

WIN ABC

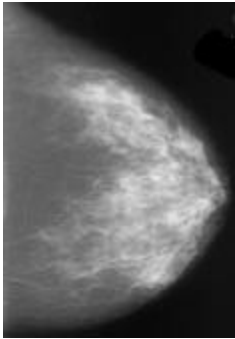
Women's Information Network
Against Breast Cancer

Summer 2001

Issue I, Volume IV

Breast Health Monitoring Guidelines

Mammography



There are many questions linked to what are the proper screening guidelines for mammography. Early detection is still the key to survival when it comes to breast cancer. When breast cancer is found early, the patient has the best chances for survival.

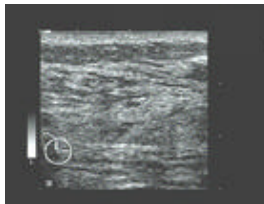
Mammography is the gold standard for screening. *Screening* is the process of evaluating healthy people with no symptoms to detect early signs of disease. The purpose of a screening or *baseline* mammogram is to establish a record of healthy breast tissue appearance against which later changes in breast tissue can be compared.

Mammography is also used for diagnostic imaging when the woman has a symptom or an abnormal physical examination of the breast. The mammogram can detect tiny, *nonpalpable* or pre-clinical abnormalities, both benign and malignant. When tumors are palpable (usually greater than 1 x 1 centimeter), mammograms are useful in characterizing the lesion and detecting unsuspected, nonpalpable changes in the same breast or in the opposite breast. *Women who have a history of radiation therapy to the breast or who have breast implants need special attention to mammographic technique to maximize accuracy in monitoring.*

Because a palpable lesion may not always be visible on mammography (even if it is large), it is important that a qualified health professional evaluate any visual, palpable or mammographic findings in the context of the entire clinical situation. Some findings warrant clinical follow-up; some, fine-needle aspiration; and some, surgical biopsy. A lump not visible on mammogram requires follow-up, possibly with needle aspiration or biopsy.

What Happens When a Lump is Found or an Abnormal Mammogram Report Occurs (*Diagnostic Alternatives*)

Ultrasound

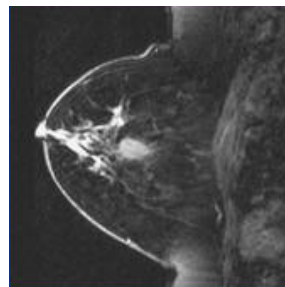


Sonography is the use of *ultrasound* or "sound waves" to detect changes in breast tissue. It is not effective as a screening tool but it is a useful

adjunct to mammography. Ultrasound is used to determine if a mass detected by palpation or mammography is solid or cystic (containing fluid). Cystic lesions are usually benign and do not require biopsy. Ultrasound is also useful in localizing a nonpalpable lesion for biopsy and sometimes reveals rupture of an implant despite a normal mammogram.

Magnetic Resonance Imaging (MRI)

Magnetic Resonance Imaging (MRI) is a sophisticated method of imaging the breast without radiation. It is not used as a screening tool and its diagnostic usefulness is being evaluated. MRI may prove valuable as a secondary test to evaluate abnormalities detected by mammography, ultrasound or palpation. Currently, it is used most often to rule out implant rupture and is rarely used as a means of breast cancer screening.



*Excerpts from the Breast Buddy Volunteer Curriculum©
WIN Against Breast Cancer*

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*"Never doubt that a small,
group of thoughtful,
committed citizens
can change the world.
Indeed, it is the only
thing that ever has."*

Margaret Mead





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Nutrition Tips During Treatment

Changes in Body Weight During Treatment

Many people assume that while they are on chemotherapy they will be sick and lose weight.

With the new anti-nausea (anti-emetic) drugs (eg., Zofran, Compazine) available to breast cancer patients, nausea and vomiting are no longer a given. In fact, many patients actually *gain* weight. If this is the case, patients are allowed to diet. *(It is always important to discuss dietary changes with the medical team.)*

Weight Gain

Three contributing factors:

- ☞ Nibbling and snacking more than usual to help ease queasiness.
- ☞ Eating as a means of dealing with anxiety.
- ☞ Reduced levels of activity.

Suggestions for Patients Undergoing Chemotherapy

? Schedule five small meals a day as opposed to three large meals a day. It is easier on the digestive system and will help keep snacking between meals to a minimum.



- ☞ Drink more water -- it is filling and invigorating.
- ☞ Remain active. Choose activities that you will enjoy.

This will:

- ☞ Get you out of the house.
- ☞ Help relieve anxiety and depression.
- ☞ Help burn excess calories.

