

Connections Quarterly

Fall 2020 ISSUE 74



THE IMPORTANCE OF TAKING CARE OF YOURSELF, FROM SCREENING TO MIND-BODY WELLNESS



Quarterly Content

Featured Story	2-3
Survivor Story	4-5
Pharmacy Corner	6
Food for Thought	7
Clinical Research Study	8
Exercise for Self-care	9
Support Services and Programs	10-11
Spiritual Wellness	12
Upcoming Events	13
Intellectual Wellness	14-17
Magnet® Nurse Snapshot	18
Clinical Research, Cancer Services Program, Connections Editorial Board	19
When To Call Us	20

For more information
about the Connections
Quarterly newsletter or
the C.R. Wood Cancer
Center, please call
518.926.6640

The Importance of Cancer Screenings

by Christopher Mason, DO, Medical Oncologist

Cancer screening is one of the most important tasks a person can do to ensure a healthy and vibrant life. Screening means testing healthy people who have no symptoms of a disease. Many cancers can be detected early through screening and treated with curative therapy. Screening is usually accomplished through a simple medical procedure like a mammogram or a pap smear. Not every type of cancer has a screening test, so it is very important to maintain a healthy lifestyle to limit a person's risk of all types of cancers. The C.R. Wood Cancer Center has many outreach programs to help community members gain access to all the recommended screening tests. The cancer center program's data shows that the screening program identifies breast cancers at earlier stages (stage 0 and 1) than other nationally accredited cancer centers. This has led to fewer Stage IV (metastatic) breast cancer patients at diagnosis in the community when compared to the national average. This underscores the importance of keeping up with cancer screening!

The cancer center also offers genetic counseling for patients with a strong family history of cancer. The C.R. Wood Cancer Center is the only cancer center in the capital region with a full-time genetic counselor for hereditary risk assessment of familial cancer syndromes. Patients are referred to the center from all around the region for this valuable resource. If people have a family history of breast, ovarian, colon, pancreatic, prostate, melanoma, uterine or any other cancer, they should speak to their doctor.

BREAST CANCER

Mammograms are X-ray pictures of the breasts which look for early signs of breast cancer. Mammograms are the best way to find breast cancer early, when it is easier to treat. The American Cancer Society recommends every woman start annual mammogram screening at the age of 40. There is some debate as to how often women should get mammograms, but most organizations recommend continuing mammogram screening until at least age 75. Screening beyond that age is based upon individual risk and comorbid health conditions. Ultrasound and MRI images may also be used to screen high-risk women for breast cancer.



COLON CANCER

Colon cancer develops from precancerous polyps and can take years or even decades to develop. The American Cancer Society now recommends that adults with average risk for colorectal cancer begin screening at age 45 instead of age 50. At either age, screening is key to preventing colon cancer. There are several colorectal cancer screening strategies, including stool tests, flexible sigmoidoscopy, colonoscopy, and CT colonography (virtual colonoscopy). Patients with inflammatory bowel disease or a genetic cancer syndrome are screened at a younger age. Individuals should speak to their doctor about which test is most appropriate for them.

LUNG CANCER

The United States Preventative Services Task Force (USPTF) recommends yearly lung cancer screening with low-dose CT scan (LDCT) for people who have a history of smoking 30-pack years, smoke now, or have quit within the past 15 years and are between 55 and 80 years old. A pack year is smoking an average of one pack of cigarettes per day for one year. For example, a person could have a 30-pack year history by smoking one pack a day for 30 years or two packs a day for 15 years. The best way for people to reduce the risk of lung cancer is to quit smoking. The C.R. Wood Cancer Center has many resources to help a person quit.

CERVICAL CANCER

The American College of Obstetricians and Gynecologists recommends all women start Pap test screening at age 21. Pap testing can be performed every three years for average-risk women. Higher-risk women and women with abnormal pap smears are screened more frequently. Women who have received the HPV vaccine should still receive Pap test screening.

PROSTATE CANCER

The American Society of Clinical Oncology recommends men talk to their doctor to see if a prostate cancer screening test is appropriate for them.

SKIN CANCER

The American Cancer Society recommends an annual skin examination during a periodic health examination for people age 20 years or older and monthly skin self-examination by all individuals. The C.R. Wood Cancer Center offers an annual skin cancer screening free of charge for all community members.

There are no specific, recommended screening tests for ovarian, pancreatic, testicular, thyroid, bladder, oral or other types of cancer. Individuals should discuss their personal risk of cancer with their doctor to come up with an individualized screening plan. Eating healthy, exercising, getting enough sleep, managing stress and avoiding environmental toxins (sun, cigarette smoke) can help reduce a person’s risk of developing cancer.

CANCER SERVICES PROGRAM (CSP)

Free Cancer Screenings available for men and women who are uninsured

Women ages 40-64

- Cervical Cancer screening
- Breast Cancer Screening

Men and Women ages 50-64

- Colorectal Cancer Screening

For eligibility, please call the Cancer Services Program at **518.926.6570**.

THE BREAST CENTER AT GLENS FALLS HOSPITAL

Services:

- Breast screening with 3D mammography & CAD (computer assisted diagnosis)
- Diagnostic mammography & breast ultrasound
- Minimally invasive biopsy procedures
- Stereotactic Mammotome® biopsy
- Ultrasound-guided biopsies & cyst aspirations
- Needle localizations
- Galactograms
- Breast health nurses providing care coordination, education and support.



Don't Sweat the Small Stuff

by Cheri Sweet

My cancer journey began as a young 31-year old wife and mom and continues to this day as a more mature 60 year old with Nana added to my previous titles. My experience each time has been different from the last. The one constant that I have had every time is a great team of medical experts and the love and support of family and friends. Every single one has played a crucial role in my journey and all have my gratitude and thanks.

