MAYO CLINIC Cancer Center

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In recent years, the value of prevention strategies has become more obvious. In addition to helping reduce your risk of cancer, they can also help you avoid heart attacks, strokes, diabetes and many other serious diseases. The following strategies describe how you can make more healthful decisions while improving your daily quality of life.

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Strategy #1: Decide to Be Tobacco-Free

Not using tobacco, or deciding to stop using it, is one of the most important health decisions you can make. Using any type of tobacco, whether it's cigarettes, snuff, pipe tobacco, chewing tobacco or cigars, greatly increases your chance of getting cancer, heart attack, stroke, gum disease and fertility problems.

Strategy #2: Eat a Variety of Healthy Foods

Your diet is another important risk factor you can control — second only to smoking. Although making healthy selections at the grocery store and at mealtime doesn't guarantee you won't get cancer or struggle with weight issues, it can help reduce your risk. Research suggests that about 30 percent of cancers are related to nutrition and physical factors, including excess weight.

Strategy #3: Stay Active and Maintain a Healthy Weight

Healthy Weight Maintaining a healthy weight and exercising regularly play important roles in preventing cancer, adult-onset diabetes, osteoporosis, stress, depression and cardiovascular disease, including high blood pressure and stroke. It can also reduce the lifestyle-limiting effects of fibromyalgia and arthritis. When you maintain a healthy weight, you are likely to feel stronger and healthier.

If you are inactive, you can benefit from making simple changes in your life, such as taking a daily walk. Walking is a gentle form of exercise and an excellent way to improve your health.

Strategy #4: Drink Alcohol in Moderation, If at All

If you drink alcohol, do so in moderation. Your risk for many different cancers increases with the amount of alcohol you consume and the length of time you've been drinking regularly. Even moderate drinking may increase your risk.



Strategy #5: Protect Yourself From the Sun

Skin cancer is one of the most common kinds of cancer — and one of the most preventable. Although repeated exposure to X-rays or contact with certain chemicals can play a role in this disease, sun exposure is by far the most common cause of skin cancer. In fact, 90 percent of skin cancer occurs on parts of the body that usually aren't covered with clothing when you go outside — your face, hands, forearms and ears. The following sun-sensible habits can help protect you from the sun.



- Avoid peak sun hours between 10 a.m. and 4 p.m.
- Stay in the shade
- Cover exposed areas
- Choose the right sun protection Use sunscreen with a sun protection factor (SPF) of at least 30
- Don't skimp on sunscreen
- Avoid reflective surfaces
- Don't use indoor tanning beds or sunlamps

Strategy #6: Learn Your Risks

Knowing your health risks and being aware of changes in your body may help you prevent cancer or help your health care provider detect it at an early stage. Early detection increases your chances of a cure.

To help assess the role heredity may play in your risk factors, research the health histories of family members. Start by talking to immediate relatives (parents, siblings and children) to find out if any of them have had a serious illness and at what age it occurred. It would also be helpful to find out the health histories of your grandparents, aunts, uncles and close cousins. If you see a pattern of disease occurring at early ages, you may wish to schedule a visit with your health care provider.

You also need to be aware of changes in your body that could signal illness. While signs and symptoms are not always obvious, the following warning signs can help you recognize some early indicators:

- Change in bowel or bladder habits
- A sore that doesn't heal
- Unusual bleeding or discharge
- Thickening or a lump in your breast, testicles or elsewhere
- Indigestion or difficulty in swallowing
- Obvious change on your skin, or in a wart or mole
- Nagging cough or hoarseness
- Unexplained weight loss

Strategy #7: Take Advantage of Screenings and Self-Exams

Regular screening and self-examination for certain cancers increase your chances of discovering cancer early — when treatment is more likely to be successful.

Regular visits to your health care provider should include examination of your skin, mouth, colon and rectum. If you're a man, examination should also include your prostate and testes. If you're a woman, add your cervix and breasts. A variety of screening tests can help detect cancer long before you might on your own. Tests your health care provider may recommend include:

- Clinical breast exam
- Digital rectal exam
- Mammogram
- Pap smear and pelvic exam
- Prostate-specific antigen (PSA) test
- Skin exam
- Sigmoidoscopy/colonoscopy
- Skin self-exam

Social Work: An Integral Part of Caring for Cancer Patients and Their Families

By Brent Moos

A cancer diagnosis can present challenges on many different levels. Having someone to listen and respond to those challenges is important. Individuals with cancer are often presented with concerns including: adjusting to a new lifestyle; relationships and work; understanding the financial impact of treatment and care; and coping with feelings related to a diagnosis.

