



CHRISTIANA CARE
HEALTH SYSTEM

Trust your health to experience.

Helen F. Graham Cancer Center

Dear Patient,

Christiana Care's Cancer Care Management Team provides support, education and encouragement throughout your treatment. Our goal is to help you take an active role in managing your health so you are better able to cope with your diagnosis.

My Personal Treatment Journal is for this purpose. It is designed to make it easier to organize your appointments and keep track of the information you receive. It also includes tips for managing side effects as well as many important resources.

Please do not try to read the entire journal in one sitting. Review the table of contents first and choose the topics that are of most interest to you.

There are many places throughout the journal for you to record personal information that pertains to your treatment. You may decide to have a friend or family member write the information for you. How much you choose to include is up to you; however, **we strongly encourage you to use this journal and to bring it with you to all cancer-related appointments.**

We sincerely hope that you will find *My Personal Treatment Journal* useful. We welcome your input. Please take time to complete the enclosed survey. Your feedback will help us make improvements.

Sincerely,

Cancer Care Management Department

Patient Feedback Survey

The Cancer Care Management Team welcomes your input as we strive to improve future editions of *My Personal Treatment Journal*. Sometime during your treatment, please take a few minutes to answer the following questions.

1. How helpful did you find *My Personal Treatment Journal*? Please circle a number below.

1	2	3	4	5
<i>Not Very Helpful</i>			<i>Extremely Helpful</i>	

2. Did you find that *My Personal Treatment Journal* had enough information? Yes No

3. Did you find that *My Personal Treatment Journal* had too much information? Yes No

4. Did you find *My Personal Treatment Journal* confusing? Yes No
If Yes, what was confusing to you?

5. Did you find *My Personal Treatment Journal* to be well organized? Yes No
If No, how could it be better organized?

6. Which section or sections of *My Personal Treatment Journal* do you use or refer to most often?

- | | |
|--|--|
| <input type="checkbox"/> Important Contacts & Phone Numbers | <input type="checkbox"/> Nutrition |
| <input type="checkbox"/> Appointments, Classes & Dates to Remember | <input type="checkbox"/> Caring for Myself at Home and Other Resources |
| <input type="checkbox"/> Symptoms & Side Effects | <input type="checkbox"/> Glossary of Terms |
| <input type="checkbox"/> Medications | <input type="checkbox"/> Miscellaneous |
| <input type="checkbox"/> Lab & Test Results | |
| <input type="checkbox"/> Helen F. Graham Cancer Center | |

7. Which section or sections of *My Personal Treatment Journal* do you use or refer to least often or not at all?

- | | |
|--|--|
| <input type="checkbox"/> Important Contacts & Phone Numbers | <input type="checkbox"/> Nutrition |
| <input type="checkbox"/> Appointments, Classes & Dates to Remember | <input type="checkbox"/> Caring for Myself at Home and Other Resources |
| <input type="checkbox"/> Symptoms & Side Effects | <input type="checkbox"/> Glossary of Terms |
| <input type="checkbox"/> Medications | <input type="checkbox"/> Miscellaneous |
| <input type="checkbox"/> Lab & Test Results | |
| <input type="checkbox"/> Helen F. Graham Cancer Center | |

8. What suggestions do you have to make *My Personal Treatment Journal* even better for future patients?

Name (optional): _____

Once you have completed this survey, please remove it from your journal, fold it and drop it off at the Helen F. Graham Cancer Center reception desk or place in the enclosed self-addressed stamped envelope and mail it. Thank you!

My Care Team

Title	Name	Phone Number
Care Coordinator		
Social Worker		
Medical Oncologist		
Radiation Oncologist		
Surgeon		
Primary Care Doctor		
Home Care Agency		
Other:		
Other:		
Other:		



My Treatment Plan

My type of cancer: _____ Stage of my cancer: _____

Diagnostic tests needed: _____

Clinical Trial (if applicable): _____

Surgery Plan

Name of surgeon: _____

Name of surgery: _____

Date of next visit: _____

Date of surgery: _____

Radiation Therapy Plan

Name of radiation oncologist: _____

Date of next visit: _____

Date of simulation: _____

Date of simulation check: _____

Date to start radiation therapy: _____

Number of treatments: _____

Approximate date of last treatment: _____

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CHRISTIANA CARE
HEALTH SYSTEM

My Treatment Plan *(continued)*

Chemotherapy

Name of medical oncologist: _____

Name(s) of drug(s): _____

Date of chemotherapy education
(if applicable): _____

Date to start chemotherapy: _____

Number of treatments expected: _____

Frequency of treatments: _____

Approximate date of last treatment: _____

Notes: _____

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Important Contacts & Phone Numbers

This section provides space to record frequently called phone numbers, as well as a detailed list of Christiana Care Health System and Community Support Services numbers.



Frequently Called Phone Numbers

Name/Business	Phone

Christiana Care Phone Numbers (all area code 302)

Department/Location	Phone
Helen F. Graham Cancer Center	
Main Desk/Information	623-4500
Toll Free:	800-811-8116
Cancer Care Management Department	623-4700
Cancer Companion – This program pairs patients with volunteers who have recently completed treatment for the same kind of cancer.	302-623-4500
Cancer Support Group	302-623-4500
Chemotherapy/Infusion Room	731-8096
Circle of Strength – Breast Cancer Support Group	623-4500
Genetic Counselor	623-4500
Health Care Psychologist	623-4500
Laboratory	623-4660
Laboratory Registration	623-4536
Library	623-4580
Lung Cancer Support Group	623-4500
Nutrition Services	623-4500
Radiation Oncology	623-4800
Radiology/CAT Scan	623-4560
Rehabilitation Center	623-4510
Pain Center	623-4510
Thoracic Surgery Center	623-4530
Simply You Boutique	368-3686
Spiritual Wellness Support Group	623-4500
Visiting Nurses Association – Living with Cancer Program	327-5000
Toll Free:	888-862-0001
Wig Bank	623-4700
Christiana Care Health System	
Bone Marrow Transplant Program – Christiana Hospital	733-6156 733-1158
CAT Scan	
Diagnostic Imaging Services – MAP 1	733-5970
Helen F. Graham Cancer Center	623-4560
Christiana Care Home Medical Equipment	452-2920
Dental Department – Wilmington Hospital	428-6468



Christiana Care Phone Numbers (all area code 302)

Department/Location	Phone
Infusion Services	
Ambulatory Infusion Center – Christiana Hospital	733-1545
Christiana Care Infusion Services (Home Infusion Services)	Northern DE: 623-0345 Southern DE: 855-7280 Toll Free: 800-522-4473
Nuclear Medicine (Bone scans, MUGA scans, etc.)	
Christiana Hospital	733-1530
Wilmington Hospital	428-2178
Outpatient Laboratory	
Helen F. Graham Cancer Center (Second Floor)	623-4660
Christiana Hospital (Map 1)	733-6244
Wilmington Hospital	428-6801
Physician Referral Service	
	482-4100 Toll Free: 888-428-4100
PET Imaging – Christiana Hospital	733-1528
Radiology	
Helen F. Graham Cancer Center <i>(for information, appointments and copies of your films)</i>	623-4560
Christiana Hospital <i>(for information and appointments)</i>	623-9729
For copies of your films	733-1747
Middletown Imaging Services	838-3088
For copies of your films	838-3000
Springside Plaza Imaging Services	838-3088
For copies of your films	838-3000
Wilmington Hospital <i>(for information and appointments)</i>	428-2251
Radiation Oncology – North Wilmington	793-4150
Speech and Swallowing Therapy	
Christiana Hospital	733-1010
Wilmington Hospital	428-6290

Community Support Services

There are several services available that can provide you and your family with information, assistance and emotional support. Your health care team can help you choose the organizations that may best meet your needs. Please note that participating in some groups may require your doctor's approval.

Service	Phone
Alliance for Lung Cancer Awareness, Support and Education	800-298-2436
American Brain Tumor Association	800-866-2282
American Cancer Society	302-324-4227 800-227-2345
American Diabetes Association	800-342-2383
American Heart Association	302-633-0200 800-242-8721
American Institute for Cancer Research	800-843-8114
BetterCancerCare.com	800-813-HOPE (800-813-4673)
Cancer Care Connection	302-266-8050 866-266-7008
CancerEducation.com	212-531-5960
Cancer Hope Network	877-HOPENET (877-467-3638)
Cancer Information Services/National Cancer Institute	800-4-CANCER (800-422-6237)
Cancerpage.com	800-277-CRFA (800-277-2732)
Colorectal Cancer Network	301-879-1500
Delaware Breast Cancer Coalition	302-778-1102
Delaware Help!Line	800-464-4357 Out of State: 800-273-9500
Dietitian On Call (American Cancer Society)	888-227-6333

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Community Support Services

Service	Phone
Family Support Group – provides information/support and encourages greater communication among patients with a blood cancer, their families, friends and health care providers.	800-220-1617
First Connection – offers one-to-one telephone support for those with a blood cancer with someone who has experienced a similar situation.	800-220-1617
First State Prostate Cancer Support Group	302-324-4227 302-323-8200
Gilda's Club®	888-GILDA4U (888-445-3248)
Gynecologic Cancer Foundation	800-444-4441
Health for Life – Health Information Resource Center and Nutrition, Exercise and Health Psychology Services	302-661-3000
International Myeloma Foundation	800-452-CURE (800-452-2873)
Leukemia and Lymphoma Society®	800-955-4LSA (800-955-4572)
Living Beyond Breast Cancer	800-753-LBBC (800-753-5222)
Lymphoma Research Foundation	800-235-6848
Mothers Supporting Daughters with Breast Cancer	410-778-1982
National Alliance of Breast Cancer Organizations	212-889-0606 888-806-2226
National Bone Marrow Transplant Link	800-LINK-BMT (800-546-5268)
National Breast Cancer Coalition	202-296-7477
National Cancer Institute	800-4-CANCER (800-422-6237)
National Coalition for Cancer Survivorship	301-650-8868
National Family Caregivers Association	301-654-1250 800-896-3650
National Foundation for Cancer Research	301-654-1250
National Hospice and Palliative Care Organization	703-837-1500
National Lymphedema Network	510-208-3200 800-541-3259

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Community Support Services

Service	Phone
National Ovarian Cancer Coalition	561-393-0005 888-OVARIAN (888-682-7426)
Nationwide Nutrition Network Referral Line (American Dietetic Association)	800-366-1655
Nutrition Hotline (American Institute for Cancer Research)	800-843-8114
Ovarian Cancer National Alliance	202-331-1332
Pancreatic Cancer Action Network	877-2-PANCAN (877-272-6226)
Partnership for Caring: America's Voice for the Dying Pathways Assessment and Referral Services – offers confidential comprehensive evaluations for anxiety, stress, depression, psychosocial stressors and marital/family problems.	800-989-9455 302-428-2100
Patient Advocate Foundation	800-532-5274
Quit Smoking	Delaware Maryland New Jersey Pennsylvania
	866-409-1858 866-463-4373 866-657-8677 877-724-1090
Sisters on a Mission – Black Women's Breast Cancer Support	302-475-0687
Support for People with Oral and Head and Neck Cancer, Inc.	800-377-0928
Supporting K.I.D.D.S. – provides support for children experiencing death, divorce and/or separation.	302-658-5433
Susan G. Komen Breast Cancer Foundation	972-308-0079 800-462-9273
United Ostomy Association, Inc.	302-239-5907
Vital Options®	818-788-5225
Wellness Community™ Delaware – provides support services for patients, families and friends.	302-995-2850 877-892-9355
Y-Me National Breast Cancer Organization™	312-986-8338 800-221-2141
Young Survival Coalition®	212-206-6610



My Appointments, Classes & Dates to Remember

This section provides you with a calendar of Helen F. Graham Cancer Center events, blank appointment sheets on which to record your treatment schedule, and an easy-to-find calendar where you can keep track of personal appointments, classes, birthdays, anniversaries – you name it!