People, including myself, are sometimes a bit shocked when they know I have been treated four-different times for cancer but that's my story and I own it. From receiving my first chemotherapy treatments in the basement floor of the Glens Falls Hospital almost 30 years ago to now having the benefits of the C.R. Wood Cancer Center.

I've had chemotherapy numerous times along with radiation, surgery and targeted treatments. I have had more biopsies, scans and blood tests than I could count. I am a breast cancer survivor!

When I was asked to share my story I hesitated briefly, nervous to put my journey into words but I've learned that people who also travel this journey are some of the strongest, most heartfelt and compassionate people, and I am proud to include myself in this group.

“For me it has also been a time to reorganize my priorities and to look at and appreciate all my life is. Don't sweat the small stuff. Don't be so concerned with how I looked during my treatment. ”

- Cheri Sweet

Hearing the words cancer from my doctor is never ever easy no matter how many times I hear it. It is life-changing and a full-time job with appointments, tests, scans, treatments and everything else that comes along with it. For me it has also been a time to reorganize my priorities and to look at and appreciate all my life is. Don't sweat the small stuff. Don't be so concerned with how I looked during my treatment. I try, with TRY being the key word (especially on chemo days), to always be grateful. For all of my life, including cancer.

If I could offer advice to anyone starting a cancer journey it would be to look for something that makes you thankful each day. Something as simple as a good cup of coffee or a sunny day. Whatever it is that works for you. Wishing you all the best on your journey.



Hiking for Self-care

by Kelle L. Engel RN, BSN, OCN

Hiking has always been a part of my self-care. I am always asked why do you hike so much? The answer is quite simple because hiking is a way for me to unwind and relax and take care of myself. Hiking is healthy for my body but it is also beneficial to my mental health. Hiking is a physical activity which releases endorphins, energizes you and makes you happy. Hiking has many physical benefits such as reducing heart disease, lowering blood pressure and cholesterol and prevents type 2 diabetes. As a family, we incorporated hiking in our lives as a way to be together unplugged from the hustle and bustle of everyday life. The tranquility of being in nature and the breathtaking views have only added to our love of hiking. Hiking as a family allows us good talks to catch up with each other and enjoy nature's beautiful surroundings while bonding us to each other by creating lasting memories. My family and I have hiked the 25-Adirondack fire towers and 21/46 of the Adirondack High Peaks as well as many of the lower peaks.

The Adirondacks offer such a variety of mountains from short day hikes to the infamous Adirondack 46 High Peaks. I never tire of being on the mountain taking in all it has to offer in all four seasons. No hike is ever the same. Fresh air and the beautiful sounds of nature are all around as well as beautiful landscapes from waterfalls to trees and bare rocks to the stunning summits which help to relax and soothe my soul. Reaching the summit is especially rewarding as the hard work of getting there is soon forgotten by the breathtaking views. Walking through nature and breathing fresh air helps me to disconnect and be present in the moment. Hiking eases away my stress, clearing my mind which recharges me and improves my sleep quality. The benefits I receive from hiking are endless. Hiking is good for my soul and my overall well-being.



Antibody-drug Conjugates

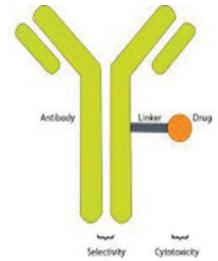
by John Adamchick, PharmD, BCOP

A new category of an anti-cancer drug has seen multiple FDA drug approvals within the last 15 months. Antibody-drug Conjugates (ADC) are a type of medication that combine monoclonal antibodies with chemotherapy in one drug. The first ADC was FDA approved in 2000, but the second ADC was not FDA approved until 2011. Two additional ADCs were then FDA approved in 2013 and 2017. However, since June of 2019 alone, there have been five ADCs approved.

We can think of ADCs like a Trojan horse. The horse (monoclonal antibody) arrives at the castle gate (protein on the tumor cell). Once the horse gets inside the castle walls (the tumor cells) it delivers the army (cytotoxic agent/chemotherapy) inside the walls in order to defeat the enemy (cancer).

An ADC contains three components: a monoclonal antibody, a linker and a cytotoxic agent (aka chemotherapy). ADCs can be designed to target different proteins on different types of cancer cells. They can also be designed to have different types and amounts of chemotherapy molecules. When an ADC is made, a monoclonal antibody is attached to the linker which is attached to the chemotherapy. Once an ADC has been administered to a patient, the monoclonal antibody seeks out a target that is very specific to tumor cells. The monoclonal antibody then binds tightly to the target on tumor cells. Once the ADC binds to its specific target, the tumor cell brings the ADC inside of the cell. When the ADC

enters the cell, the linker is broken down and the chemotherapy is released into the cell. The release of chemotherapy in turn causes the tumor cell to die.



Each component of an ADC has characteristics that allow them to be effective at killing cancer cells. First, the monoclonal antibody must target proteins that are specific to cancer cells and have limited expression on normal cells. Next, the linker must be stable in circulation and be able to be broken down once the ADC enters the cell in order to allow the release of the chemotherapy. Finally, the chemotherapy must be highly potent since only a small number of chemotherapy molecules can be attached to each monoclonal antibody molecule.

Although these ADCs aim to deliver chemotherapy agents directly to tumor cells, they are not without side effects. These drugs can still cause some of the same side effects that traditional chemotherapy can cause. For example, peripheral neuropathy, low blood counts, nausea, constipation, diarrhea and fatigue can still occur with some of the ADCs.

In addition to the ADCs that are already FDA approved, there are multiple others in clinical trials. Hopefully some of these will provide additional therapeutic options to patients with cancer just as the approved ADCs have done.

