A VNSNY SELF-CARE GUIDE
for the Management of Cancer

Visiting Nurse Service of New York
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Learning that you have cancer can be overwhelming and it is normal to experience a wide range of emotions. In addition to family and friends, VNSNY is here to help support you through your treatment.

**There are many things you can do to manage your illness and this guide will help you.**
What Is Cancer?

Cancer is the general name for a group of more than 100 diseases. It begins in the cells, which are the building blocks of tissues. The organs of the body are made up of tissues. Normally, cells grow, separate into tissues, then grow old and die.

However, cancer cells do not die, they continue to grow out-of-control and divide, causing masses or tumors that take over the place of the regular tissues. Cancer cells divide faster than normal cells and without purpose. Left untreated, cancers may lead to serious illness and even death.

How does cancer start?

Cancer starts when new cells grow where there is no need and/or old cells do not die but keep on growing. Sometimes family genetics cause the cancer to develop. Other times it is exposure to environmental toxins such as coal, tobacco use, or other toxic substances. Other reasons could be medications or living in polluted areas. Not all cell overgrowths are cancerous. When there is cell overgrowth without cancer in a tumor it is called a benign tumor. Benign tumors do not spread to other parts of the body. They are usually not life threatening, and can be removed and do not grow back. Cell growth that is cancerous is called malignant. Not all cancers are tumors. For instance, neither leukemia or lymphoma have tumors.

How does cancer spread?

Cancer cells often travel to other parts of the body where they begin to grow and form new tumors. This happens when the cancer cells get into the body’s bloodstream or lymph vessels. Over time, the tumors replace normal tissue. The process of cancer spreading is called metastasis.

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Talking to My Health Care Providers

Your relationship with your doctor is a key part of your care. Your doctor should be someone whom you feel comfortable with and someone who listens to your concerns and answers your questions. Your doctor can explain:

- Your diagnosis
- Your health condition
- Your treatment options
- Your progress throughout treatment

You will also have nurses with special training and skills who will be working with your doctor. These nurses are there to help you manage:

- Your medications
- Your treatment
- Side effects you may have

In many cases, the nurse can help to answer your questions. Nurses can connect you to the other members of your health care team to help you get the answers you need.

Like all good relationships, your relationship with your health care provider is a two-way street. It’s your job to:

- Ask questions
- Learn about your treatment
- Become an active member of your cancer care team
## Talking to Your Health Care Providers

Your goal is to become an expert on how the cancer affects you. This book will help you on your journey. The following are examples of questions you may want to ask:

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<th>What kind of cancer do I have?</th>
<th>What is the success rate of this treatment?</th>
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<td>Where is it?</td>
<td>What is the goal of treatment – to cure or to control symptoms?</td>
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<td>How big is it?</td>
<td>What are the possible risks or side effects of the treatment?</td>
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<td>What are my treatment choices?</td>
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<td>What are the pros and cons of the treatment you recommend?</td>
<td>How long will treatment last?</td>
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<th>How often will I need to come in for treatment or tests?</th>
<th>What kind of changes will I need to make in my work, family life, and leisure time?</th>
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## Talking to Your Health Care Providers

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<td>What are the chances that the cancer may come back (recur) with the treatment plans?</td>
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When you meet with your doctor make sure that all your concerns and questions, no matter how small, have been answered. This information will give you a full understanding of what you are dealing with and know what to expect from the treatment.

It will take more than one visit to discuss all of your concerns. New questions may come to mind. It might be hard to remember all that information. Some people find it helpful to take notes, and/or bring a list of questions. You can also bring a family member or friend, to write down the answers.

Remember that you have the right to get a second opinion about your diagnosis and treatment. Asking for a second opinion does not mean that you don’t like or trust your doctor. Doctors understand that you also want the best treatment and that you will look at all options in order to make the right decisions.
Staging of Cancer

After cancer is diagnosed it has to be staged to determine the best treatment. Staging tests will show the extent or how much the cancer has grown, and if it has spread to other parts of the body. Cancer can spread by getting into the blood stream, the lymphatic system and by invasion of local structures. Some of the tests used to stage cancer include:

CT scan

An X-ray machine connected to a computer is used to take pictures of the part of the body where the cancer is located and the nearby organs. If you have a brain tumor, a CT scan of the chest, abdomen and pelvis may be ordered to rule out other tumors. You will get an injection of a solution called “contrast material” which is used to give a better picture of the tumor. You may have to drink the solution if the cancer is in your abdomen (belly). The solution makes it easier to see any abnormal areas. The CT scan will tell your doctor the size of the tumor, how far it has spread and where it has spread.

PET scan

Your doctor uses a PET scan to see if the tumor has spread or to find where the cancer spread. You will be given an injection of a radioactive sugary solution. The machine will take pictures of how the body is using the sugar. Normal cells will be slower to use the sugar. Cancer cells will be brighter in the pictures because they work faster with the sugar.
Other tests may also be used such as a biopsy, which is taking a sample of the cells or tumor close to the cancer or in other organs to determine if it has spread.

