

## LIVING WITH CANCER

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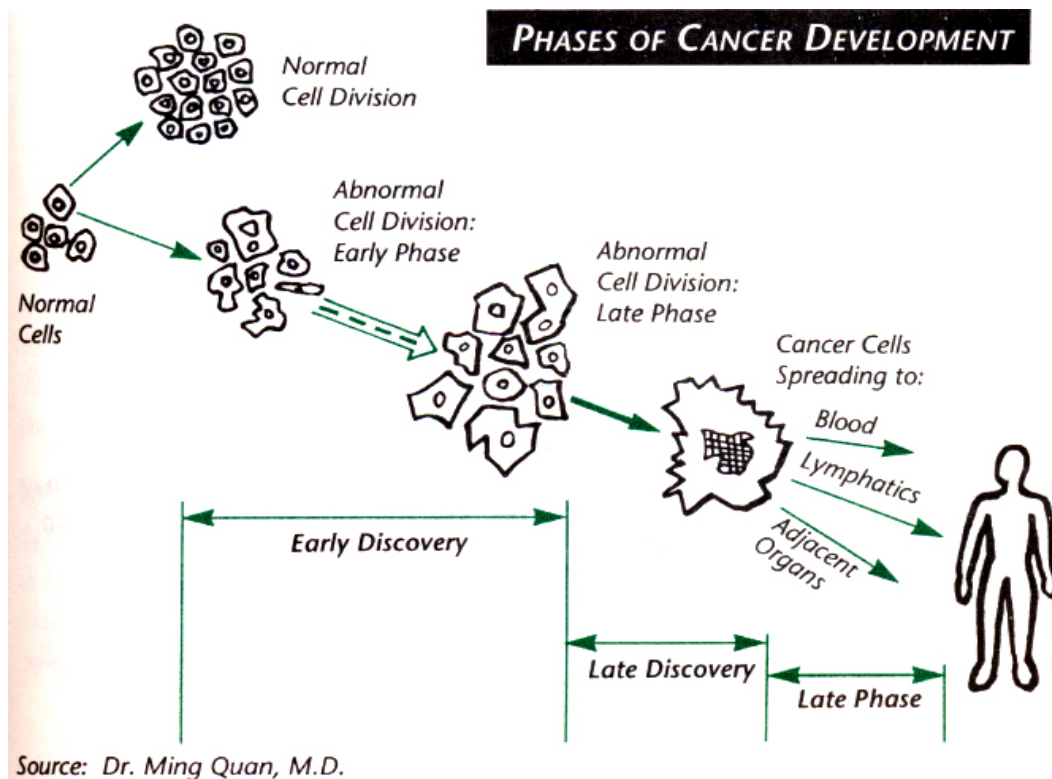
## Chapter 1: What is Cancer?

CANCER is a group of many diseases, which are due to uncontrolled growth of abnormal cells. These cells may grow into masses of tissue called tumors. Tumors may be benign (non-cancerous) or malignant (cancerous). Malignant tumors invade and destroy nearby tissues and organs and can even spread (metastasize) to other parts of the body.

### CANCER FACTS

Although many people have some understanding of cancer, most people don't like to think about cancer or know how to cope with it.

Cancers that are found early may be easier to cure. Getting regular checkups and paying attention to early warning signs are two of the reasons current cancer survival rate is much higher than it was in the past.



## WHAT ARE THE COMMON CANCERS AND THEIR SYMPTOMS?

- **LUNGS**: Persistent cough; coughing up blood; shortness of breath.
- **BREASTS**: Lumps in breasts; changes in shape; nipple discharge.
- **COLON AND RECTUM**: Changes in bowel habits; rectal bleeding; blood in stool; red or black stool.
- **PROSTATE (male)**: Difficulty with or painful urination; frequent urination, especially at night.
- **UTERUS, OVARIES, AND CERVIX (female)**: Postmenopausal bleeding; abnormal vaginal discharge; abdominal swelling; painful intercourse.
- **LIVER**: Feeling of fullness at the upper right quadrant of the abdomen; jaundice or pain caused by an enlarged liver; weight loss; nausea; vomiting.
- **NASOPHARYNX**: All the following can be symptoms of nasopharyngeal cancer:
  - Nose: Blockage of breathing passageway; pus discharge; bleeding.
  - Ear: Gradual or complete loss of hearing; ringing in the ears; earache; pus discharge.
  - Neck: One or more lumps.
  - Throat: Hoarseness; difficulty swallowing.
- **SKIN**: Delayed healing of wounds; changes in shape, size, or color of a wart or mole; sudden appearance of a mole or wart.

## WHAT SHOULD YOU DO AFTER NOTICING THE ABOVE SYMPTOMS?

If you notice any of the above signs or symptoms, contact a physician immediately. These symptoms may be caused by illnesses other than cancer. Remember, pain is usually not an early warning sign of cancer.

Some people attribute these symptoms to old age and therefore ignore them. Please do not think that these symptoms are not important enough to mention to your physician. Ask your physician if you have any questions. Write them down before your appointment and record the answers.

## WHAT TESTS SHOULD BE DONE REGULARLY?

Your doctor will recommend which test(s) and the frequency of each test according to your age, gender, and medical and family history. If you have had cancer in the past or a family history of cancer and/or other illnesses, testing should be more frequent.

- **FECAL OCCULT BLOOD TEST**: Collection of one or more stool samples to test for unseen blood in stool. Blood in stool may be an indication of cancer in the colon or rectum. Your doctor can give you a simple kit to collect stool samples at home to be mailed or delivered to your doctor's office.
- **DIGITAL RECTAL EXAM**: With gloved hands, the doctor examines the rectum for prostatic tumors in men or rectal tumors in men and women.
- **SIGMOIDOSCOPY**: The doctor examines the rectum and the lower part of the colon with a special instrument.
- **COLONOSCOPY**: Similar to sigmoidoscopy, but the entire colon can be checked, and suspicious lumps can be cut out and checked for cancer (biopsied).
- **DOUBLE CONTRAST BARIUM ENEMA**: Patient is given a chemical (barium) solution to drink, which helps outline the colon and rectum during an x-ray.
- **PROSTATE SPECIFIC ANTIGEN (PSA)**: A test used to determine prostate specific antigen level in the blood in men. The higher the level, the more likely the chance of prostate cancer.
- **PELVIC EXAM AND PAP SMEAR**: Pelvic exam is the examination of the female reproductive organs. Using a small instrument and gloved hands, the doctor examines the vagina, uterus, and ovaries. A Pap smear is usually done at the same time as the pelvic exam. Cells from the cervix are removed for examination under a microscope for any abnormality. A Pap smear is not a painful procedure.
- **MAMMOGRAM AND CLINICAL BREAST EXAM**: A mammogram is an examination of the breast using low-dose X-ray. It is used to detect abnormalities of the breasts. A clinical breast exam is performed by a health professional (doctor or nurse) as part of a health exam. It helps detect changes in the breasts.

If any of these test results is positive, it does not mean that you have cancer. It means that further tests are necessary. If cancer is suspected, a biopsy is needed to confirm it. Tissue is removed from the tumor to be examined under a microscope to determine if it is cancerous or not.

## WHAT IF YOU FIND OUT YOU HAVE CANCER?

If the test result shows that you have cancer, you should receive treatment as soon as possible. Cancer is an illness in which abnormal cells grow. If you do not begin treatment immediately, the abnormal cells will continue to grow and invade healthy tissues.