Antibody-drug Conjugate	FDA Approved Indication(s)	Year Approved
Gemtuzumab Ozogamicin (Mylotarg)	Acute Myelogenous Leukemia (AML)	2000
Brentuximab Vedotin (Adcetris)	Hodgkin Lymphoma and T-cell Lymphoma	2011
Ado-Trastuzumab Emtansine (Kadcyla)	Breast Cancer	2013
Inotuzumab Ozogamicin (Besponsa)	Acute Lymphocytic Leukemia (ALL)	2017
Polatuzumab Vedotin (Polivy)	Diffuse Large B-cell Lymphoma (DLBCL)	2019
Enfortumab Vedotin (Padcev)	Urothelial Cancer	2019
Fam-Trastuzumab Deruxtecan (Enhertu)	Breast Cancer	2019
Sacituzumab Govitecan (Trodelyv)	Breast Cancer	2020
Belantamab Mafodotin (Blenrep)	Multiple Myeloma	2020



Nutrition and Your Well-Being

by Andrea Chowske, RD, CSO, CDN

When you are being treated for cancer, nutrition is an important part of your care. Even if you are eating less than usual, regular meals can help you feel stronger and provide more energy. Here are some tips to help feel your best.

- Try to eat six to eight small meals and snacks throughout the day. Choose foods that are easy to fix and easy to eat.
- Eat on a schedule. Even if it's small, have a meal within one hour of waking and every two hours after that. Most importantly, don't skip meals. Set a timer if needed.
- If you find that meats are difficult to eat or you don't like how they taste, try chopped or ground meats mixed with a sauce or in a casserole.
- Fruits and juices are usually easy to consume and may perk up your taste for other foods. Include them with your meals.
- Allow friends and family to prepare meals or shop for you. Don't hesitate to accept their offers of help. Be sure to tell them if there are certain foods that you can't eat very well or don't like.
- Breakfast is the best meal of the day for many people. Try eating a bigger breakfast to keep your energy up during the day.
- If you are physically able, try to increase your activity level by walking or exercising lightly.
- Keep nutritional supplements on hand for those days when you just don't feel like eating.
- To maximize calories, choose foods high in healthy fats like avocados, nut-based foods and oils. Making smoothies or other blended foods can help make your nutrients easy to swallow.
- Try not to get overly concerned with the quality of the foods you eat. If all you feel like having is a milkshake, your body will use it! During this season of treatment and recovery, remember that food is only one aspect of your wellness. Having something to eat is much better for you than having nothing to eat!

Adapted from Academy of Nutrition and Dietetics Complete Resource Kit for Oncology Nutrition and cancerdietitian.com

New Study Open at Glens Falls Hospital—EA5191

A Randomized Phase II Trial of Cabozantinib and Cabozantinib Plus Nivolumab Versus Standard Chemotherapy in Patients with Previously Treated Non-Squamous NSCLC (<http://www.ClinicalTrials.gov>)

In other words, testing the addition of the pill chemotherapy, cabozantinib, to the standard immune therapy nivolumab compared to standard chemotherapy for non-squamous non-small cell lung cancer

Why is this study being done?

This study is being done to answer the following question:

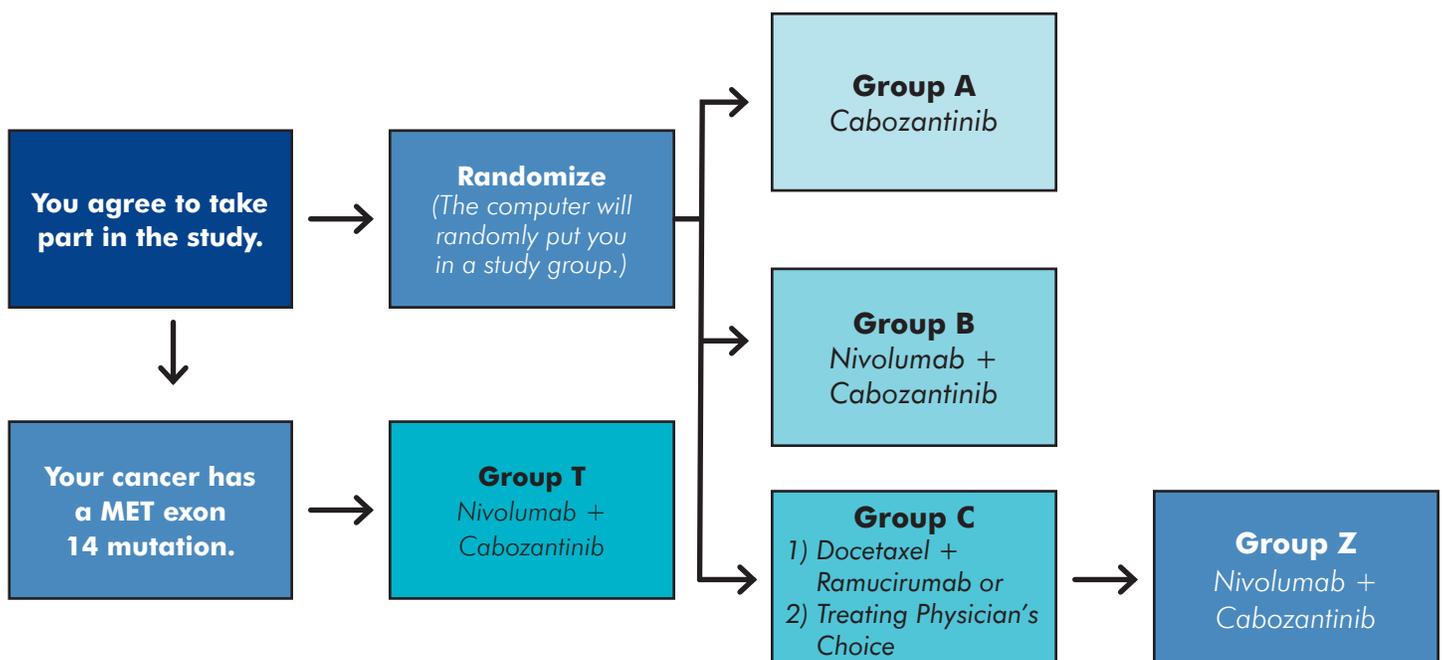
Can we lower the chance of a lung cancer from growing or spreading with an oral drug called cabozantinib? In this study, we are testing cabozantinib by itself and also with the immune drug, nivolumab.

