Stone Soup Group

Catherine Steele
Pacific University

Jaime Yoshino
Pacific University

Recommended Citation
https://commons.pacificu.edu/ipp/20

This Innovative Practice Project is brought to you for free and open access by the School of Occupational Therapy at CommonKnowledge. It has been accepted for inclusion in Innovative Practice Projects by an authorized administrator of CommonKnowledge. For more information, please contact CommonKnowledge@pacificu.edu.
Stone Soup Group

Description
The overall project of Pacific University School of Occupational Therapy students, Jaime Yoshino and Catherine Steele, aimed to address the concerns and quality of life of women and their support systems facing a diagnosis of breast and reproductive cancers.

Previous ties and connections were made through advisor Nancy Krusen and graduated students (Nicole Teixeira and Stefanie Fendrick), with the local non-profit organization Breast Friends. Breast Friends’ mission is to ensure that no women goes through cancer alone, by minimizing fear and isolation of cancer with programs and resources that empower emotional support and hope. They provide several workshops, informational packets, one-on-one support, and programs to help women, their family, friends, co-workers and community through the cancer experience. Breast Friends collaborated with previously stated Pacific University students and advisor, to express the desire and need for a multi-professional, educational support program for women recently diagnosed and/or actively receiving treatment for breast and reproductive cancer.

The proposed program, Stone Soup Group, intends to provide holistic approach to address a variety of physical, mental, emotional, and spiritual health concerns, through six bi-monthly sessions lasting for approximately 90 minutes, at Pacific University Health Professions Campus in Hillsboro, Oregon. We hope to have various healthcare professionals, community resources, and volunteers present sessions on a variety of topics. The overall outcome is to provide education, support, and community resources through a multi-professional approach, in order to promote quality of life for women recently diagnosed or currently receiving treatment for breast and other reproductive cancers, as well as all those effected by the trauma of cancer.

Disciplines
Occupational Therapy | Rehabilitation and Therapy

Rights
Terms of use for work posted in CommonKnowledge.
Introduction:

The overall project of Pacific University School of Occupational Therapy students, Jaime Yoshino and Catherine Steele, aimed to address the concerns and quality of life of women and their support systems facing a diagnosis of breast and reproductive cancers. Having a recent diagnosis of cancer requires a revision of roles and activities, development of new behaviors to cope with emotional and physical effects, changes to financial situation, and significant changes to social relationships, all which effects one’s sense of well-being and quality of life. () It is becoming more necessary to develop a multi-professional approach prior to and during cancer treatment in order to improve quality of life, due to the fact that cancer is all encompassing to both the patient and his/her family and friends.

According to the Susan G. Komen For the Cure (2012), it is estimated that in 2012 there will be 226,870 new cases of invasive Breast Cancer, and 39,510 breast cancer deaths. Oregon has among the highest incidence rate in the nation, with 130 per 100,000 women. (Susan G. Komen For the Cure, 2012). There is a growing trend that survival is more and more common, however it is still important to acknowledge the high quantity of women diagnosed.

Gynecological cancers are also prevalent and affect a large population of women within North America. Gynecological cancers include cervical, ovarian, uterine, vaginal, and vulvar. Every six minutes an American woman will be diagnosed with gynecological cancer, uterine cancer being the most common of the reproductive system (UCSF Medical Center, 2012). According to the CDC (2012), in the United States there was an incidence of 80,976 women diagnosed with a gynecological cancer, with mortality rates
of 27,739. Approximately 35,000 women are diagnosed with uterine cancer each year; it currently is the forth most common cancer in women. Additionally, it is estimated that 20,000 women are diagnosed with ovarian cancer each year; it is eighth most common cancer on women and the fifth most common cause of cancer death.

Within the Portland Metropolitan area, there are several support services available for individuals facing cancer. Of these services, more than half of these programs are mainly counseling and support group services, several are medical based centers, such as Providence, OHSU, Legacy, Kaiser Permanente, and Advantist, and the rest are mainly alternative medicine approaches like yoga, imagery, acupuncture, and naturopathic medicine.

Research Supporting a Multi-Professional, Educational Program:

Breast and reproductive cancers can have profound effects on a person’s physical, mental, emotional, social, and spiritual states. This may impact functioning in major areas of occupational performance (self-care, productivity, and leisure) engagement in valued activities, and the ability of the individual to fulfill certain roles (mother, wife, friend, worker). Vockins (2004) demonstrated that by engaging in activities that have meaning or value, individuals experiencing personal crisis, such as a life-threatening diagnosis, could elicit a sense of familiarity and control.

There has been substantial evidence for an educational, multi-disciplinary, community-based program to help with adjustment and adaptation and promote engagement in roles and valued activities. Wehlan et al. (1997) found that 84% of newly diagnosed cancer patients reported a desire and need for information. Helgeson, Cohen,
Schulz, & Yasko (1999) found that education-based groups facilitated significant improvement in initial adjustment to a breast cancer diagnosis both initially after intervention and at a 6 month. Education and community resources can help to ease the burden on support systems, answer questions that may be difficult to discuss, and help an individual create a positive routine to maintain engagement in occupations and improve quality of life.

In relation to a multidisciplinary approach, extensive research has been done on the benefits of multidisciplinary collaboration in treatment of breast and other cancers (Tripathy, 2003; Pruthi et al, 2007; Lattazi et al, 2010). Anderson et al (2008) stated that successful cancer management requires the ongoing communication and active collaboration among patients and a diverse team of specialists and healthcare professionals. Professionals should maintain constant communication and collaboration in order to apply therapies and management options in an organized fashion, respect patient preferences, and improve patient understanding and comfort with treatment.

**Occupational Therapy’s Relevance:**

The role of an occupational therapist in oncology is “to facilitate and enable an individual patient to achieve maximum functional performance, both physically and psychologically, in everyday living skills regardless of his or her life expectancy” (Vockins, 2004). As a part of a multidisciplinary team, OTs can provide an unique perspective on holistic, client-centered approach, and play a vital role in organization of information that will best equip the participant to achieve independence, positive occupational performance (self-care tasks, leisure, employment, etc), and quality of life.
Also, occupational therapy concepts can provide education on specific treatments such as pain management, relaxation and stress management, lymphedema and physical interventions, home assessments and modifications, and activity analysis and adaptations.

Through this research and gathering of statistics, it is evident that there’s a continued increasing rate of diagnosis, and also a lack of multi-professional community resources provided for clients recently diagnosed with cancer. Also, there is a significant amount of research supporting the benefits of a multi-professional, educational program to support the journey to recovery.

The Process

Innovative Practice Projects (IPP), developed and completed by third year students in preparation for graduation, often create new relationships with local programs or continue with pre-established projects previously initiated by other students. Previous ties and connections were made through advisor Nancy Krusen and graduated students (Nicole Teixeira and Stefanie Fendrick), with the local non-profit organization Breast Friends. Breast Friends’ mission is to ensure that no women goes through cancer alone, by minimizing fear and isolation of cancer with programs and resources that empower emotional support and hope. They provide several workshops, informational packets, one-on-one support, and programs to help women, their family, friends, co-workers and community through the cancer experience. Breast Friends collaborated with previously stated Pacific University students and advisor, to express the desire and need for a multi-
professional, educational support program for women recently diagnosed and/or actively receiving treatment for breast and reproductive cancer.

The proposed program, Stone Soup Group, intends to provide holistic approach to address a variety of physical, mental, emotional, and spiritual health concerns, through six bi-monthly sessions lasting for approximately 90 minutes, at Pacific University Health Professions Campus in Hillsboro, Oregon. We hope to have various healthcare professionals, community resources, and volunteers present sessions on a variety of topics. The overall outcome is to provide education, support, and community resources through a multi-professional approach, in order to promote quality of life for women recently diagnosed or currently receiving treatment for breast and other reproductive cancers, as well as all those effected by the trauma of cancer.

Through discussion with Nancy Krusen, three goals were targeted to further develop this program. Our first goal included co-developing and presenting an Inter-professional Case Conference about breast cancer care to educate and provide awareness to other professional students about multi-professional cancer treatment. The conference took place on January 20, 2012 at the Tuality Hospital Education Center. This involved collaborating with faculty and students from a variety of health professions, including pharmacy, physical therapy, medical administration, dental hygiene, and physician assistant. The case conference was successful in providing healthcare students with awareness of the importance of a multi-professional approach to breast cancer care, and also creating positive discussions and conversations among students and faculty about best practice. During this case conference Catherine Steele and Jaime Yoshino also presented on the partnership with Breast Friends to create a free, educational, interactive,
multi-professional program for women and support systems recently diagnosed with cancer, and asked for volunteers interested in participating in the development of this program.

A second goal established was to develop a pilot program curriculum for Stone Soup Group. During this pilot program, research was to be gathered in order to establish evidence of effectiveness of the program. To initiate the research proposal, Jaime and Catherine completed National Institutes of Health (NIH) ethics training online required by the Institutional Review Board (IRB). This was vital for recognizing the ethics and consideration for research participants in completing a research project. Before the proposal was fulfilled, evaluations to collect data were chosen based on the desired outcomes by participants. The World Health Organization Quality of Life-BREF (WHOQOL-BREF) questionnaire (See Appendix _: WHOQOL-BREF) and a intake questionnaire based on client roles, condition, and interests (See Appendix __:Initial Questionnaire). These were chosen as evaluation methods. A request for permission to use the WHOLQOL-BREF for data collection was required from the World Health Organization (WHO) to comply with copyright laws (See Appendix _: Permissions Letter to use WHOQOL-BREF). An initial proposal was developed along with necessary supporting documents, contact was made with the IRB and the process of applying to construct a research project titled: The effects of a multidisciplinary program on quality of life for women recently diagnosed with reproductive cancer. (See Appendix _: IRB Proposal)

The third goal was to develop a six-session curriculum through identifying a multi-professional team. Catherine and Jaime first identified 12 significant professions
that would provide beneficial information to these participants. These include oncology, nursing, pharmacy occupational therapy, physical therapy, diet/nutrition, psychology, massage therapy, acupuncture, naturopathic medicine, and financial planning. Through a variety of resources, contacts, and research, students developed relevant topics to include in the curriculum, and basic guidelines for information and resources. Then, students made connections with healthcare professionals and students to assist with compiling the curriculum.

**Research Methods for Stone Soup Group Pilot Program:**

For the proposed pilot program participants will be identified or recruited through partnering organization Breast Friends, local oncologists and cancer centers, and support groups and organizations. Researchers will review with identified participants the informed Consent to Participate, evaluation forms, and the ability to withdraw from the study. Participants will complete an initial WHOQOL-BREF and Stone Soup Group Questionnaire at the time they begin the initial session. Upon completing final session (3 months) participants will be asked to complete a second WHOQOL-BREF and Stone Soup Group Questionnaire. The study will take place at Pacific University Health Professions Campus, 190 SE 8th Ave., Hillsboro, OR 97123. This study will take place for three months, for six, 90 minutes sessions, bimonthly. Sessions will cover a variety of topics and will be conducted by identified health professionals (See Appendix: Program Overview).

Due to time constraints, a proposed start date of the program has yet to be identified. Nancy Krusen and future Pacific University School of Occupational Therapy
student will initiate the pilot program and complete the gathering and interpretation of data. When future students are added to this research project, the students will provide the appropriate training certificates in order to complete this study.

**Future Development:**

- Identify healthcare professionals to lead sessions and collaborate as apart of a multi-professional team. Due to lack of commitment and timing, specific professionals have not been identified.
- Apply for funding options and grants.
- Organizing fundraising and volunteer help, there will always be a need for funding, awareness, and volunteers.
- Initiate Stone Soup Group Pilot Program
- Gather and interpret result of proposed current research project
- Always more research could be done measuring specific functional outcomes related to education, multi-professional approaches, and this program as a supportive resource through diagnosis and treatment.

**Conclusion:**

This previously established partnership developed by former Pacific University graduates and advisor Nancy Krusen, along with individuals at Breast Friends, have only begun to develop the grand potential to providing care for this population. Breast Friends is a successful non-profit organization that offers multiple resources, and they continue to develop additional programs to fulfill a
variety of needs for this population. This program in an innovative, therapeutic option and community resource that serve a population that was not addressed through Breast Friends, while also improving quality of life of these participants.

This process has provided Catherine and Jaime with a beneficial experience that involved collaboration with an organization, provide unique services, act as a consultant, learn the research process, and many more. This will continue to provide opportunities for research, experiences for future students, and advocate for our profession.
1. What is the title of this study?
The Effects of a Multidisciplinary Program on Quality of Life for Women Recently Diagnosed with Reproductive Cancer

2. Study overview

a. What is the purpose of this study?
The purpose of this study is to determine the efficacy of a multidisciplinary program on the improvement of the quality of life for women and her support systems recently diagnosed with breast and other reproductive cancer. This study will contribute to evidence-based practice by examination of multidisciplinary approach to support this population.

b. What is the basis of this undertaking?
This action research will evaluate the efficacy of a multidisciplinary program as a primary resource for women and support systems.

c. What do you plan to do with the results of this study?
The results of this study would provide evidence to establish a community-based program. The results will also provide information about the changes in quality of life for the participants and support systems as a result of involvement in the program.