Today, there are many ways to treat cancer. Get second opinions from several doctors to determine the best treatment plan for you. You should also ask your doctor if you should consult an oncologist. If you have questions about your diagnosis and treatment results, ask your doctor.

## WHAT IS THE BEST WAY TO REDUCE CANCER RISK?

About 80% of cancer cases are related to lifestyle and environmental factors. By reducing or eliminating exposure to cancer causing agents (carcinogens), the risk of getting cancer can be lowered.

Here are some cancer risk reduction tips:

- Control weight.
- Don't smoke.
- Drink alcohol only in moderation, (1-2 drinks a day) if any at all.
- Avoid too much sunlight, especially from 10am to 4pm (wear protective clothing, use sunscreen with a sun protection factor (SPF) rating of 15 or above).
- Avoid unnecessary X-rays.
- Avoid contact with asbestos and petroleum products.
- Follow health and safety rules in the workplace.
- Eat foods high in fiber (fruits, vegetables, whole grains) and low in fat.
- Limit consumption of salt-cured, pickled, or smoked foods (e.g. salted fish).
- Discuss the pros and cons of estrogen replacement with your doctor, if you are a post-menopausal woman.
- Include cancer-related check-ups in your regular physical exam.
- Learn the warning signs.

## WHAT ARE SOME WARNING SIGNS OF CANCER?

1. Change in bowel or bladder habits
2. A sore that does not heal
3. Unusual bleeding or discharge
4. Thickening or lump in breast or elsewhere
5. Long-term indigestion or difficulty swallowing
6. Obvious change in wart or mole
7. Nagging cough or hoarseness
8. Unexplained weight changes

## Chapter 2: Radiation Therapy

THIS chapter is developed to help you and your family understand radiation therapy.

It covers topics such as:

1. How is radiation therapy given?
2. External and internal therapy
3. How to manage side effects

### WHAT IS RADIATION THERAPY?

Radiation is a special kind of energy carried by waves or a stream of particles. It can come from special machines or from radioactive substances. High levels of the same kind of energy can be used to treat cancer. Radiation deposits energy that destroys the fastest-growing cells (usually those are the cancer cells) in that area by damaging their genetic material. Even though radiation destroys both cancer cells and normal cells, normal cells can repair themselves and grow back. The use of high-energy rays or particles to treat disease is called radiation therapy.

### HOW IS RADIATION THERAPY GIVEN?

Radiation therapy can be either external or internal. Most people who receive radiation therapy for cancer have the external type, but some patients have both.

#### EXTERNAL THERAPY IS GIVEN:

- By a machine that directs the high-energy rays or particles at the cancer site.
- During outpatient visits to a hospital or treatment center.

#### INTERNAL THERAPY IS GIVEN BY:

- Inserting a radioactive substance sealed in a small container, called an implant, directly into a tumor.
- Placing an implant in the area where a tumor has been removed to kill any tumor cells that may remain.
- Taking an unsealed radioactive source by mouth.
- Injecting an unsealed source into the body.

If you take unsealed radiation by mouth or injection, you will probably need to stay in the hospital for several days.

## EXTERNAL RADIATION THERAPY:

### WHAT TO EXPECT

External radiation is the most widely used therapy because it allows large areas of the body to be treated at the same time. The doctor's choice of radiation source and strength depends on the type of cancer and how deep into the body the radiation must penetrate to reach it.

Simulation - To pinpoint the treatment area

A therapist will use a special x-ray machine to define your "treatment port," and mark it with semi-permanent colored ink. You may have more than one treatment area.

Simulation takes half an hour to two hours.

You can help by:

- Lying very still on the table during simulation.
- Being careful not to wash off the ink marks.
- Letting medical staff know if your marks are fading.

### WHAT HAPPENS DURING TREATMENT?

- You sit in a special chair or lie down on a treatment table.
- You must remain very still so the radiation goes where it is needed and goes to the same area each time.
- You cannot see the radiation, and most likely will feel nothing.

### HOW LONG DOES IT TAKE?

Treatment usually is given:

- 5 days a week for 6 or 7 weeks.
- Each session lasts 15-30 minutes, but the actual time it takes to give the dose of radiation is only 1-5 minutes.
- If you feel ill or uncomfortable, tell the therapist. The machine can be stopped at any time.



## POINTS TO REMEMBER

- Don't worry; your body does not become radioactive.
- There is no need to avoid other people.
- Expect side effects in the area being treated (for example, redness and scaliness of the skin in the area through which the radiation was delivered). Most can be controlled with medicine or diet.
- Most side effects go away after treatment ends.
- Tell your doctor if you have coughing, sweating, fever, or unusual pain.  
And don't forget:
- The doctor should see you at least once a week.
- The treatment plan may be revised.
- It's important to complete all scheduled treatments to get the most benefit from your therapy.

## INTERNAL RADIATION THERAPY:

### WHAT TO EXPECT

Internal radiation therapy places the high-energy radiation as close to the cancer cells as possible, so that fewer normal cells are exposed to radiation. This means the doctor can give a higher total dose in a smaller area and in a shorter time. Radioactive materials can be placed internally using small implants or by direct injection into the bloodstream or body cavity.

Radioactive substances used include: Radium, cesium, iridium, iodine, phosphorus

### HOW IS THE IMPLANT PLACED IN THE BODY?

- The procedure is done in the hospital with anesthesia. Under the guidance of imaging procedures, such as X-rays, ultrasound, or CT, a physician will place the implant in the target area.

### HOW LONG IS THE IMPLANT KEPT IN THE BODY?

- They can be temporary (1-7 days) or permanent. The permanent implants are small and cause little discomfort. Therefore, they are simply left in place after their radioactive material is used up.

### DOES THE IMPLANT SPREAD RADIATION TO OTHER PEOPLE?

- It may transmit some rays outside the body, so you may need a private room. Visitors may be limited, and they should sit at least 6 feet from your bed and stay no longer than 30 minutes each day. Most hospitals do not let children under 18 or pregnant women visit a patient receiving implant treatment.



## WHAT HAPPENS AFTER THE IMPLANT IS REMOVED?

- There is no more radioactivity in your body.
- You may need extra rest, but you can do as much as you feel like doing.
- The treated area may be sore or sensitive for a while.

## ARE THERE SIDE EFFECTS?

If general anesthesia is used, the anesthetic may make you feel drowsy, weak, or nauseated. From the implant itself:

- Pain and illness are rare.
- The applicator holding the implant in place may be uncomfortable.

High dose rate (HDR) brachytherapy is a type of internal radiation therapy often used in treating prostate cancer. It uses needles containing radioactive material that travel to the tumor. They can be left in place for less than a day.

## MANAGING SIDE EFFECTS

### FATIGUE

The body uses a lot of energy when healing itself. Stress, daily trips for treatment, and the effects of radiation on normal cells may all contribute to fatigue. Most people begin to feel unusually tired after a few weeks of radiation therapy. This will gradually go away after the treatment is finished.

You can help by:

- Not trying to do too much.
- Limiting activities when you feel tired.
- Resting or sleeping in your free time.
- Trying to get more sleep at night, and rest during the day.
- Learning relaxation techniques such as deep breathing, meditation, visual imagery, etc.

### SKIN PROBLEMS

Skin in the treatment area may look reddened, irritated, sunburned, or tanned. After a few weeks of therapy, skin may be very dry. With some kinds of therapy, treated skin may develop a "moist reaction," especially in areas where there are skin folds. When this happens, the skin may become very sore. You should tell your doctor or nurse right away. Most skin reactions go away a few weeks after treatment is finished, but in some cases, treated skin remains darker than it was before.