Oncology social workers are academically trained professionals who help patients and families mediate personal and social stresses related to a cancer diagnosis.

Many oncology social workers hold a master's degree, which requires advanced training in human development and behavior. Licensure at the master's level qualifies the social worker to diagnose and provide therapy for mental health disorders, such as depression, anxiety and adjustment disorder.

The social work profession holds in high regard the values of service, social justice, dignity and worth of the person; importance of human relationships; integrity and competence. With this goal in mind, along with a set of professional values and standards, social workers are a vital resource to cancer patients and their families. They offer assistance with:

- Psychosocial assessment and planning
- Individual and group counseling
- Hospital to community transition planning
- Information, education and referrals
- Advocacy

Psychosocial Assessment and Planning

An assessment completed by a social worker helps the medical team and family evaluate the resources and dynamics within a family system. This process can be helpful in identifying the status of roles and relationships and the current coping style of each family member in response to a cancer diagnosis.

Individual and Group Counseling

Participating in some form of counseling through the cancer journey can be a powerful way for individuals and their families to take control of the situation. This process can also help patients understand and validate their thoughts and feelings such as a sense of loss, fear, anger, depression, anxiety or other emotional concerns.

Hospital to Community Transition Planning

Returning to the community following a hospitalization can require careful planning and mobilization of resources. Whether patients transition to their home or to a facility for care, support from an inpatient social worker and/or nurse discharge planner can help them access community services such as health care, medical equipment, meals, counseling and other resources.

Information, Education and Referrals

Social workers can direct individuals to available resources and answer questions about topics such as: options for health coverage, advance directives, medication assistance programs, emotional support and much more. They also work closely with American Cancer Society patient navigators to locate community resources and services.

Advocacy

Social workers are trained advocates and can also help individuals navigate systems and offer support in the medical or community setting.



"Social workers are key instruments and activists

in oncology as change-agents," says Alan Brankline, inpatient medical social worker at Mayo Clinic's campus in Scottsdale, Ariz. "We help patients, the family system and the entire team by connecting them to resources, listening to their needs, counseling, and most importantly providing a support network during their journey."

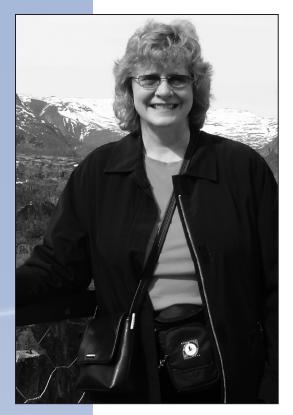
For more information or to meet with a Mayo Clinic oncology social worker, call:

Rochester: (507) 284-2131 Arizona: (480) 342-1124 Florida: (904) 953-6904

Brent Moos is an oncology social worker at Mayo Clinic in Minnesota. Portions of this article were adapted from the work of the Mayo Clinic Medical Social Services Social Work Identity Task Force in Rochester.

Melanoma Survivor Takes Prevention Seriously

By Nicole Bennett Engler



When spending time outdoors during the day, Becky wears protective clothing.

Since her 20s, Becky Smith has had a history of atypical moles and biopsies. She knew to take precautions, such as staying out of the sun during peak hours and applying sunscreen before heading outdoors.

Over the next 20 years, Becky went to Dermatology appointments every six months, which often resulted in biopsies of abnormal-looking moles. After two moles that had changed color were removed and tested, Becky was diagnosed with malignant melanoma on her right thigh and calf in March 2007.

The cancer diagnosis, never opportune, came at a time when Becky was busy with life's other issues. She had just learned that her daughter was getting married, and that one of her co-managers was leaving the Mayo Clinic Section of Patient Education.

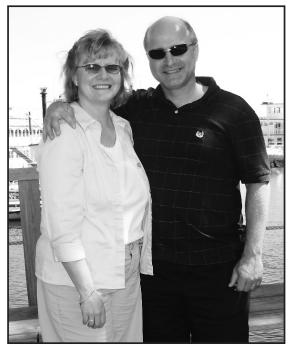
"This diagnosis shocked me," says Becky. "It was extremely stressful and difficult — both a personal and a professional challenge. I've been a nurse for 24 years, but I've never had such a struggle balancing work and my personal life."