3. What is the nature of your intended sampling and data collection activities?

a. Does the study involve interaction or intervention with living people?
This program’s primary aim is to provide a free, supportive and interactive multidisciplinary resource within the community to improve the quality of life for women who are recently diagnosed and/or actively receiving treatment for breast and other reproductive cancers. Information about the program will be publicized in the community, such as announcements through Breast Friends, medical providers, and other support groups. The program will involve six rotating sessions that will occur every other week for 6 weeks. Sessions will include information, group discussions, and interactive activities related to a topic. The six topics include:
- Effects of Cancer
- Daily Norms and Adaptations Modifications
- Promoting Healthy Lifestyles
- Emotional health, Support Systems, and Sexuality
- Alternative Medicine
- Financial Planning

Participants will complete an initial World Health Organization Quality of Life Measure (WHOQOL) (see Appendix A) and Questionnaire (see Appendix B) at the beginning of the first session, upon the completion of the six-session program, and 6 month follow-up.

b. Does the data already exist in “archival” form?
Data is not archival

i. Is the data set, as it exists, expected to remain private, by law?
These data will remain private, protected by HIPPA and FERPA.
ii. Does the investigator have ready access to the identities of the individuals from whom the information was obtained by the agency with which you are working? Identification of the individuals will consist of initials and the last four digits of the phone number.

iii. If all personal identifiers have been removed from the data source, could the investigator re-identify the data? Investigators will not be able to identify participants.

iv. Explain in precise detail the nature of the data you will be using: note where it is housed, how you will gain or be permitted access, and how participant privacy will be protected.

The nature of the data will be based on the demographics and quality of life. The data will be kept in a locked filing cabinet, and electronic data will be password protected.

4. Where will the study take place?
   This study will take place at Pacific University Health Professions Campus (HPC2) in a reserved conference room.

5. Appropriate permissions
   Not applicable, investigator will reserve campus room when needed.

6. What is the anticipated time frame of the study?
   The study will take place from the point of IRB approval, expiring one year from approval date. The description of this proposal will be presented at the Research and Practice Symposium. Findings will also be submitted for journal publications and conference/poster presentations including inter-professional conferences.
1. Study title

The Effects of a Multidisciplinary Program on Quality of Life for Women Recently Diagnosed with Reproductive Cancer

2. Study personnel

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Institution</th>
<th>Program</th>
<th>Email</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nancy Krusen</td>
<td>Principle Investigator</td>
<td>Pacific University</td>
<td>Occupational Therapy</td>
<td><a href="mailto:nekrusen@pacificu.edu">nekrusen@pacificu.edu</a></td>
<td>503-352-7349</td>
</tr>
<tr>
<td>Catherine Steele</td>
<td>Occupational Therapy Student</td>
<td>Pacific University</td>
<td>Occupational Therapy</td>
<td><a href="mailto:stee0304@pacificu.edu">stee0304@pacificu.edu</a></td>
<td>971-241-1458</td>
</tr>
<tr>
<td>Jaime Yoshino</td>
<td>Occupational Therapy Student</td>
<td>Pacific University</td>
<td>Occupational Therapy</td>
<td><a href="mailto:yosh4732@pacificu.edu">yosh4732@pacificu.edu</a></td>
<td>808-383-7455</td>
</tr>
</tbody>
</table>

3. Study invitation, purpose, location, and dates

You are invited to participate in a research study on the potential efficacy of a multidisciplinary program on the improvement of the quality of life for women and her support systems recently diagnosed with breast and gynecological cancer. The project has been approved by Pacific University Institutional Review Board and will be completed by two occupational therapy students supervised by a faculty advisor. You are invited to attend six sessions that will occur one every other week for 6 weeks. Sessions will include information, group discussions, and interactive activities related to the following topics:

- Effects of Cancer
- Daily Norms and Adaptations Modifications
- Promoting Healthy Lifestyles
- Emotional health, Support Systems, and Sexuality
- Alternative Medicine
- Financial Planning

You will be asked to complete a Quality of Life Measure (WHOQOL) and Questionnaire at the beginning of the first session, again following the completion of the six-session program, and once again after 6 months.

This study will take place at Pacific University Health Professions Campus (HPC2), in a reserved conference room. The study will begin with the first session of the pilot program on _____ at ____. The results of this study will provide evidence to support the continued implementation of the program, as well as provide evidence-based practice for health professionals and women and support systems.
4. Participant characteristics and exclusionary criteria

Study participants must be women 18 years or older, who have a diagnosis of breast or other reproductive cancer. Primary support systems are invited to participated, male or female, over 18 years or older. Participants can be of any ethnicity. This pilot study will only include adults with English fluency.

5. Study materials and procedures

Number of Participants: Currently there is no cap on limit of participants; an estimated number will be 10-20.

Procedures: This program will include six sessions that will provide support and information in an educational and interactive manner. Participants will fill out a WHOQOL and Questionnaire at beginning of the first session and at the end of the last session.

A typical session will be structured:
- 30-40 minutes of education and information presentation
- 30 minutes of group time: the participants will be split into 2 groups. One group of the women experiencing the cancer, and another group of her families and supports. This will allow the women and supports to ask questions and express concerns to the professionals that they would not necessarily want to share with the other.
- 15 minutes to bring the groups back together, provide resources and possibly do a short activity.

Topics Include:
- Effects of Cancer
- Daily Norms and Adaptations/Modifications
- Promoting Healthy Lifestyles
- Emotional Health, Support Groups, Sexuality
- Alternative Medicine
- Financial Planning

Duration/Time: Duration 90 minutes sessions, once every other week, for six sessions.

Participants are encouraged to be present at all sessions.

Additional costs to Participants: Transportation to program sessions

Study Materials:
Appendix A: The World Health Organization Quality of Life (WHOQOL) -BREF- is an international cross-culturally quality of life assessment instrument comprising 26 items, measuring the following broad domains: physical health, psychological health, social relationships, and environment. The WHOQOL will be given to the participants at the beginning of the first session, again following the completion of the six-session program, and once again after 6 months. The purpose is to examine the efficacy of this program through the improvement and changes in quality of life for the participants.
Appendix B: A questionnaire developed by the investigators to gain information on demographics of the participants and his/her daily roles, routines, and personal interests.

6. Risks, risk reduction steps and clinical alternatives

a. Unknown risks

It is possible that participation in this study may expose you (or an embryo or fetus, if you are or become pregnant) to currently unforeseeable risks.

The study poses minimal risks. Completing the questionnaires and participating in program sessions may prompt strong emotions. Enrollment is voluntary, and participants have the opportunity to withdrawal from the study at any time without consequences to participation in the program. Breach of confidentiality is possible by other participants, potentially causing emotional distress.
b. Anticipated risks and strategies to minimize/avoid
Participation in the study is voluntary with minimal risks. All participants involved are given an informed consent sheet along with a verbal explanation of the purpose of the study. Participants may leave the study at any time without consequences. If unforeseen emotional, psychological, or physical concerns arise at during involvement in this study, participants will be referred to their existing primary care provider.

c. Advantageous clinical alternatives
This study does not involve experimental clinical trials.

7. Adverse event handling and reporting plan
In the case of a minor adverse reaction reasonably attributable to participation in the study, the investigators will notify the IRB by the next normal working day. In the case of more serious adverse events that occur during or for a reasonable period following the study, the investigators will notify the IRB within 24 hours. If unforeseen emotional, psychological, or physical concerns arise at during involvement in this study, participants will be referred to their existing primary care provider or emergency services if necessary.

8. Direct benefits and/or payment to participants
a. Benefit(s)
There is no direct benefit to you as a study participant.

b. Payment(s) or reward(s)
Participants will not be paid for their participation.

9. Promise of privacy
Demographic data collected will only be reported in aggregate form and only as it pertains to the outcome of the study. Participants will provide identifiers only as initials and last four digits of phone numbers on the WHOQOL and Questionnaire. Consent forms with signatures will be held separately in a locked filing cabinet. Confidential material will be held for up to 7 years following the study. At that time research documents will be destroyed.

10. Medical care and compensation in the event of accidental injury
During your participation in this project it is important to understand that you are not a Pacific University clinic patient or client, nor will you be receiving care as a result of your participation in this study. If you are injured during your participation in this study and it is not due to negligence by Pacific University, the researchers, or any organization associated with the research, you should not expect to receive compensation or medical care from Pacific University, the researchers, or any organization associated with the study.

11. Voluntary nature of the study
Your decision whether or not to participate will not affect your current or future relations with Pacific University. If you decide to participate, you are free to not answer any question or withdraw at any time without prejudice or negative consequences. If participant chooses to withdraw, all documentation will be destroyed.
12. Contacts and questions

The researcher(s) will be happy to answer any questions you may have at any time during the course of the study. If you are not satisfied with the answers you receive, please call Pacific University’s Institutional Review Board, at (503) 352-1478 to discuss your questions or concerns further. If you become injured in some way and feel it is related to your participation in this study, please contact the investigators and/or the IRB office. All concerns and questions will be kept in confidence.

13. Statement of consent

I have read and understand the above. All of my questions have been answered. I am 18 years of age or over and agree to participate in this study. I have been offered a copy of this form to keep for my records.

Yes  No
〇  〇  I am 18 years of age or over.
〇  〇  All my questions have been answered.
〇  〇  I have read and understand the description of my participation duties.
〇  〇  I have been offered a copy of this form to keep for my records.
〇  〇  I agree to participate in this study and understand that I may withdraw at any time without consequence.
〇  〇  I give permission for the researcher(s) to use (un/altered) images in published reports that do not allow others to ascertain my identity.

Participant’s signature ____________________________ Date

Principal investigator’s signature ____________________________ Date
1. Study title

The Effects of a Multidisciplinary Program on Quality of Life for Women Recently Diagnosed with Reproductive Cancer

2. Study personnel

<table>
<thead>
<tr>
<th>Name</th>
<th>Nancy Krusen</th>
<th>Catherine Steele</th>
<th>Jaime Yoshino</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role</td>
<td>Principle Investigator</td>
<td>Occupational Therapy Student</td>
<td>Occupational Therapy Student</td>
</tr>
<tr>
<td>Institution</td>
<td>Pacific University</td>
<td>Pacific University</td>
<td>Pacific University</td>
</tr>
<tr>
<td>Program</td>
<td>Occupational Therapy</td>
<td>Occupational Therapy</td>
<td>Occupational Therapy</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:nekrusen@pacificu.edu">nekrusen@pacificu.edu</a></td>
<td><a href="mailto:stee0304@pacificu.edu">stee0304@pacificu.edu</a></td>
<td><a href="mailto:yosh4732@pacificu.edu">yosh4732@pacificu.edu</a></td>
</tr>
<tr>
<td>Telephone</td>
<td>503-352-7349</td>
<td>971-241-1458</td>
<td>808-383-7455</td>
</tr>
</tbody>
</table>

3. Study invitation, purpose, location and dates

You are invited to participate in a research study on the potential efficacy of a multidisciplinary program on the improvement of the quality of life for women and her support systems recently diagnosed with breast and gynecological cancer. The project has been approved by Pacific University Institutional Review Board and will be completed by two occupational therapy students supervised by a faculty advisor. You are invited to attend six sessions that will occur one every other week for 6 weeks. Sessions will include information, group discussions, and interactive activities related to the following topics:

- Effects of Cancer
- Daily Norms and Adaptations Modifications
- Promoting Healthy Lifestyles
- Emotional health, Support Systems, and Sexuality
- Alternative Medicine
- Financial Planning

You will be asked to complete a Quality of Life Measure (WHOQOL) and Questionnaire at the beginning of the first session, again following the completion of the six-session program, and once again after 6 months.

This study will take place at Pacific University Health Professions Campus (HPC2), in a reserved conference room. The study will begin with the first session of the pilot program on _____ at ____. The results of this study will provide evidence to support the continued implementation of the program, as well as provide evidence-based practice for health professionals and women and support systems.
4. Participant characteristics and exclusionary criteria

Study participants must be women 18 years or older, who have a diagnosis of breast or other reproductive cancer. Primary support systems are invited to participated, male or female, over 18 years or older. Participants can be of any ethnicity. This pilot study will only include adults with English fluency.

5. Study materials and procedures

Number of Participants: Currently there is no cap on limit of participants; an estimated number will be 10-20.

Procedures: This program will include six sessions that will provide support and information in an educational and interactive manner. Participants will fill out a WHOQOL and Questionnaire at beginning of the first session, again following the completion of the six-session program, and once again after 6 months.

A typical session will be structured:

- 30-40 minutes of education and information presentation
- 30 minutes of group time: the participants will be split into 2 groups. One group of the women experiencing the cancer, and another group of her families and supports. This will allow the women and supports to ask questions and express concerns to the professionals that they would not necessarily want to share with the other.
- 15 minutes to bring the groups back together, provide resources and possibly do a short activity.

Topics Include:

- Effects of Cancer
- Daily Norms and Adaptations/Modifications
- Promoting Healthy Lifestyles
- Emotional Health, Support Groups, Sexuality
- Alternative Medicine
- Financial Planning

Duration/Time: Duration 90 minutes sessions, once every other week, for six sessions.

Participants are encouraged to be present at all sessions.

Additional costs to Participants: Transportation to program sessions

Study Materials:

Appendix A: The World Health Organization Quality of Life (WHOQOL) -BREF- is an international cross-culturally quality of life assessment instrument comprising 26 items, measuring the following broad domains: physical health, psychological health, social relationships, and environment. The WHOQOL will be given to the participants at the beginning of the first session, again following the completion of the six-session program, and once again after 6 months. The purpose is to examine the efficacy of this program through the improvement and changes in quality of life for the participants.

Appendix B: A questionnaire developed by the investigators to gain information on demographics of the participants and his/her daily roles, routines, and personal interests.