You should:

- Be very gentle with the skin in the treatment area.
- Wash only with lukewarm water and mild soap.
- Don't wear tight clothing.
- Don't rub, scrub, or scratch.
- Don't put heating pads or ice packs on treated skin.
- Don't use powders, creams, perfumes, deodorants, body oils, ointments, lotions, or home remedies in the treatment area for several weeks afterward. Many skin products leave a coating on the skin that can interfere with radiation therapy or healing.
- Avoid exposing the area to the sun during treatment and for at least 1 year afterwards. Wear protective clothing. Ask the doctor about sun blocking lotions.

## HAIR LOSS

Radiation therapy causes hair loss only in the area being treated. So, if it's the hip that's being treated, you will not lose hair from your head. Most patients find the hair grows back again after treatment. But loss of hair from the head, face, or body can be hard to adjust to.

You may want to:

- Wear a hat, turban, scarf, or wig with a soft lining.
- Select a wig early on so you can match your hair color and style.
  - Choose one with a lining that will not irritate the scalp.

## SIDE EFFECTS OF RADIATION ON THE BLOOD

Sometimes radiation therapy can cause low white blood cell counts or low levels of platelets. These cells help your body fight infection and repair wounds. If your blood tests show low levels of these cells, your treatment might be delayed for a week or so to allow your blood counts to come back up. Bleeding gums or prolonged bleeding from a cut, for example, should be reported to the doctor right away.

## SIDE EFFECTS OF RADIATION TO THE HEAD & NECK

Some people experience:

- Redness and irritation in the mouth
- Dry mouth
- Changes in or loss of sense of taste
- Cavities
- Earaches (earwax hardens)
- Difficulty swallowing
- Swelling or drooping of skin under the chin

## Mouth Care

- Avoid spices and coarse foods such as raw vegetables, dry crackers, and nuts
- Don't smoke, chew tobacco, or drink alcohol
- Stay away from sugary snacks that promote tooth decay
- Do not use commercial mouthwash, as alcohol dries the mouth
- Have a complete dental checkup before starting therapy
- Clean teeth and gums thoroughly with a soft brush after meals and before sleeping
- Use a fluoride toothpaste without abrasives
- Floss gently between teeth daily
- Follow the doctor's or nurse's directions to rinse your mouth frequently with warm water or saline solutions
- You may need to stop wearing your dentures until treatment is over

## TIPS ON EATING

Soreness or dryness in the mouth or throat can make it hard to eat.

- Choose foods that taste good and are easy to eat
- Prescription pain medications may help
- If it hurts to chew or swallow, try to have more liquid and semi-solid foods

Side Effects of radiation to the breast and chest

- Difficulty or pain swallowing
- Radiation after lumpectomy may cause changes in the skin texture, increased/decreased sensitivity, or changes in breast size
- Cough
- Breast soreness or swelling from fluid build-up

You should:

- Wear a soft cotton bra, without wires
- Go bra-less when possible
- Ask about exercises to keep your arm from getting stiff

## OTHER CONCERNS

If your therapy includes implants of radioactive material after external radiation is completed, you may have breast tenderness or a feeling of tightness while the implants are in your breast. After they are removed, you may notice some of the side effects of the external treatment. After 10 or 12 months, no further changes are likely to be caused by radiation therapy.

If you see new changes in your breast, tell your doctor at once.

## **SIDE EFFECTS OF RADIATION TO THE STOMACH & ABDOMEN**

You may have to deal with an upset stomach, nausea, or diarrhea. Localized damage to the lining of the esophagus, stomach, and intestines, and accumulation of toxic waste products of cell destruction are probable causes. Your doctor can prescribe medicines for relief. Do not take any home remedies without checking with the doctor or nurse.

### **NAUSEA**

- To manage nausea, pay attention to when it occurs
- If you feel queasy a few hours right after therapy, do not eat for several hours before your treatment time. You may handle the treatment better on an empty stomach.
- If your stomach feels upset just before treatment, try a bland snack such as toast or crackers and apple juice just before the appointment.
- Try to unwind before your treatment. In the waiting room, read, write letters, or work on a crossword puzzle to relax.
- Stick to any special diet given to you.
- Eat small frequent meals.
- Eat and drink slowly.
- Avoid foods that are fried or high in fat.
- Drink cool liquids between meals.
- Choose foods with a mild aroma, and those served cool or at room temperature.
- For severe upsets, try a clear liquid diet or bland foods that are easy to digest, such as dry toast and gelatin.

### **DIARRHEA**

Diarrhea most often begins in the third or fourth week of external therapy. Your doctor can prescribe medicine or give you special instructions to help. Tell the doctor or nurse if the medicine is not controlling the diarrhea.

Making these changes in your diet may help:

- Try a clear liquid diet (water, weak tea, clear broth, apple juice, plain gelatin) as soon as diarrhea starts or when you feel that it's going to start.
- Ask your doctor or nurse which liquids won't make the diarrhea worse, such as water, weak tea, clear broth, and drinks that are low in sugar.
- Avoid foods high in fiber or that can cause cramps or a gassy feeling (raw fruits and vegetables, coffee, beans, cabbage, whole grain products, sweets, and spicy foods).

- Eat small frequent meals.
- Avoid milk and milk products if they irritate your bowels.
- When diarrhea starts to improve, try eating small amounts of low-fiber foods such as rice, bananas, applesauce, mashed potatoes, low-fat cottage cheese, and dry toast.
- Be sure to eat foods high in potassium (bananas, potatoes, oranges, apricots) and other minerals you may lose through diarrhea.

Try to pack the highest possible food value into even small meals so that you will have enough calories and vital nutrients.

### **SIDE EFFECTS OF RADIATION TO THE PELVIS**

Radiation therapy to any part of the pelvis (the area between the hips) may cause one or more of the digestive problems already described. The bladder may also be irritated, causing discomfort or frequent urination. Your doctor can prescribe medicines to help.

### **SIDE EFFECTS OF RADIATION TO SEXUAL AND REPRODUCTIVE ORGANS**

Other side effects occur only in the sexual and reproductive organs, depending upon which organs are treated. Some of the more common side effects do not last long after treatment. Others are long-term or permanent. Before your treatment begins, ask your doctor about these side effects.

### **FERTILITY**

- Discuss birth control measures with your doctor. It is not a good idea to become pregnant during therapy.

### **RADIATION MAY HURT THE FETUS**

- If you are pregnant before beginning therapy, special steps should be taken to protect the fetus.
- Women may stop menstruating or have other menopause symptoms.
- Vaginal itching, burning, or dryness may occur.

Radiation therapy to an area that includes the testes can reduce both the number of sperm and their ability to fertilize. This does not mean that you will be infertile. If you want to father a child and are concerned about future fertility, look into the option of banking your sperm before treatment.

## SEXUAL RELATIONS

Some women are advised not have intercourse during treatment to the pelvic area. Others may find intercourse painful. You most likely will be able to resume having sex a few weeks after treatment ends.

Some shrinking of vaginal tissues occurs during therapy. After the therapy is finished, your doctor may suggest using a dilator, a device that gently stretches the tissue of the vagina.

Most types of radiation therapy do not cause a change in the ability to enjoy sex; however, both men and women may notice a decrease in their levels of desire. This is more likely caused by the stress of having cancer than by the radiation therapy and should go away when the treatment ends. It should not be a major concern.