She was later referred to Mayo Clinic's Medical Genetics Department, where she was diagnosed with familial melanoma syndrome (FMS), an inherited tendency to develop melanoma. Becky also learned that, because of the genetic condition, her immediate family members had a 50 percent chance of being diagnosed with melanoma. As a result, Becky's immediate family members have annual skin exams and practice sun safety.

"Receiving the FMS diagnosis was frightening, but the more I learned about it, the more I understood and I had hope," says Becky, adding that she was relieved to learn that she could live a long, healthy life if she took precautions such as check-up appointments and sun protection.

Just when Becky thought her cancer experience was winding down, she received her third melanoma diagnosis — in her left calf in June 2007. Luckily, she did not require invasive surgery or radiation as her melanoma had not spread beyond the cancerous moles in her legs.

Over the next 18 months, Becky had about 80 moles biopsied with no further melanoma identified. "This has really made me feel optimistic," says Becky. "I feel like I'm living a normal life again."



Becky (pictured with her husband, Joey) found a silver lining in her cancer experience by discovering how much her family and friends care about her.

Becky reiterates the importance of finding melanoma early, as well as diligent skin care and regular Dermatology checkup appointments.

Looking back, she credits her medical team, colleagues, family and friends for helping her overcome her fears during such a scary time.

"I credit Mayo's Dermatology team for saving my life," she says, adding that her longtime dermatologist, Rokea el-Azhary, M.D., Ph.D., recognized her risk and kept a close watch on her skin. "Dr. el-Azhary was so compassionate throughout my entire experience and her team truly paid attention to my personal and emotional needs. She understood when I requested to bring clinical health psychologist Kristin Vickers Douglas, Ph.D., to several of my procedures to help me with my anxiety. I am really thankful for this level of individualized medicine."

Becky continues to take sun exposure seriously and is careful when she ventures outdoors during peak hours between 10 a.m. and 4 p.m.

"It's a lifestyle issue — it's about reprioritizing," she says.

While Becky used to garden during the day, she now gardens in the evening. And, while outside, she always wears sunblock.

"It's also a quality-of-life issue," she says. "I wanted to live to see my daughter married."

Becky says she found a silver lining in this experience by discovering how much her family, friends and colleagues care about her and her well-being.

Outside of gardening, Becky enjoys ceramics, exercising and reading. She and her husband, Joey, have three children, Diana, 26, Brandon, 23, and Aaron, 20. Diana got married last summer.



Becky enjoys spending time in her garden during off-peak sun hours in the evening.



Adjustment Disorder	A condition in which a person responds to a stressful event (such as an illness, job loss, or divorce) with extreme emotions and actions that causes problems at work and home.
Advance Directive	A legal document that states the treatment or care a person wishes to receive or not receive if he or she becomes unable to make medical decisions (for example, due to being unconscious or in a coma). Some types of advance directives are living wills and do-not-resuscitate (DNR) orders.
Anxiety	Feelings of fear, dread, and uneasiness that may occur as a reaction to stress.
Atypical (Atypia)	State of being not typical or normal. In medicine, atypia is an abnormality in cells in tissue.
Biopsy	Tissue removed from the body and examined under a microscope to determine whether disease is present.
Depression	A mental condition marked by ongoing feelings of sadness, despair, loss of energy and difficulty dealing with normal daily life. Other symptoms of depression include feelings of worthlessness and hopelessness, loss of pleasure in activities, changes in eating or sleeping habits, and thoughts of death or suicide. Depression can affect anyone, and can be successfully treated. Depression affects 15-25 percent of cancer patients.
Psychosocial	Involving both psychological and social aspects.

Definitions obtained from <u>www.cancer.gov</u>. Defined terms are in italics in newsletter.

Book Review



Cancer: What Causes It, What Doesn't

American Cancer Society, 2003. 217 pp. ISBN-13: 9780944235447, \$14.95.

Can you get cancer from cellular phones, deodorant or power poles? These and more questions are answered in this book, which shares who is at risk for cancer and how it develops. Chapters also address scientific studies and how to read them, and dangers that exist in our home and workplaces. The authors review how cancer was first discovered in Egyptian mummies as well as an overview of how cancers form at the molecular level. Topics covered include pesticides, radiation, radon and ultraviolet light. A complete list of resources, a glossary of terms, references and an index are included. Helpful to readers is the writing style that describes each term in the text with an explanation and first person quotes from cancer researchers.