6. Risks, risk reduction steps and clinical alternatives

a. Unknown risks

It is possible that participation in this study may expose you (or an embryo or fetus, if you are or become pregnant) to currently unforeseeable risks.

The study poses minimal risks. Completing the questionnaires and participating in program sessions may prompt strong emotions. Enrollment is voluntary, and participants have the opportunity to withdrawal from the study at any time without consequences to participation in the program. Breach of confidentiality is possible by other participants, potentially causing emotional distress.
b. Anticipated risks and strategies to minimize/avoid

Participation in the study is voluntary with minimal risks. All participants involved are given an informed consent sheet along with a verbal explanation of the purpose of the study. Participants may leave the study at any time without consequences. If unforeseen emotional, psychological, or physical concerns arise during involvement in this study, participants will be referred to their existing primary care provider.

c. Advantageous clinical alternatives

This study does not involve experimental clinical trials.

7. Adverse event handling and reporting plan

In the case of a minor adverse reaction reasonably attributable to participation in the study, the investigators will notify the IRB by the next normal working day. In the case of more serious adverse events that occur during or for a reasonable period following the study, the investigators will notify the IRB within 24 hours. If unforeseen emotional, psychological, or physical concerns arise during involvement in this study, participants will be referred to their existing primary care provider or emergency services if necessary.

8. Direct benefits and/or payment to participants

a. Benefit(s)

There is no direct benefit to you as a study participant.

b. Payment(s) or reward(s)

Participants will not be paid for their participation.

9. Promise of privacy

Demographic data collected will only be reported in aggregate form and only as it pertains to the outcome of the study. Participants will provide identifiers only as initials and last four digits of phone numbers on the WHOQOL and Questionnaire. Consent forms with signatures will be held separately in a locked filing cabinet. Confidential material will be held for up to 7 years following the study. At that time research documents will be destroyed.

10. Medical care and compensation in the event of accidental injury

During your participation in this project it is important to understand that you are not a Pacific University clinic patient or client, nor will you be receiving care as a result of your participation in this study. If you are injured during your participation in this study and it is not due to negligence by Pacific University, the researchers, or any organization associated with the research, you should not expect to receive compensation or medical care from Pacific University, the researchers, or any organization associated with the study.

11. Voluntary nature of the study

Your decision whether or not to participate will not affect your current or future relations with Pacific University. If you decide to participate, you are free to not answer any question or withdraw at any time without prejudice or negative consequences. If participant chooses to withdraw, all documentation will be destroyed.
12. Contacts and questions

The researcher(s) will be happy to answer any questions you may have at any time during the course of the study. If you are not satisfied with the answers you receive, please call Pacific University’s Institutional Review Board, at (503) 352-1478 to discuss your questions or concerns further. If you become injured in some way and feel it is related to your participation in this study, please contact the investigators and/or the IRB office. All concerns and questions will be kept in confidence.

13. Statement of consent

I have read and understand the above. All of my questions have been answered. I am 18 years of age or over and agree to participate in this study. I have been offered a copy of this form to keep for my records.

Yes No

I am 18 years of age or over.

All my questions have been answered.

I have read and understand the description of my participation duties.

I have been offered a copy of this form to keep for my records.

I agree to participate in this study and understand that I may withdraw at any time without consequence.

I give permission for the researcher(s) to use (un/altered) images in published reports that do not allow others to ascertain my identity.

Participant’s full name (please print)

Parent/guardian’s name (please print)

Parent/guardian’s signature Date

Principal investigator’s signature Date
6 March 2012

Dear Nancy Krusen, PhD, OTR/L; Catherine Steele; Jaime Yoshino:

Thank you for submitting your project plans to the IRB and thus allowing Pacific University to comply with federal regulations regarding research activities involving human subjects.

Based upon the materials submitted, your project (048-12, An Interprofessional Educational Program for Women with Reproductive Cancer) has been classified as follows:

- **Not IRB Jurisdiction**
  - Please refer to the explanation below.

Eligible for IRB Exemption (as per 45 CFR 46.101(b))
- Please refer to the explanation below.

- **Expedited Review**
  - Please refer to the explanation below.

- **Full Board Review**
  - Please refer to the explanation below.
  - Your documents will be reviewed by the full board at its next meeting. Feedback will arrive under separate cover after the meeting minutes are transcribed and collated.

Explanations:

The stated purpose of this study is to determine the impact of an inter-professional educational program on the quality of life for women recently diagnosed with breast or reproductive cancer, and members of their support system. The results will be used to inform the practices of the professionals working in this organization. This proposal was submitted as a research-related activity and examines the effectiveness of an existing service program. This co-chair agrees with this classification. Barring unexpected developments, no further IRB consultation is necessary. However, do not hesitate to contact the IRB if you think it appropriate. Good luck with the project.

Sincerely,

Philip Schot, PhD  
co-Chair, Pacific University IRB

Isaac Gilman, MLIS  
co-Chair, Pacific University IRB
This letter signifies that the above proposal has been reviewed and registered by the Institutional Review Board at Pacific University based on the materials furnished by the investigator(s). Please keep this letter on file, along with all informed consent and release forms, if applicable, for at least three (3) years, being mindful of participant confidentiality.

Also, because this proposal was deemed exempt or did not fall under IRB jurisdiction, it does not require continued approval from the IRB as long as it is not modified in such a way that it would no longer qualify under these categories. If you anticipate making changes to the research protocol, or if any participant experiences an adverse effect (e.g., physical injury or psychological distress), please contact the IRB office immediately. As a researcher, you are responsible for the well-being and safety of your participants.

For all proposals, including those that are exempt or not under IRB jurisdiction, please submit a project closure request once your research is no longer active. This request can be made through the IRB office.

If you have any questions please do not hesitate to contact us. We thank you again for your submission and wish you well in your research endeavors.

Sincerely,

Philip Schot, PhD
co-Chair, Pacific University IRB

Isaac Gilman, MLIS
co-Chair, Pacific University IRB
Stone Soup Group Curriculum

Created by:
Catherine Steele, OTS
Jaime Yoshino, OTS
Pilot Program for Breast Friends Session Outline

- **Effects of Cancer: RN, oncologist, pharmacist**
  - Types of treatment: chemo, radiation, surgery, hormone
  - Side effects
  - Medication Management
  - Pain Management
  - Hormonal changes
  - Surgery options

- **Daily Norms and Adaptations/Modifications: OT**
  - Roles and Routines and Schedules
  - Modifications and Adaptations to Activities of Daily Living
  - Relaxation and Support Groups

- **Promoting Healthy Lifestyles: PT, Dietians/Nutritionist, Dental Health**
  - Diets and Nutrition to promote health and wellness in relation to cancer
  - Exercising and strengthening through the cancer process, relation to related surgeries
  - Dental Health

- **Emotional Health, Support Groups, sexuality: Psychologist**
  - Support Groups
  - Sexuality and Intimacy
  - Emotional support
  - Self Image and Esteem (Possible Beautician)

- **Alternative Medicine: Massage Therapist, Acupuncturist, Naturopath, Nutritionist**

- **Financial Planning:**
  - Will writing
  - Financial planning
  - Record Keeping
  - Billing, Health Insurance

A typical session will look like this:
- 30-40 minutes of education and information presentation
- 30 minutes of group time: the participants will be split into 2 groups. One group of the women experiencing the cancer, and another group of her families and supports. This will allow the women and supports to ask questions and express concerns to the professionals that they would not necessarily want to share with the other.
- 15 minutes to bring the groups back together, provide resources and possibly do a short activity.
Definitions of Healthcare Professionals
This list of professionals is not all encompassing and is subject to revision as needed. Stone Soup Group directors will continually assess the participant’s needs for additional medical or community-based personnel.

Oncologists are medical doctors who specialize in the diagnosis and treatment of cancer. Oncologists specialize in three main types of treatment, medicine (chemotherapy), radiation, and surgical.

Registered Nurses are trained to provide services that are therapeutic, preventative, and various medical supports. Some are specialized in certain areas such as women care and breast health.

Pharmacists dispense prescriptions drugs to customers and patients. They also consult and counsel with other physicians, patients, and other healthcare professionals on the side effects, safety, dosages, and selection of medications.

Occupational Therapists help individuals to participate in activities of daily living such as feeding, toileting, and dressing; and instrumental activities of daily living such as home management, shopping, and meal preparation.

Physical Therapists provide treatment for individuals who are unable to move due to an illness or an injury. They specialize in promoting endurance, strength, and mobility through exercise and movement.

Nutritionists create food and nutrition programs, direct meal preparations, and look over the portion sizes of meals. They encourage healthy eating habits by modifications of diet.

Dental Health/Dental Hygienists encourage patients to maintain good oral health as well as provide preventative strategies for other dental care concerns.

Psychologists study mental conditions and behavior in humans by interpreting, observing, and recording how individuals interact with the environment. They provide treatment and consultations to promote positive mental and emotional health.

Massage Therapists use touch to move soft-tissue muscles and circulate blood flow in the human body. There are a variety of reasons for massage which include reducing pain, relieving heavily used muscles, and decreasing stress.

Acupuncturists use Chinese medicine approaches such as needles, herbs, and other tools to treat problem areas such as pain, headaches, and various side effects.

Naturopaths focus on holistic, proactive prevention and healing methods, principles and practices, and comprehensive diagnosis and treatment. They help facilitate the body’s inherent ability to restore and maintain optimal health.

Financial Planners provide guidance and assistance with medical bills, health insurance, budgeting, record keeping, and/or composing wills and assigning power of attorney.
Stone Soup Questionnaire

Initials: ___________  Last 4 digits of phone number: _____________

Diagnosis: ___________________________________________
Initial Date of Diagnosis: _______________________________
How did you hear about us? ______________________________

Current Health Professional Team:
- [ ] Oncologist
- [ ] Dentist
- [ ] Massage Therapist
- [ ] Physical Therapist
- [ ] Other: ________________________________________________________
- [ ] Nurse
- [ ] Eye Doctor
- [ ] Acupuncturist
- [ ] Nutritionist
- [ ] General Practitioner
- [ ] Psychologist
- [ ] Naturopathologist
- [ ] Occupational Therapist

I live  [ ] Alone  [ ] with: _______________________________________

Who and what are your primary supports? (eg. husband, parents, friends, particular support group, a gym, etc)

Who and what are your primary supports? (eg. husband, parents, friends, particular support group, a gym, etc)

What are you daily Roles? (eg. mother, employee, wife, friend, volunteer, etc)

What are you daily Roles? (eg. mother, employee, wife, friend, volunteer, etc)

What does your typical day look like?

| Morning: (wake up time, morning routine, etc) |  |
| Day: (work, volunteer, etc) |  |
| Afternoon: (pick up kids, work out, etc) |  |
| Evening: (evening routine, dinner, bed time, etc) |  |

What do you like to do for enjoyment and relaxation? And how often do you participate in those activities?

What do you like to do for enjoyment and relaxation? And how often do you participate in those activities?

How do you learn best?  Reading? Listening? Watching videos? Practice or in a group?

How do you learn best?  Reading? Listening? Watching videos? Practice or in a group?
Exit Questionnaire

Initials: __________  Last 4 digits of phone number: ____________

Where in your treatment are you? ____________________________________________
(ex. Prior to chemo/surgery, post chemo/surgery, during surgery/chemo)

Did a support system attend sessions?  ☐ Yes  ☐ No

Who? (ex. Spouse, parent, friend) ____________________________________________

Which sessions did you attend?

☐ Session 1: Effects of Cancer  (RN, Oncologist, Pharmacist)
☐ Session 2: Daily Norms, Adaptations/Modifications  (OT)
☐ Session 3: Promoting Healthy Lifestyles  (PT, Nutritionist, Dental Hygienist)
☐ Session 4: Emotional Health  (Psychologist)
☐ Session 5: Alternative Medicine  (Acupuncturist, Massage Therapist, Naturopath)
☐ Session 6: Financial Planning  (Financial Planner)

Which sessions were most relevant and why?

Are you seeking additional resources and supports that should be included?

What resources did you find most helpful?

Additional Comments?
Speaker Evaluation Form

Presentation Title: ____________________________

Speaker: ____________________________

Overall, I enjoyed this speaker and found him/her engaging and informative (circle one)

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The speaker(s) provided useful content</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>The speaker(s) was engaging</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>The speaker(s) had sufficient knowledge and expertise of the topic</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>The speaker(s) appeared well-prepared</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>The speaker(s) developed rapport and responded to my needs</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>The speaker(s) answered my questions thoroughly and respectfully</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>I would like to see this speaker again next year</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

What did you like about this speaker(s)?

What about this speaker(s) do you think needs improvement?

Additional Comments
Content Evaluation

Presentation Title:  
Speaker:  

Overall this presentation met my expectations and provided me with relevant information (Circle One)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please select a rating that best describes your experience with today's topic

<table>
<thead>
<tr>
<th>The content of this topic was helpful to my recovery</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I will further explore use of this discipline as apart of my team</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I plan to utilize the resources presented in this session</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>This topic helped ease some of my anxieties and fears</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The information met my expectations</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Handouts were useful and informative</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Audiovisual aids were easy to hear and see</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What did you find particularly helpful/useful in this session?

What would have liked to learn more about? What should be added to this topic?