## DOES RADIATION THERAPY AFFECT THE EMOTIONS?

Nearly all patients who receive treatment for cancer feel some degree of emotional distress. It's not unusual to feel:

- Depressed
- Angry
- Frustrated
- Afraid
- Lonely
- Helpless

Radiation therapy may affect the emotions indirectly through fatigue or changes in hormone balance, but the treatment itself is not the direct cause of mental distress.

Many patients help themselves by talking about their feelings with a close friend, family member, chaplain, nurse, social worker, or psychologist.

- You may want to ask your doctor or nurse about meditation, relaxation exercises, or cancer support groups to help you unwind and feel better.

Adapted by the American Cancer Society, Chinese Community Health Education Council and the Chinese Community Health Resource Center from "Radiation Therapy and You" published by the National Institutes of Health, 1990. Revised 2021.

## Chapter 3: Chemotherapy & Other Treatment Options

This chapter has been developed to help you and your family understand chemotherapy.

It covers topics such as:

1. How chemotherapy works.
2. How it is given.
3. The importance of good nutrition.
4. The management of some of the more common side effects.

Cancer is often treated by a combination of surgery, radiation therapy, and chemotherapy. For some cancers, chemotherapy has been proven to be a very effective form of treatment. This chapter presents a general overview of chemotherapy.

Perhaps, you will find you have more questions than are answered here. We encourage you to discuss any questions you have about your treatment or condition with your doctor or nurse.

### WHAT IS CHEMOTHERAPY?

Literally, chemotherapy means the use of drugs or medications (such as aspirin) to treat disease or illness. Today, however, chemotherapy refers to a form of cancer treatment, which uses drugs specifically to fight cancer cells.

### HOW IS CHEMOTHERAPY GIVEN?

Chemotherapy can consist of one drug or a group of drugs that work together.

The most common ways of administration are:

- By mouth, in pill form
- By injection
- Intravenously (IV), through a tiny catheter placed in a peripheral or central vein)

Sometimes, when the drugs are administered intravenously, medication may seep out of the vein. This may cause redness and a burning sensation at the I.V. site. Tell your doctor or nurse if this happens. Chemotherapy is painless but can cause temporary uncomfortable sensations such as nausea.

Chemotherapy reaches the cancer cells through the blood stream.



## WHERE WILL I HAVE MY TREATMENTS?

- Your doctor's office
- In the hospital
- At home

The location depends on the nature of the drugs, your insurance, and/or your or your doctor's choice.

## HOW LONG AND HOW OFTEN WILL I RECEIVE TREATMENT?

Treatment schedules may vary from daily to monthly depending on:

- The kind of cancer you have.
- The drug or drugs used.
- How your body responds to the treatment.

It is important to tell your doctor what other medications you are taking, including heart medicine, before you begin chemotherapy.

## HOW WILL I KNOW IF THE CHEMOTHERAPY IS WORKING?

When you visit the doctor's office, or if you are in the hospital regularly, your doctor and nurse will track your progress using different tests and/or exams, which may include:

- Blood tests
- X-rays
- Tracking your weight
- Physical examinations

## WHAT SIDE EFFECTS MIGHT I HAVE?

The chemotherapy drugs used to fight cancer cells are very strong and can attack healthy cells as well. As a result, you may experience side effects from the medications. The most common side effects are:

- Nausea and vomiting
- Fatigue
- Hair Loss
- Most side effects are temporary. Once treatment stops, the healthy, normal cells grow back.

## TIPS FOR COPING WITH SIDE EFFECTS OF CHEMOTHERAPY

- Nausea and Vomiting
- Chemotherapy drugs can cause nausea because they affect the stomach lining and the brain.
- Your physician may prescribe anti-emetics (anti-nausea medications) to help relieve the nausea you feel.

## TIPS ON EATING

- Eat several small meals rather than three large meals each day.
- Avoid drinking water with meals, but drink water between meals to keep your fluid intake at a good level.
- Don't eat greasy or fried foods (such as roast duck).
- Avoid foods that are too hot or too cold.
- Eat slowly.
- Rest after eating. Instead of lying down, it is better to sit up or take a walk.
- Avoid unpleasant odors.
- Prepare and store food ahead of time to eat later when you are hungry.

## DIARRHEA

It is important to notify your doctor if diarrhea is severe or lasts more than 24 hours. Your doctor may prescribe medication to help control diarrhea.

If you experience diarrhea:

- Drink plenty of fluids.
- Eat potassium-rich foods such as bananas, oranges, potatoes, and peach or apricot nectars, unless your doctor tells you otherwise.
- Avoid coffee, tea with caffeine, alcohol, and sweets.

## MOUTH SORES

Chemotherapy drugs can cause your mouth to dry out or sores may appear on the gums, tongue, and sides of your mouth. These can be painful and make chewing and swallowing difficult.

It is important to take care of your mouth:

- Be sure to check your mouth daily
- Use a mouthwash as suggested by your doctor
- Keep your mouth and gums clean (use a soft toothbrush)

Eating tips to avoid irritating your mouth:

- Avoid very hot or cold foods
- Avoid spicy or sour foods
- Drink lots of liquids
- Eat moist foods such as applesauce, rice porridge, mashed potatoes, and soup
- Avoid very hard foods. Blend food to a smooth consistency to make it easier to swallow.

## FATIGUE

Chemotherapy drugs can attack healthy bone marrow (the place where blood cells are made) as well as the cancer cells in your body. This may result in lower production of red blood cells. The resulting anemia may cause fatigue.

The signs and symptoms of anemia are:

- Feeling tired or “light-headed”
- Being short of breath

Be sure to get sufficient rest. Your doctor may decide to give you blood transfusions in order to treat the anemia. Mild exercise, such as walking, is recommended to help regain your strength.

## BLEEDING

Because chemotherapy drugs also lower levels of platelets, which help the blood to clot, you may experience increased bleeding. Some signs and symptoms of bleeding associated with low platelet levels are:

- Bruises
- Bleeding of nose or gums
- Blood in stool or urine

It is important to take precautions to avoid bleeding:

When shaving use an electric shaver.

- Do not cut or tear cuticles (skin around your nails).
- DON'T use aspirin.

Notify the doctor immediately if you observe any unusual bleeding.

## HAIR LOSS

Some chemotherapy can cause either partial or total hair loss. Loss of hair can be emotionally upsetting. Try to talk to others about your feelings. Hair loss is temporary, and your hair will begin to grow back when treatments end.

Here are some tips to help you manage your physical appearance:

- Wear a wig
- Wear a scarf
- Wear a hat

Skin Chemotherapy may cause some irritation to your skin. Your skin may dry out, itch, etc.

You should:

- Use skin moisturizer or medicated soaps and creams.
- STAY OUT OF THE SUN. Skin is more easily burned by the sun's rays when undergoing chemotherapy.
- Use protective coverings such as hats or umbrellas.
- Use a sun block with a sun protection factor (SPF) of 15 or more.

## INFECTION

Chemotherapy drugs also attack the production of white blood cells, which fight off bacteria. Therefore, you are more susceptible to infection.

Here are some tips to prevent infection:

- Wash your hands before meals and after using the bathroom.
- Avoid crowds and people with colds or flu.
- Avoid sharp objects, which might cut you. Clean all skin cuts thoroughly to prevent infection.
- When shaving, use an electric shaver.

The signs and symptoms of Infection Include:

- Fever
- Chills
- Sweating
- A burning sensation when urinating
- Severe cough or sore throat
- Diarrhea

If infection occurs, your physician may prescribe medication in the form of I.V. (intravenous) antibiotics to treat the infection.