We are doing this study because we want to find out if this approach is better or worse than the usual approach for lung cancer. The usual approach is defined as care most people get for lung cancer, and for this study chemotherapy is given intravenously (IV).

What is the usual approach for Non-Squamous NSCLC?

The usual treatment approach for patients being treated for second-line NSCLC is treatment with FDA approved chemotherapy such as docetaxel with or without ramucirumab, or other single agent chemotherapy agents. The usual treatment approach for patients with tumors with mutations in ROS1, RET or MET can also include targeted-pill therapy.

If you have advanced non-squamous non-small cell lung cancer which has either grown or has recurred, you may be eligible to take part in this study. If you would like more information about this trial, please contact **Dr. Aqeel Gillani** at **518.926.6620**. You may also contact the Research Office and speak with **Beth Ann Brundage**, RN, OCN at **518.926.6644** or **Nannette Oberhelman**, CCRP.





Exercise and Cancer

by Brittany DelGrande, DPT, CLT-LANA, Physical Therapist at Glens Falls Hospital

Did you know that exercise in cancer patients is related to reduced anxiety and depression, less fatigue, improved sleep, improved physical function and improved quality of life? Exercise has shown to be related to a decreased risk of recurrence of breast and colorectal cancer. Only 1/3 of cancer survivors report meeting exercise guidelines.

Physical therapists can help you safely return to exercise or initiate an exercise program.

Exercise Recommendation:

- 150-300 min/week of moderate intensity aerobic exercise or
- 75-150 min/week of vigorous aerobic activity

What can YOU do?

- Walk 30 min per day 3-5x/week
- Bike
- Swim
- Lift weights
- Yoga
- Dance

How do I know what moderate intensity is?

- You should be able to talk in full sentences while exercising at moderate intensity.
- If you can only say a few words at a time, you are exercising at a vigorous level.

When in doubt, ask your doctor!

There are many programs designed specifically for working with people after a diagnosis of cancer.

Healthy Steps

Weekly, low-impact activity group focus on moving the lymphatic system and minimizing lymphedema. (Currently on hold during Covid-19 precautions.)

Forever Strong

This is a three-month membership to the YMCA or the Glens Falls Hospital Rehabilitation and Wellness Center. This membership includes work with an individual exercise specialist to help you safely meet your goals.

ABC—Strength Training

Twelve-week, strength training program after a diagnosis and treatment for breast cancer led by physical therapist, **Lisa Malette**. This program is held at the Glens Falls Hospital Rehabilitation and Wellness Center.

Livestrong

Twelve-week program for all cancer survivors. Held at the Glens Falls and Wilton YMCA's.

For more information about these programs, please contact **Vickie Yattaw**, RN, OCN at **518.926.6639** or email **vyattaw@glensfallshosp.org**.

For general questions about cancer or support services available, call Nurse Navigators Vickie at 518.926.6639, Lisa at 518.926.6563 or Nicole at 518.926.6629

SERVICES FOR INDIVIDUALS BY APPOINTMENT

Care Management

For: Continuing care needs, transportation and financial concerns.

Info: Karen Cook, LMSW | 518.926.6619

Chemotherapy Education Class

For: Individuals & family starting chemotherapy.

Meets: Tuesdays at 4:00pm | Cancer Center Library or by appointment at your convenience.

Info: Vickie Yattaw, RN, BSN, OCN® | 518.926.6639

Lisa Haase, RN, BSN, OCN® | 518.926.6563

Nicole Molinero, RN, BSN, OCN® | 518.926.6629

Clinical Research

For: Anyone interested in learning about clinical trials.

Info: Beth Brundage, RN, OCN® | 518.926.6644

Genetic Counseling

For: Anyone concerned about their personal or family history of cancer.

Info: Rebecca Kerr, MSc, CGC | 518.926.6574

Nutrition Counseling

For: Anyone interested in dietary counseling.

Info: Andrea Chowske, RD, CD-N | 518.926.2635

Pastoral Care

For: Anyone interested in spiritual counseling.

Info: 518.926.3531

Patient Financial Assistance

For: Referrals, prior authorizations, billing, insurance questions.

Info: Elizabeth McCauley | 518.926.6516

Psychosocial Oncology

For: Counseling for patients and/or their families.

Info: Gerry Florio, Ph.D.

Kate Lail, MHCH

Call 518.926.6640 for an appointment

Nurse Navigators

For: Individuals & family diagnosed with any cancer.

Meets: By appointment or stop by.

Info: Vickie Yattaw, RN, BSN, OCN® | 518.926.6639

Lisa Haase, RN, BSN, OCN® | 518.926.6563

Nicole Molinero, RN, BSN, OCN® | 518.926.6629

Spa Services at Cindy's Healing Place Massage Therapy

For: Cancer patients during and after treatment.

Meets: By appointment at Cindy's Healing Place.

Info: Please call 518.926.6640

Uniquely You® Boutique & Salon

For: Any cancer patient.

Free wigs, hats & turbans, skin & hair care.

Meets: By appointment on Tuesdays in the C.R. Wood Cancer Center.

Info: Please call 518.926.6640

SPECIAL PROGRAMS Preregistration Required

Couples Retreat

For: Anyone living with and beyond cancer.

Meets: One weekend each year in the spring.

Info: Vickie Yattaw, RN, BSN, OCN® | 518.926.6639

Cindy's Comfort Camp

For: Families, children, and teens ages 6-17 years who have experienced the death or serious illness of a parent or close relative.

