)
Quotes by Survivors, for Survivors

“Feeling I’m an important part of the team, not someone that decisions are made for.”

“What helped me is knowing what to expect later on, who to talk to, questions to ask.”

“Have realistic expectations about your recovery time.”

“Redefining normal is very important to me.”

“Be in charge of your medical care.”

“Read other peoples stories.”

“I have a medical summary that I carry around.”

“People feel empowered when they have information.”

“It would be encouraging to tell other patients to have a goal or vision in mind.”

“I find my connection through books written by those who had experienced cancer.”