## WILL MY SEXUAL ORGANS BE AFFECTED?

Though physical ability or desire will not be affected, fatigue may be a factor.

- Women: Your menstrual cycle may change; therefore, it is very important to use birth control while undergoing chemotherapy.

- Men: Chemotherapy may cause temporary or permanent infertility. Talk to your doctor or nurse if you have any concerns.

## EATING WELL IS IMPORTANT

A balanced diet can help the recovery of normal cells. Therefore, your diet should consist of foods high in carbohydrates, vitamins, minerals, and protein such as:

- Meat, poultry, eggs, fish, nuts
- Vegetables and fruits
- Nutritional supplements such as Ensure, Instant Breakfast, or Boost.

Increased nutritional demands while undergoing chemotherapy require:

- 50% more protein
- 20-50% more calories
- More fluid intake – Drink at least 8-10 cups of water every day. Increased fluids help the kidneys flush out chemotherapy drugs.
- Your healthcare provider may suggest adding a multivitamin.

## YOUR FEELINGS

Talk to your doctor, friends, family members, and other patients about your feelings and concerns. Your emotional wellbeing is as important as your physical health. You should:

- Keep a list of questions and concerns you have about your treatment and personal situation. Have the list with you at your next visit with your doctor as a handy reminder.
- Engage in your usual activities as much as possible.
- Treatments can be boring. Bring a friend; read a book; listen to music.

## REMEMBER

You can take an active role to help yourself get through your treatment more comfortably by:

- Maintaining a positive attitude
- Drinking plenty of fluids
- Eating a balanced diet
- Getting sufficient rest
- Exercising as usual to help keep your mind and body in good health

## OTHER CANCER TREATMENT OPTIONS:

### SURGERY

Surgery is performed for several purposes: to diagnose cancer by examining body tissue (biopsy), to remove precancerous or cancer cells. It provides the greatest opportunity to cure many types of cancer, particularly those that have not spread to other parts of the body. With today's advanced technology, surgery has become safer and less invasive. Nonetheless, before making the decision to undergo surgical treatment, you should understand the risks involved as with other cancer treatment options.

Complications during surgery is uncommon, but can involve the following:

- Extensive bleeding which may require blood transfusion
- Damage to nearby organs or blood vessels
- Reactions to anesthesia

After surgery, the most common problem is pain. There are many ways to deal with pain; discuss with your physician what works best for you.

### HORMONE THERAPY

Sex hormones can stimulate the growth of prostate and breast cancer. Hormone therapy is a treatment option to remove the hormones or block their actions. The duration of such treatment is based on your age, the stage of your cancer, and other factors. Common side effects include:

- hot flashes
- nausea and vomiting
- loss of appetite
- In men, hormone therapy may cause:
  - impaired sexual function
  - loss of sexual desire

In women, patients may experience:

- mood swings
- blood clots
- vaginal dryness

### IMMUNOTHERAPY (ALSO CALLED BIOLOGICAL THERAPY)

Immunotherapy helps patients to use their own immune system to fight against cancer. One approach is to stimulate the immune system to work harder; another is to use external sources. Cancer vaccines are a type of immunotherapy.

Information provided by Dr. Richard Cohen Cancer Fund. Revised 2021.

## Chapter 4: Proper Nutrition during Cancer Treatment

### WHY IS GOOD NUTRITION IMPORTANT?

- Enables you to cope with the side effects of treatment better
- Prevents weight loss
- Prevents body tissue from breaking down
- Helps to repair damaged tissue
- Helps to fight infection
- Provides energy

### WHAT FOODS SHOULD BE INCLUDED?

- Eat a variety of foods daily: grains, fruits, vegetables, meats, and dairy products.
- Eat more high-protein, high-calorie foods.

### WHAT ARE HIGH-PROTEIN FOODS?

Protein helps your body heal and fight infection.

Protein rich foods include:

- Meats
- Dairy products
- Fish
- Dried beans
- Seafood
- Tofu/Soy milk
- Poultry
- Nuts and Seeds
- Eggs
- Peanut butter

### WHAT ARE HIGH-CALORIE FOODS?

Foods containing large amounts of fat and sugar provide extra calories to help maintain weight or promote weight gain.



### Examples of high-calorie foods:

- Fried foods
- Meats
- Desserts
- Nuts and seeds
- Whole Milk
- Butter or margarine
- Cheese
- Oils
- Cream
- Mayonnaise

### HOW DO I INCREASE CALORIES AND PROTEIN IN MY DIET?

1. Eat 5-6 small meals a day. (3 meals + 3 snacks)
2. High-calorie snack ideas:
  - Avocado
  - Canned fruits with syrup
  - Cheese
  - Sweet potato soup
  - Pudding
  - Red bean soup
  - Ice cream
  - Tofu fa
  - Custard
  - Nuts and seeds
  - Peanut sweet soup
  - Sesame sweet soup
  - Yogurt
3. Add honey, glucose, or polycose to drinks.
4. Add sesame oil to foods or soups.
5. Add sweetened condensed milk to coffee, tea, or hot cereal.
6. Add gravy or sauce over rice or noodles.
7. Spread butter, mayonnaise, peanut butter, jam, or sweetened condensed milk onto breads or crackers.
8. Use whole milk and add in powdered milk, Ovaltine, Horlicks, and/or sugar.
9. Add evaporated milk to desserts (gelatin, pudding, red bean soup) and hot cereal.
10. Add blenderized cooked meats and vegetables, tofu, shredded dried pork, or fish to soups or rice porridge.
11. Add eggs or egg whites to soups or hot cereals.
12. Use nutritional supplements such as Ensure, Carnation Instant Breakfast, or Boost.

\* Soups, chicken essence, and rice porridge provide mainly fluids and contain minimal calories and protein.

## WHY DO I NEED TO DRINK MORE FLUIDS?

- Fluids help carry nutrients to cells and waste products away, keep body temperature constant, and soften stools.
- Diarrhea, vomiting, or fever can cause loss of fluids (dehydration).
- Certain drugs increase the need for fluids to flush the bladder and kidneys.
- Adults need 8-12 cups of fluids daily.
- Beverages and foods with high fluid content:
  - Water
  - Milk/Soy milk
  - Coffee
  - Tea
  - Tomato
  - Soup
  - Juice
  - Soda
  - Gelatin
  - Rice porridge
  - Fruit drinks
  - Fruits (e.g., watermelon, orange)

## HOW DO I COPE WITH EATING PROBLEMS?

- If you have any questions, please visit an oncology dietitian.