My Appointments

Day		Date	Time	Appointment/Location					
M	Tu	W	Th	F	Sa	Su			
Notes: _____									
Day		Date	Time	Appointment/Location					
M	Tu	W	Th	F	Sa	Su			
Notes: _____									
Day		Date	Time	Appointment/Location					
M	Tu	W	Th	F	Sa	Su			
Notes: _____									
Day		Date	Time	Appointment/Location					
M	Tu	W	Th	F	Sa	Su			
Notes: _____									
Day		Date	Time	Appointment/Location					
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Day		Date	Time	Appointment/Location					
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My Appointments

Day							Date	Time	Appointment/Location
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Notes: _____									

My Appointments

Day	Date	Time	Appointment/Location
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Notes: _____			

Day	Date	Time	Appointment/Location
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My Appointments

Day							Date	Time	Appointment/Location
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Notes: _____									
Day							Date	Time	Appointment/Location
M	Tu	W	Th	F	Sa	Su			
Notes: _____									

Symptoms & Side Effects

Your doctors can best treat you if they know how you have been feeling. This section is designed to provide helpful information about the symptoms and side effects you may experience. There is space to record your pain and symptoms/side effects. Guidelines are also included to help you recognize when to call your doctors.

Try to keep your notes about pain, symptoms and side effects up to date. Refer to them when talking with your doctors on the phone and take them with you to your office visits. This will help your doctors provide the best treatment for you.

Self-Monitoring: When to Call My Doctor

This list will help you recognize the side effects you need to tell your doctor about. Use the *My Symptoms and Side Effects* pages every day. In some cases, you will need to call your doctor **right away**. Use the following guidelines to check your symptoms. Be sure to bring all of your Symptom Records to your doctor visits so your doctor and/or nurse can review them.

1. FEVER

Take your temperature twice per day (unless otherwise directed by your physician) AND any time you feel chilled, hot or sick.

Call your doctor **RIGHT AWAY**:

- If your fever is 38° C/100.5° F or higher. DO NOT TAKE MEDICINE TO LOWER YOUR TEMPERATURE UNLESS YOUR DOCTOR TELLS YOU IT IS OK.
- If you are having shaking chills.

2. APPETITE LOSS

Call your doctor if you are eating half or less of what you usually eat for more than a week.

3. BLADDER/KIDNEY/REPRODUCTIVE SYSTEM

Call your doctor if you develop any of the following symptoms:

- Pain or burning when you urinate.
- Change in color or odor of urine.
- Blood in urine.
- Change in the amount you urinate.
- Change in the number of times that you urinate.
- Loss of bladder control.
- Lower back pain.
- Vaginal discharge or bleeding for which you do not know the reason.

4. BLEEDING

Call your doctor if you have any bleeding, such as:

- Nose bleeds.
- Bruises.
- Pinpoint-sized clusters of red bumps (petechiae) on any area(s) of the skin.
- Bleeding gums.
- Blood in urine or stool.

continued on next page

Self-Monitoring: When to Call My Doctor (continued)

5. BREATHING

Call your doctor RIGHT AWAY or call 911 if you are experiencing any of the following:

- Shortness of breath.
- Hard time breathing.
- Change in breathing (faster or slower, deeper breaths or more shallow breaths).
- Pain in your chest.
- Cough.
- Change or increase in sputum (note the color, thickness/thinness, odor and amount of sputum).

6. CONSTIPATION

Call your doctor if you develop any of the following symptoms:

- Difficulty passing stool.
- Passing stool less frequently than usual.
- Pain or discomfort when passing stool.

Note: If your doctor recommends stool softeners and/or laxatives, please take them. If you develop diarrhea or frequent stools, discuss this with your doctor.

7. DIARRHEA

Call your doctor if you have 4-6 loose or watery stools per day for more than 24 hours.

8. EYES

Call your doctor if any of these symptoms start suddenly or do not go away:

- Tenderness.
- Swelling.
- Dryness.
- Discharge.
- Changes in vision.

9. FATIGUE

Call your doctor if you develop any of the following symptoms:

- Weariness or exhaustion.
- Difficulty completing normal activities, such as eating or shopping.

continued on next page

Self-Monitoring: When to Call My Doctor (continued)

10. HEART AND CIRCULATION

Call your doctor RIGHT AWAY if you are experiencing any of the following:

- Chest pain.
- Heart palpitations.
- Fluttering (may feel like “butterflies in the chest”).
- Irregular heart beat or rhythm.
- Swelling of the hands or feet.

11. IV (INTRAVENOUS) CATHETER SITE

Call your doctor RIGHT AWAY if you experience any of the following:

- Redness.
- Swelling.
- Discharge.
- Tenderness.
- Leaking catheter.
- Catheter has been pulled out.
- Difficulty flushing catheter.

12. MOUTH/THROAT

Call your doctor if you develop any of the following symptoms:

- Dryness.
- Soreness.
- Difficulty eating or swallowing.
- Bleeding.
- White or red patches.
- Ulcers (open sores).

13. MUSCLES/BONES

Call your doctor if any of these symptoms start suddenly or do not go away:

- Pain or swelling.
- Muscle cramps.
- Stiffness.
- Difficulty walking or standing.

continued on next page



Self-Monitoring: When to Call My Doctor (continued)

14. NEUROLOGICAL

Call your doctor if any of the following appear as new symptoms and last for more than a few hours:

- Headache.
- Dizziness.
- Lightheadedness.
- Blurred vision or change in vision.
- Stiff neck.
- Hard time walking.
- Loss of balance.
- Inability to think or speak clearly.
- Change in wakefulness.

15. PAIN

Call your doctor if any you have pain that begins suddenly or does not go away.

- Be ready to tell your doctor about your pain:
 - When does it happen?
 - Where do you feel it?
 - How long does it last?
 - What causes your pain?
 - What takes the pain away?
- Be able to describe your pain in terms such as:
 - Burning.
 - Throbbing.
 - Tingling.
 - Shooting.

16. SKIN

Call your doctor if you develop any of the following symptoms:

- Redness.
- Swelling.
- New rash.
- Itching.
- Bruising.
- Soreness.
- Tender areas.

continued on next page



Self-Monitoring: When to Call My Doctor (continued)

17. STOMACH/INTESTINES

Call your doctor if you experience any of the following symptoms:

- Change in color/consistency of bowel movements.
- Diarrhea (4-6 loose or watery stools per day, for more than 24 hours).
- Blood in your stools.
- Black stools.
- Nausea (3 or more times per day or not relieved by medication).
- Vomiting (3 or more times per day or not relieved by medication).
- If you can't keep food, liquids, or medicine down.

18. TINGLING IN FEET/TOES and/or HANDS/FINGERS

Call your doctor if you have any prolonged tingling/numbness in your feet, toes, hands and/or fingers.

19. WEIGHT LOSS

Call your doctor if you lose two or more pounds in one week.



Side Effect Information Sheets

The following pages provide information about some of the most common side effects from cancer treatments, and some of the ways you can manage their symptoms. Please discuss your side effects with your care team – they may have other ideas to help you.

Cancer Treatment-Related Fatigue

For some cancer patients, the cancer itself or the radiation used to treat the cancer can reduce the body's ability to make red blood cells. Too few red blood cells results in a condition known as anemia. People with anemia often experience fatigue because their blood cannot carry enough oxygen to their cells.

Anemia-related fatigue can cause you to feel weak and to lose interest in people and daily activities. Tiredness may be caused by the disease itself, or by medical treatments, like chemotherapy, radiation and surgery. Anemia-related fatigue is not related to physical activity or how well you did or did not sleep.

To help combat anemia-related fatigue

- Get plenty of rest – start or follow a normal and regular sleeping routine.
- Don't fight fatigue. Rest when you need it.
- Avoid drinking caffeine in the evening.
- Try to keep a regular daily routine that is reasonable.
- Don't feel you have to keep up with your normal activities.
- Limit and prioritize activities. Do the important ones first and decrease the number of less important ones.
- Accept offers from friends and family to help with chores.
- Reduce and manage your stress – eliminate unnecessary and unhealthy stress in your life.
- Eat a balanced diet – eating the right foods can give you energy.
- Ask your doctor or nurse to refer you to a dietitian who can help you make good food choices.
- Eat small, frequent meals.
- Drink lots of fluid throughout the day.
- Avoid fast food.
- When preparing nutritious meals, make extra portions and freeze them for later use.
- Continue to socialize and do the things you enjoy but be sure to balance your activity with rest.
- Exercise daily – talk to your doctor about how much exercise is right for you.

Managing cancer treatment-related fatigue in the workplace

Cancer treatment-related fatigue may interfere with your ability to perform your workplace duties. Talking with your employer and your co-workers about your fatigue may decrease their uncertainty or uneasiness about your lack of energy as it relates to your cancer treatment. The more they know and understand about cancer treatment-related fatigue, the better they can support you.

continued on next page



Cancer Treatment-Related Fatigue (continued)

Cancer treatment-related fatigue is the most common and longest lasting side effect associated with cancer treatment. Explain to your employer/supervisor that you want to be as productive as you are able while you are undergoing treatment. Be realistic with yourself and your supervisor about your work goals during this time. Review and re-evaluate your work goals as needed.

Cancer treatment-related fatigue can sometimes affect your moods, emotions, and your ability to concentrate or make decisions. Discuss this with your employer/supervisor and how you might make changes in your responsibilities to minimize the impact of these symptoms.

Consider:

- A flexible schedule that takes advantage of your peak energy times.
- Changes/modifications in your current job responsibilities.
- Reassignment to a new position that might be less physically or mentally demanding.

Other recommendations

- Make an effort to keep an open dialogue with your employer, supervisor, and co-workers about how you are feeling. This builds trust and helps to avoid confusion and anxiety.
- Hold an informal “lunch and learn” session to help your employer, supervisor, and co-workers understand cancer treatment-related fatigue. Use educational material available from your doctor’s office or ask your oncology nurse to consider presenting for you.
- Evaluate your health benefit plan to determine whether you have supportive care referrals that can assist with managing your cancer treatment-related fatigue. These referrals might include a registered dietitian, physical or occupational therapy, exercise physiologist, mental health or complementary therapy practitioner.
- Ask for help if/when you need it.
- Set realistic work priorities daily.
- Adjust work routine(s) as necessary.
- Eat properly throughout the day to maintain your energy.
- Drink plenty of fluids.
- Take rest periods.
- Exercise routinely to maintain your strength.
- Take your medication(s) as prescribed by your doctor.

Constipation

Constipation is caused by slowed movement of waste through the bowel. The result is less than three bowel movements (BMs) per week. Surgery, decreased exercise, a change in eating/drinking habits and certain medicines can cause constipation.

Constipation may cause cramping, bloating/gas, loss of appetite, stomach or back pain and nausea. Many people use this term when they feel they haven't emptied their bowel or when they feel they should have BMs more often.