Meets: One weekend each spring for families and fall for children living with loss, at the Double H Ranch in Lake Luzerne.

Info: 518.926.6640

Cindy's Retreat

For: Women living with and beyond cancer.

Meets: One weekend each spring and fall at Silver Bay on Lake George.

Info: Karen Cook, LMSW | 518.926.6619

Breast Cancer Survivors Luncheon

For: Breast cancer survivors and a guest.

Meets: One Saturday in October.

Info: Lisa Haase, RN, BSN, OCN® | 518.926.6563

Survivor Breakfast

For: Any cancer survivor and a guest.

Meets: One Saturday in June.

Info: Lisa Haase, RN, BSN, OCN® | 518.926.6563

Summer Picnic

For: Any cancer survivor and their family.

Meets: One Wednesday in August.

Info: Vickie Yattaw, RN, BSN, OCN® | 518.926.6639

These groups are open-ended and you may come as you wish. You may want to call if you are new or you have not come for some time to make sure that the schedule or location has not changed.

DISCUSSION GROUPS

ABC Support Group (After Breast Cancer)

For: Individuals with breast cancer.
 Meets: 4th Monday each month at 6:00pm
 C.R. Wood Cancer Center Waiting Room,
 Virtual option available
 Info: Lisa Haase, RN, BSN, OCN® | 518.926.6563

Blood Cancer Support Group

For: Individuals & family diagnosed with lymphoma, leukemia or multiple myeloma.
 Meets: 2nd Wednesday each month at 6:00pm
 Cancer Center Library, Virtual option available
 Info: Karen Cook, LMSW | 518.926.6619

Caregiver Support Program

For: Caregivers for patients diagnosed with cancer.
 Meets: First Wednesday every Month at 10:00am–11:30am
 Cancer Center Library, Virtual option available
 Info: Vickie Yattaw, RN | 518.926.6639

MBC—Living Together

For: Metastatic Breast Cancer Diagnosis
 Meets: Third Friday each month at 10:00am–11:30am
 Cancer Center Library, Virtual option available
 Info: Vickie Yattaw, RN, BSN, OCN | 518.926.6639

Rays of Hope

For: Women with ovarian cancer.
 Meets: 3rd Wednesday each month 4:00pm
 Cancer Center Library, Virtual option available
 Info: Mary Davis | 518.656.9321
 Carol Smith | 518.793.0565

Tobacco Cessation

Whether you're thinking about quitting or ready to quit, call the NYS Smokers' Quitline for help and support.

1.866.NY.QUITS (1.866.697.8487)

QUIT FOR LIFE
Stop Smoking Program Preregistration Required
 A four-week program for anyone who would like to quit smoking.
 October 6th – 27th, 2020
 Tuesday nights from 6:00pm – 7:00pm
 In the C.R. Wood Cancer Center Library.
 For information or to register, please call
Lisa Haase, RN, BSN, OCN® | 518.926.6563

ACTIVITY GROUPS

Healthy Steps®

For: Gentle exercise for individuals with a cancer diagnosis.
 Meets: Tuesdays at 10:00am
 Community Learning Center (Side B)
 Info: Vickie Yattaw, RN, BSN, OCN® | 518.926.6639

Tai Chi and Relaxation/Meditation

For: Anyone interested.
 Meets: Monday afternoon at 3:30pm and 5:30pm
 Community Learning Center (Side B).
 Info: 518.926.1000

Twisted Twirlers

For: Individuals diagnosed with any cancer and caregivers who would like to join this Hall of Fame twirling group. New twirlers always welcome!
 Meets: 11:30am, 1st and 3rd Tuesday each month
 Community Learning Center (Side B).
 Info: Barbara Ringer | 518.792.7437
 Vickie Yattaw, RN, BSN, OCN® | 518.926.6639



Healthy Steps® participants.

Healing is much more than curing one's physical ailments...

Healing includes attention to and nurture of our emotional and spiritual health.

The Spiritual Life

by Rev. Nancy L. Goff, Coordinator, Pastoral Care

How to care for our physical health is oftentimes straightforward in terms of medication and other interventions; somewhat elusive can be caring for our emotional and spiritual health, though there are an array of means to address both. I'd like to share some avenues we can take to care for our spiritual health (some understand "spirit" to mean "soul").

Fundamental to our spiritual well-being is "goodness"—an understanding or choosing to believe, that despite conflicts, pain and suffering there is always goodness to be found and experienced; that the world as we know/see it, is greater than ourselves AND, that we have a purpose or part to play (though sometimes unclear) in this place and time. Spiritual health can be grounded in nature, in a belief there is a master creator, sometimes spoken of as a "higher power" or given a name: God, YHWH, Allah, Divine.

Theologian Henri Nouwen writes, "The spiritual life does not remove us from the world but leads us deeper into it" (*Reaching Out: The Three Movements of the Spiritual Life*). We can experience such deepening by attending to our spiritual health. Taking time daily or throughout our week to:

- 1** Find something "good" in each day and give thanks for it—embracing gratitude feeds and lifts our spirit.
- 2** Observe nature's offerings of beauty—be it in the trees, the rivers, oceans, flowers, even rain and snow, mountains and valleys.

3 Meditation—focusing on a word or verse—what does it bring to our mind that is good and affirming; some find saying (chanting) the word or phrase repeatedly brings them into a spiritual realm/connection that brings them peace and/or may encourage them to push through an otherwise challenging day or situation.

4 Prayer—another word for prayer is simply "conversation"—sharing our worries, laments, hopes and joys with our Higher Power, releasing them from our hearts to our Higher Power to carry for us or remove from us.

5 For some folks, silence or quiet is very restful and nurturing to their spirit—setting themselves apart from the demands of the day/week for some period of time—15 minutes (more/less)—after which they feel refreshed ready to reengage life.