Suggestions for Patients Having Trouble with Nausea, Vomiting, Loss of Appetite and Weight Loss

- ☞ Ask the doctor to increase the anti-nausea medication if vomiting continues.
- ☞ Drink enough fluids to avoid dehydration and the imbalance in electrolytes that can result from vomiting and diarrhea. This can be done by keeping your urine as lightly colored as possible.
- ☞ Add a liquid milkshake-like supplement such as Ensure (available in most drug stores, grocery stores and pharmacies) to the diet. This will help boost energy and supply a portion of the nutrients and calories the body needs throughout the course of treatment.
- ☞ Ask someone else to cook the food. Some patients feel that it is easier to eat certain foods if they do not have to prepare them.
- ☞ Choose foods high in protein such as eggs, cheese or peanut butter. This will help to maximize the value of the small amount of food that will be eaten.

☞ Some patients undergoing chemotherapy complain about a metallic or bitter taste; switching to plastic eating utensils may alleviate the problem.

☞ Avoid using favorite foods to stimulate appetite. Some patients associate them with treatment and find that they can never eat them again.

Always discuss any problems such as a severe loss of appetite or nausea and vomiting with members of your health care team.



Changes in Digestion During Treatment

Some anticancer drugs may cause problems with diarrhea. As chemotherapy drugs work to fight and kill unhealthy cells, they also affect healthy cells and bacteria in the digestive tract such as lactobacillus acidophilus -- known as the "friendly bacteria". Diarrhea is often associated with a decrease in the numbers of these bacteria. Increasing lactobacillus acidophilus intake can restore a proper balance in the digestive system.

How to Restore the Proper Balance

- Eat foods rich in lactobacillus acidophilus such as yogurt and many cheeses (check labels).
- Drink acidophilus-fortified milk.
- Take acidophilus supplements (available in health food stores).



ask informed!

A word of caution for patients:

Always discuss complementary treatments such as nutritional supplements with members of your health care team. *When in doubt -- questions and keep your doctors*

A Tip to Help a Patient Deal with Nausea

If you are experiencing nausea, try to get your mind off the feeling by listening to calming music, watching a good movie or doing other activities that you find pleasant and relaxing. Get some fresh air if you are cooped up in your office or home.

Helping Patients Deal with Life After Treatment Tips to Turn Our Experiences with Cancer Into a Positive Approach for the Way in Which We Live “Life After Cancer”

Survivorship and Partnership

Some of the challenges facing cancer survivors include:

🦋 Staying healthy during and after treatment. Utilize community resources such as WIN ABC, don't play “Wonder Woman” or “Super Man”; allow others to pitch in and help with your day-to-day responsibilities; communicate your feelings and needs to others – people want to help but often don't know where to begin, so give them some suggestions of things they can do for you.

🦋 Staying healthy after the crisis and fear have diminished. Your family, friends and co-workers are back to business as usual and you are back into a regular routine. A little dust on your coffee table is not the end of the world; take a bubble bath or pick up a good book instead of picking up the dust cloth!

🦋 Stress Management – Keep your immune system well tuned; listen to relaxation tapes; learn how to meditate, exercise and eat right.

🦋 Dealing with fear of recurrence or dealing with a recurrence. When in doubt, check it out!

🦋 Relationship issues, body image and sexuality issues. Take the pressure off yourself and ease back into intimacy.

Think of it as “Re-entry”:

🦋 Intimacy – looking at scars for the first time; showing partner your scars for the first time; making love for the first time.



🦋 Social – family routine; social routine; work place routine. Redefine roles and responsibilities; work together to establish new routines and new norms.

🦋 Community – transition from patient active to patient activist/advocate. Learn how to be heard and make a difference. Get informed and stay informed!

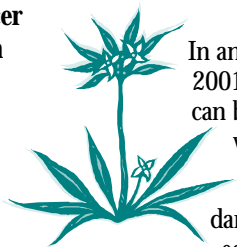
🦋 Work with other individuals and organizations to affect public opinion and public policy on key areas such as:

- 🌿 anti-tobacco legislation
- 🌿 environmental protection legislation
- 🌿 the need for more money for breast cancer research

Become and remain a partner with your health care team, your health care system and with your community.

Part 4 of a 4 part series
Excerpts from the Breast Buddy Volunteer Curriculum©
WIN Against Breast Cancer*

Herbal Medicines and Perioperative Care



In an article released on July 11, 2001 by JAMA, herbal medications can be very hazardous to a patient who undergoes surgery.