Recommendations

- Keep a written record of your BMs.
- Drink eight eight-ounce glasses of liquid each day. The best liquids to drink are water and 100 percent fruit juices.
- Limit the amount of caffeine you drink, such as coffee, tea, cola and Mountain Dew®.
- Eat a well-balanced high fiber diet to help make BMs softer and easier to pass. Good choices include fresh fruits, vegetables, whole-grain breads, oatmeal, bran cereal and brown rice.
- Plan time for BMs when you don't have to hurry.
- Exercise will help prevent constipation. Walking, swimming and biking are good choices. Exercise will also make your heart stronger, lower blood pressure and keep you healthy.
Note: Be sure to talk with your doctor before starting any exercise program.
- Your doctor may prescribe medicine to prevent constipation. Take the medicine as directed.
- Talk with your nurse or doctor before using laxatives, enemas or suppositories for constipation.

Call your doctor or nurse if you experience:

- Constipation that lasts longer than two weeks.
- Fever and abdominal (belly) pain with the constipation.
- Bright red blood in your BMs.
- Diarrhea (liquid BMs).



Diarrhea

Diarrhea is a rapid movement of waste matter through the bowel, producing many loose watery stools. Diarrhea can be caused by infections, certain medicines and treatments, or tension and stress. In all types of diarrhea, there is a rapid passage of water and important substances from the body which may result in weakness, dizziness, thirst or decreased urine output.

Recommendations

- Record the number of stools you have each day. If you have 4-6 loose or watery stools per day for more than 24 hours, call your doctor or primary nurse.
- Replace fluid loss by drinking eight to 10 eight-ounce glasses of liquid (100 percent fruit juice, soup, water) each day.
- Eat small, frequent meals.
- Eat low-fiber foods, such as cheese, lean meats, fish, boiled milk, cereals, pasta, white rice, peeled apples and cooked vegetables.
- Avoid high-fiber and greasy foods.
- Avoid gas-forming foods, such as onions, cabbage and beans.
- Avoid caffeine (tea, coffee, cola, Mountain Dew® and chocolate).
- Anxiety or worrying can make your diarrhea worse. Talk with your care team about ways to deal with your stress.
- Your doctor may prescribe medicine to control your diarrhea; take it as directed.
- Be certain to thoroughly clean your rectal area after each bowel movement. If your rectal area becomes sore, call your doctor or primary nurse.



Dry Mouth

Dry mouth is caused by a decreased amount of saliva. This is often a side effect of radiation treatments given to the head or neck area and certain chemotherapy drugs. You may notice a coated tongue, crusted lips, or an unpleasant taste in your mouth. If not cared for, dry mouth may cause difficulty with swallowing, taste changes, and tooth decay.

Recommendations

- Drink extra fluids.
- Keep crushed ice handy and suck on it frequently.
- Suck on sugarless candies or chew gum to increase saliva (tart or sour balls work best).
- Eat juice popsicles, Italian ices and sherbets to help decrease dryness.
- Use lip moisturizers (such as Vaseline®, Blistex®, Chapstick®) to reduce dryness and cracking.
- Use sauces and gravies on food to help make them easier to swallow.
- Brush your teeth and rinse with water often to freshen your mouth and prevent tooth decay; always use a soft toothbrush.
- Avoid commercial mouthwashes that contain alcohol; Crest® Pro-Health Rinse is alcohol-free.
- Ask your doctor about the use of artificial saliva.

Loss of Appetite

Loss of appetite is a common side effect of cancer and its treatment (chemotherapy and radiation therapy). It can also occur because of depression and/or stress. Some people eat less because they are just not hungry, they feel full too soon or they have a bitter, metal taste in their mouth. Sometimes food tastes bad or not the same as usual.

Recommendations

- Eat many small meals instead of three large meals. Include your favorite foods. Note: your appetite will probably be best in the morning and decrease as the day goes on.
- Snack on foods such as nuts, peanut butter crackers, yogurt, fruits or cheese between meals, at bedtime or whenever you feel hungry.
- Exercise or take a walk for 5-10 minutes approximately one half hour before meals; this may increase your appetite.
- Choose food high in protein and calories, such as milkshakes, pasteurized eggnog, liquid supplements (such as Ensure[®], Boost[®]), peanut butter, yogurt or instant breakfast.
- Vary your diet – try spices and seasonings to make your food more flavorful.
- Arrange food to look nice on your plate – try adding a slice of lemon or bit of parsley.
- Make mealtime pleasant by eating with family or friends, watching TV, reading, listening to soothing music, using soft lighting or decorating your table with a brightly colored table setting. If you are able to get out of bed, eat meals in your kitchen or dining room.
- Pleasant cooking smells may increase your appetite. If the smell of cooking is unpleasant, avoid cooking food yourself when possible; ask someone else to cook or try ready-made dinners.
- Consider Meals on Wheels or similar community programs. Our staff can help determine if you qualify.



Low Platelet Count

Platelets are blood cells that help your blood clot. The blood test that measures the number of platelets in your body is called a platelet count. A normal platelet count is 150,000-350,000/NL. When your platelets are low, you may bleed or bruise more easily than usual.

How to Recognize Low Platelets

If you do not have enough platelets, you may notice signs of bleeding, such as:

- Nosebleeds.
- Easy bruising.
- Bleeding from a cut that takes longer than usual to stop.
- Black or bloody stools.
- Brown or red urine.
- Tiny pinpoint-sized red or purple spots (petechiae) on your skin or inside your mouth.
- Heavier than normal menstruation.

Note: If you have any of these symptoms, call your doctor or nurse RIGHT AWAY.

When Your Platelet Count is Low

- Avoid aspirin or any medication containing aspirin.
- Use a soft-bristled toothbrush or sponge to clean your teeth. Do not floss.
- Protect yourself from cutting or bruising your skin.
- Wear gloves when gardening.
- Wear shoes to protect your feet.
- Shave with an electric razor.
- Avoid contact sports.
- Avoid constipation.
- Blow your nose gently.
- Check with your doctor before having any dental work.
- If you have blood drawn or cut yourself, apply pressure to the site for 3-5 minutes.

When your platelets are low, it is important to notify your doctor IMMEDIATELY if you:

- Sustain a fall.
- Are involved in a motor vehicle accident.
- Experience a headache, change in level of consciousness and/or blurred vision.

Call your doctor even if you do not think you have been hurt.

Lymphedema

Lymphedema, or swelling caused by fluid buildup in the soft tissue, may be the result of radiation therapy or scarring after lymph nodes are taken out. The main symptom of lymphedema is constant swelling in the hand, foot, arm or leg. If this swelling is ignored, the limb will get more swollen and the skin will lose its ability to stretch. Infection and more serious problems can happen if lymphedema is not treated.

Note: Should you notice your arm, hand or leg swelling, contact your physician. A referral to a physical therapist or an occupational therapist specializing in lymphedema management may be advised.

Lymphedema may occur at any time after surgery or radiation therapy, so it is important to follow these tips throughout your lifetime:

- When possible, keep your arm(s) or leg(s) raised above the level of your heart. While sitting, put your leg(s) on a chair/stool or keep your arm(s) on a pillow.
- Wash your skin at least once per day and apply a lanolin cream.
- Avoid injuries and infection by observing the following guidelines:
 - Use an electric razor to shave your skin to avoid cuts.
 - Wear sunscreen with a sun protection factor (SPF) of 15 or greater.
 - Avoid burns to the affected arm(s) or leg(s).
 - Wear protective clothing to avoid insect bites.
 - Clean any cracks in your skin with mild soap and water, then apply an antibacterial ointment and cover with a Band-Aid®.
 - Do not cut your cuticles or pick hangnails.
 - Avoid extreme heat or cold; avoid ice packs and heating pads to the affected arm(s) or leg(s).
 - Do not lift, push or pull anything that weighs 15 pounds or more with the affected arm(s) or leg(s).
- Avoid putting extra pressure on the affected arm(s) or leg(s) by observing the following guidelines:
 - Wear clothes without elastic-type bands.
 - Wear only bandages or stockings without tight bands.
 - Wear loose jewelry.
 - Do not have your blood pressure taken, blood drawn or have injections on the arm or leg where surgery was performed.
- Check your arm(s) or leg(s) every day for changes. **If you see signs of infection such as swelling, redness, pain, heat or fever, call your doctor RIGHT AWAY.**
- Try using gentle massage to increase comfort and improve circulation.

continued on next page



Lymphedema (continued)

Additional Tips for Hand/Arm Lymphedema

- Wear gloves when gardening, doing yard work or housework, washing dishes, etc.
- Use oven mitts when reaching into a hot oven.
- Wear thimbles when sewing.
- Do not wear a bra until/unless your doctor tells you that you may.
- Carry handbags on the arm that is not affected or wear a “fanny-pack.”

Additional Tips for Leg Lymphedema

- Avoid walking barefoot, especially on the beach or in the water.
- Cut your toenails straight across.
- See a foot doctor for any foot care problems.
- Keep your feet clean and dry.
- Wear cotton socks.
- Avoid crossing your legs while sitting.
- When sitting, change position every 30 minutes.

Nutritional Suggestions

While there is no “lymphedema diet,” it is good to choose a mix of healthy foods and eat them in moderate amounts. Follow these guidelines:

- Avoid being overweight or obese. Obesity can make the symptoms of lymphedema worse by placing strain on the lymphatic vessels.
- Eat a diet that is mainly plant-based. Vegetables, fruits, legumes (beans, peas, lentils) and whole grains will give you vitamins, minerals and fiber. These foods are lower in calories and fat than animal-based food, which can cause obesity.
- Eat a low-salt diet. This type of diet will not prevent the swelling of lymphedema, but it may keep extra fluid from building up in your body.
- Avoid low-protein diets because they make lymphedema swelling worse.
- Drink at least eight eight-ounce glasses of water per day. Avoiding fluids will cause your body to become dehydrated and will not improve lymphedema.

Some people try special diet programs, hoping their health will improve. These include diets that are dairy-free, organic (grown without chemicals), vegetarian, macrobiotic or supplemented with vitamins, minerals, herbal preparations or plant enzymes.

Note: Before making changes to your diet, talk with your doctor and/or registered dietitian.

For more information, call 302-523-4500 to schedule an appointment with a Registered Dietitian through the Helen F. Graham Cancer.



Mouth Care

Mouth care is an important part of daily hygiene. A clean mouth may prevent or lessen some complications that may arise from your cancer treatments.

Recommendations

- Look at your mouth daily. If you have soreness, redness, bleeding or painful teeth or gums, let your doctor know.
- Using a soft-bristled toothbrush, brush your teeth every morning, after meals and at bedtime.
- Use dental floss daily, unless your doctor tells you not to. (Flossing is not recommended for people taking anticoagulants or at risk for bleeding.)
- Rinse your mouth four times per day with 1 teaspoon of baking soda added to an 8 oz. glass of warm water.
- Use a lip moisturizer to reduce dryness and cracking.
- Avoid using commercial mouthwash because it can dry out your mouth. Mouthwash may also sting open sores in your mouth; Crest Pro-Health Rinse® is alcohol-free and may be used as an alternative.
- If you wear dentures:
 - Remove and clean them daily.
 - Remove them before going to sleep and place in a water bath.
 - Avoid wearing them if they fit poorly or cause your mouth to hurt.