Other important ways to nurture our spirit are through music, worship and/or fellowship. Music transcends words alone, and for some, can lift us beyond ourselves into a place where indeed, all is good! Because human beings are created (in my understanding) to be relational—not living isolated lives—our spiritual health requires interaction with others—in worship, fellowship and play—particularly with those whom we share common belief systems.

The Pastoral Care Department of GFH is here as a spiritual resource to both inpatients and outpatients in their journey towards holistic health body, mind and spirit.

Breast Cancer Awareness Activities

During the month of October the Breast Center, the Cancer Services Program of Warren Washington and Hamilton Counties and the C.R. Wood Cancer Center will be hosting a month-long breast cancer awareness event.

We will be celebrating national mammography day on October 17th by having special giveaways for all who receive their mammogram in the month of October.

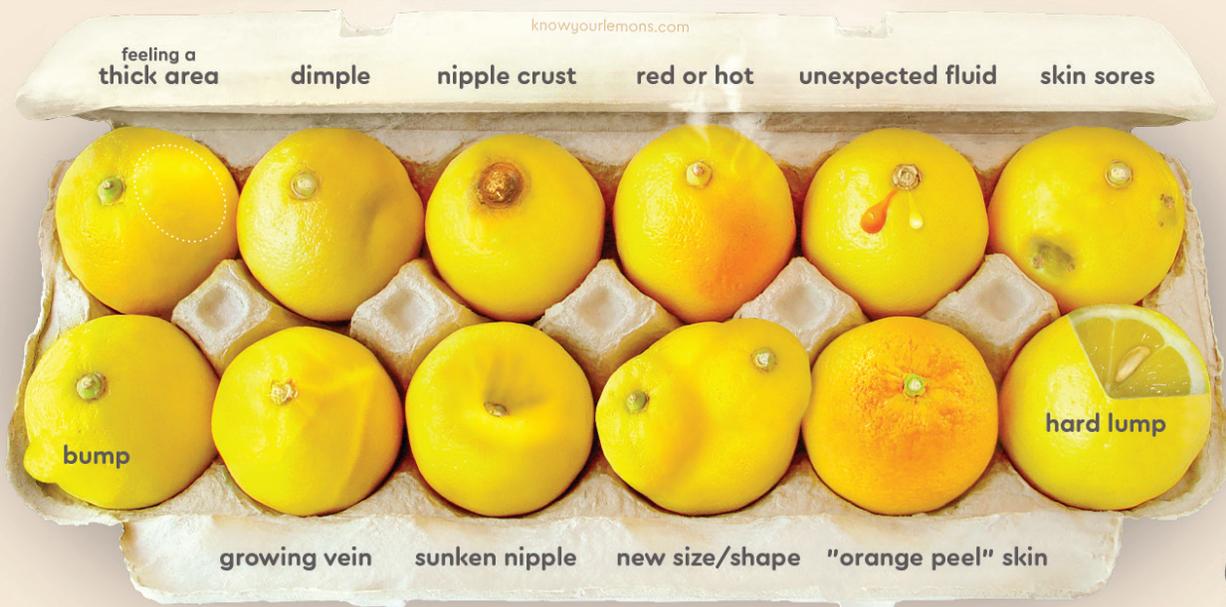
Know your normal

Please remember to know what is normal for you. Check your breast and look for signs of anything that is new, abnormal and not symmetrical. See the graphic below for various changes that should be followed by your physician.



WHAT BREAST CANCER CAN LOOK AND FEEL LIKE

Recognise something? Don't panic, some changes are normal. But if it stays around be smart—show your GP.



"A cancerous lump often feels hard and immovable like a lemon seed. It can be any shape or size".



Want information on each symptom?

 knowyourlemons.com

 **worldwide** breast cancer. Designed by charity WorldwideBreastCancer.org, USA. Do not alter, crop or add to this image without written permission.

 @knowyourlemons #KnowYourLemons

Mindfulness

B C C O G N I E B L L E W R W S W
 B B F E E L I N G S F D H N S E A
 V K M I N D F U L N E S S O N L C
 P I L K Q X B M O E Y M R I O Y C
 R N D I U X R I D B R I G S N T E
 F D K Y F J T U P D W C C S J S P
 S S S B G C T A P S Z W Y A U E T
 R S S O E I D U E U L A V P D F I
 E E D L T J J L R I L O L M G I N
 I N F T R K F D S U S O P O M L G
 R E A L H C C T O X E N M C E K V
 R R E P A R D N N V N Z V W N B I
 A A H R B R Z E A H S U M U T B L
 B W E A K R Z S L G E W E H A T T
 K A F Q F V J E O U S E V O L Q U
 F O C U S E D R P S L M L W S U B
 I S X L L W L P C P Z B I X Z N V

Accepting
Attitude
Awareness
Barriers
Compassion

Feelings
Focused
Kind
Lifestyle
Love

Mindfulness
Nonjudgmental
Personal
Present
Reflection

Selfcare
Senses
Value
Wellbeing

Cross-training our brains

Brain fitness should begin with a basic understanding of how the brain works, followed by the pillars of a healthy lifestyle: balanced nutrition, aerobic exercise, stress management, mental stimulation and social engagement.

Cross-training our brains—exercising a wide range of cognitive, emotional and executive functions—can help us and build up targeted brain functions over time. Research-based methodologies include meditation, reframing (cognitive therapy), biofeedback and cognitive training.