Additional Comments
Resources and All Information in Curriculum Obtained From:

**Cancer Information:**

**Books:**
- The Breast Cancer Companion
  - By, Nancy Sokolowski and Valerie Rossi
- Dr. Susan Love’s Breast Book
  - By, Susan M. Love

**Websites:**
- The American Cancer Society: [www.cancer.org](http://www.cancer.org)
- Breast Friends: [www.breastfriends.org](http://www.breastfriends.org)
- The Breast Care Site: [www.thebreastcaresite.com](http://www.thebreastcaresite.com)

**Scheduling and Coordinating Help:**

**Websites:**
- Lotsa Helping Hands: [www.lotsahelpinghands.com](http://www.lotsahelpinghands.com)
- Care Calendar: [www.carecalender.org](http://www.carecalender.org)
- What Friends Do: [www.whatfriendsdo.com](http://www.whatfriendsdo.com)

**Physical Therapy and Exercise:**

**Books:**
- Yoga and Breast Cancer: A Journey to Health and Healing
  - By, Ingrid Kollack and Isabell Utz-Billing
- Staying Abreast, Rehabilitation Exercises for Breast Cancer Surgery
  - By, Annie Toglia

**Websites:**
- Staying Abreast: [www.stayingabreast.com](http://www.stayingabreast.com)

**Nutrition:**

**Books:**
- Eating Well, Staying Well During and After Cancer
  - By, American Cancer Society
- Tell Me What to Eat Before, During, and After Cancer Treatment
  - By, Jodi Buckman Weinstein

**Websites:**
- Nutrition and Cancer- Recipes for High-Calorie Drinks: [www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=86&ContentId=P07328](http://www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=86&ContentId=P07328)

**Naturopathic Medicine:**

**Books:**
  - By, Barbara MacDonald and Kelly Jennings
- The Definitive Guide to Cancer: An Integrative Approach to Prevention, Treatment, and Healing (3rd Edition)
  - By, Lise N. Alschuler and Karolyn A. Gazella
- Breast Cancer: Beyond Convention
Building and Supporting Support Systems:

Books:
- Helping Your Mate Face Breast Cancer
  - By, Judy C. Kneece
- When a Parent Has Cancer: A Guide to Caring for Your Children
  - By, Wendy S. Harpham

Websites:
- Men Against Breast Cancer (MACB): www.menagainstbreastcancer.org
- Breast Cancer Network of Strength: www.networkofstrength.org
- Helping Children When a Family Member Has Cancer (downloadable pamphlet): www.cancercare.org
- Sex and Intimacy: www.breastcancer.org/tips/intimacy/

Beauty and Shopping

Books:
- Beauty Pearls for Chemo Girls
  - By Marybeth Maida and Debbie Keiderer
- Ramy Gafni’s Cancer Beauty Therapy: The Ultimate Guide to Looking and Feeling Great While Living with Cancer
  - By, Ramy Gafni

Websites:
- Look Good… Feel Better: www.lookgoodfeelbetter.org
- Hip Hats With Hair: www.hatswithhair.com
- Tender Loving Care (tlc) Magazine/Catalog: www.tlcdirect.org
- Shop Well With You: www.shopwellwithyou.org
- Assistwear Garments: www.assistwear.com
- Still You Fashions: www.stillyoufashions.com
- The Breast Care Site: www.thebreastcaresite.com

Financial Planning:

Websites:
- Cancer Care – Financial Assistance: http://www.cancercare.org/financial
**Daily Norms and Adaptations/Modifications:**
Lead by: Occupational Therapy

**Goals and Objective:**
- Participants will engage in activities and informational sessions to address Roles and Routines and how cancer changes these in a women’s life.
- Participants will have the opportunity to discuss and share in a supportive group setting
- Participants will be introduced to different modifications and adaptations they will expect to encounter

**Roles and Routines:**
- Roles Activity:
  - Discussion of importance of keeping roles throughout the process and how they may change
- Routines: Schedules and Record Keeping
  - Pie of Life
  - Daily, Weekly, Monthly scheduling
  - Building your support system

**Modifications:**
- Energy Conservation
  - Asking for help when needed
  - Small ways to conserve energy
    - Breaking tasks into small steps
    - Taking breaks and resting
    - Delegating of tasks
    - Sitting to complete activities: hygiene, cooking, etc
    - Short cuts: buying pre-chopped vegetables
- Relaxation
  - Simple Yoga
  - Meditation
  - What relaxes you now? Maintaining these.
- Environmental Adaptations and equipment
  - Post Surgery: Handout
  - Aides: long handled sponge, sock aides, reachers, shower hoses, handle bars, shower chairs, commodes, etc.
  - Environmental adaptations:
    - Limiting reaching: bringing frequently used items down from high shelves or up from low cabinets
    - Stools in the kitchen and bathroom for energy conservation and safety
    - Railing for stairs, clear pathways, and reduce fall risks
What are ROLES?
- Behaviors expected by others and shaped by culture, that help you gain sense of your relationship to others.
- Roles shape our social interactions
- Roles influence our actions, what kinds of things we do, and our daily and weekly cycles

<table>
<thead>
<tr>
<th>Family Examples</th>
<th>Possible Responsibilities and Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Mother/Father</td>
<td>Child care, household chores, planning activities, preparing meals, supportive, loving, caring, etc</td>
</tr>
<tr>
<td>□ Son/Daughter</td>
<td>Household chores, school, listening to parents, caring for siblings, caring for aging parents, loving, caring, etc</td>
</tr>
<tr>
<td>Brother/sister</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work Examples</th>
<th>Possible Responsibilities and Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Worker</td>
<td>Organization, confidence, goal-oriented, etc</td>
</tr>
<tr>
<td>□ __________ (your job)</td>
<td>* This can include any specific skills required for the job, or specific responsibilities you have</td>
</tr>
<tr>
<td>□ Volunteer</td>
<td>Caring, providing support/time, organized, creative, etc</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Examples</th>
<th>Possible Responsibilities and Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Friend</td>
<td>Loyal, good listener, out-going, honest, caring, being supportive, cheering up a friend, etc</td>
</tr>
<tr>
<td>□ Student</td>
<td>Responsible, studious, organized, going to class, doing assignments, taking exams, etc.</td>
</tr>
<tr>
<td>□ Partner</td>
<td>Caring, loving, communicating, respecting each other, supportive, etc</td>
</tr>
<tr>
<td>Husband/wife</td>
<td></td>
</tr>
<tr>
<td><strong>Being YOU!</strong></td>
<td><strong>Possible Responsibilities and Characteristics</strong></td>
</tr>
<tr>
<td>----------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>(your name)</td>
<td>*Responsibilities to yourself! Hobbies, Self-Care, hygiene, reading, sleeping, eating, bathing, leisure activities, alone time, etc.</td>
</tr>
</tbody>
</table>

**Keeping your Balance!**

**Have a SCHEDULE and a ROUTINE!**
- Plan your day or week to only be in one role at a time.
- Use one central calendar to organize.

**Have time to REST and RELAX!**
- Plan time for yourself! Plan pleasurable activities, exercise, time for self-care, meditation, and even alone time.
- Change your expectations about the number of tasks you can cram in a day, balance involves allowing time to rest and relax!

**PRIORITIZE**
- You need to get back in touch with what is truly necessary and important to you. Remember, it’s OK to say “NO” when you need to.

**Re-Establish and Recognize your VALUES**
- Many decisions about how to spend your time will be guided by your values

**DELEGATE whenever possible!**
- Involve family members, friends, co-workers, etc in jobs/activities that do not exclusively need to be done by you.

**ORGANIZE your work and home environments!**
- You will spend less time looking for things and more quality time doing!

**Keep COMMUNICATION LINES open!**
- Have a support system, because your feelings, needs, and wants should be known and respected.
Maintain a **POSITIVE ATTITUDE, SENSE OF HUMOR, and FLEXIBILITY**!

Most difficult situations can be worked through if you keep your wits about you!

**Remember to RESPECT YOURSELF!**

Make healthy choices and changes as needed to keep you in balance day after day! Pace Yourself! Enjoy Life!
Activity: Role Juggler

**Purpose of Group:**
- To provide information about understanding own roles and the aspects and responsibilities of those roles in a fun and engaging activity.
- To discuss strategies for management and balance of roles.
- To engage clients in an activity that incorporates movement and deep breathing.

**Objectives:**
- Client will identify at least 3 personal roles, and 5 responsibilities of those roles.
- Client will identify 3 strategies to use for management and balance of roles.

**Space Requirements and Materials:**
- Large enough area for clients to have at least arms length between each other.
- Rubber Gloves or Balloons
- Markers or Permanent markers to write on the balloons/gloves
- Handouts

**Directions:**
- Discussion about the definition of roles, how they influence actions and thoughts, and provide examples.
  - Roles Definitions:
    - “Sets of behaviors expected by society, shaped by culture, and may be further conceptualized and defined by the client.”
    - “Involves gaining a sense of one’s relationship to others and of expected behaviors.”
    - Roles influence the manner and content of our actions, what kinds of things we do, and how our daily and weekly cycles are partitioned.
  - Ask Group for Role Examples
  - Use a common role (ex. “daughter”, “child”, “friend”) and ask group for examples of the responsibilities and activities of this role. “What does it mean to be a _____________?”
- Clients make 2-3 Role Balloons, by blowing up their gloves and tying them with a rubber band. Then, writing the role on the palm of the glove, and aspects/characteristics on the fingers.
- Clients share their different roles.
- Clients are instructed to play balloon volleyball with one glove, and try not to let the glove hit the ground. Then have clients try to keep two gloves from hitting the ground.
- Discuss the difference in difficulty with juggling one role or two at a time. Possible conversation about taking on other’s roles, if balloons gets mixed up.
- Discuss the importance of managing roles and focusing on one role at a time.
- Prior to group, prepare 15 index cards with one strategy for maintaining balance. Taking turns, each group members randomly choose one card and read the strategy. Then the group member will state whether they…
  - Currently use this strategy
  - Whether they plan to use this strategy (why or why not)
  - How they plan to implement it
  - Discuss the strategy with the group.
- Provide handout of strategies

**Adaptations and Variations:**

- Only Role Identification can be addressed in the group session, and blown up balloons can be used as a reminder bouquet of clients' different roles.
- If clients are unable to think of roles, clients can be provided with a list of possible roles and associated responsibilities.
- If clients have trouble with physical balance, balloon volleyball can be done sitting in a chair.
- If clients have difficulties with fine motor tasks, roles from the Role List can be cut out and taped to the balloon and facilitator can provide assistance with tying the balloons.
- If clients have difficulties with blowing up balloons, some can be blown up before the group starts.
Tips for Making Schedules:

• Color Coding! : Color code in any way that works for you. For example by specific events (medical appointments, chemotherapy, family time, work, etc), or by responsibility (mom is red “Cook Dinner”, dad is blue “pick up kids”, friend is green “drive kids to practice”)

• Make it clear and understandable

• Have a master schedule for everyone to see and contribute

• Create the schedule together with everyone involved

• Include your support systems

• Try to be as flexible and possible, and have a back up plan

Websites for Organizing a Help Team: These sites help you coordinate how your friends and family can help with meals, errands, child care, etc.

• www.lotsahelpinghands.com
• www.carecalender.org
• www.whatfriendsdo.com
<table>
<thead>
<tr>
<th></th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>5:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NOON</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midnight</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:00 AM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td>Monday</td>
<td>Tuesday</td>
<td>Wednesday</td>
<td>Thursday</td>
<td>Friday</td>
<td>Saturday</td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>--------</td>
<td>---------</td>
<td>-----------</td>
<td>----------</td>
<td>--------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Month</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>---------------</td>
<td>-----------------</td>
<td>---------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>January</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>February</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>March</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>April</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>September</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>October</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>November</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>December</td>
<td>Medical Dates</td>
<td>Important Dates</td>
<td>Fun Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Managing Radiation Therapy

What is Radiation Therapy?
A local treatment that is usually administered in combination with surgery. The goal of surgery is to remove or treat the cancer, usually by removing as much as possible in a lumpectomy. Radiation of 4500-5000 rads or centigrays then assists in destroying the remaining microscopic cancer cells.

How Long is Radiation Therapy?
Treatments are scheduled and paced out once a day for a given number of weeks. If you get too much radiation all at once, your skin will have bad reactions. You will have an initial consultation meeting to discuss scheduling and further information.

During Treatment Tips:
- Ask your doctor about skin-care guidelines. Some tips may include:
  - Using mild soaps (Ivory, Pears, Neutrogena)
  - Use soaps with no fragrances, deodorants, or any kinds of metal
  - NO deodorant on the side being treated
  - Use a light dust of cornstarch if needed. Don’t use talcum powder.
- Wear clothing that is loose and easy to get off and on.
- Choose tops that are soft (like pima cotton) and lightweight, skin may be tender after treatments.
- Bring someone with you for emotional support and assistance.

Common Side Effects and How to Manage

<table>
<thead>
<tr>
<th>Side Effect</th>
<th>Managing</th>
</tr>
</thead>
</table>
| Mild “Sunburn” effect, Skin Rash, thickening, flaking | • Salves: Aloe Vera, Clanedula ointment, Aquaphor, Lubriderm, or Biafine  
• Gel Pad to cool the burn: Radiacare  
• Burn Ointments and Non-stick coverings when skin is blistering (Telfa Pads)  
• Sunscreen (SPF +30) to protect from sun exposure |
| Sensitive Breast Area | • Wear loose, lightweight clothing that is easy to get on and off: button up shirts, cotton clothing, etc  
• Cotton Bras and camisoles that will not irritate skin  
• Sleeping with a pillow between your breast, on the side that isn’t being treated |
| Fatigue and Tiredness | • Ask for help with managing tasks and responsibilities  
• Cut back on the amount of activities  
• Make modifications to the home. Improve accessibility of commonly used items.  
• Consult with a nutritionist for foods to boost energy |

All Information adapted from The Breast Cancer Companion By, Nancy Sokolowski & Valerie Rossi and Dr. Susan Love’s Breast Book By, Susan M. Love
What is Chemotherapy?
A systemic treatment that interfere with the cell division process so cells can’t divide and eventually die. Chemotherapy attacks all rapidly dividing cells, which include hair cells, bone marrow, and cancer cells.