Nausea and Vomiting

Many people experience nausea and vomiting because of medicines, treatments, illnesses, anxiety, pain or change in electrolytes (chemicals in the body). Other symptoms you may have with nausea and vomiting are:

- Fast heart rate.
- Trouble breathing.
- Fast breathing.
- Dizziness.
- Weakness.

Tips to Help Control Nausea

- Try listening to tapes, music or watching TV to take your mind off feeling nauseated.
- Sleep during the hours when your nausea and vomiting are worst.
- If you feel sick when you first wake up, take the medicine you use for nausea, then rest in bed for one-half hour to one hour before getting up.
- Open a window to let in fresh air.
- Take time to rest between and/or during normal activities.

Tips to Help You Start Eating

- Eat small frequent meals (six to eight times per day) rather than three large meals.
- Eat slowly.
- Eat foods or drinks that might have helped control your nausea and vomiting in the past.
- Eat cold or room temperature foods such as sandwiches, cereals, salads and desserts. (Hot foods and their smells often make nausea worse.)
- Eat bland or plain foods, such as dry crackers, mashed potatoes, applesauce, sherbet or toast.
- Drink liquids such as ginger ale and fruit juices. Sip liquids slowly. Also try items such as clear soups, gelatins, caffeine-free teas and juice popsicles.
- Suck on sugar-free hard candy (peppermint or spearmint).
- Rinse your mouth often to avoid an unpleasant, sour taste.

Things that May Make Nausea Worse

- Strong perfume.
- Unpleasant odors.
- Food with strong odors.
- Too much activity or sudden movement (both may interfere with your sense of balance).

continued on next page

Nausea and Vomiting (continued)

Things to Remember

- Tell your doctor or nurse if a medicine or treatment has made you nauseated in the past. (Medicine to control your nausea can be given before you have to take the medicine or treatment this time.)
- Let your doctor or nurse know if your medicine is not helping your nausea; the dose of the medicine may need to be increased or a different medicine prescribed.
- Call your doctor if any medicine you are taking makes you feel nauseated or causes vomiting.

If You are Vomiting

- If your vomiting is not controlled by medication, call your doctor.
- Try to avoid eating or drinking large amounts.
- Keep a record of how often and how much you are vomiting.



Low White Blood Count

White blood cells (WBCs) are made in the bone marrow, the soft tissue in the center of many of our bones. Chemotherapy, radiation therapy and certain diseases can affect the bone marrow and can cause a decrease in the number of WBCs. The blood test that measures WBCs is a complete blood count (CBC). A normal white blood cell count is 5,000-10,000/NL.

When you have a low number of WBCs, you are more prone to develop an infection. It is important to know when you have an infection and also how to protect yourself from an infection.

How to Recognize Infection

If you have an infection and your white blood cell count is low, the usual signs of infection such as pus formation, redness, swelling and pain may not be present. Signs you need to watch for include:

- Temperature of 100.5° F or greater (or any temperature reading that your doctor advises you to report). Call your doctor RIGHT AWAY. Take your temperature twice per day to monitor.
- Shaking chills.
- New dry or moist cough.
- Burning feeling when urinating.
- Loose bowels.
- Sore throat.
- “Flu-like” symptoms.
- Skin rash.

Note: If you have any of these symptoms, call your doctor right away.

How to Protect Yourself from Infection

- Avoid crowds when your white blood cell count is low.
- Avoid people with infections, colds and contagious diseases.
- Wash your hands before meals and after using the bathroom.
- Protect your skin from cuts and scratches. If your skin is dry, use lotion to soften it. Also, wear gloves while gardening, cleaning, doing dishes, etc.
- Use an electric razor to avoid cutting your skin.
- Keep your mouth clean and moist. Brush your teeth after eating using a soft-bristled toothbrush.
- Rinse your mouth with 1 teaspoon baking soda mixed with 1 cup of water. Swish, gargle and then spit. Avoid commercial mouthwashes that contain alcohol; Crest® Pro-Health Rinse is alcohol-free.

continued next page

Low White Blood Count (continued)

- Avoid using enemas, suppositories or tampons.
- Bathe or shower daily, paying special attention to your genital area.
- Avoid grooming your pet or cleaning bird cages or litter boxes.
- Always wear shoes to protect your feet.
- Use deodorant rather than antiperspirant, which blocks sweat glands and may promote infection.
- Do not have any vaccinations unless they are approved by your physician.
- Practice safe sex by using condoms during intercourse.



My Symptom & Side Effect Record

Use this chart to record your daily weight. To track any other symptom(s)/side effect(s) you are experiencing, place a ✓ in the box under the symptom(s)/side effect(s) next to the appropriate date(s).

Date	7/15						
Weight	152						
Temperature	97.9 / 98.7						
Shaking Chills							
Mouth Sores							
Rash							
Diarrhea	✓						
Constipation							
Nausea	✓						
Vomiting	✓						
Loss of Appetite							
Numbness in Hands/Fingers							
Numbness in Feet/Toes							
Personal notes:							

My Symptom & Side Effect Record

Date							
Weight							
Temperature							
Shaking Chills							
Mouth Sores							
Rash							
Diarrhea							
Constipation							
Nausea							
Vomiting							
Loss of Appetite							
Numbness in Hands/Fingers							
Numbness in Feet/Toes							
Personal notes:							

My Symptom & Side Effect Record

Date							
Weight							
Temperature							
Shaking Chills							
Mouth Sores							
Rash							
Diarrhea							
Constipation							
Nausea							
Vomiting							
Loss of Appetite							
Numbness in Hands/Fingers							
Numbness in Feet/Toes							
Personal notes:							

My Symptom & Side Effect Record

Date							
Weight							
Temperature							
Shaking Chills							
Mouth Sores							
Rash							
Diarrhea							
Constipation							
Nausea							
Vomiting							
Loss of Appetite							
Numbness in Hands/Fingers							
Numbness in Feet/Toes							
Personal notes:							

Monitoring My Pain

It is very important that your doctor is aware of any pain you are experiencing. Your doctor will want to know if you have any new pain or if you have any pain that lasts a long time. To help your doctor understand how to treat your pain, you will need to give him/her some details about it. For example, your doctor will want to know the following information about your pain:

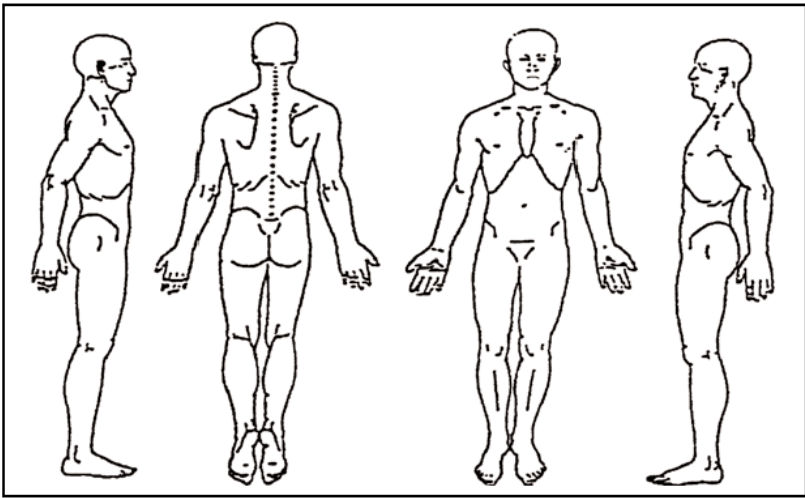
- When your pain started.
- How severe your pain is.
- What you were doing when the pain started.
- What activities make the pain worse or better.
- Name and dose of medication taken to relieve the pain.
- How severe your pain is/was 1-2 hours after taking medication.

Please rate the severity of your pain on a scale of 0-10, where 0 means that you have no pain and 10 means that you have unbearable pain. *Please note that if you are experiencing unbearable pain or pain that is greatly limiting your activity level, you should call your doctor RIGHT AWAY.*

The chart on the next page is designed to help you track your pain. Take your Pain Assessment Record with you to your doctor's appointments and refer to it when you talk to your doctor or nurse on the phone about your pain.

My Pain Assessment Record

Use this page to record your pain. Complete the table below using the pain scale and mark the body chart with the location of your pain.

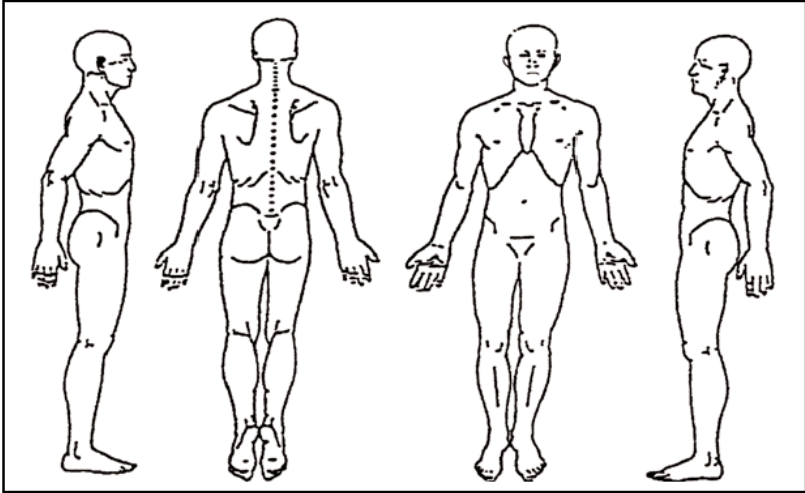


Pain Scale	
0	no pain
1	
2	mild
3	
4	moderate
5	
6	distressing
7	
8	horrible
9	
10	unbearable pain

Time Pain Began	Rate Pain 0 – 10	What activity were you doing when the pain began? (What might have caused the pain?)	Name and amount of pain medication taken	Time pain medication taken	Rate pain 1 – 2 hours after taking medicine 0 – 10	Comments

My Pain Assessment Record

Use this page to record your pain. Complete the table below using the pain scale and mark the body chart with the location of your pain.



Pain Scale

0 no pain

1

2 mild

3

4 moderate

5

6 distressing

7

8 horrible

9

10 unbearable pain

Time Pain Began	Rate Pain 0 – 10	What activity were you doing when the pain began? (What might have caused the pain?)	Name and amount of pain medication taken	Time pain medication taken	Rate pain 1 – 2 hours after taking medicine 0 – 10	Comments

Medications

During your treatment, you will often be asked what medications you are taking. Use this section to write down your medications as well as other information, such as the name of your pharmacy, your prescribing doctor and the dates you started and stopped medication. If you stop taking a medication, cross it off the list. If the dose or instructions for a medication change, cross off the original/old information and use a new box to record the new dose/instructions. These steps help to keep your list up to date.

Remember to take this record with you to your appointments so your health care providers have a current list of your medications.

My Medications

Pharmacy	Pharmacy Phone	Known Allergies

Medication	Dosage	Prescribed By	Start Date	Stop Date
How much and how often.				
Reason you are taking:				

Medication	Dosage	Prescribed By	Start Date	Stop Date
How much and how often.				
Reason you are taking:				

Medication	Dosage	Prescribed By	Start Date	Stop Date
How much and how often.				
Reason you are taking:				

Medication	Dosage	Prescribed By	Start Date	Stop Date
How much and how often.				
Reason you are taking:				

My Medications

Medication	Dosage <small>How much and how often.</small>	Prescribed By	Start Date	Stop Date
Reason you are taking:				

Medication	Dosage <small>How much and how often.</small>	Prescribed By	Start Date	Stop Date
Reason you are taking:				

Medication	Dosage <small>How much and how often.</small>	Prescribed By	Start Date	Stop Date
Reason you are taking:				

Medication	Dosage <small>How much and how often.</small>	Prescribed By	Start Date	Stop Date
Reason you are taking:				

Medication	Dosage <small>How much and how often.</small>	Prescribed By	Start Date	Stop Date
Reason you are taking:				

Lab Results & Test Records

This section provides pages where you can record results of lab tests and other tests you have had.