## LOSS OF APPETITE

- Eat small, frequent meals
- Take small amounts of liquid and consume foods that are easily digested, such as bread, crackers, rice, and noodles
- Visit the grocery store or restaurant to stimulate your sense of smell or sight
- Make mealtime more relaxed and pleasant
- Have a glass of wine before meals (if approved by M.D.)
- Exercise regularly

## NAUSEA AND VOMITING

- Avoid eating for 1-2 hours before treatment
- Wear loose-fitting clothing
- Use relaxation exercises (deep breathing) or meditation
- Eat and drink slowly
- Eat small meals and drink in between meals
- Avoid overly sweet or greasy foods and foods with strong odors
- Try salty foods, crackers, toast
- Eat foods at room temperature
- Avoid mixing hot and cold foods
- Drink beverages chilled or cooled instead of hot
- Rest after eating

## **SORE MOUTH**

- Avoid foods that are raw, spicy, salty, rough, or acidic
- Avoid extremely hot or cold foods
- Try soft, bland, puree, or blenderized foods
- Use a straw to drink liquids

## **TASTE BLINDNESS (CHANGED SENSE OF TASTE)**

- Emphasize odor, texture, and eye appeal in food preparation
- Choose strongly flavored, seasoned, or tart foods

## **THICK, VISCOUS SALIVA**

- Modified diet if having difficulties chewing or swallowing
  - Thickened liquids
  - Pureed, minced, or cut-up foods
- Increase fluids
- Drink hot tea or club soda

## **DRY MOUTH**

- Serve foods with gravy or sauce
- Drink liquids during meals
- Drink lemonade or tea with lemon
- Suck on sugarless lemon drops, hard candies, or dried lemon peel or plum
- Chew sugarless gum

## **DIARRHEA**

- Avoid milk or choose lactose-free milk
- Limit high fiber foods such as bran cereal, whole wheat bread, dried beans, nuts, raw fruits and vegetables
- Avoid high fat foods
- Replace potassium (very ripe bananas, mashed potatoes)
- Replace fluids (broth, tea, water, rice porridge)

## **CONSTIPATION**

- Increase fiber (refer to Diarrhea above)
- Increase fluids
- Daily exercise

## SAMPLE MEAL PLAN (HIGH-CALORIE)

Approximately:

- 2500 Calories
- 120 gm Protein (20%)
- 95 gm Fat (35%)
- 270 gm Carbohydrate (45%)

### BREAKFAST

- 1 c. Oatmeal (½ c. oatmeal + 4 oz. whole milk + 1 egg + 2 tsp. sugar)
- 1 sl. Toast with 2 tsp. margarine & 2 tsp. jam

### SNACK

- 6 Crackers with 2 Tb. peanut butter
- 8 oz. Juice

### LUNCH

- 1 c. Soup noodles (1 c. noodles + 3 oz. meat + ½ c. vegetables + 2 tsp. sesame oil)
- 1 Fruit

### SNACK

- 1c. Tofu fa with 1 Tb. syrup
- 3 Cookies

### DINNER

- 1 c. Rice
- 2-3 oz. Pan fried fish
- ½ - 1 c. Stir fried meat (2 oz.) with vegetables
- 2/3 c. Bean soup
- 1 Fruit

### SNACK

- 1c. Whole milk with 1 Tb. Ovaltine

## Chapter 5: Coping with Cancer

A DIAGNOSIS of cancer is a powerful reminder of the importance of one's health. This booklet is written for people who are affected by cancer, such as cancer patients themselves, or their family members and friends.

No cancer patient is the same. Although the material in this booklet is intended to be helpful, some sections may not apply to everyone. A few suggested responses might make you feel uncomfortable. Each person must cope with cancer in his/her own way. What follows is intended to be a general guide.

### EMOTIONAL TURMOIL OF CANCER

Our bodies and minds are not completely separate. It will help keep our bodies strong if we also deal with the emotional turmoil of cancer successfully - a side of cancer that surgery, drugs, and radiation cannot treat.

People with cancer, their friends, and their family members may face intense fears, anxieties, and frustrations. For many of us, these feelings will be new, and the road ahead may appear overwhelming. For everyone, however, it is important to be aware of these feelings and seek ways of coping that fit us best.

Cancer is a major illness, although it is not necessarily fatal. In the U.S., there are 9 million people alive today who have had cancer but have survived. Most of these people are considered cured of their cancers. For others, cancer has become a "chronic condition" somewhat like hypertension, diabetes, or mild heart conditions - one that is controlled or managed by lifestyle changes and/or medication.

Just as others with chronic conditions, periodic health checkups will be part of cancer patients' lifelong routine. Cancer survivors will, undeniably, be more sensitive to and anxious about minor signs of illness or discomfort. Many will live for years, grow old, and die as they had expected before cancer was diagnosed.

After a diagnosis of cancer, it is hard not to think about dying, but it's even more important to concentrate on living. Remember, a diagnosis is not a death sentence. With advanced medical technology and widespread knowledge of early detection for cancer, its survival rate is relatively high. For some forms of the disease, 9 out of 10 people diagnosed can be considered cured. Of the other types, many will live a long time before dying of the disease. Indeed, there will be many sunrises and sunsets to enjoy. So let us take a look at living

- living with cancer and its treatment, but living, nonetheless.

## SHARING THE DIAGNOSIS SHOULD YOU TELL

One question many people ask after diagnosis is, "Should I tell"? Rarely, your answer is no. A family member could be too old, too young, or too emotionally fragile to accept the diagnosis, but people are surprisingly resilient. Most find ways to deal with the reality of illness and the possibility of death. They find the strength to bounce back from unbearable grief. The diagnosis of cancer hits most of us with a wave of shock, fright, and/or denial. The amount of time each person takes to accept the reality of cancer is different.

Usually family and close friends learn sooner or later that you have cancer. Most people with cancer find it best to share the diagnosis and to let those closest to them offer their support. Of course, you must find the right timing and use words that you are most comfortable with when you tell your family and friends that you have cancer.

## WHEN FAMILY MUST DECIDE

Sometimes family members are the first to learn about the diagnosis. If, as a family member, the decision falls on you, it may be difficult to tell the patient (for example an older parent or grandparent) that they have cancer. However, most people with cancer would say it is best to share the diagnosis. One cancer patient wrote, "Time is so valuable, and there may be things the person would like to accomplish, there are decisions to be made."

Family members also bear great emotional burden during the period of diagnosis. They, too, need the comfort of sharing their feelings. Yet, it is almost impossible to support the rest of the family if you are hiding the diagnosis from the person with cancer. He or she inevitably learns the truth. The consequences can be deep anger, hurt, or bitterness. The patient might believe that no one is being honest about the diagnosis because the cancer is terminal.

## SOMEHOW CHILDREN KNOW

Even children sense the truth. Some parents who tried to "spare" their children from knowing later voiced regret at not discussing the truth during the course of the disease. Children have amazing capabilities to understand difficult situations. However, when their normal world is turned upside down and whispered conversations go on behind closed doors, they often imagine situations that are worse than reality. They often feel hurt and confused by what seems to be a lack of attention, unreasonable demands, or expectations placed on them.

The goal in telling the children that someone in the family has cancer is to give them an opportunity to ask questions about the disease and to express their feelings about it. Of course, all of us want to shield our children from pain, but pain that they understand is easier for them to cope with than the pain and fear of the unknown or imagined threats.

## SHARING FEELINGS

Sometimes, the whole family suspects the truth before the diagnosis is made. Someone recognizes the symptoms, or the family doctor seems overly concerned. Nonetheless, hearing the words tumor, cancer, or malignant can be devastating. It is often impossible to take in the reality of the diagnosis immediately. We hear it, but somehow, we don't believe it. This is normal. People's minds have a vast capacity to absorb information only when they are ready to accept it.

## THE FAMILY ADJUSTS

The period following diagnosis is a difficult time of adjustment for family members. Each person must deal with his or her own feelings while trying to be sensitive to the person who has cancer. Being part of the family doesn't mean you can make people talk about their feelings before they are ready. You need sources of support too. There are ways to encourage openness. Be ready to listen when others are ready to talk, and let your continued presence show your support. Remember, however, the person with cancer gets to set the timetable.