How Long is Chemotherapy?
Chemotherapy is given in cycles to allow the bone marrow to recover. Treatments are usually given every 3 weeks in 21-day or 28-day cycles. Treatment may be intravenous or a combination of intravenous medicine and pills, and can last anywhere from 12 weeks to 6 months.

Plan Ahead:
Before you start chemotherapy
✓ Arrange and schedule help for family responsibilities (child care, meals, shopping, transportation, etc)
✓ Fill prescriptions in advance for treating side effects
✓ Do not take any alternative medicines or supplements without discussing it with your oncologist
✓ Have a thermometer to look out for fevers
✓ Get a complete dental exam and cleaning
✓ Get a Pap smear if needed (may cause abnormal results)
✓ Plan for hair loss
✓ Plan something special for yourself after treatment!

During Slow Drip Intravenous Treatments: Things you should bring
✓ A Friend for company and support
✓ A book/magazine, Laptop computer, music, etc
✓ Relaxation Techniques (guided imagery, meditation, progressive relaxation)
✓ Bring a Jacket or swea room
✓ Pillow and blankets (G
✓ Snacks

Common Side Effects and How to Manage Them

<table>
<thead>
<tr>
<th>Common Side Effect</th>
<th>Management</th>
</tr>
</thead>
</table>
| Nausea and Vomiting | • Drink lots of fluids before session  
• Eat plain foods (crackers, dry toast, popsicles, jell-o)  
• Avoid fried, high-fiber, or odorous foods  
• Medications (talk to your doctor and pharmacist) |
| Loss of Appetite | • Eat small and frequent meals, every 2-3 hours eat/drink  
• Eat with others in a relaxed, social environment  
• Try eating high-calorie and high-protein foods |
| Hair Loss | • Protect your head with covering (hats, scarves, wigs)  
• Care for your scalp (massages, Hair Vitamin Viviscal)  
• See Hair Beauty Tips Brochure |
| “Chemo Brain” Fuzzy Thinking Confusion | • Ask your doctor about medications and stimulants  
• Exercise ignites your brain cells  
• Have a daily planner or organizer  
• Create a schedule before you start therapy |
| Dry Skin | • Moisturize skin frequently  
• See Skin Care and Facial Beauty Tips Brochure |
| Mouth Sores and Dry Mouth | • Mouth Sores: rinse with saltwater or baking soda mixtures, or ask about prescription numbing agent  
• Dry Mouth: Biotene Gel or Biotene Dry Mouth Toothpaste, Oral Balance, and Biotene Gum Help |
| Premature Menopause | • Talk to your doctor!  
• Ask about contraception, hot flashes, menstrual cycles, or concerns about future pregnancies |

All Information adapted from
The Breast Cancer Companion By, Nancy Sokolowski & Valerie Rossi and Dr. Susan Love’s Breast Book By, Susan M. Love
Preparing for Recovery After Surgery

Resources

Web Sites for Organizing a Help Team!
These sites help you to coordinate how your friends and family can help with meals, errands, child care, etc.
- www.lotsahelpinghands.com
- www.carecalender.org
- www.whatfriendsdo.com

Fashions and Information for Post-Surgery
- Assistwear Garments: Hospital garments that are comfortable, fashionable, and accommodates drainage bulbs and IVs. (www.assistwear.com)
- Still You Fashions: Comfortable and attractive prosthetic alternatives (www.stillyoufashions.com)
- The Breast Care Site: Sponsored by Amoena, provides information, resources, and a broad spectrum of post-mastectomy products (www.thebreastcaresite.com)

Prepare Yourself

- Review doctor’s instructions on how to prepare for surgery
- Pack a hospital bag (toiletries, lip balm, relaxation materials, insurance and medication information, cell phone and charger, etc)
- Clothes:
  - Use postsurgical bras (soft, front fastening, no underwire) or no bra
  - Use button-front tops: you may have difficulty pulling shirts over your head
  - Use very loose clothing to accommodate for limited range of motion after surgery, and various drainage tubes and bandages

Create a Schedule and Routine

- Line up caregivers and transportation for your children
- Prepare and freeze your favorite foods ahead of time!
- Set a routine. (who will help if needed, what will you need, when you want to do these things):
  - Morning and nighttime routines
  - Meals
  - Daily Activities and Responsibilities
Prepare Your Home

The Kitchen
- **STOP Reaching!** Bring frequently used items down from high shelves, or up from low cabinets.
- **Quick and Easy!** Have favorite snacks and water or other desired beverages readily available and easily accessible.
- **Save Your Energy!** Have a stool in the kitchen during long tasks.
- **Ask for assistance!**

The Bathroom
- **Handlebars!** It may be painful and tiring to sit and stand, use handlebars near the toilet for safety.
- **Safety First!** Use handlebars and assistance to get in and out of the tub/shower for safety.
- **Shower chair!** Standing may be painful, shower chairs make showering comfortable and safe.
- **Save Your Energy!** Use a stool at the sink during hygiene tasks (brushing teeth, combing hair, washing face).

Your Day Area
- **A Comfortable Recliner!** may be the most comfortable after a transverse rectus abdominis myocutaneous (TRAM) flap or latissimus dorsi flap reconstruction.
- **Clear Pathway!** To and from the bathroom. Avoid climbing stairs!

The Bedroom
- **Clear Pathway!** to and from the bed and to and from the bathroom.
- **Be Comfortable!** Laying flat may be painful, use large pillows to position yourself comfortably upright.
- **Sleeping Arrangements!** If you sleep with a partner, and he/she moves a lot in the night, consider having your partner sleep elsewhere during the first couple of days. You do not want to be at risk of rupturing sutures or damaging surgical areas.

Keep Important Items Close:
Set up a night stand near your recliner and bed of things you may need. Your ability to reach will decrease!
- Phone
- Laptop
- Lamp/Booklight
- Books
- TV Remote
- Water and Snacks
- Tissues
- Relaxation Materials
- Glasses
- Medications
Simple Yoga for Recovery

Why Yoga?
- Connection of Mind and Body
- Reduces anxiety, stress, depression, fatigue, and nausea during treatment
- Improves pain control and relaxation
- Boosts Energy!
- Safe way to keep muscles activated, improve mobility, and strengthen during recovery

Here are a few very low-impact exercises you can do everyday!

Please be aware of your body and complete with caution!
If you feel any pain, consider using a variation presented or withdraw from that particular exercise and talk to your doctor!

Basic Stances

Lying on Back
- Lie on a comfortable surface on the floor. Yoga mat is encouraged, or a carpeted area.
- Stretch neck by pointing chin toward chest.
- Stretch back and legs by flexing feet so that toes point toward the ceiling.
- Stretch arms out next to your body, palms facing down.
- Relax shoulders, face, lips, and tongue.
- Breathe in and out deeply through your nose.
- **Variation** with a cushion: If you have uncontrolled high blood pressure or eye conditions, place your head on a cushion or folded blanket.
- **Variation** with bent knees: If you have difficulty stretching your legs or if the lower part of your back is not completely flat on the floor, bend your knees and place your feet flat on the floor, hip width apart.

Standing Posture
- Feet hip width apart, and distribute your weight evenly on feet.
- Extend knees without hyper-extending (do not lock them, keep a slight bend).
- Rotate thighs outward keeping feet in place, feel your pelvis lift up.
- Stretch vertebrae between your tailbone and top of head, lengthen spine.
- Relax belly.
- Raise chest and let shoulders and arms hang loosely.
- Align chin parallel to the floor, and relax face, lips, and tongue.
- Breathe in and out deeply through your nose.

All positions are adapted from the book *Yoga and Breast Cancer: A Journey to Health and Healing*, by Ingrid Kollak, RN, PHD, & Isabell Utz-Billing, MD. This resource includes further explanations of poses, more intensive poses, and other yoga resources.
Simple Yoga for Recovery

Lying Down Poses

Dorsal Palm Tree
Widens the chest cavity and enlarges breathing capacity.
Slow movements to loosen and stretch the shoulders, ankles, and wrists.

- In Lying on Back posture
- Relax your body and consciously stretch your spine and flex your feet with toes stretched toward the ceiling

Part 1: Loosening the Shoulders
- Place hands on your belly, tips of middle fingers touching
- Inhale while opening arms to the side, touch the floor with the back of hands if possible.
- Exhale while moving arms back to start (hands on belly)
- Repeat for six complete inhalations and exhalations
- Place your hands next to your body with palms facing down

**Caution:** Post surgery precautions may cause pain and difficulty with Part 1. Move slowly, if there is any pain, stop this motion and move to part 2 and 3

Part 2: Loosening ankles
- Inhale pulling the balls of feel toward your body without moving legs.
- Exhale and point your toes out straight
- Repeat for six complete inhalations and exhalations

Part 3: Wrists and ankles
- Inhale while flexing your feet toward your body and bending hands up, fingers pointing up toward the ceiling
- Exhale while stretching your feet (pointing toes) and placing your hands back on the grown
- Repeat for six complete inhalations and exhalations
Simple Yoga for Recovery

Lying Down Poses

Dorsal Knee Rotations

- In the Lying on Back Posture
- Conscious stretch spine and lower chin toward chest
- Relax body, face, mouth, and tongue
- Bend knees and pull them close to your chest
- R hand on R knee and L hand on L knee.
- Slowly start moving lower legs in small circles
- Complete 1 circle with 1 inhalation and exhalation
- Repeat for six complete circles
- Go the opposite direction for six circles.

Knee to Chest

- In the Lying on Back Posture
- Proceed from Knee Rotation Posture
- Exhale and pull your knees closer to chest by bending arms
- Inhale and move knees away from chest by extending arms
- Repeat for six complete inhalations and exhalations

Variation: If completing two legs together are painful, do one leg at a time.

Yoga Nidra in Shanti Asana Posture

- In Lying on Back Posture
- Conscious stretch neck and lower your chin toward chest
- Relax shoulders flat on the floor. Relax face, mouth, and tongue
- Breathe slowly in and out through your nose
- Close your eyes.
- Lay with arms beside body, palms facing ceiling
- Let feet fall out to the sides
- Bring awareness to every part of your body and consciously relax all the muscles.
- After you’ve relaxed your body, breathe deeply for six complete inhalations and exhalations.
- Slowly wiggle your fingers and toes
- Slowly get up into seated posture

Variation: If lower back pain, lie with knees bent, hip width apart. See Variation for Lying on Back in Basic Stances.
Simple Yoga for Recovery

Standing Poses

Shoulder and Arm Stretches
Slow movements stretch and loosen the shoulder and arm muscles and joints

**Caution:** Post surgery precautions may cause pain and difficulty with actions. If you feel any pain or discomfort, stop action and tell your doctor.

**Part 1: Shoulders and Forearms**
- Inhale and raise arms to shoulder height
- Keep shoulders relaxed, to make sure raise shoulders briefly and let them sink down
- Exhale and rotate arms until your palms are facing back

**Part 2: Shoulders and Hands**
Lengthens spine and stretches back muscles for good posture
Loosens joints and muscles in shoulders and hands
- Inhale and lift arms out to the sides, then up over head, stretch arm as high as possible.
- Inhale and open hands, exhale and close hands
- Repeat for 6 complete inhalations and exhalations
- Exhale and return arms down to Standing Posture for 3 inhalations and exhalations

**Part 3: Biceps and Triceps**
Loosens the elbow joint while strengthening shoulders, biceps, and triceps
- Inhale and raise arms to shoulder height
- Exhale and bend both arms to touch shoulders, Inhale and stretch out both arms
- Repeat movement for 6 complete inhalations and exhalations
- Exhale and lower arms to return to Standing Posture
Simple Yoga for Recovery

Standing Poses

Neck Rotations and Head Bows

Loosen the neck muscles that tend to hold tension and stress.

- Inhale tuning head to the right
- Exhale turning head to the left.
- Repeat for six complete inhalations and exhalations
- Return to starting position for 3 long inhalations and exhalations

- Exhale and gently bow head forward and right, keep shoulders relaxed
- Inhale and bring head back to starting position
- Exhale and gently bow head forward and left
- Inhale and bring head back to starting position
- Repeat for 6 complete inhalations and exhalations (three per side)

- Inhale, stretch spine and neck upward
- Exhale, and relax shoulders. Keep chin parallel to the floor.