My Lab Results

Name: _____ Date of Birth: _____

Date	RBC	HGB	HCT	WBC	PLT	Comments	Other

Test	Male	Female
RBC (Red Blood Count)	4.2-5.4 million/cu mm	3.6-5.0 million/cu mm
HGB (Hemoglobin)	16± 2 GM	14± 2 GM
HCT (Hematocrit)	47± 5%	42± 5%
WBC (White Blood Count)	5,000-10,000/cu mm	5,000-10,000/cu mm
Platelets (PLT)	150,000-300,00/cu mm	150,000-300,000/cu mm

My Test Results

Name: _____ Date of Birth: _____

Test Name	Date	Body Area	Facility
<i>CAT Scan</i>	<i>8/30/05</i>	<i>Chest</i>	<i>Helen F. Graham Cancer Center</i>

Personal notes:

Helen F. Graham Cancer Center

This section includes directions to the Helen F. Graham Cancer Center, as well as a calendar of events and a list of available services.

Directions to Helen F. Graham Cancer Center

Driving South on I-95

Take Exit 4B onto Route 58 west (Churchmans Road). Follow Route 58 one mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

Driving North on I-95

Take Exit 4 onto Route 7/Route 1 north. Take Exit 166 onto Route 58 west (Churchmans Road). Follow Route 58 for six-tenths of a mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

From southern New Castle, Kent and Sussex counties

Take Exit 166 off of Route 7/Route 1 north and onto Route 58 west (Churchmans Road). Follow Route 58 for six-tenths of a mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

From southern Chester County, Pennsylvania

Follow Route 41 south to Route 7 south. Follow Route 7 to right turn onto Route 4 west (Ogletown-Stanton Road). Turn left on Route 58 east. Go three-tenths of a mile and turn right onto Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

From Cecil County, Maryland

Take I-95 north to Exit 4 (Metroform) Route 7/Route 1 north. Take Exit 166 onto Route 58 west (Churchmans Road). Follow Route 58 six-tenths of a mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

From Maryland's Eastern Shore

Take Maryland Route 213 north to Route 40 east. From Route 40 turn onto Route 7/Route 1 north. Take Exit 166 onto Route 58 west (Churchmans Road). Follow Route 58 six-tenths of a mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

From New Jersey

After crossing the Delaware Memorial Bridge, follow I-295 to I-95 south Exit 4 (Metroform) to Route 58 west (Churchmans Road). Follow Route 58 one mile. Turn left at the light to enter Christiana Hospital campus. Follow the signs to the Helen F. Graham Cancer Center.

Helen F. Graham Cancer Center Programs and Services

CANCER CARE MANAGEMENT PROGRAM

Christiana Care's Cancer Care Management Team works with your doctor to plan the best care for you in both the inpatient and outpatient settings. Your Cancer Care Management Team includes a care coordinator, social worker, and other support professionals. This team will be with you through your entire treatment. For more information, please call 302-623-4700.

CLINICAL TRIALS

The Helen F. Graham Cancer Center at Christiana Care is committed to ongoing studies of new therapies and research for new cancer treatments. Physicians study and adopt the latest treatments that may offer more hope for the effective treatment of numerous cancers. Patients and their families can stay closer to home and enjoy the convenience of community-based care. Please talk to your doctor or nurse for more information.

JUNIOR BOARD LIBRARY

The Junior Board Cancer Resource Library is a warm, welcoming multimedia center tailored to your special needs. Our library staff can help you find answers, advice and information about the latest advances in cancer treatment and many related topics. The library is free and open to the public. For more information, please call 302-623-4580.

CANCER COMPANION PROGRAM

The Cancer Companion Program is for people recently diagnosed with cancer. This program connects you with a volunteer who has had the same type of cancer as you and has completed his/her treatment. For more information, please call 302-623-4500.

SIMPLY YOU BOUTIQUE

"Mastectomy-wear for the confident woman." Breast prostheses, mastectomy bras, swimwear, headwear, wigs, compression hosiery and lymphedema garments are available for purchase. The boutique is located in the Helen F. Graham Cancer Center. For more information, please call 302-368-3686.

CANCER SPECIAL NEEDS FUND

The Cancer Special Needs Fund can provide financial assistance to patients who have undergone treatment at any Christiana Care Health System location. This program is funded by the Junior Board of Christiana Care. Special guidelines apply; call 302-623-4700 for information.

continued on next page



**CHRISTIANA CARE
HEALTH SYSTEM**

Helen F. Graham Cancer Center Programs and Services (continued)

LOOK GOOD...FEEL BETTER®

This program teaches beauty techniques to women who are actively undergoing cancer treatment. This free program focuses on how to use cosmetics and skin care products to cope with hair loss and skin changes caused by cancer treatment. This program is sponsored by the American Cancer Society, the Cosmetic, Toiletry, and Fragrance Association and the National Cosmetology Association. Call 302-623-4500 for more information.

WIG BANK

Free wigs are available by appointment. The wigs are donated by the Junior Board of Christiana Care. Special guidelines apply; call 302-623-4700 to schedule an appointment.

CANCER HELP

Cancer Help is a computer for public use located in the lobby of the Helen F. Graham Cancer Center. This computer provides information about how to fight cancer, including diagnosis, treatment, medication, diet and nutrition. The computer is easy for most people to use. Please ask for assistance if needed.

DUPONT TRANQUILITY GARDEN

Relax and renew your spirit in the lovely DuPont Tranquility Garden. It is the perfect place to rest between appointments or to wait for a loved one. The garden is located at the back of the lobby by the pond.

HELEN F. GRAHAM CANCER CENTER WEBSITE

Take a virtual tour of the Helen F. Graham Cancer Center. Go to Christianacare.org, click Homepage, and click Helen F. Graham Cancer Center.

REHABILITATION SERVICES

Programs for managing lymphedema, fatigue, pulmonary problems and other complications associated with cancer are available at several Christiana Care locations. For more information, call 302-623-4510.

continued on next page

Helen F. Graham Cancer Center Programs and Services (continued)

GENETIC COUNSELING AND TESTING

A certified genetic counselor is available to work with patients and families with hereditary forms of cancer. There are three phases to genetic counseling and testing, therefore three visits are necessary to complete the entire process. The first step of this process is an education session outlining the risks, benefits and limitations of genetic testing. This step is critical in understanding the value of testing and how it will affect the individual as well as his/her family members. The second step includes time to ask questions and the actual blood sampling. The third step is a follow-up appointment to discuss the test results. Note that it typically takes several weeks to obtain test results. For more information or to schedule an appointment, please call 302-623-4500.

REGISTERED DIETITIAN

A registered dietitian is available for group or individual counseling regarding nutritional issues. For more information, or to schedule an appointment, please call 302-623-4500.

HEALTH CARE PSYCHOLOGIST

A health care psychologist is available for individual, couples or family counseling focusing on the emotional responses to cancer. For more information or to schedule an appointment, please call 302-623-4500.

Nutrition

This section provides a list of classes and programs as well as other key nutrition resources. All emphasize the importance of getting the most nutrients from the foods you eat.

About Cancer Treatments and Nutrition

Why is nutrition so important right now?

Eating well during treatment helps your body and immune system recover. Healthy foods, especially those high in protein and calories, help you maintain your weight. This improves your strength and energy levels and may reduce treatment side effects. Your dietitian can help build a nutrition plan that works for you.

Chemotherapy and Nutrition

When you are undergoing chemotherapy, you may experience these side effects:

- Food may taste unpleasant or “funny.”
- Feeling of fullness, even when you have not eaten.
- Feeling sick after your treatments.
- Diarrhea.
- Constipation.
- Sores in your mouth or having trouble eating because of mouth problems.
- Feeling very tired.

Radiation Therapy and Nutrition

When you are undergoing radiation therapy, you may experience these side effects:

- Feeling of fullness, even when you have not eaten.
- Weight loss because you are not eating enough.
- Diarrhea.
- Sores in your mouth or having trouble eating because of mouth problems.
- Feeling very tired.
- Swelling in the arms and sometimes the legs (lymphedema).

Please remember that not everyone will experience these symptoms. Every person’s body reacts differently to cancer and cancer treatments. These are the common side effects that typically pose challenges to good nutrition while undergoing treatment. Dietitians are very knowledgeable about which foods you should eat and which you should avoid. They can help you choose the best foods to help you feel better.

Source: Copyright © 2000, Aspen Publishers, Inc. Oncology Diet and Nutrition Patient Education Resource Manual.

Nutrition Services

Whether you are living with cancer or simply motivated to learn how to eat for a healthy life, changing your dietary habits can make a difference in the way you feel. It's never too late to start improving what and how you eat. Our staff will encourage and support you in making the dietary and lifestyle choices you need to achieve better health.

Personal Clinical Nutrition Assessment

Information from a four-step evaluation helps to prioritize problem areas and develop a nutrition plan. The evaluation includes: detailed health and diet history, measurements to assess body composition, computerized dietary analysis of your current eating patterns and a one-hour, one-to-one diet instruction session.

Individual Clinical Nutrition Counseling

You and/or your family and a registered dietitian work together during scheduled 45-minute sessions to develop a lifestyle-change plan that meets your own personal nutrition and health goals. Special attention is given to issues related to chronic diseases, such as high blood pressure, diabetes, heart disease and osteoporosis.

Comfort Foods for Cancer Therapy

Attend a FREE, group nutrition class to learn about foods that can help nourish and fortify you during chemotherapy or radiation therapy. Maintaining enough calories and proteins can help you minimize weight loss and manage unpleasant side effects such as decreased appetite, taste changes, nausea, diarrhea, constipation, sore throat or dry mouth. Caregivers and patients will benefit from the dietary tips and easy-to-follow recipes presented.

Remember, eating the right kind of foods before, during and after treatment can help you feel better, stay stronger, decrease the risk of infection, help you heal and recover faster and tolerate treatment-related side effects.

Let a registered dietitian work with you to develop a nutrition plan that will help you manage:

- Cancer risk.
- Diabetes.
- Fatigue.
- Fluid retention.
- Heart conditions.
- High blood pressure.
- High cholesterol.
- Tube feedings.
- Weight loss.
- Weight gain.

Please call 302-623-4500 or 800-811-8116 to schedule a nutrition appointment or to register for a free group class.



Caring for Myself at Home and Other Community Resources

This section provides information regarding caring for yourself at home, a list of classes, support groups, and organizations dedicated to helping you with various aspects of your treatment, and a Cancer Information Guide that details additional information about your illness.

Caring for Myself at Home

When caring for yourself at home, some everyday activities may become difficult for you to do safely. Dressing changes, medicine schedules, even bathing may become hard for you. You may find that you need special equipment to help you, such as a walker, wheelchair or bedside toilet. You may also need other supplies depending on your individual situation. Home care nurses have special training in cancer treatment and can help you better understand your disease and side effects you may experience. They can also check to be sure that you are safe at home. The nurses can help you decide what other services you may need, such as physical therapy or a home health aid to help you with your personal care. If you have other health conditions besides cancer, a nurse can help you with those as well.