Sometimes, in trying to support the person with cancer, you may actually cut off his or her attempts to express feelings. Remember that lifting the spirit doesn't mean hiding from the truth. Some family may rush in with assurances that "everything will be all right." When there is really no such assurance, do not deny the reality of the patient's situation. Denial may cause the patient to withdraw, feel deserted, and be left to face an uncertain world alone. Unintentionally, you've abandoned the one you hoped to help and set up patterns that can be difficult to change just when support is important.

## FINDING HOPE

There are ways to find hope during periods of despondency or despair. We all need to remember the individuality of each case. We tend to get caught up with statistics and averages, but no two cancers ever behave the same way. Everyone has different genes and immune systems. Their will to live and urge to fight also vary. These cannot be measured on charts or graphs. No one can offer any of us "forever," but there are good prognoses. Despite an increasing number of cancer diagnoses, promising test results and effective treatments can reinforce a positive outlook of life.

## LISTENING, SHARING, BEING YOURSELF

As a family member or friend of the cancer patient, there are different ways in which you can be important. You can listen to expressions of feeling or act as a sounding board for a discussion of future plans. You can help focus anger or anxiety by helping explore the specific causes - drug reactions, the job situation, finances, and so forth. This may be what cancer patients need - someone to listen, react and absorb their outpourings, not necessarily to "do" anything. It is a difficult role, but it can be immensely rewarding.



Many people think they don't know "how to act" around people with cancer. The best you can offer is to be natural, to be yourself. Let your intuition guide you. Do what you can comfortably do; don't try to be someone you are not. This in itself is comforting.

## **COPING WITHIN THE FAMILY**

Problems within the family can be the most difficult to handle simply because you cannot escape them at home. Some family members deny the reality of cancer or refuse to discuss it. It is not uncommon to feel isolated or unable to face cancer openly.

In these situations, individual counseling or cancer patient groups can provide the needed support and reinforcement. Moreover, these resources provide an outlet for the frustrations you face within the family.

## **CHANGING ROLES**

Families may have difficulty adjusting to the role changes that are sometimes necessary. One husband found it overwhelming to come home from work, prepare dinner, help his children with their homework, change bedding and dressings, and still try to provide companionship and emotional support for his children and sick wife.

On the other hand, the usual head of the household might now be the family's most dependent member. In addition to roles as a wife, a mother, and a caretaker, a woman might have to add a job outside the home for the first time. A spouse who used to share the load can become the sole breadwinner and homemaker.

These changes can cause great disturbance in the ways family members interact. The usual patterns disappear. Parents might look to children for emotional support at a time when the children themselves need it the most. Teenagers might have to take over major household responsibilities. Young children can revert to infantile behavior as a way of dealing with the impact of cancer on the family as a unit and on themselves as individuals. The sheer weight of responsibility can become insurmountable, destroying normal family associations and consuming time needed for rest and recreation.

## **THE HEALTH OF THE FAMILY**

Performing too many roles at once can endanger emotional wellbeing and the ability to cope. Setting priorities may solve the problem. For example, the cancer patient and/or their caretaker can relax housekeeping standards or learn to prepare simpler meals. Perhaps the children can take on a few more household chores than they have been handling.

If a simple solution is not enough, consider getting outside help. Some agencies might provide trained homemakers. Let someone who can be objective help sort out necessary tasks from those that can go undone. The financial cost of professional services needs to be weighed against the emotional and physical cost of shouldering the load alone.

## **SUPPORT FROM THE FAMILY**

The desire to "do something" is common for those whose family member or friend has cancer. There is nothing anyone can do to change the course of cancer, so they may do everything they can for the patient. Sometimes, doing everything is the worst course to follow.

People with cancer still have the same needs and often the same capabilities as they did before. If they are physically able, they need to participate in their normal range of activities and responsibilities. Helplessness, or worse, an unnecessary feeling of helplessness, is one of the great woes of the person with cancer.

Even a bedridden patient is probably still able to discuss treatment options, financial arrangements, and the children's school problems. As difficult as it may be, the rest of the family must make efforts to preserve as much of the patient's usual role within the family as possible.

The least you can do is to keep the patient informed of necessary decisions. You can help the seriously ill patient ward off feelings of helplessness or abandonment if you continue to share your activities, goals, and dreams as before.

## **HELP FOR THE CHILDREN**

Children may have difficulty coping with cancer in a parent. Mom or Dad may be away from the house - in a hospital that may be hundreds of miles from home - or home in bed, in obvious discomfort, and perhaps visibly altered in appearance.

In the face of such disturbance, children are often asked to behave exceptionally well also: to play quietly, perform extra tasks, or be understanding of others' moods beyond the maturity of their years. Children may resent lost attention. Some fear the loss of their parent or begin to imagine their own death. Some children, formerly independent, now become anxious about leaving home and their parents. Disciplinary problems can arise if children attempt to command the attention they feel they are missing.

It may help if a favorite relative or family friend can devote extra time and attention to the children, who do need comfort and reassurance, affection, guidance, and discipline. Trips to the zoo are important, but so is regular help with homework and someone to attend the basketball awards banquet. If your efforts to provide support and security fail, professional counseling for children or with parents together may be necessary and should not be overlooked.

## **SELF-IMAGE WHEN TREATMENT BRINGS YOU DOWN**

Cancer treatment is nearly always aggressive. Surgery can be disfiguring. Radiation or drug treatment may be prescribed following surgery to ensure that no hidden, microscopic cancer cells are left to travel to other parts of the body.

Treatment can extend over weeks or months, and its side effects can include nausea, hair loss, fatigue, cramps, skin burn, or weight changes. It is not unusual for the treatment to cause more illness or discomfort than the initial disease. The cancer patient must contend with emotional reactions to such treatment and side effects. It is difficult to convince yourself that you are recovering when you feel absolutely rotten. It is hard to be optimistic when you feel worse now than at the time of diagnosis.

The schedule of radiation or drug treatments may seem endless. You are convinced that there never was a day when you didn't feel awful and there never will be a time when you will feel normal - if only you could remember how normal feels.

Some even interpret these physical reactions to treatment as signs that the cancer is returning. This is rarely the case, although it may be necessary to remind yourself of this fact again and again. Do not hesitate to share such anxieties with your doctor.

A return to the hospital setting for outpatient treatment causes anxiety for some cancer patients. Researchers studied a group of women undergoing radiation therapy following breast cancer surgery. They found that the women felt better psychologically immediately after leaving the hospital after surgery than they did once follow up treatment began. It can be unsettling, indeed, to return again and again to the hospital or physician's office, places which may have come to represent the most frightening aspects of cancer.

You can try to plan special activities for the days when you feel well and brace yourself for the days when you feel awful. When you feel unwell, try to cheer yourself up. Sometimes your emotions will fluctuate due to the treatment. It's helpful to others and easier for you if you inform people around you that treatment may cause mood swings.

The known is usually easier to cope with than the unknown. It is important to be familiar with each treatment's side effects and their causes. Not only does knowledge reduce fear, but some side effects can be eliminated (or at least eased) through treatment changes, medication, or changes in diet.

## **BODY IMAGES**

Each of us develops our self-image over the years. We may not be completely satisfied with that image, but usually we are comfortable with it when we are with someone we love. This helps us feel sexually attractive to our partner. Disfigurement, hair loss, nausea, radiation burns, and even fatigue can destroy your good feelings about your physical appearance. If you now believe you are unattractive, you might anticipate rejection and avoid physical contact with your partner. It is good to remember that in most cases your partner is more concerned about your wellbeing than his or her own.