Having Cancer is Hard — Finding Help Shouldn't Be

By Celeste "CC" Chervenka, American Cancer Society Patient Navigator



Recognizing that cancer patients face many challenges after receiving a cancer diagnosis, Mayo Clinic partners with the American Cancer Society (ACS) to offer on-site patient navigators to help cancer patients, their caregivers and families connect to resources, programs and support.

Patient navigators work in collaboration with the entire health care team — including social workers, chaplains, and hospice staff — to help patients as they face the psychosocial, emotional and financial issues that can accompany a cancer diagnosis.

Patient navigators can help individuals:

- Learn more about cancer treatment options and how to emotionally manage a new diagnosis
- Assist with locating transportation and lodging resources
- Get answers to financial and insurance questions
- Explore options for wigs, head coverings and skin care issues
- Learn how the hospital works and key questions to ask a health care provider
- Find local support groups and programs for patients when they return home

Services are free and confidential.

While at Mayo Clinic in Minnesota, meet ACS navigators Jeri Lensing and Angela Young by visiting the Stephen and Barbara Slaggie Family Cancer Education Center on the street level of the Gonda Building, or on the 10th floor resource area. You can also call them at (507) 266-9288.

Visit Celeste "CC" Chervenka at Mayo Clinic in Arizona at the Patient Health and Education Library on the concourse level in the clinic or call her at (480) 301-5990.

At Mayo Clinic's Jacksonville, Fla. campus, American Cancer Society trained volunteers assist individuals in the Cancer Resource Room on the eighth floor of the Davis Building. Call (904) 953-7290.

For more information or to connect with a patient navigator, visit www.cancer.org or call (800) 227-2345, 24 hours a day, seven days a week. The ACS will also soon offer an around-the-clock opportunity to chat online with a patient navigator.



Celeste "CC" Chervenka Mayo Clinic in Arizona



Jeri Lensing Mayo Clinic in Minnesota



Angela Young Mayo Clinic in Minnesota

Calendar of Events

June

27 *Living with Lynch Syndrome:*

An Update far Families 10 a.m. – 3 p.m. Mayo Clinic Rochester, Minn. (507) 284-2241

27 "Get Your Rear in Gear"5K Run/Walk

Mayo Civic Center Rochester, Minn. (952) 426-6521 www.getyourrearingear.com

September

12 *Multiple Myeloma Charitable Foundation 5K Walk/Run* Essex Park Rochester, Minn.

Rochester, Minn. (507) 259-3979 http://mmcf.wordpress.com

20 Join the Journey: Breast Cancer Awareness

Walk Mayo High School Rochester, Minn. www.jointhejourney.us

October

3 *Minnesota Light the Night Walk* Leukemia & Lymphoma Society Lake Phalen Park St. Paul, Minn. (763) 852-3041 www.lightthenight.org

24 Women's Cancers 2009:

Merging Science and Care Phillips Hall, Siebens Building Mayo Clinic Rochester, Minn. 507-266-4886

November

5 *Light the Night Walk*

Leukemia & Lymphoma Society Jacksonville, Fla. (904) 332-6414 www.lightthenight.org

Together Pays Tribute to Colleague, Friend

The Together newsletter editorial board would like to honor and recognize our friend and colleague, Julie Earle, R.N., who passed away unexpectedly in February 2009. Julie was a radiation oncology therapy nurse for more than 20 years at Mayo Clinic Rochester and served on the Together editorial board since 2004. Most recently, she served as a radiation



Julie Earle, R.N.

oncology nurse supervisor. She touched the lives of many patients, families and colleagues over the years and will be remembered for her compassion, friendliness, humor and professionalism. Julie was an excellent mentor to new nurses in radiation oncology and will be missed by all.



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together

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Patient Advocates

The mission of Mayo Clinic Cancer Center is to provide compassionate, state-of-the-art care for the patient with cancer today and continued advancements in the prevention, diagnosis, treatment and cure of cancer in the future. The programs and services of the Cancer Center span the three Mayo Clinic campuses in Arizona, Florida and Minnesota.

together newsletter provides educational information for cancer patients, their family, caregivers and friends. Physicians, staff and cancer patients write the articles. To view the **together** newsletter online, visit www. mayoclinic.org/cancer-education-rst.

To submit story ideas, provide feedback or unsubscribe, call (507) 266-9288 or e-mail canceredprog@mayo.edu.