- Exhale and gently bow head to the left side (tilting to the left)
- Inhale and bring head back to starting position.
- Exhale and gently bow head to the right side (tilting head to right)
- Inhale and bring head back to starting position.
- Repeat for 6 complete inhalations and exhalations (three per side)
- Return to starting position for 3 long inhalations and exhalations

- Exhale and gently bow head to the left side (tilting to the left)
- Inhale and bring head back to starting position.
- Exhale and gently bow head to the right side (tilting head to right)
- Inhale and bring head back to starting position.
- Repeat for 6 complete inhalations and exhalations (three per side)
- Return to starting position for 3 long inhalations and exhalations

- Exhale and gently bow head forward and right, keep shoulders relaxed
- Inhale and bring head back to starting position
- Exhale and gently bow head forward and left
- Inhale and bring head back to starting position
- Repeat for 6 complete inhalations and exhalations (three per side)
Homemade Zen Gardens

Benefits of Zen Gardens

- Cultivating a Zen Garden is a meditative, relaxing, and stress-relieving activity
- Perfect for calming down or centering yourself
- It is creative, artful, and skill-building as you practice designing visually-appealing, flowing scenes over and over.
- This nurturing gift to yourself takes only minutes a day, rejuvenates your mind, and enhances your creative life.
- The long, smooth, soft strokes promote relaxation of your body and mind.
- Value/Gratitude Stones promote focus on positive ideas that are important to you

Supplies:

- A wide, flat container like a pie or cake pan
- Sand
- Rake: you can buy a rake at any craft store, or use a fork or even a small paint brush
- Smooth Stones (Value Stones)
- Any other additions (leaves, sticks, figurines, candles, gems, etc)

How to Use Your Zen Garden

- Making your Value Stones: Write with a permanent marker things you value or love on the stones.
- Fill your pan with the sand, and place your stones in the sand
- Relax your mind and body
- Using long, smooth strokes, slowly carve pathways into the sand with your rake
- Focus on the values as you pass each Value Stone
- Go different directions, circle around stones, create patterns, etc.
- Slowly breath in and out with each stroke.
Physical Therapy Interventions

It is important to stay active through the cancer process to reduce the effects of cancer related fatigue, enhance quality of life, decrease pain, improve mood, and decrease risk of recurrence. It is most important to stay active through the cancer process because of the potential of cancer related fatigue.

Cancer Related Fatigue is associated with: cancer itself, chemotherapy, radiation, surgery, anemia, anxiety, depression and insomnia.

  - “Cancer related fatigue affects 70-100% of patients receiving radiation, chemotherapy, stem cell or marrow transplants, and/or biological response modifiers.”
- It is defined as: feeling tired, weary, exhausted, having trouble concentrating or remembering even after sleeping.
- Studies have shown that exercise, especially resistance training can decrease the effects of cancer related fatigue. Subjects who exercised performed better on physical functioning tests, had less difficulty with ADL’s, slept better and had less anxiety.

Bottom line: even when you are feeling tired it is important to remain as active as possible, because in the long run it will increase your overall energy and activity level. It may also allow you more treatment options you might not otherwise be a candidate for due to exercise’s positive effect on the body’s cell profile.

- Low to moderate intensity exercise: helps maintain functional ability and reduce fatigue
- Moderate activity: has a protective effect against breast cancer in pre and post-menopausal women
- Moderate activity: after diagnosis decreases the risk of mortality
  - 1.25-2.5 hours/week of brisk walking reduced the risk of breast cancer by 18%

Early Role of PT’s:

- Education to avoid protective posture as this could lead to an increased risk of adhesive capsulitis (frozen shoulder)
- After mastectomy: Avoid shoulder ROM greater than 90’ and follow any other precautions set by the surgeon.
- It is still important to move the shoulder on the affected side (following surgical precautions) as this will decrease risk frozen shoulder and prevent loss of ROM.
- Gently increase exercise, including strengthening, flexibility and aerobic exercise.
- Use energy conservation techniques and pacing throughout the day to help with cancer related fatigue.
Why Exercise?
- Manage body fat. High amounts of body fat are associated with higher amounts of estrogen and higher risk of developing lymphedema.
- Strengthen muscles that may become weak after surgery.
- Increase flexibility and motion in joints that may become difficult to move after treatment.
- Encourage movement of lymph. Muscle pumping actions also facilitate lymph to move.

Principles of Exercise
- Wear a compression garment as you exercise.
- Progress very gradually. Start with very light exercise and see how you respond the next day.
- Practice good breathing habits: Do not hold your breath. Breathe with each repetition.
- Do not exercise with pain.

Do not exercise if you:
- Are ill and/or have a fever.
- Have chest pain or an irregular heartbeat.
- Experience shortness of breath, unusual fatigue, or nausea.
- Have leg pain or cramps.
- Are feeling disoriented or confused.
- Have bone, back, or neck pain that does not go away with resting. See your doctor as soon as possible.

Ideas for exercise activities:
- Tai Chi
- Qigong
- Swimming & pool exercises
- Upper Body Exerciser (UBE)

Exercises to encourage lymphedema drainage:
- Lying on your back with your knees bent. Contract abdominal muscles to bring your lower back to the floor. Progress the exercise by lifting your head and shoulders as you exhale.
- Neck movements
  o 1) Slowly turn your head side to side.
  o 2) Bring your ear to your shoulder.
- Shoulder movements
  o 1) Shrug your shoulders—as high as you can and as low as you can.
  o 2) Roll your shoulders forward and backward.
  o 3) Squeeze your shoulder blades together. Bend your elbows.
- Deep breathing. Place your hand on your chest and another hand on your stomach. As you exhale, push out your stomach (and the hand on it). The hand on your stomach should move more than the hand on your chest.
Oral Care Advice for Patients with Breast Cancer

- **Chemotherapy**
  - To prevent serious problems, see a dentist about one month prior to treatment
    - Give your oncologist contact information for your dentist
  - Side effects of chemotherapy in the mouth
    - Difficult or pain w/ eating, talking and swallowing
    - Increases opportunity for infections
      - Periodontal disease
      - Caries
    - Painful mouth and gums
    - Dry mouth
    - Burning, peeling, or swelling tongue
    - Infection
    - Change in taste
- Check your mouth everyday
- How to keep your mouth healthy
  - See your dentist BEFORE you start chemotherapy
  - Treat any problems prior to getting chemotherapy
  - Drink lots of water
  - Suck ice chips
  - Use sugarless gum (preferably w/ “Xylitol” in it
  - Use a saliva substitute to help moisten the mouth
  - Clean your teeth, gums and tongue w/ an extra-soft toothbrush after every meal and at bedtime. If brushing hurts, soften the bristles in warm water
  - Use a fluoride toothpaste
  - Don’t use mouthwashes with alcohol in them
  - Floss you teeth gently every day. If you have bleeding or areas that hurt, avoid these areas but floss where you can.
  - Rinse your mouth several times a day w/ a solution of ¼ teaspoon each of baking soda and salt in one quart of warm water. Follow with plain water rinse.
  - Dentures that don’t fit well can cause problems. Talk to your cancer doctor or dentist about your dentures.
- If your mouth is sore
  - Choose foods that are good for you but are easy to chew and swallow
  - Take small bites, chew slowly, and sip liquids w/ your meal
  - Eat soft, moist foods such as cooked cereals, mashed potatoes, scrambled eggs.
- If you have trouble swallowing, soften food with gravy, sauces, broth, yogurt or other liquids
  - Call your doctor or nurse when your mouth hurts
    - They can prescribe medicine to help control the pain
  - Stay away from
    - Sharp, crunchy foods that could scrape or cut your mouth
    - Avoid foods that are hot, spicy or high in acid like citrus fruits and juices which can irritate your mouth
    - Avoid sugary foods like candy or soda which could cause cavities
    - Be careful with toothpicks as they can cut your mouth
    - Avoid all tobacco products and alcoholic drinks
  - See your dentist within a few months of completing chemotherapy and have regular and frequent visits

- **Radiation**
  - Recommendations are much the same as chemotherapy, however with breast cancer radiation, side effects will not be as pronounced or may not occur. Follow any recommendations that pertain to patient problems.
  - Most important to visit a dentist prior to treatment and post treatment according to dentist recommendations.
<table>
<thead>
<tr>
<th>Local Dental Resources (Created By, Ann Ossinger, RDH and Shawna Rohner, RDH, MS)</th>
</tr>
</thead>
</table>
| **Hillsboro Virginia García Memorial Dental Center**  
503-352-2354  
730 SE Oak St.  
Hillsboro, OR 97123  
*Only two adults per day for urgent care. First come, first serve. Bring proof of income. Provides comprehensive care for children.* |
| **Cornelius Virginia García Memorial Dental Center**  
503-359-8505  
44 N. 11th Cornelius  
*Only two adults per day for urgent care. First come, first serve. Bring proof of income. Provides comprehensive care for children.* |
| **NW Medical Teams Mobile Dental Van**  
503-624-1000  
*Location changes. Free dental care provided for uninsured. Two clinics per month.* |
| **Multi-Care Dental**  
503-988-3410  
12710 SE Division St. Portland  
Urgent care: 7:30am-6:30pm Mon. – Fri.  
*Care is available only to OHP recipients covered with A+ package or standard plan.* |
| **Dental Access Program**  
503-988-6942  
Mon. – Fri. 8am-4pm  
426 SW Stark St. 9th floor  
Portland, OR  
*Provides limited urgent services to uninsured pts. $40 min, sliding scale fee.* |
| **Willamette Dental**  
800-461-8994  
*Multiple locations. Call for hours & fees.*  
*OHP & weekend hours.* |
| **OHSU Dental School**  
503-494-8867 (Adults)  
503-494-8880 (12& under)  
611 SW Campus Dr.  
Portland, OR 97239  
*Emergency appointments avail the next day & comprehensive care.* |
| **Senior Smile Program**  
503-513-5010  
Mon. – Fri. 9am-1pm  
10505 SE 17th Ave.  
Milwaukie, OR 97222  
*Serves Multnomah county low income, uninsured seniors (60+) at 50% discount.* |
| **Portland Community College Dental Clinic**  
503-977-4909  
426 SW Stark St. 9th floor  
Portland, OR  
*Exam, x-rays & cleaning.* |
| **Clackamas Country Dental Clinic**  
503-655-8569 ext. 3  
Mon. 12noon-8pm  
Tue.-Fri. 8:30am-4:30pm  
1425 Beavercreek Rd.  
Oregon City, OR 97045  
*Serves uninsured children up to age 19. OHP or uninsured adult’s emergency only $25 fee.* |
| **Doernbecher Children’s Hospital Dental Clinic**  
503-418-5799  
8:30am-5pm  
700 Campus Dr. 7th floor  
Portland, OR 97201  
*Serves children with special health needs & are medically fragile with craniofacial defects and speech problems.* |
| **Project Dental Van for Forest Grove, Banks & Gaston School District**  
503-359-2598  
Ask for Martha Ochoa. Call for location.  
*Emergency care only for children & students for the above school districts.* |
| **Westside Dental Emergency**  
503-533-0772  
17985 NW Evergreen Pkwy.  
Beaverton, OR 97006  
*Call for hours and fees.* |
| **Portland Dental Emergency**  
503-252-9657  
Sun. 9am-5pm  
12596 SE Stark St. Plaza 125  
Portland, OR 97233  
*Same day appointment. No OHP. CareCredit accepted. Spanish & Vietnamese speaking.* |
| **Hillsboro Family Resource Center**  
503-844-1063  
*Call for location.*  
*Food pantry, clothes closet & emergency dental care at no charge. Waiting list. Spanish speaking.* |
| **Children’s Dental Center**  
503-916-5808  
4701 SE Bush St.  
Portland, OR  
*Program serves students k-12 who attend Portland public schools. Students must not have private insurance or OHP.* |
| **Emergency Tooth Dr. East**  
503-252-9657  
Sun. 9am-5pm  
12596 SE Stark St. Plaza 125  
Portland, OR 97233  
*Same day appointment. No OHP. CareCredit accepted. Spanish & Vietnamese speaking.* |
| **Emergency Tooth Dr. West**  
503-641-2200  
Open 7 days/week  
13779 SW Farmington Rd.  
Beaverton, OR 97005  
*Same day appointment. General dentistry. No OHP. CareCredit accepted. Spanish speaking.* |
| **Local Dental Resources** (Created By, Ann Ossinger, RDH and Shawna Rohner, RDH, MS) |
|---|---|---|
| **East, Mid, Northeast & Southeast County Dental Clinic**  
503-988-4900 East  
503-988-3410 Mid  
503-988-3664 Northeast  
503-988-4410 Southeast  
Mon.-Fri. 7:30am-6:30pm  
Call for addresses and fees.  
Wheelchair accessible.  
Spanish & Russian speaking. | **Dental Care Today**  
503-846-1989  
Mon.-Fri. 8am-5pm  
2251 SE TV Hwy. Hillsboro, OR97123  
*In Sunset Esplanade. Emergency walk-in. Takes insurance, including OHP. Offers 3rd party financing. Spanish speaking.* | **Mountain View Dental**  
Dr. Shonee Sendelback, DDS  
Dr. Molly Saunders, DMD  
General Dentist  
503-357-2158  
1907 Mountain View Lane  
Suite 400  
Forest Grove, OR 97116  
Most Insurances accepted  
CareCredit available |
| **Dr. Martin Burbano, DMD**  
General Dentist  
503-992-2287  
Mon.-Thurs. 8am-5pm  
1818 Pacific Ave  
Forest Grove, OR 97116  
**Payments avail through Capital One financing.** | **Dr. Shaun Chavez, DDS**  
General Dentist  
503-640-4674  
Mon.-Thurs. 8am-5pm  
808 SE Oak St. Hillsboro, OR 97123  
PPO with several insurance plans.  
No OHP. CareCredit Avail. **Spanish speaking.** | **Dr. John Galloway, DDS**  
General Dentist  
503-643-9400  
Mon.-Thurs. flexible hours  
12075 SW Allan Blvd.  
Suite 201 Beaverton, OR 97005  
**Bill insurance. OHP welcome. CareCredit Avail.** |
| **Dr. Todd Gifford, DMD**  
General Dentist  
503-246-1710  
Weekend/Evening Appointments  
1616 SW Sunset Blvd. Suite E  
Portland, OR 97239  
Flexible Payment and financing options  
Preferred Provider w/most dental insurance plans. | **Dr. Mario Pedroza, DDS**  
General Dentist  
503-648-6671  
Mon.-Thurs. 8:30am-5pm Fri. 7am-3pm  
324 SE 9th St. Hillsboro, OR 97123  
**Most insurance plans. No OHP. CareCredit. Same or next day emergency appointment. Spanish speaking.** | **Dr. Barry Scott, DDS**  
Endodontic  
503-718-0095  
Mon.-Thurs. 8am-5pm  
9020 SW Washington Square Rd.  
Suite 570  
Portland, OR 97223  
**Financing avail through Chase.** |
| **Dr. David Kreutzer, DDS**  
Endodontic  
503-644-4425  
11786 SW Barnes Rd. Suite 230  
Portland, OR 97221  
**Easy access to Hwy. 26 & off Barnes Rd.** | **Dr. Mike Monroe, DMD**  
Orthodontics  
503-648-6671  
Mon.-Thurs. 8-5pm  
Tues 9-5pm  
3838 SW 185th Ave. Suite 400  
Aloha, OR 97007  
**Third party payment options avail.** | **Dr. Tamara Justus, DDS**  
Orthodontics  
503-357-3800  
Mon.-Thurs. 8:30am-5:30pm  
11790 SW Barnes Rd. Suite 390  
Portland, OR 97225  
**Complimentary consultation. In-house payments. CareCredit avail. Spanish speaking.** |
| **Dr. Kae Cheng, DMD**  
Oral Surgery  
503-848-6777  
3075 SW 234th Ave, Suite 108  
Hillsboro, OR 97123  
**Two locations. CareCredit avail.** | **Beaverton Oral Surgery**  
503-640-6080  
Multiple locations.  
**Private insurance.** | **Dr. Matsuda, Dr. Blizzard & Dr. Russell**  
Periodontist  
503-642-1535  
Mon.-Thurs. 8am-5pm  
18325 SW Alexander St. Suite 2  
Aloha, OR 97006  
**CareCredit avail.** |
| **Hi5 Dental Dentistry for Kids!**  
**Dr. Hai Pham, DMD**  
Pediatric Dentist  
503-642-1535  
18325 SW Alexander. Suite 2  
Aloha, OR 97006  
**Accepts OHP and most insurance** | **World of Smiles Pediatric Dentistry**  
**Dr. Michelle Stafford**  
503-626-9700, Call for hours.  
11790 SW Barnes Rd.  
Portland, OR 97225  
**Accepts OHP/Capitol Dental & ODS plus (translator). CareCredit available** | **Dr. Stapleton, DDS**  
Pediatric Dentist  
503-642-1535  
Mon.-Thurs. 8am-5pm  
18325 SW Alexander St. Suite 2  
Aloha, OR 97006 |
Nutrition and Cancer: eating a healthful diet during and after your treatment can help you:

- Feel better
- Keep up your strength and energy
- Keep up your weight and your body’s store of nutrients
- Tolerate treatment-related side effects
- Maximize the benefits of treatment
- Decrease your risk of infection
- Heal and recover quickly

Studies have shown that patients who eat well during cancer treatment are better able to tolerate chemotherapy, radiation therapy, surgery, or biological therapy side effects. People who eat well during cancer treatment may even be able to tolerate higher doses of treatments.

Basis for a healthful diet during all phases of the cancer experience:

- Eat five or more servings of a variety of vegetables and fruits each day
- Choose whole grains in preference to processed (refined) grains and sugars
- Limit consumption of red meats, especially those high in fat and processed
- Choose foods that help you maintain a healthful weight

Suggestions When Others Cook: some tips to make it easy to accept others offers to help

- Keep a stand-by grocery list on hand so it’s easy to send a friend or loved one to the store
- Offer menus of foods that are to your liking for friends and family members wanting to assist with meals
- Keep a list of foods that appeal to you after treatment so those helping you will know what you can most easily tolerate
- Eat when you feel up to it
- Allow people to help prepare meals – and clean up afterwards

Managing Side Effects of Cancer Treatment: consider the following tips

- Try to eat small, frequent meals and snacks rather than three large meals
- Nutritional supplements such as commercial drinks (Ensure, Instant Breakfast, Orgain) can be helpful during this time
- If you have thick saliva or dry mouth, rinse your mouth often with a salt and soda mouthwash made of one-teaspoon salt and one-teaspoon baking soda added to a quart of water. Also rinse with it before meals and snacks
- If you are having pain, diarrhea, or nausea, ask your doctor about medications that will help

Nutritious Snacks: during cancer treatment your body often needs extra calories and protein to help you maintain your weight and recover and heal as quickly as possible. Try to each small, nutritious snacks throughout the day.

Examples of Nutritious Snacks:

<table>
<thead>
<tr>
<th>Cheese</th>
<th>Peanut butter</th>
<th>Nuts</th>
<th>Soups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homemade milkshakes and smoothies</td>
<td>Granola</td>
<td>Yogurt</td>
<td>Pudding, Custards</td>
</tr>
<tr>
<td>Pretzels</td>
<td>Whole grain crackers</td>
<td>Egg Salad</td>
<td>Tuna Salad</td>
</tr>
</tbody>
</table>
Resources and Information Retrieved from:

- **OHSU Health Information Nutrition and Cancer:**
  [http://www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=86&ContentId=P07286](http://www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=86&ContentId=P07286)

- **Book:** Eating Well, Staying Well During and After Cancer
  By, The American Cancer Society
Psychology: mind/body connection. Learn and explore techniques to help reduce stress, anxiety, depression, assist mind-body harmony. Learn stages of grief, explore resources and supports, and try out simple breathing, relaxation, and imagery techniques.

Stages of Grief:
1. Denial: “This can’t be happening, not to me.” “I feel fine.”
2. Anger: “Why me? It’s not fair!” “Who is to blame?”
3. Bargaining: “I’ll do anything for a few more years.”
4. Depression: “I’m so sad, why bother with anything?”
5. Acceptance: “It’s going to be okay.”

Depression: it’s normal to grieve over the changes that cancer brings, the already uncertain future becomes more uncertain, dreams and plans might change or be lost. Increased sadness and difficulty carrying out daily activities may be signs of clinical depression. Up to one in four people with cancer have clinical depressions.

- Symptoms
  - Loss of interest of pleasure in almost all activities
  - Ongoing sad or “empty” mood
  - Extreme tiredness or loss of energy
  - Trouble sleep with early waking, sleeping too much, or not being able to sleep
  - Trouble with focus, remember, or making decisions

- Ideas
  - Seek appointments for mental health treatment
  - Promote physical activity, mild exercise
  - Engage in conversation and other enjoyable activities

Anxiety: throughout diagnosis, treatment, and recovery, it is common people with cancer may be fearful and anxious. It is normal to feel fear (treatment, doctors, rests), afraid (uncontrolled, pain, dying, unknown), and at times apprehensive.

- Symptoms
  - Uncontrolled worry
  - Muscle tension
  - Trembling, shaking, signs of restlessness
  - Trouble solving problems and focusing
  - Dry mouth
  - Angry outbursts

- Ideas
  - Get help through counseling and/or support groups
  - Deep breathing and relaxation
  - Medications
  - Remember that it is OK to feel sad and frustrated

Imagery: mental exercises designed to allow the mind to influence the health and well-being of the body. The patient imagines sights, sounds, smells, tastes, or other sensations to create a kind of purposeful daydream. Imagery can help to reduce stress, anxiety, and depression; manage pain; lower blood pressure; ease some of the side effects; and create feelings of being in control.
Information Retrieved From: http://www.cancer.org/Treatment/index
Support Groups, Sexuality, Self-Image and Esteem

Building Your Support System

Your Partner:

- Have discussions and open communication. Talk with your partner about his/her feelings. It is important to share and support each other.
- Recognize your and your partner’s coping styles. Be respectful to each other, and understand that your coping styles may be different.
- Guide your partner as to how much or how little to help. Partners may go into “fix-it” modes or retreat from the situation. Discuss what is the right balance of intervention, be clear of your needs and when you want to handle issues yourself.
- Be truthful and transparent. Passive-aggression will cause confusion and tension. If you want something, say so…

Resources:
- Men Against Breast Cancer (MACB): national nonprofit organization designed to provide services and educate men to be effective caregivers. ([www.menagainstbreastcancer.org](http://www.menagainstbreastcancer.org))
- Breast Cancer Network of Strength: through the Partner Match Program, you can be matched with a person who has had similar experiences being a caregiver. ([www.networkofstrength.org](http://www.networkofstrength.org))
- Book: Helping Your Mate Face Breast Cancer by Judy C. Kneeece

Your Children:

- When telling your children:
  - Be HONEST and REASSURING as much as possible.
  - Plan in advance, and choose a time when the whole family can be together.
  - Young Children: use simple language, name the sickness as “cancer”, explain side effects from strong medicine to get rid of the cancer, reassure that cancer is not contagious, encourage questions and open discussions/communication.
  - Teenagers: most likely teens know more about cancer, offer statistics of survival rates as reassurance, explain treatments and side effects.

- Children need ROUTINE: it will decrease the anxieties and fears
  - Have caregivers be familiar people
  - Create a schedule for kids to see and know where you will be (appointments, treatments, etc.) and develop a daily routine

Resources:
- Helping Children When a Family Member Has Cancer: Pamphlet downloadable from [www.cancercare.org](http://www.cancercare.org)
- Book: When a Parent Has Cancer: A Guide to Caring for Your Children, by Wendy S. Harpham (written by a mother, physician, and cancer survivor)

Your Friends and Community:

- Create a list and contact information of the top 5 friends or community members that you can depend on for emergencies. Make sure you ask them if they are willing to be contact for help, as well as what things you will need from them (childcare, housekeeping, cooking, etc)
- Keep a Thank You Journal: to keep track of well wishes, gifts, kind gestures, and help you receive from friends, family, and community members. So that you may send out thank-you cards, phone calls, or e-mails, etc.
Self-Esteem and Self-Image:
- Your body will be going through a variety of changes. Side effects of treatment, such as hair loss, nausea, skin sensitivities, etc.
- But cancer has an impact on more than our outer shell, it strikes at the heart of our being. Once healthy and strong, now sick and scared.

Solutions:
- Coming to an understanding of the changes that will occur. We know it will be hard to understand, but once you recognize and own it, you can move forward!
- Looking Good—Feeling better! Looking good makes you feel better, and feeling better makes you look good! They are intertwined! So care for yourself physically, emotionally, and spiritually and show the world and yourself that you are the same wonderful person! (Handouts)
- Continue with your regular routine as much as possible. Exercise, go out, talk on the phone, don’t withdraw from the world. This will affect how you feel about your life and yourself.
- Healthy diet and nutrition! But also indulge in guilty pleasures from time to time!

Resources
- Look Good… Feel Better: Beauty guide and tips for makeup, wigs, etc. (lookgoodfeelbetter.org)
- Book: Beauty Pearls for Chemo Girls, by, Marybeth Maida and Debbie Kiederer
- Book: Ramy Gafni’s Cancer Beauty Therapy: The Ultimate Guide to Looking and Feeling Great While Living with Cancer, by Ramy Gafni

Sexuality and Intimacy:
- Keeping intimacy is important for maintaining relationships and releasing tensions and maintaining a connection with your partner.
- Women may lose interest in sex due to discomfort, fatigue, self-image, or hormone differences.
  - There is limited or no vaginal estrogen, so the vagina may become dry, making sex painful. Vitamin E or coconut oil as an aid. Over-the-counter moisturizers or lubricant (Replens) that are non-hormonally active and non-irritating. Check with your doctor!
  - Getting massages! Intensive touch can help to put you in the mood.
  - Focus on the little things… kisses, intimate hugs, time together, etc.
  - Energy saving positions.
  - Resource: www.breastcancer.org/tips/intimacy
- Partner Concerns: Partners may be concerned with worry or anxiety of causing pain, affecting treatment, etc.
  - Have discussions and open communications with each other
  - It is perfectly normal to maintain a sexual relationship during cancer treatments. Talk to your doctor about any precautions!
  - Set date and times that you and your partner can be together, even if it is not strictly for intercourse, intimate time together is important.
- You can compensate… Other ways to meet your needs
  - Be affectionate and romantic
  - Get a massage! Or spoil yourself
  - Fantasy can enrich your life, romance novels or romantic movies
- Make a bigger deal of birthdays and anniversaries
Changes to Expect

- Hair Thinning
- Hair Loss
- Lower Immune System: Be aware of different products and what is in them.

Resources

All Information was adapted from:

Book: Beauty Pearls for Chemo Girls
By, Marybeth Maida and Debbie Keiderer

Look Good... Feel Better
lookgoodfeelbetter.org

Other Resources:

Book: Ramy Gafni’s Cancer Beauty Therapy: The Ultimate Guide to Looking and Feeling Great While Living with Cancer
By Ramy Gafni

Hip Hats With Hair
www.hatswithhair.com

Tender Loving Care (tlc)
Magazine/Catalog
www.tlcdirect.org

Shop Well With You
www.shopwellwithyou.org

Why Does This Happen?

Cancer cells reproduce rapidly, so chemotherapy is specifically formulated to kill cells that multiply quickly. The drugs cannot distinguish between rapid growing cancer cells and rapid growing hair cells, so they attack both.

Information presented are recommendations. You should ALWAYS CONSULT WITH YOUR DOCTOR about any products or adverse reactions.
You and Your Hair

Caring for your scalp!