Source: The SharpBrains Guide to Brain Fitness

Resource Box: New Brain Fitness Tools

BrainBaseline

A free mobile app featuring dozens of cognitive tests that can be retaken over time, and that facilitate self-monitoring.

brainbaseline.com

BrainHQ

A web-based cognitive training program that includes Useful Field of View (UFOV) training (UFOV is an important component of safe driving.)

brainhq.com

Cogniciti

A free web-based cognitive assessment designed to measure whether the test taker's cognition is within a normal range given their age, or warrants a visit to the doctor.

cogniciti.com

CogniFit Senior Driver

A web-based cognitive training program that assesses and trains for ten-driving-related cognitive skills.

lifestore.aol.com/category/online-learning/cognifit-senior-driver

HeartMath Inner Balance

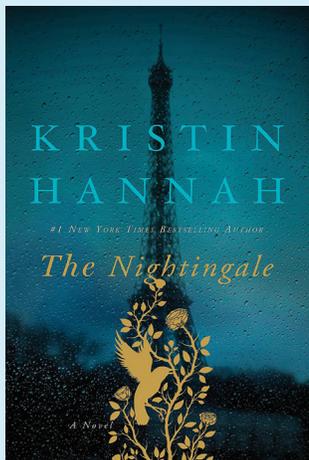
A mobile heart rate tracker that helps you find inner balance with you mental and emotional well-being.

heartmath.com



Book Recommendations

by C.R. Wood Cancer Center Staff

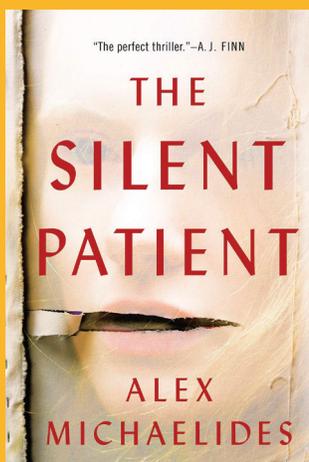


The Nightingale

by Kristin Hannah

Recommended by Nanette Oberhelman, Clinical Research

With courage, grace and powerful insight, bestselling author Kristin Hannah captures the epic panorama of WWII and illuminates an intimate part of history seldom seen: the women's war. *The Nightingale* tells the stories of two sisters, separated by years and experience, by ideals, passion and circumstance, each embarking on her own dangerous path toward survival, love and freedom in German-occupied, war-torn France—a heartbreakingly beautiful novel that celebrates the resilience of the human spirit and the durability of women. It is a novel for everyone, a novel for a lifetime.



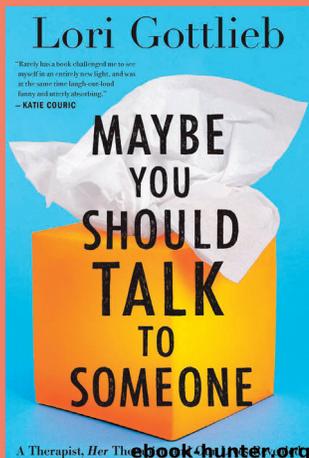
The Silent Patient

by Alex Michaelides

Recommended by Vickie Yattaw, RN, BSN, OCN

The novel takes a few chapters to clear its throat and set the plot in motion, but once the tracks are laid it's full steam ahead. Dark twists and delightful turns follow, secrets (and a diary) are revealed and you will likely find yourself racing to the end.

This will keep you guessing right up until the end—then it will all snap in place. One of the best reads of the year!

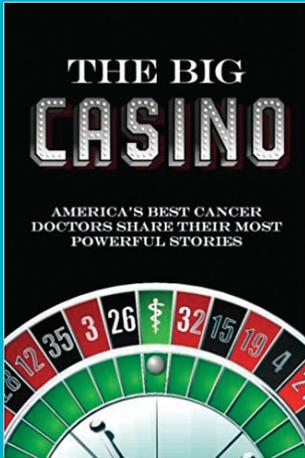


Maybe You Should Talk To Someone

by Lori Gottlieb

Recommended by Cathenia Kramer, Cancer Services Program

Maybe You Should Talk to Someone is revolutionary in its candor, offering a deeply personal yet universal tour of our hearts and minds and providing the rarest of gifts: a boldly revealing portrait of what it means to be human, and a disarmingly funny and illuminating account of our own mysterious lives and our power to transform them.



The Big Casino: America's Best Cancer Doctors Share Their Most Powerful Stories

by Stan Winokur, MD, and Vincent Coppola

Recommended by Aqeel Gillani, MD, FACP

This book is a collection of 42 essays authored by some of the leading oncologists in USA. They have narrated exceptional accounts of their experiences treating cancer. All the essays show the human side of oncology. It demonstrates the invaluable gifts that we have received from our patients including courage, strength, love and compassion.

The book reflects that oncologists are human beings with the same feelings, concerns and happiness as our patients. The stories relayed in the book address the strong emotion of fear that both patients and their doctors experience along their journey while getting treatment.

I believe this book will be therapeutic for readers. It will help patients understand that it is okay to express their feelings to their treatment team. This book is a part of my favorite collection and I would strongly recommend it to my patients and colleagues.

**WE HOPE YOU ENJOY
OUR RECOMMENDATIONS!**





MAGNET DOCUMENT SNAPSHOT

"Patients receiving chemotherapy premedication with diphenhydramine often experience sedating side effects. I (Beth) attended the ONS Congress and learned that Zyrtec could be used in its place, without the sedating side effects. We identified this as an area for improvement and we presented the evidence-based practice change to our UBC, Medical Director, and Nurse Manager. Once we got their approval, we created an Iowa Model, did a literature search, and enlisted the help of our pharmacist for comparison of cost, pharmacokinetics, and side effect profile. We have been able to initiate this new practice and we have not seen an increase in infusion reactions. Our patients report fewer CNS side effects and are more satisfied with how they feel after their treatments.