Staging will be based on the size of the tumor, whether it has invaded a close body organ, and how much it has spread to other organs and the lymphatic system. Some cancers are not staged until a pathologist has looked at some tissue under a microscope.

**MRI**

MRI is a strong magnet linked to a computer; it is used mainly to take pictures of the spine and the brain to see if the cancer has spread there. You will be given a contrast material with this study to make the pictures of the cancer better. Advanced imaging may be ordered to help the doctors know more about the type of tumor you have and to help plan the surgery.

**Bone Scan**

A bone scan will show if the cancer has spread to the bones. A radioactive material is injected and a scanner is placed over the body to see where most of it collects as this will show the cancer location. This may not always be ordered, depending on the type of cancer you have.
Treatment decisions depend on types of cancer, stage of cancer, age, current health status and personal needs. Many different treatments are used. Common types of treatment include surgery, chemotherapy, radiation, immunotherapy, and biologic and hormonal therapies. Listed below is a basic explanation of these treatments. These treatments may be used alone or together.

1. Surgery

Surgery is one of the oldest forms of cancer treatment. It can be used for:

**Preventative:** Taking out tissue before it becomes cancerous, such as removing pre-cancerous polyps.

**Diagnostic:** Taking a piece of tissue and looking at the cells under a microscope also known as biopsy.

**Staging:** Looking inside the body to see how much cancer there is and where it has or will spread.

**Curative:** Taking out the cancer when it is only in one place.

**Restorative:** To improve the way a person looks after a major cancer surgery such as breast reconstruction after mastectomy.
2. Chemotherapy

Chemotherapy (chemo) uses strong drugs to treat cancer cells. Chemo has been used since the 1950’s. There are many types of chemotherapy used today. It can be given by injection or intravenous infusion into a vein or as pills. It may be given in a hospital, clinic or doctor’s office if it is done by injection or infusion. Oral medications may be prescribed for use at home as solo therapy, or be used with another medication either before or after an injection or infusion of that medication.

**Chemotherapy can be used to:**

- Keep the cancer from spreading
- Slow the growth of the cancer
- Kill cancer cells that have spread to other parts of the body
- Relieve symptoms such as pain caused by the cancer

Chemotherapy works best against rapidly dividing cells, such as cancer cells, but this is why you may experience certain side effects such as hair loss, nausea and vomiting, diarrhea, mouth sores and decreased blood counts, since these normal cells are also rapidly dividing.
How Is Cancer Treated?

3. Radiation

Radiation uses high-energy beams like X-rays to stop cancer cells from growing. Radiation beams are pointed at an exact spot on your body that your doctor has determined the cancer cells are located.

Radiation can be external (like getting an X-ray) or internal (radiation is implanted in the body) in or near the cancer location or systemic. Sometimes both external and internal radiation are used as treatment. Systemic radiation attaches radioactive substances to a drug that may be given orally or intravenously and travels throughout the body to kill cancer cells. Radiation does not hurt while you are getting it but later side effects may include pain, itching or redness at the area where it was given.

Why Radiation?

Radiation is used:

1. To treat the cancer, to stop it from growing, as a cure or to slow down the growth so that surgery or chemotherapy can be done.

2. To shrink the tumor to manage symptoms, such as pain, to relieve pressure, prevent loss of control of bowels or bladder if cancer tumor is growing in or close to those organs.

3. Your oncology team will discuss with you the amount of radiation to be used, the course of treatment, cost, diet, what to do before, during and after radiation therapy. Remember this is the time to ask as many questions as you need to make a decision. Keep a list and bring it with you to each appointment. No question is too simple and do not feel like you are a bother to the staff, they are there to assist you through this very stressful time.
4. Immunotherapy

Your immune system is your defense system against germs and disease. Immunotherapy — also known as biotherapy — uses parts of your own immune system to become better at finding and destroying cancer cells. It can also speed up repair of normal cells affected by other treatment. It is used to treat some blood cancers. However, the cancer may also invade the immune system and weaken it. Your oncology team will discuss with you if this is an option for you based on the type of cancer you have and how your body is responding to the cancer.

5. Targeted Therapies

Targeted therapies interfere with specific molecules that are known to cause cancer growth and spread. They work in different ways and new ones are being developed for various cancers. You may need special tests to see if your cancer will respond to a specific therapy.

6. New Cancer Treatment Therapies

New cancer treatments are being developed all the time. Many of them are targeted to specific types of cancer. Some of the most recent ones are:

**Transoral laser microsurgery (TLM)** is widely used for tumors of the throat and larynx (voice box).

**Cryoablation** is also known as cryotherapy or cryosurgery. A special probe is inserted into the tumor and then cooled to temperatures well below freezing. It causes the tumor to be frozen and destroyed, mainly used in cancers of the prostate, breast or kidney.