If you think that a home health care visit may be helpful, please contact your care coordinator or the Helen F. Graham Cancer Center at 302-623-4700.

Cancer Information Guide

Basics About Cancer

Cells and the Cell Cycle

The body is made up of billions of cells. There are many kinds of cells with different functions. For example, a nerve cell in the brain is very different from a skin cell.

Most cells constantly divide to allow for growth and healing of tissues after cell injury. This process is called reproduction and occurs in steps, known as the cell cycle. Cells differ in the rate at which they reproduce. For example, cells of the intestinal tract, scalp and bone marrow reproduce faster than cells in the muscles and nerves.

Cells receive internal and external “signals” which affect their reproduction process. Abnormal cells can occur anywhere in the body for reasons that may not be known. In some cases, abnormal cells do not respond to the signals that control their reproduction. This may cause rapid or disorganized cell growth, causing a tumor. Cancer is a general term for diseases that are characterized by the uncontrolled growth and spread of abnormal cells.

Types of Tumors

There are two types of tumors: benign and malignant.

A benign tumor is described as a swelling or growth:

- That is not cancerous.
- Does not spread from one part of the body to another.
- Causes concern when it is pressing on an important organ or interferes with the organ’s normal function.

A malignant tumor is:

- A tumor or mass of cancerous cells which can travel through the body and invade other organs of the body. The process of spreading to other areas is called metastasis.
- An invasion of cancerous cells in a part of the body that interferes with the functions of a group of cells, as with leukemia.

Diagnosing cancer requires information from a variety of sources, including:

- Information you give about your symptoms.
- Your medical history.
- Diagnostic tests.
- MRI.
- Signs of illness.
- Lifestyle habits.
- CAT scan.
- Biopsy.
- Bone scan.



Emotional and Physical Aspects of Cancer

Adjusting to the Diagnosis

Learning that you have cancer can be overwhelming. Many people experience shock and denial and say, “It can’t be true” or “I can’t believe this is happening to me.”

Common feelings you may experience could be:

- Fear.
- Uncertainty about what will happen next.
- Changes in your self-esteem.
- Anger.
- Sadness.
- Depression.
- Anxiety.
- Threatened sense of security about losing control over events in your life.

OR

You may also feel anxious about losing control over events in your life.

Your family and friends may:

- Feel the same fear and anxiety about the diagnosis as you do.
- Say “everything will be fine” to make you feel better, not realizing that this cuts off your ability to share your feelings.
- Avoid talking about your cancer because they don’t know what to say.
- Shy away from you because they don’t know how to handle their feelings.
- Be afraid because of misconceptions they have about the diagnosis of cancer.
- Be the target of your anger and/or feel angry at you.

Sometimes it can be difficult to have conversations with your family and friends about what would be helpful to you. Please review the list on the next page for some ideas about how you can receive help from your loved ones. Often friends and family are relieved when given something to do to make your life a little better.

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Emotional and Physical Aspect of Cancer (continued)

20 Practical Tips for Helping a Friend or Loved One with Cancer

1. Don't avoid me. Please call and visit me just like you always have.
2. Bringing over my favorite meal is a great help. Bring food in disposable containers so I don't have to worry about cleaning and returning them.
3. Watch my children while I take time to be alone or with other loved ones. My children might also need a little break from my illness.
4. When you call or visit, please be aware of my limitations. I will get tired more quickly than I did before.
5. Call for my shopping list when you are going to the grocery store, just picking up a few items can be a tremendous help.
6. Help me to celebrate the holidays by decorating my hospital room or home.
7. Help my family. Invite them out or offer to stay with me so they can go do something for themselves for a little while.
8. Let's talk about it. I might want to talk about my illness. It's okay to find out by asking, "Do you feel like talking about it?"
9. Don't always feel that we have to talk. Sitting quietly together is fine.
10. If it is important to me, help me to feel good about my appearance.
11. Please include me in decision making. It helps me feel in control when I participate in decision making with regards to family matters or my treatment.
12. Talk to me about things that interest both of us, not just my illness.
13. Bring a positive attitude, it can be contagious.
14. Could you help me with some cleaning? During my illness, my family and I still have dirty clothes, dishes, and a dirty house.
15. Don't be afraid to cry with me or to laugh with me. Sharing our emotions helps to ease my sense of loneliness and isolation.
16. Pray for me and share your faith with me.
17. Tell me how you would like to help me. When I agree, please follow through.
18. Tell me about support groups so I can share with others.
19. Mow my lawn.
20. Bring me humorous books and movies and watch them with me.

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Emotional and Physical Aspect of Cancer (continued)

Coping Strategies

Coping strategies are ways to manage the distress caused by cancer. Here are some tips that can help you cope with your diagnosis:

Try physical exercise to help you work off feelings kept inside. You may also find that exercise helps you:

- Think more clearly.
- Reason better.
- Sleep more restfully.

Continue leisure activities that you enjoy

- Maintain your humor – rent films or read books that will lighten your mood.
- Socialize with your family and friends whenever possible.

Seek information to reduce fear about the unknown:

- Consult health professionals with concerns about your own care.
- Arrange to speak with other patients about their experiences through the help of your treatment team.

Share your feelings and seek support:

- Have more than one person to talk to.
- Locate a support group.
- Consider seeing a professional.

Helping Children Cope

Adults should let children know it is okay for them to be upset. Help children talk about their feelings and what is happening to the family, friends, other adults and what will happen to them.

Children may worry that expressing their fears, worries and concerns may upset their parents who are also coping with the diagnosis of cancer. They may be more comfortable talking about their feelings with another trusted adult. Consider these resources for children:

- Favorite aunt/uncle.
- Neighbor.
- Grandparent.
- Minister.
- Teacher/counselor at their school.
- Social worker.
- Health psychologist.
- Support groups for children who have a family member with cancer.

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Emotional and Physical Aspect of Cancer (continued)

Coping Resources

The added stress of cancer on a patient and family sometimes requires the assistance of a professional to provide supportive counseling and direction. Clinical social workers, health psychologists and chaplains are available to you throughout your treatment experience to address the emotional and spiritual issues you may have.

These professionals can:

- Listen when you are feeling afraid, angry, doubtful or guilty.
- Care when you are lonely or isolated.
- Accept and be concerned about you as a whole person.
- Help you and your family use coping strategies more effectively and teach new ways to cope with the feelings you are experiencing.
- Support you and your family as you learn new roles.
- Connect you with resources that provide support, education and financial aid.

Chaplains are also able to provide spiritual counseling and offer a presence when sharing the resources of sacrament and prayer and/or reading of religious literature.

Please review the following suggestions below. You may decide that you would like to arrange an appointment with the health psychologist, social workers or to attend a support group. We encourage you to do so by calling 302-623-4500.

1. Try to Manage Your Strong Emotions

Shock and disbelief are often a first reaction to a cancer diagnosis. During cancer treatment other strong emotions such as fear, anger, nervousness, and sadness are common. Although these strong emotions are a natural result of the stress you are facing, it is important that you do not allow these strong emotions to reduce your ability to make good decisions. Research has shown that talking to professionals and family, keeping a journal, praying and using relaxation techniques help patients and family members manage these strong emotions.

2. Do Not Avoid the Situation

People who develop a plan of action for dealing with their stressors have been shown to experience less emotional distress. It is important that you face your thoughts and feelings and follow through with your medical treatment plan.

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Emotional and Physical Aspect of Cancer (continued)

3. Develop Realistic Optimism

Realistic Optimism means being realistic about the challenges your illness brings to your life, while at the same time remaining optimistic that these challenges can be overcome. This is done by focusing your attention on all of the small positive events that happen to you everyday. More specifically, you make yourself think of positive things and prevent negative thoughts.

4. Allow Family and Friends to Help You

Family and Friends can be a big help to you in different ways. They can help you in a practical way by bring you meals or going to your appointments with you. They can also provide emotional support by listening to your concerns, spending time with you and letting you know they care.

5. Maintain Balance in Your Life

There are many changes in a cancer patient's life. Many people find that maintaining a "normal" schedule as best as they can helps to reduce the distress associated with cancer. It is important to include fun activities in this schedule to help balance the stress in your life.

6. Knowledge is Power

Learning about your diagnosis and treatment is one of the best methods of reducing anxiety associated with cancer. Obtaining truthful, research based information about your diagnosis and treatment will also assist you in correcting myths and misinformation about cancer.

Sexuality

Sexuality is related to the image we have of ourselves, being male or female, what roles we fill in our lives such as occupation, material status, parenthood and how we express these things about ourselves to others. Some simple examples of sexuality are touching, hugging, kissing, or sharing quiet time with our partner. Revealing ourselves to one another, giving and receiving affection and sexual intimacy are all part of sexuality. Cancer and the emotions caused by this diagnosis may affect how attractive and/or worthwhile you feel. Talking with your doctor or nurse may help you discover other ways that you can be comfortable with feeling sexual and expressing these desires.

Cancer treatment can change how you relate to your partner. You may experience:

- Short-term decrease in sexual interest due to the mental or physical side effects of cancer.
- Change in your body image as result of one or more of the following:
 - Surgical scars.
 - Hair loss.
 - Skin changes.
 - Pain.
 - Nausea.
 - Removal of a body part.
 - Fatigue.
 - Insertion of a treatment device, for example Hickman catheter, tracheostomy or colostomy.

Men may experience:

- Inability to have an erection.
- Feelings of inadequacy.
- Lack of desire.
- Premature or delayed ejaculation.
- Fear about sexual performance.

Women may experience:

- Vaginal soreness or dryness.
- Inability to achieve climax.
- Lack of desire.
- Menopause.

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Sexuality (continued)

Cancer therapy can affect your ability to have children. You will need to discuss this with your doctor to learn what birth control and fertility options are available to you.

Whether you are male or female, your cancer may change the way you see yourself and your willingness to let your partner see you. Some things, like hair loss, are a constant reminder of your illness. Feeling uncomfortable with sexuality is most common in the first few weeks after treatment begins. You may feel the most vulnerable and worried about your partner's rejection at this time. The most important, but often the hardest thing you can do is to share your feelings with your partner. Only by talking with each other can you develop an understanding and become more comfortable keeping sexuality part of your relationship.

Here are some suggestions:

- Ask questions. Your doctor or nurse can help you deal with some of the physical change and may have suggestions for your specific problem(s). Usually the problem(s) can be solved.
- Explore new options to express yourselves sexually:
 - Spend more time becoming aroused.
 - Try light tickling, fondling or massage.
 - Focus on other body areas that feel pleasurable to you and your partner, such as the neck or ears.
 - Try different positions.
 - Plan intimacy to create an air of anticipation and romance.
- It may be helpful to:
 - Take pain medication between one-half to one hour before sexual activity.
 - Schedule your intimate time when you will be most rested.
 - Use unscented or water-based lubricant or cream for intercourse if you are a woman experiencing vaginal soreness or dryness.



Cancer Treatments and Treatment Side Effects

There are different ways to treat cancer. The type and characteristics of the abnormal cells, size or number of cells, and the location of the cancerous cells will help your doctor decide the best treatment for you.

Chemotherapy

Chemotherapy (keemoTHERapy) is the use of drugs to destroy cancer. Your treatment may consist of one drug or a group of drugs that work together (combination therapy). Chemotherapy can be given by mouth or injection directly into the bloodstream. The drugs travel through the bloodstream to:

- Kill cancer cells.
- Stop cancer cells from growing.
- Keep new cancer cells from forming.