The overriding reactions probably begin with, "Will treatment succeed?", "How can I show my love and support?", etc. The least common is, "What about sex?" In reality, your partner may be afraid to appear overly eager and therefore insensitive. So, it may be up to you to show a desire for physical contact and to let it be known whether you are interested in sexual intimacy as well as other expressions of affection, such as hugging, caressing, and kissing.

Keep in mind that it's not only your body that makes you "sexy." There are also intangible qualities that your partner finds you attractive: a sense of humor, intellect, a certain sweetness, great common sense, special talents, or loving devotion - we all know what qualities we have other than our physical appearance that make us special. If you feel you have lost some of your special qualities along with a breast, leg, or prostate gland, counseling may help you change that perspective.

## **REBUILDING MIND AND BODY**

Time, along with demonstrations of love, understanding, and affection by your partner and family should help you work through feelings about your changed body image. In addition, some find that physical activities improve their sense of being when they are in touch with their bodies.

People who take on a challenging activity that moves them beyond a disability - skiing for amputees for example - find that it can provide a whole new sense of self-worth. "Can you believe, I have more pride in this ragged body than I did when it was all there?" asked a tennis ace, who took up the game after his colostomy.

Poetry, music, painting, furniture building, sewing, and reading provide creative growth of which you can be equally proud. Acquiring new interests and talents can also help strengthening personal image.

## **WHAT SPOUSES CAN DO**

Spouses of cancer patients can be affected by disfigurement or debilitation of their loved ones caused by cancer treatment. Although you understand that he/she needs your support and love most at this time, you may find that you are unable to provide that support. You might feel awkward about physical contact because you think your partner is not ready for it and that you will be judged as being insensitive.

It helps to remember that touching, holding, hugging, and caressing are ways to express the acceptance and care that are so important to the person with cancer. More than words, they show love and express your belief in the patient's continued desirability as a physical being.

If barriers begin to grow, perhaps a professional counselor can help you work out your reactions toward the patient, the disease, or your feelings that too much of the responsibility has been placed upon your shoulders. Make sure you are doing whatever you can to reestablish bonds of closeness and caring.

## **WHEN FRIENDS DON'T CALL**

Lost friendships are one of the real heartbreaks cancer patients face. Friends do not call for a variety of reasons. They might not know how to respond to a change in your appearance or just don't know what to say to you. Their absence does not necessarily mean they no longer care about you. If you believe discomfort rather than fear is keeping a particular friend from visiting, you might try a phone call to dissolve the barrier.

Examine carefully whether friends shun you or whether you have withdrawn from your usual social contacts to protect your own feelings. You can neither enlighten nor draw comfort from an empty room. If possible, the best place to be is out in the world with other people.

## FIGHTING LONELINESS

Regardless of what you do, your friends might desert you. Circumstances might have left you alone before cancer struck. This is an awful loneliness, difficult for anyone to endure. There are no easy answers or solutions. The mutual support of other people with cancer might provide some solace and comfort. There are probably others in your community who need your companionship as much as you need theirs.

Search for cancer support groups in your community to make new friends who understand what you are going through. Being housebound does not mean that they are unwilling to share some quiet moments or some deep sorrow with someone who will understand. A physician, social worker, visiting nurse, or member of the clergy should be able to help you contact another cancer patient who could use the company.

## STAYING INVOLVED

When you have cancer, you need responsibilities, diversions, outings, and companionship just as before. As long as you are able to, you should go to work, take the kids to the zoo, play cards with friends, or go on a trip. Try to remember that responsible pursuits keep life meaningful, and recreation keeps it stimulating. You need activities that give you a sense of purpose and enjoyment.

"Doing," is not the same as overdoing. Try to recognize your limitations as well as your capabilities. Fatigue can bring on crushing despair, and many people have found that a safeguard as simple as adequate rest fends off depression. Exhaustion weakens our physical and emotional defenses.

## THE YEARS AFTER

Cancer is not something anyone forgets. Anxieties remain as active treatment ceases and the waiting stage begins. A cold or a cramp may be cause for panic. As 6-month or annual check-ups approach, you swing between hope and anxiety. As you wait for the mystical 5-year or 10-year point, you might feel more anxious rather than more secure. These are feelings all cancer patients share. No one expects you to forget that you have had cancer or that it might recur. Each patient must seek his/her own ways to cope with the underlying insecurity of not knowing his or her true state of health. The best prescription seems to be a combination of challenging responsibilities requiring a full range of skills, participating in interesting activities, and a generous dash of playfulness and laughter.

You still might have moments when you feel as if you lived perched on the edge of a cliff. These moments can come up anytime, but they will be fewer and farther apart if you fill your mind with thoughts other than cancer.

Cancer might take away your belief that tomorrow stretches forever. In exchange, you are granted the vision that each day is precious, a gift to be spent wisely and richly. No one can take that away.

*"Coping with Cancer" is developed by the American Cancer Society, the Chinese Community Health Education Council, and the Chinese Community Health Resource Center, 1992. The material is partially excerpted from "Taking Time, 1990 by the National Cancer Institute. Revised 2021.*

## Chapter 6: The Perspective of Chinese Medicine

### ON HEALTH MAINTENANCE

DURING its history of more than five thousand years, China has developed many effective exercises that promote health, such as Tai Chi and Qi Gong.

These health-promoting exercises have carried on through the centuries and are popular even now.

They have several similar characteristics:

- They must be practiced daily in order to enjoy their beneficial effects.
- They enhance our body's ability to combat disease.
- They are harmless and do not have bad side effects if practiced correctly.

According to the Chinese philosophy of medicine, illness occurs when:

- Qi and blood are weakened,
- The ying and the yang (natural balance of opposites) are disrupted
- The natural and organic systems of the body are impaired.
- The breakdown of these processes leads to the impediment of the normal circulation of qi and blood. This results in the retention of the body's heat and toxins, accumulation of moisture and mucus, leading to an eventual illness.
- In Chinese medicine, it is believed that extreme emotions also play a very important role in a person's susceptibility to illness.

For example, extreme fear or excitement may cause:

- Restlessness
- Palpitations
- Insomnia
- Psychiatric disorders
- Extreme anger may cause:
  - Liver dysfunction
  - Back pain
  - Depression
  - Anxiousness
  - Irritability
  - Menstrual disturbances
  - Impairment of blood circulation leading to internal bleeding



Extreme sadness may lead to:

- Spleen and stomach dysfunctions such as lack of appetite and discomfort after eating
- Chinese medicine also subscribes to the belief that an unbalanced diet and exposure to certain climatic elements (known also as the "six external negative elements": wind, cold, heat, dampness, dryness, and fire) may also cause illness.
- Therefore, according to Chinese Medicine, an individual must follow the guidelines below in order to enjoy good health.
- Practice health-promoting exercises to aid the circulation and maintenance of qi, to balance the ying and yang, to enhance the functions of the body's systems and organs, and to increase the body's immunity to diseases.
- Be optimistic, stable, and have a firm grip on his/her emotions.
- In addition, a person should also live in accordance with the natural environmental changes and maintain a balanced diet to have good health.
- If a person becomes ill, he/she must face the reality of his/her illness, adopt a positive and optimistic attitude, and cooperate with the doctor's treatment.
- A patient should not abandon established Western medical treatment or rely solely upon traditional Chinese medicine.

The American Cancer Society agrees with the theories advocated by Chinese medicine: exercise, proper nutrition, positive outlook on life, and a coordinated life to better help cancer patients face the disease and treatment process. When exercising, it is best to be with relatives, friends, or others. Pay attention to your body and speed to prevent fatigue and hurting yourself.