The herbs most likely to be dangerous to your health are: echinacea, ephedra, garlic, ginkgo, ginseng, kava, St. John's Wort and valerian. These herbs account for more than 50% of all herbs on the market. Some of the complications that can arise include stroke, bleeding, cardiovascular instability. Taking these herbs during the perioperative period places the patient at an added risk.

The research follows an extensive study led by Michael K. Ang-Lee, MD; Jonathan Moss, MD, PhD; Chun-Su Yuan, MD, PhD.

Many patients do not disclose that they are taking supplements and many physicians do not ask the patient what they are taking. People who take these supplements tend to think of them more as a food supplement versus a medication. There is no real classification of the supplements and currently they are classified as dietary supplements by the Food and Drug Administration.

Each drug should be discontinued well before surgery and caution for some because they have a withdrawal period. The recommendations are as follows:

Echinacea—Discontinue before surgery: As far in advance as possible, especially for transplant patients or those with liver problems.

Ephedra—Discontinue at least 24 hours before surgery.

Garlic—Discontinue at least seven days before surgery.

Ginkgo—Discontinue at least 36 hours before surgery.

Ginseng—Discontinue at least seven days before surgery.

Kava—Discontinue at least 24 hours before surgery.

St. John's Wort—Discontinue at least five days before surgery.

Valerian—Discontinue before surgery: Taper off weeks before surgery. Suddenly stopping can cause withdrawal problems.

The next time you or a loved one is scheduled for surgery, be sure to inform your doctor if you are taking any over-the-counter medications, herbs, diet pills or food supplements. It just very well could save your life.



Source: Journal of the American Medical Assn.

In Honor

Mr. & Mrs. Joe Baker's Wedding

From Charles Elder

Adam Blechman

From Stephanie & Ernie Davis

Lisa Boswell

From Michael Borden

Lawrence I. Schwartz, MD

Sonia Calleja

From Bibi, Paul & Ivonne

Charlotte, Renee, Sharon, Happy & Women Reaching Women

From Justine Richard

Sandra Elson

From Nikki & Howard Applebaum

Renée & Larry Gaines

25th Wedding Anniversary
From Esther & Michael Morris

Joan Gluck

From Fred Feldheim

Tammy Lesin

From Judith & Irving Feld

Ryna Lipkind

From Nancy & Leonard Marcus

Nancy Marcus Birthday

From Myrna Bauman

Anita Glick

Jean Lamden

Nancy & Leonard Marcus

Shirley Shafer

Betsy Mullen

From Grayce & Sid Hess

Aurelia Nattiv

Julia Pelayes

From Veronica & Tristan Pelayes

Karen Rodrigues

From Lynette Finley

Melanie Turner

From Toya Turner

WIN ABC Ladies

From Nancy & Maria Didia

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Lynne Goldsmith

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From our President/CEO:

Betsy Mullen

Dear Friends,

WIN ABC sends out information, free of charge, to over 100 newly diagnosed patients every month via our Breast Aid Education Program. With the recent increase in postal rates, the cost of each patient package ranges from \$5.60 to \$7.35 in postage alone. Each packet includes many books, videos and WIN's Resource Guide. We also send similar packages of information to family and friends. We know that breast cancer affects more than just the person diagnosed; it affects everyone who cares about them.

WIN staff stays in touch with patients, plus sends additional information as needed throughout their treatment and well into their recovery. Each patient receives comprehensive one-on-one service from WIN and knows that we are here for them on an ongoing basis. This personalized care makes a positive impact and is appreciated by all those whom we serve.

We are able to provide this service through the help and generosity of others. Please continue to support our efforts through tax-deductible donations as we work together to help patients fight and WIN against breast cancer. Your help and support truly make a difference in the lives of many.

With gratitude,

Betsy

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In Memory Of

Jared Blechman

From Barbara & Curt Fuller

Lynn Brown

From "Chosen Ones"

Lic Chechi

From Deepa Prashant

Melina Iorio Cimirro

From Enrichetta Potter

Mary Louise Gamboa

From Leida Erickson

Lynda Halsey

From Margaret Bloom

Linda Poepoe

Selina Howitt

From Loretta Howitt

Edith Icard

From Christie Icard Buchanan

Lynn Jain

From Sonia Calleja

Sydell Land

From Quarles School

Mary Marcoux

From Loretta Howitt

Pam Pilate

From Shelly Blechman

Ester Polyak

From Alla & Alex Polyak

Rose Slavin

From Lawrence I. Schwartz

Margaret Agnes Walsh

From Lawrence I. Schwartz



Find the Fight.
Find a Cure.

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