Chemotherapy can be given in the doctor's office, in the hospital or at home, depending on how you are feeling and what kind(s) of drug(s) you are receiving. Chemotherapy treatments will be given at regular intervals, such as weekly or twice per month for several months. The length and frequency of treatment depends upon the individual and the drug(s) being used.

Effects of Chemotherapy

Because chemotherapy works by damaging rapidly dividing cells, it can damage both cancerous and normal cells. However, unlike cancer cells, normal cells can heal themselves and recover in a few weeks. The cells most likely to be temporarily affected include:

- Bone marrow.
- Hair.
- Alimentary tract (mouth, stomach, intestines).
- Reproductive system (sex glands).

When these cells are affected by chemotherapy, side effects may occur. There is no way to know if you will experience side effects or how bothersome the side effects may be.

Side Effects of Chemotherapy

Bone Marrow

Bone marrow is the tissue in the middle of the bone. New blood cells are always being formed in the marrow to replace blood cells that "wear out." Chemotherapy can interfere with the formation of red blood cells, white blood cells and platelets.

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Cancer Treatments and Treatment Side Effects (continued)

Red Blood Cells (RBC) carry oxygen. If your red blood cell count is low, you may feel:

- Tired.
- Dizzy.
- Chilly.
- Short of breath.
- Weak.

If you experience any of these symptoms:

- Report them to your doctor or nurse.
- Take frequent rest periods.
- Get help bathing, dressing, cooking and cleaning.

White Blood Cells (WBC) fight infection. When your white blood cell count is low, you are more prone to infection.

Platelets (PLT) are blood cells that help your blood clot easily. When platelets are low, you may bleed or bruise more easily.

For more information on WBCs and platelets, see the Side Effects Information Sheets in the Symptoms & Side Effects section of this journal.

Hair

You may lose some or all of the hair on your head or other parts of your body while undergoing chemotherapy treatment and with some types of radiation. This is usually temporary and your hair will grow back. After your hair grows back, it may look and feel somewhat different than before treatment.

What to do:

- Plan for this side effect by getting a wig or hair piece before you begin treatment.
- Cover your head with a scarf or hat.
- Avoid excessive shampooing, hair dryers, hairspray, rollers, sun and cold exposure to your head.
- Avoid excessive brushing and/or combing.
- Use a wide-toothed comb.

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Cancer Treatments and Treatment Side Effects (continued)

Mouth

Your taste buds may be more sensitive.

What to do:

- Avoid highly seasoned, salty foods.
- Flavor foods with sugar, basil, seasonings, lemon juice or mint.

Mouth sores may occur 1-2 weeks after treatments starts. The lining of your mouth may become red and sore and small white blisters may appear. Inspect your mouth every day looking for blisters or areas that are sore.

What to do:

- Avoid spicy, acidic foods.
- Eat soft, bland foods.
- Avoid alcohol, caffeine and cigarettes.
- Practice good mouth care.
- Rinse your mouth after each meal and at bedtime with a baking soda rinse (1 tsp baking soda in one cup of warm water).
- Keep your lips moist with Vaseline® or Chapstick®.
- Remove your dentures except when eating.
- Drink liquids through a straw for easy swallowing.

Stomach/Intestines

Nausea or vomiting, loss of appetite, diarrhea and/or constipation may occur a few hours after your treatment and may last for several days.

What to do for **nausea and/or vomiting**:

- Eat small, frequent meals.
- Eat bland foods, such as dry toast, crackers, clear soups and/or caffeine-free tea.
- Serve meat alternatives such as fish, cheese, egg salad, chicken or legumes (beans) that may be more easily digested.
- Drink ginger ale or apple juice.
- Avoid sweets, fatty and/or fried foods.
- Clean your mouth frequently.
- Increase liquids or eat ice chips.
- Take medication as your doctor prescribes to prevent nausea.

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Cancer Treatments and Treatment Side Effects (continued)

- Try to relax while eating (watch TV or listen to the radio).
- After eating, avoid lying down for two hours.
- Rest after eating, since activity can slow digestion and increase discomfort.
- Breathe slowly through your mouth if you feel nauseated.

If nausea continues after trying these tips, tell your doctor.

What to do for **loss of appetite**:

- Eat small, frequent meals.
- Eat with other people.
- Include your favorite foods.
- Use supplements, such as milkshakes, that are high in protein and calories.
- Add fruit or juice to milkshakes, custards, ice cream and/or puddings to increase their nutritional value.
- Use marinades to make meats more tender and flavorful.

What to do for **diarrhea**:

- Eat low-fiber foods, such as bananas, cheese, rice and/or pasta.
- Increase your fluid to 3-4 quarts per day (caffeine-free soda, Gatoraid® and juice popsicles are best).
- Take your medication as prescribed by your doctor.
- Keep your rectal area clean and dry.
- Take warm baths.
- Rest when you are tired.
- Keep a record of the number, characteristics and amount of bowel movements; report this information to your doctor.

Alert your doctor if you have four to six loose or watery stools for more than 24 hours.

What to do for **constipation**:

- Eat high-fiber foods.
- Drink prune juice and 1-2 extra glasses of liquid per day.
- Maintain and stimulate regular bowel activity by exercising lightly each day.
- Drink a hot beverage 30-60 minutes before your usual time for a bowel movement.
- Have a quiet time each day when you can sit on the toilet uninterrupted to promote regularity.
- Gently massage your abdomen from right to left while you are sitting on the toilet.

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Cancer Treatments and Treatment Side Effects (continued)

Less Common Side Effects Can Occur with Specific Medications

If your drugs indicate that they may cause skin changes:

- Avoid sun exposure.
- Use a sunscreen (SPF 30 or higher) when outdoors.
- Wear protective hats and clothing.
- Report skin rashes and/or itching to your doctor.

If your drugs indicate that they may cause numbness in your hands or feet:

- Take extra care to protect your feet by wearing comfortable shoes and socks when walking.
- Avoid handling very hot or sharp items.
- Wear gloves in cold weather.
- Report increased numbness to your doctor.

If you experience decreased kidney function (less frequent urination):

- Increase fluids to 3-4 quarts per day.
- Report decreased urination to your doctor.

Tell your doctor if you experience any of the following:

- Blood in your urine.
- A change in the color of your urine.
- Soreness or irritation of your veins.
- A change in sexual or reproductive function.
- A change in lung function, such as shortness of breath.
- A pounding feeling in your chest or extra heart beats, chest pain or other heart symptoms.

Remember, do not hesitate to ask questions or share your feelings and/or concerns.

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Cancer Treatments and Treatment Side Effects (continued)

Hormone Replacement Therapy

Hormone therapy is used to block cancer cells from getting the hormones that they need in order to grow. Treatment may include drugs that change the hormones in your body or surgery to remove organs, such as ovaries, that produce hormones.

Talk to your health care provider about what side effects you may experience during hormonal therapy.

Radiation Therapy

Radiation therapy is the local treatment of cancer using high-energy x-rays or radioactive particles to kill cancer cells and stop them from growing. Radiation therapy targets specific tumors with an exact amount of radiation. It does not affect the entire body, however, it is possible that some normal cells surrounding the tumor may receive some radiation. Unlike cancer cells, most of them recover from the effects of radiation. To protect normal cells, the doctor carefully limits the daily dose of radiation and also shields as much normal tissue as possible while aiming the radiation at the cancer site. The goal of radiation therapy is to kill cancer cells with as little risk as possible to the normal cells.

Radiation therapy is sometimes used as the only treatment for cancer. It can also be used in combination with surgery or chemotherapy. Like surgery, radiation therapy is a local treatment – that is, it affects only the part of the body that is receiving the radiation.

The following types of radiation therapy are the most common:

External Beam Radiation

A machine, called a linear accelerator, directs a beam of radiation into the tumor from outside your body. Treatments are done on an outpatient basis in a hospital or clinic. The first visit generally lasts 1-2 hours, and may be a consultation visit only. A consultation visit does not include actual radiation treatment. Once you are scheduled to receive radiation, actual treatment takes only minutes. The entire visit usually takes less than 30 minutes. Usually, treatments are given 5 days per week for 5-6 weeks. The actual number of radiation treatments depends upon the total amount of radiation needed.

Internal Radiation

This type of radiation is also called “brachytherapy” or “implant” therapy. A radioactive source is placed inside the body, in or near the tumor, to deliver high doses of radiation which destroy the cancer cells. Sometimes a short hospital stay is necessary with this therapy.

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Cancer Treatments and Treatment Side Effects (continued)

GliaSite

GliaSite Radiation Therapy System is a system of delivering liquid radiation internally through a catheter in the brain. This catheter allows for the radiation therapy to be delivered to the cavity left after a brain tumor has been removed. The radiation therapy is left in place for several days. Once therapy is completed the liquid radiation and the catheter are removed. The goal of this therapy is to improve control of tumor growth and decrease damage to normal tissues.

Intensity Modulated Radiation Therapy (IMRT)

IMRT can treat hard-to-reach tumors with a high level of accuracy. With this level of accuracy, higher than traditional doses of radiation can be used while causing less damage to normal tissues. IMRT may be used alone or with other treatments.

High Dose Rate Implant

Treatment with high dose rate implants allows a patient to receive a dose of radiation over several minutes instead of several days. The number of treatments and the frequency of the treatments varies from patient to patient and will be determined by your doctor. The dose of radiation is directed only to the area of the tumor, thus sparing much of the normal tissue around the tumor. This decreases the degree of side effects experienced with radiation therapy. This type of therapy is commonly used with gynecological cancers. Patients may or may not receive external beam radiation along with high dose rate implants.

MammoSite®

MammoSite® is a form of partial breast irradiation. It works by delivering radiation from the inside of the lumpectomy cavity (the space that is left after the tumor is removed) directly to the tissue surrounding the cavity where cancer is most likely to recur. Radiation therapy with Mammosite can be completed in five days.

Other Types of Radiation Therapy

There are also other types of radiation therapy. These include stereotactic radiosurgery (SRS), stereotactic radiotherapy (SRT), and total body irradiation (TBI). Your doctor will provide a complete explanation of these treatments if they are indicated for you.

Side Effects of Radiation Therapy

The side effects of radiation therapy depend upon the area of the body being treated. For this reason, each patient may experience different symptoms. Your Radiation Oncologist (doctor) and nurse will review the possible side effects and the best way to manage these symptoms.

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Cancer Treatments and Treatment Side Effects (continued)

Side Effects of Radiation Therapy may include:

- Mild to moderate fatigue.
 - Treatment can be stressful and very tiring; you should try to rest as much as possible and eat properly to maintain your strength.
- Skin changes sometimes occur near the end of treatment. Skin around the treatment area may become reddened, irritated, tanned or “sunburned.” Some people find that the area becomes dry; others notice it becomes very moist, especially between creases. If your skin becomes irritated, try the following to lessen the discomfort:
 - Avoid soaps with perfume or deodorants and ointments; use lukewarm water and plain soap.
 - Wear soft cotton bras and/or loose clothing.
- Swelling in the arms and legs sometimes occurs (lymphedema). Tell your doctor if this happens to you.
- You may experience other side effects depending upon the area of your body that receives radiation. Your physician will review these specific side effects with you.

Discuss your side effects with your health care provider – they may have other suggestions for your particular situation!