Beth Sponzo, BSN, RN, OCN &
Julia Leonard, BSN, RN, OCN

NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENTS

NK3b: PROVIDE ONE EXAMPLE OF CLINICAL NURSES' USE OF EVIDENCE-BASED PRACTICE TO REVISE AN EXISTING PRACTICE WITHIN THE ORGANIZATION

Clinical Nurses Revise Outpatient Chemotherapy Treatment Protocols

NURSES

Beth Sponzo, BSN, RN, OCN
Julia Leonard, BSN, RN, OCN

WHERE

The Cancer Treatment Center

MAGNET IMPACT

Historically, diphenhydramine was used as a premedication in outpatient chemotherapy regimens to reduce the risk of infusion reactions. Patients reported to their nurses that they often left their chemotherapy treatments and had to sleep for most of the day due to the sedating effects of the diphenhydramine. This greatly impacted their quality of life.

Beth Sponzo, BSN, RN, OCN, attended a professional conference--the ONS Congress--and learned about evidence that showed cetirizine is just as effective in preventing infusion reactions, without the sedative side effects.

Beth brought this information back to her UBC and Cancer Center leadership. She began working with fellow UBC member, Julia Leonard, BSN, RN, OCN on an Iowa Model and literature search. They also worked with their Cancer Center pharmacist on side effect profiles and pricing.

The clinical nurses were empowered to present their findings to their interprofessional partners and were successful in getting longstanding orders for diphenhydramine changed to cetirizine. The first fifty patients that received the new regimen were tracked and there were no increases in infusion reactions. Patients reported less sedative side effects and an improved quality of life on the days they had chemotherapy treatments.

Through the Glens Falls Hospital Nursing Shared Leadership structure, Beth and Julia were able to implement an evidence-based project and work with interprofessional partners such as pharmacists and physicians. They were able to fully actualize their roles as certified oncology nurses and improve care for the patients of the C.R. Wood Cancer Center.

Clinical Research at the C.R. Wood Cancer Center at Glens Falls Hospital

If you have been diagnosed with cancer, you may want to talk to your physician about taking part in a clinical trial. Clinical trials may offer treatment options for patients with cancer that are not otherwise available.

- **If you have just found out you have cancer**, the time to think about a clinical trial is before you make a treatment decision. Talk with your doctor about all your options, including a clinical trial.

Other clinical trials are looking for people who have already been treated for their cancer.

- **If you have already had one or more forms of cancer treatment** and are looking for a new treatment option, there may still be a clinical trial for you to think about.

Please call our research office at **518.926.6644** or **518.926.6701** for more information about clinical trials available at Glens Falls Hospital or visit our website at <https://www.glensfallshospital.org/services/hospital/cancer-center/clinical-research-and-trials/>

You may also want to visit the National Cancer Institute website for other clinical trials at www.cancer.gov/clinicaltrials.

Cancer Services Program (CSP)

Men and women who are uninsured, meet eligibility criteria and are in need of treatment for breast, cervical, colorectal or prostate cancer screening, may be eligible for full-medicaid coverage through the Medicaid Cancer Treatment Program. Coverage is arranged through the Cancer Services Program Case Manager and will last for the entire treatment period.

Glens Falls Hospital provides a New York State Department of Health Cancer Services Program grant that funds breast, cervical and colorectal cancer screenings and follow-up testing at no cost for uninsured men and women. If you or someone you love is without health insurance, call today at: **1.800.882.0121** or **518.926.6570**.

Connections Editorial Board

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If you are unable to view this on the internet and would like to receive Connections at home, please call, write or email the editor:

C.R. Wood Cancer Center, Glens Falls Hospital, Glens Falls, NY 12801

Email: svirgil@glensfallshosp.org

Please let us know if you would like to be removed from our mailing list.

Medical Oncology

When you call during clinic hours (8:30am – 4:30pm weekdays) you will reach the telephone triage nurse. The phone is **518.926.6620**, the number you are given to call if you have any questions or problems.

If it is an emergency, please call 911.

When you call you will very likely need to leave a message as the nurse is often busy with other patients who have called. Please try to speak clearly (without rushing) giving the following information in the message to help her assist you efficiently:

- Your name, or the name of the person you are calling about. *Please spell the last name.*
- Date of birth.
- Your doctor's name.
Not the PA because they work with multiple doctors.
- Your phone number.
- The reason why you are calling.

If you are calling for a medication refill, please include:

- The name and location of the pharmacy you use.
- The medication and the dose.

You will need to allow 48 hours to have the medication refilled. Most prescriptions will be sent to your pharmacy by email (e-scribed). If it is a medication that cannot be sent electronically, we will call you back with instructions.

If you are having a medical problem, we will try to call you back within two hours. Please be patient as sometimes many calls come in within a short period of time.

My Health Record

<https://glensfalls.iqhealth.com> Allow 48 hours for a response. If you are having a medical problem that needs prompt attention, it is better to call us and leave a message. My Health Record is designed to provide a brief summary of your most recent visit with your doctor. Unfortunately, it is not an efficient forum for a detailed discussion with your care team. It is better to call with questions or, if appropriate, wait to discuss them at your next visit.

Many doctors return their calls (especially test and lab results) at the end of their clinic or at lunchtime, so it may be a few hours before they get back to you. When you call, you can let us know if it is okay for them to leave a message with the results on your answering machine.

If you call after hours and need a response, (evenings, nights or weekends) please tell the answering service to page the on-call doctor. No one is available to check messages during off-hours so it will not be received until the next business day.

Radiation Oncology

Patients receiving radiation therapy who have questions during clinic hours (8:00am – 4:00pm weekdays) should call the Radiation Therapy Department at **518.926.6670** and ask to speak to a nurse. You will be directed to **Kelle Engel, RN, BSN, OCN®** or **Kit Howard, RN, OCN®**. If they are not available to speak with you, please leave a brief message with a callback number. You should expect a call back within 20 to 30 minutes.

If it is an emergency, please call **911**. If you have questions or concerns after the department closes or on the weekend, please call the same number, **518.926.6670**. An answering service will take your information along with a phone number and a radiation oncologist will return your call. Please do not wait with a problem. The radiation oncologists are on call to address any of your concerns.