- Stay away from abrasive products!
- Gentle Massage: Circulates the blood under the skin, keeps hair follicles healthy
- Hair Vitamin: Viviscal (fashion models use to keep hair healthy)
  (Always check with your doctor!)

Wigs

Many insurance companies will pay for a wig! If your insurance does not cover wigs, several organizations provide wigs at no charge: American Cancer Society, Cancer Cares, and Breast Cancer Network

Choosing a Wig:

Synthetic vs. Human Hair?
Really it is your decision... While it might seem better to choose human hair, experts say that synthetic hair may be the best option. Synthetic is less bulky, thinner stands, styles hold longer, less maintenance, and significantly cheaper.

- Bring a friend you trust for helpful opinions on styles and colors!

T-shirt Wrap

- Cut straight across a T-shirt, just under the sleeves.
- Take the bottom “Tube”, and place the hemline on your forehead.
- At the back of the head, hold each side of the tube and cross the fabric in the right hand over the left, creating a figure-8.
- Bring the lower loop of the figure-8 from the back of the head to the front, creating a headband.
- Tuck in any loose fabric.

Basic Scarf Tying

- Fold a large square, 32”-36” diagonally, drape low over forehead
- Bring the ends to the back, tie ends at the back
- Finish by tucking the point of the scarf under the knot
- OR finish by tying the knot over the point of the scarf
- OR finish by crossing the ends at the back over the point, then coiling the ends forward and tying in front
- Bring the lower loop of the figure-8 from the back of the head to the front, creating a headband.
- Tuck in any loose fabric.

Changes to Expect

- **Skin:**
  - Dryness
  - Redness
  - Extreme Sensitivity
  - Irregular Pigmentation
- **Face:**
  - Lost Eyebrows and Lashes
  - Dry Lips
  - Skin Dryness
  - Redness or Flushed
  - Irregular Pigmentation

Why Does This Happen?
Cancer cells reproduce rapidly, so chemotherapy is specifically formulated to kill cells that multiply quickly. The drugs cannot distinguish between rapid growing cancer cells and rapid growing hair and skin cells, so they attack all. Skin’s main role is to protect our organs, and chemotherapy may compromise this barrier. It is important to care for and maintain skin integrity.

Resources

All Information was adapted from:

Book: Beauty Pearls for Chemo Girls
By, Marybeth Maida and Debbie Keiderer
Look Good... Feel Better
lookgoodfeelbetter.org

Other Resources:

Book: Ramy Gafni’s Cancer Beauty Therapy: The Ultimate Guide to Looking and Feeling Great While Living with Cancer
By Ramy Gafni

Hip Hats With Hair
www.hatswithhair.com

Tender Loving Care (tlc) Magazine/Catalog
www.tlcdirect.org

Shop Well With You
www.shopwellwithyou.org

Information presented are recommendations. You should ALWAYS CONSULT WITH YOUR DOCTOR about any products or adverse reactions.
Cleansing Your Skin:
✓ Creamy, water-soluble products that you can wash away rather than wipe away.
✓ Avoid wiping or rubbing, but if you must, try to use 100% cotton clothes and wipe lightly.
✓ Try to avoid products with harsh ingredients such as deodorants, alcohol, oil, color, and fragrances.
(Always check with your doctor!)

Moisturizing Your Face:
✓ Water-based moisturizers with a high SPF.
✓ Moisturizers with antioxidants:
  ✓ Vitamin E
  ✓ Vitamin C
  ✓ Grapeseed Extract
  ✓ Green tea.
✓ Moisturizers with botanicals:
  ✓ Shea Butter
  ✓ Avocado
  ✓ Olive Oil
  ✓ Seaweed

Moisturize Your Body:
✓ Healing and Nourishing Products: help relieve dry and flaky skin.
  ✓ Vitamin E
  ✓ Aloe
  ✓ Chamomile
  ✓ Arnica
✓ Hydrating Products: attract water and hold it in skin
  ✓ Sodium PCA
  ✓ Hyaluronic acid
  ✓ Sorbitol
  ✓ Algae Extract
  ✓ Various plant-based lipids like avocado oil.

Concealer:
✓ Choose a stick or creamy formula to avoid drying skin
✓ Look for a concealer formulated for sensitive skin
✓ Dot concealer where needed and use finger tip to lightly pat and blend. DO NOT RUB!

Lips:
✓ Stay with the same colors you love, just go Glossy! Matte lipstick may dry out lips.
✓ Balms with Vitamin E or Shea Butter
✓ For severely damaged lips, choose an ointment with:
  ✓ Petroleum
  ✓ Vitamin E
  ✓ Salicylic Acid
  ✓ At least SPF 15

Foundation:
✓ Foundation should be applied to cleaned and moisturized skin.
✓ Products should be alcohol and fragrance free and formulated for sensitive skin.
✓ Try a liquid, cream, or moisturizing formula with some SPF protection

Blush:
✓ Blush is one of the easiest ways to look healthier
✓ Use a powder blush
✓ Gently sweep over cheekbones and toward ears.

Eyebrows:
✓ Draw the line in short strokes
✓ Use a pencil that is ash or dark brown
✓ Stay away from black, even if your hair is black, because it will be too intense and dark.
Naturopathic Medicine:  
Offering an Integrative Approach to Cancer Care

What is Naturopathic Medicine?

Often referred to as holistic, Naturopathic medicine is a patient-centered approach to health that focuses on treating the individual and the underlying cause of disease. Naturopathic doctors (NDs) blend centuries-old knowledge and a philosophy that nature is the most effective healer with current research on health and human systems. The primary therapeutic modalities used include clinical nutrition, botanical medicine, homeopathy, physical manipulation, and hydrotherapy. Individual practitioners incorporate an eclectic array of additional healing tools ranging from flower essences and craniosacral therapy to bioidentical hormones and pharmaceutical medications. The underpinnings of naturopathic medical practice are found in six principles:

1. First Do No Harm - primum non nocere
2. The Healing Power of Nature - vis medicatrix naturae
3. Discover and Treat the Cause, Not Just the Effect - tolle causam
4. Treat the Whole Person - tolle totum
5. The Physician is a Teacher - docere
6. Prevention is the best "cure" - praevenire

Body, Mind, and Spirit: Treat the Gut and Eat your Medicine

- Cancer treatments such as chemotherapy and radiation kill all rapidly proliferating cells – cancer, hair, blood, and digestive tract, including the healthy bacteria. Many patients describe gut-related side effects such as constipation, diarrhea, weight loss or gain, nausea, vomiting, fatigue, change in taste and appetite. These problems can affect sleep, mental and emotional well-being, and the ability to exercise. It is hard to feel and act strong and healthy when your gut is not working well. It is essential to rebuild your digestive tract to give you the nutritional building blocks needed to tolerate and survive cancer treatments.
  - Probiotics – replenish gut flora to increase absorption of nutrients
  - L-Glutamine – feed the epithelial cells that line the digestive tract
  - Aloe – contains polymucosaccharides that soothe and heal damaged cells

- Research has shown that while high-dose nutrient supplementation may be helpful in some cases, food is universally the best source of healing nutrients. Even in cases demonstrating a genetically inherited risk for cancer, the field of epigenetics has shown that our diet and lifestyle choices can impact whether these cancer promoting genes get turned on or off. These are foods that should be added to your diet for both cancer prevention and support during cancer treatment:
  - Cruciferous vegetables – broccoli, kale, cabbage, cauliflower, bok choi, radishes, arugula, chard, brussel sprouts, collard greens
  - Colorful veggies - carrots, red pepper, spinach, and tomatoes contain antioxidants that may be cancer protective.
  - Anti-inflammatory diet – inflammation has been linked to numerous chronic diseases, including cancer.
There are many other well-researched supplements and lifestyle modifications that a naturopath might recommend to cancer patients and survivors to support healing. Therapies that enhance the immune system, decrease overall inflammation, promote proper detoxification and elimination, and modulate hormonal balance.

- Stop smoking – Number 1 modifiable risk factor for all cancers (not just lung cancer)
- Green tea, curcumin – strongly inhibitory to cancer cell reproduction
- Melatonin – taken at bedtime, this hormone acts as an antioxidant, decreases tumor growth, and increases effectiveness of some conventional treatments

**Body, Mind, and Spirit: Choosing Peace**

- **STRESS** – Nearly ever-present in our society today, even before a cancer diagnosis. Some are well aware of the unwanted changes chronic stress induces – insomnia, diarrhea or constipation, muscle tension, headaches. Others are so habituated to their stressors, they can’t see the detrimental health changes until their body screams and forces them to wake up – an attack of acute pancreatitis, a heart attack, a cancer diagnosis. All of these body symptoms should serve as a wake up call for us to intentionally reduce stress and actively choose peace.
  - Find areas in your life that are most stress-inducing and re-evaluate their importance.
  - Exercise in moderation is an excellent stress reducer.
  - Meditation, deep belly breathing, and yoga bring you out of your mind, where stress originates, and into your body, where you can actively release it.

**Body, Mind, and Spirit: Heart-centered reason for living**

Healing at the spirit level is often overlooked in conventional medicine, and yet there are numerous studies on the healing power of prayer, yoga, and spiritual community. In naturopathic treatment, we can use plant-based medicines and homeopathy to help patients who are struggling with themes of life purpose, self worth, and connection to the divine. Often patients experience a profound sense of peace and wholeness when they attend to spirit-level healing.

- Flower Essences: Sunlight infusions that contain the energetic properties of plants to address emotional well-being, soul development, and spiritual purpose.
- Homeopathy: Constitutional prescribing selects a remedy that helps restore balance to the physical and emotional body.
- Five Element Acupuncture: Points are chosen based on balancing a person’s constitution and using the symbolism and energetics of the point names to reconnect a person with their life’s mandate.
Resources in Portland and beyond:

Low Income:
   IEP: http://www.itmonline.org/iep/index.htm
   Quest Center: http://www.quest-center.org/

Providence Integrative Cancer Center:
   http://oregon.providence.org/patients/programs/providence-integrative-medicine-program/Pages/default.aspx

Cancer Treatment Centers of America Seattle:
   http://www.cancercenter.com/seattle-clinic.cfm

Books:

The Breast Cancer Companion: www.thebreastcancercompanion.com/

Recipes using Cruciferous and Colorful Vegetables:

Breakfast smoothie:
½ - 1 cup frozen blueberries  
½ avocado  
1 cup frozen or fresh spinach, chard or kale, chopped and stalks removed  
½ coconut milk  
2 Tbsp ground flax seeds  
Splash of fruit juice of your choice for sweetness  
Add Water or almond milk until smoothie is desired thickness  

Blend together and drink immediately.  
NOTE: Flax seeds are a binder and will cause the smoothie to get very thick and gelatinous if you allow it to sit before drinking. You can also use smoothies as a medium for getting some of your supplements – probiotics, glutamine, and aloe for maintaining a healthy digestive tract are excellent additions to the ingredients listed above.

Grated Beet and Carrot Salad with Radish-Miso Dressing  
*Adapted from the Whole Life Nutrition Blog

Salad:  
1 head leaf lettuce, rinsed, spun, and torn into pieces  
1 large beet, peeled and grated  
3 to 4 large carrots, grated  
1/2 to 1 cup chopped cilantro  
½ c toasted sunflower seeds or pecans  
*Add poached or roasted salmon for more protein.  
*Can add handful of arugula for more crucifers.

Dressing:  
3 small radishes  
½ green apple  
1/4 cup extra virgin olive oil  
1/4 cup Miso  
1/4 cup water  
1 clove garlic  
1/2-inch piece fresh ginger, peeled  

Place all dressing ingredients in a blender and mix until very smooth and creamy. Add salt to taste and blend again. Extra dressing can be stored in the refrigerator for up to a week.
**Financial Workshop:** cancer is tough: mentally, physically, emotionally, and often overlooked – financially. Whether it is the lack of insurance, being underinsured, navigating what insurance covers, or organizing finances to adjust to the new burden, this aspect of the disease is a stressful one. The goal of providing a financial workshop is to provide a comprehensive/education resource for patients and their supports to address concerns and questions in regards to insurance, Medicare, Medicaid, advance directives, living wills, budgeting, and many other resources. Workshops will be lead by experts in the field of insurance, social work, and financial counseling.

**Resources and Information Obtained From:**

- **Cancer Care – Financial Assistance:** [http://www.cancercare.org/financial](http://www.cancercare.org/financial)
- **American Cancer Society – Finding and Paying for Treatment:** [http://www.cancer.org/Treatment/FindingandPayingforTreatment/index](http://www.cancer.org/Treatment/FindingandPayingforTreatment/index)

**ITEMS TO LOOK AT:**

- **Applying for Disability**
- **Advance Directive:** a formal document written in advance of an incapacitating illness that states a patient’s choices regarding health care if the patient becomes unable to make decisions.
- **Budgeting**
- **COBRA:** Consolidated Omnibus Budget Reconciliation Act, gives you the right to choose to keep the group health insurance benefits that you would otherwise lose after you reduce your work hours, quit your job, or lose you job.
- **Durable Power of Attorney for Health Care:** a legal document in which a person gives authority for making decisions about his/her health care to someone else. The document is usually written so that this authority is given only if the person becomes unable to make decisions for him/herself.
- **Health Care Directive (Living Will):** person can stipulate the kind of life prolonging medical care he/she would or would not want if terminally ill or permanently unconscious and unable to make medical decisions or speak for him/herself.
- **Medicare/Medicaid**
- **Prescription Coverage**