Radiofrequency Ablation (RFA)

Ablation is a word that refers to procedures done to destroy diseased or damaged tissue. Radiofrequency ablation, or RFA, is a minimally invasive image-guided procedure used to destroy cancerous tumors. RFA is an option which may take the place of conventional surgery or may be an option when surgery can't be done. Complications and recovery time are often less with RFA than with conventional surgery.

What is RFA used for?

RFA can be used to destroy tumors in many sites of the body. It is most frequently used to destroy tumors in the liver. It has also been used to destroy tumors in other body sites such as the kidney, lung, bone, adrenal glands, prostate, breast and bladder. RFA may be an option for those patients who are unable to go through surgery to remove their tumor due to the tumor size and location or due to risk factors that make surgery a poor choice. In some cases RFA is used to destroy the tumor completely. In other cases only part of the tumor is destroyed. Ablating only part of the tumor may be enough to make chemotherapy more effective. This may provide local control of tumor growth.

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Cancer Treatments and Treatment Side Effects (continued)

Surgery

Surgery is a common method of treating certain kinds of cancer and is considered a local treatment. The doctor operates to remove the tumor and nearby tissue that may or may not contain cancer cells. Some healthy tissue may need to be removed to prevent the cancer from spreading.

Cancer cells can spread to other parts of the body through the lymphatic system. During surgery the doctor may remove lymph nodes near the tumor because they may contain cancer cells. Sensations you may experience after surgery include:

- Discomfort at the surgical site that will lessen as each day passes.
- Numbness or tingling in the area of your incision.
- Tiredness.

These feelings will gradually go away as your body heals. Your nurse will review coughing, deep breathing and leg exercises with you to lower your chance of certain complications after surgery. You may also be given information about patient controlled analgesia (PCA) to help manage your pain.

Advance Directives

The purpose of advance directives is to explain to your family and your health care providers the extent of medical treatment you wish to receive, or not receive, should you become unconscious or too ill to make the decision at a later point in your life. Advance directives are documents you create while you are feeling well and thinking clearly. Advance directives can be developed as follows:

■ Individual Instructions (formerly referred to as a living will)

- This written statement tells your family and your health care providers whether you want any medical procedures or equipment used to keep you alive if you are in a terminal condition or in a permanently unconscious state. A terminal condition is one that will result in your death regardless of treatment. Permanently unconscious means having a diagnosis of either a persistent vegetative state or irreversible coma for a minimum of four weeks. Both terminal and permanently unconscious conditions must be confirmed in writing on your chart by two doctors.

■ Power of Attorney for Health Care Decisions

- This is a document in which you name another person as your agent to make health care decisions for you when you are unable to do so yourself.

Federal law requires that hospitals ask incoming patients whether they have advance directives for medical care. It is the policy of Christiana Care Health System to honor your wishes regarding your medical care through your advance directives, as long as these directives comply with Delaware law and the policies of the Christiana Care Health System. A notary is **not** required for an advanced directive.

A booklet with more information about advance directives and assistance in completing an advance directive are available from your social worker at the Helen F. Graham Cancer Center, 302-623-4700. You can also obtain additional information through the following sources:

Source	Location	Phone
Patient Relations	Christiana Hospital	302-733-1340
	Wilmington Hospital	302-428-4608
Pastoral Services	Christiana Hospital	302-733-1280
	Wilmington Hospital	302-428-2780
DE Division of Services for Aging Adults with Physical Disabilities	Statewide	800-223-9074
	New Castle County	302-453-3820
	Kent and Sussex Counties	302-422-1386

Note: Although it is not required, you may also contact an attorney.



Bone Marrow Biopsy/Aspiration

Bone marrow is the spongy tissue that fills the core (center) of your bones. Bone marrow in the head (skull), breastbone (sternum), backbone (spinal column) and hip bone (iliac crest) is responsible for the production of white blood cells, red blood cells and platelets. A bone marrow biopsy/aspiration samples the spongy tissue and tests the bone marrow for the number and type of cells being made.

Bone marrow biopsy/aspiration procedures are used to diagnose blood disorders, document tumor involvement and/or to determine treatment response.

A specially trained nurse or your doctor performs the procedure. The bone marrow sample can be obtained from the top front or back portion of your hip bone (iliac crest) or your breastbone (sternum).

The following describes the procedure order:

1. An appropriate bone is chosen.
2. The area is cleaned.
3. A numbing medicine (anesthetic) is injected into the site; this may feel like a bee sting for a few seconds.
4. Your nurse or doctor waits for the injection site to become numb.
5. The bone marrow needle is inserted gently into the bone; a sensation of pressure may be felt.
6. A small sample of marrow is withdrawn with a syringe while the bone marrow needle is in the bone.
7. The needle is removed when an adequate sample is obtained.
8. A tight bandage is placed over the site to keep the area clean and prevent bleeding.
9. The bone marrow site is checked frequently for signs of bleeding.
10. The bandage is removed after 12 hours. The area may be sore for several days. In the meantime, ask your physician for pain medication, if needed.



Guided Imagery for Relaxation

Guided imagery is a simple relaxation technique that uses special audiotapes designed to help your body and mind relax. Some benefits of guided imagery include:

- Reduced stress and anxiety.
- Decreased pain.
- Better/more restful sleep.

Tapes are available for outpatients at the Helen F. Graham Cancer Center Library and New Castle County Libraries. Tapes can also be purchased at most book and music stores. If you are admitted to the Christiana Care Health System Hospital, a Guided Imagery channel is available on the Patient Education Television System.

Note: DO NOT use guided imagery while operating machinery or driving a motor vehicle.

Clinical Trials

A clinical trial, or protocol, is a carefully controlled study to answer a specific scientific question. Most cancer clinical trials are done to evaluate new treatments. These treatments often involve surgery, radiation therapy, chemotherapy or a combination of these treatments. Clinical trials are a way to help doctors learn if a new treatment is safe and effective for people. There are also clinical trials to study ways to prevent cancer; these are often known as chemoprevention trials. Some studies also look at the emotional impact of cancer, symptom control and ways to improve quality of life of people with cancer.

Clinical trials are not for everyone. Your doctor will discuss with you whether a clinical trial would be an appropriate treatment option for your type of cancer. If you are a candidate for a clinical trial, ask about the side effects, risks and expected benefits. Your doctor or nurse can give you a booklet, called “Taking Part in Clinical Trials – What Cancer Patients Need to Know” for a more detailed explanation of clinical trials.

Your doctor can help answer any questions you have about the clinical trial before you agree to become involved. You must sign an informed consent form in order to participate in a clinical trial. You can choose to stop participating at any time.

Side effects of a clinical trial may be similar to those you might experience with standard treatment. However, because clinical trials are research studies into new areas of treatment, some side effects are unknown.

Glossary of Terms

Definitions of common cancer related terms.

Glossary of Terms

Adjuvant Chemotherapy: the use of drugs in addition to surgery and/or radiation to treat cancer.

Alopecia: the loss of hair from the body and/or scalp.

Anemia: low red blood cell count; symptoms include shortness of breath, lack of energy and fatigue.

Anorexia: absence or loss of appetite for food.

Antiemetic: a medicine that prevents or controls nausea and vomiting.

Benign: word to describe a tumor that is not cancerous.

Biopsy: the surgical removal of a small piece of tissue for microscopic examination to determine if cancer cells are present; a procedure for diagnosing cancer.

Blood Count: the number of red blood cells, white blood cells or platelets in a given sample of blood.

Bone Marrow: the inner spongy tissue of bone where red blood cells, white cells and platelets are formed.

Bone Marrow Biopsy and Aspiration: a procedure in which a needle is inserted into the center of a bone, usually the hip or breast bone, to remove a small amount of bone marrow for microscopic examination.

Bone Marrow Transplant: replacement of bone marrow after high-dose chemotherapy.

Cancer: a general name for over 100 diseases in which abnormal cells grow out of control; a malignant tumor.

Cell: the basic structure of living tissue. All plants and animals are made up of one or more cells.

Chemotherapy: the treatment of disease with drugs.

Clinical Trial: a planned cancer study to investigate the effects of a specific type or combination of treatments in a human population.

Colon: part of the large intestine that leads from the small intestine to the rectum.

Complementary Therapy: used to enhance or complement standard medical therapies. These include taking dietary supplements, megadose vitamins and herbal products, massage therapy, magnet therapy, spiritual healing and meditation. Those practices not generally recognized by the medical community as standard or conventional.

Cytology: study of cells under a microscope.

Detection: finding an abnormality in a person with or without symptoms.

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Glossary of Terms (continued)

Diagnosis: the process of identifying a disease by its characteristic signs, symptoms and lab findings.

Diarrhea: several loose watery stools.

Gastrointestinal (GI): having to do with the digestive tract, which includes the stomach and intestines.

Genes: contain information that is inherited from parent to child and from cell to cell.

Hormone: substances secreted by various organs that help to control growth, metabolism and reproduction. (Used as treatment following surgery for breast, ovarian or prostate cancer.)

Infusion: the process of dripping fluids into the vein through a plastic tube.

Injection: the use of a syringe to “push” fluids into the body; often called a “shot.”

Intramuscular (IM): into muscle; some anti-cancer drugs are given by IM injection.

Intravenous (IV): into a vein; anti-cancer drugs are often given by IV injection or infusion.

Lymphedema: swelling in the arms and legs as a result of lymph node removal or scarring after radiation therapy.

Lymph Gland (Lymph Node): these glands make lymph, a substance that filters impurities in the body.

Malignant: word used to describe cells that grow out of control; used to describe a tumor that is cancerous.

Metastasis: when cancer cells break away from their original site and spread to another area in the body.

MRI (Magnetic Resonance Imaging): a way to see the inside of the body with a special machine that uses magnets to produce images.

Oncologist: a doctor trained to treat patients with cancer.

Palpation: procedure using the hands to examine organs such as the breast or prostate. A palpable mass is one that can be felt.

PET (positron emission tomography) Scan: a computerized image of the metabolic activity of the body tissues used to find disease.

Platelet: a substance in the blood necessary for clotting. Platelet transfusions are given to prevent or control bleeding.

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Glossary of Terms (continued)

Prosthesis: an artificial replacement for a missing part of the body, such as a breast or limb.

Protocol: plan for an experimental procedure or treatment.

Radiation Therapy (Radiotherapy): cancer treatment using radiation (high energy x-rays) to kill cancer cells and stop them from growing.

Radioactive Implant: source of high dose radiation that is put into and around a cancer to kill the cells.

Red Blood Cells: cells that supply oxygen to tissues throughout the body.

Side Effects: symptoms resulting from a treatment or treatments.

Standard Treatment: a cancer treatment currently used and considered effective on the basis of past studies.

Stereotactic Radiosurgery (SRS): one treatment or multiple treatments delivering a precisely focused, high-dose x-ray beam.

Stomatitis: sore on the inside of the GI tract, for example, the mouth, stomach and/or intestines.

Total Body Irradiation (TBI): radiation treatment of the entire body that is used to kill cancer and bone marrow cells. TBI prepares the body for bone marrow transplant (BMT).

Tumor: an abnormal growth of cells or tissues; tumors may be benign (non-cancerous) or malignant (cancerous).

White Blood Cells: the blood cells responsible for fighting infection.

X-ray: radiant energy used to diagnose disease.

Miscellaneous

Use this section to record any additional information about your treatment.

Miscellaneous

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Miscellaneous

Miscellaneous