In addition to your medical team, an excellent source for more detailed information, is the National Cancer Institute Types of Treatment page (www.cancer.gov).
Cancer treatments can affect normal cells as well as cancer cells. Your cancer journey is a unique experience. While many of the side effects experienced are similar; each person’s response varies.

This self-care guide can help you cope with common problems occurring from your cancer or its treatment. Dealing with problems early can often prevent them from becoming more serious. The members of your health care team want you to tell them about any problem no matter how small. Tell them as soon as you know about the problem to prevent them from becoming more serious. Most times treatment such as chemotherapy and radiation affect rapidly dividing cells. Some healthy cells normally divide frequently so they are at risk of damage when the treatment destroys the cancer cells. Normal cells will recover from the effects of chemotherapy, but cancer cells cannot recover and will die. The temporary damage to normal cells is the cause of side effects when receiving chemotherapy. This self-care guide will help you to identify some of these side effects and learn ways to prevent them from getting worse. Some common side effects will be discussed with tips for when to call your healthcare team.
Know Your Labs

Low Blood Counts

Treatment can cause low counts of normal blood cells. These cells are needed to carry oxygen throughout your body, fight infection, and prevent bleeding.

Blood counts measure three parts of blood:

**Hemoglobin** is a molecule in red blood cells. Hemoglobin carries oxygen around to the rest of the body. A normal hemoglobin range is about 14.5 to 18 for men and 12 to 16 for women. A low hemoglobin level is called anemia. Your doctor may order a shot to help boost your red blood cells. If you become seriously anemic, you may need a blood transfusion.

**White blood cells** fight against infections. Chemotherapy and radiation can kill white blood cells and put you at risk for infection. A normal white blood cell count is about 5,000 to 10,000. You may be given a white blood cell booster shot if your counts are too low.

**Platelet counts**: Platelets are the part of the blood that helps it to form clots. Too little and you can bleed too much. Too much and your blood can be too thick. A normal platelet count is about 150,000 to 450,000. If your platelets drop very low, your doctor may order a platelet transfusion.
If you are experiencing:

- New or worsening tiredness that make it harder to do the things you normally do
- Pale skin nail beds or gums
- Weakness or dizziness
- Chest pain or shortness of breath

What you can do:

- Alternate activity with frequent rest periods
- Plan your important activities when you have the most energy
- Eat a balanced diet that includes protein (meat, eggs, cheese, and legumes such as peas and beans), and drink 8-10 glasses of water a day, unless your care team gives you other instructions

How your caregiver can help:

- Help schedule friends and family members to prepare meals, clean house, do yard work and run errands
- Watch for confusion, faintness, or dizziness

When to call your doctor:

- Tell the doctor if you’re not able to get around as well as usual
- You have chest pains
- You have shortness of breath when resting
- You feel dizzy or faint
- You become confused or cannot concentrate
- You have not been able to get out of bed for more than 24 hours
You will not feel that your white blood count is low. Usually your doctor finds out when the blood results are read. If you suddenly feel different or feel cold or have shaking chills, use a thermometer to take your oral temperature and let the doctor know if your temperature is more than 100.5

You can prevent infection by:

- Washing your hands with soap and water frequently. Always before and after using the bathroom and before meals.
- Avoid anything that can cause cuts in the skin
- Avoid crowds and anyone with a possible infection
- Keep your mouth very clean, brush at least twice a day using a soft toothbrush and rinse with a salt or bicarbonate of soda solution before and after meals
- Wash uncooked fruits or vegetables well or peel
- Do not clean up after pets — ask your caregiver to do this
- Pay attention to any burning or pain when urinating
- Talk to your doctor about flu and pneumonia vaccinations

How your caregiver can help:

Be on the look-out for signs of infections such as:

- Temperature of more than 100.5
- Any new area of redness or swelling
- Pus or yellowish discharge from an injury or other location
- New cough or shortness of breath
When to call the doctor:

Call your doctor if you experience any of the following:

- Temperature of more than 100.5° F when taken by mouth
- Burning when you urinate
- Chills
- Dizziness
- Sore throat
- Confusion
- Cough
- Redness or swelling
- Difficulty breathing
- New abdominal pain
- Shaking chills that may be followed by sweating
- Headache or bad sinus pain
- Stiff neck when bending your neck forward
- Sores or white patches in the mouth

Know Your Labs
Low White Blood Count

If you experience:

- Bleeding from any where (such as mouth, nose, or rectum)
- New bruises on the skin
- Red rash that looks like pinpoint dots, usually starting on feet and legs
- Bad headaches, dizziness, or blurred vision
- Weakness that gets worse
- Pain in joints or muscles
- Vomiting blood or dark material that looks like coffee grounds
- Blood in stool (bright red, dark red, or black stools)
- More than the usual amount of vaginal bleeding during monthly periods

Know Your Labs
Low Platelet Counts
Know Your Labs

Low Platelet Counts

What you can do:

- Avoid constipation and straining on the toilet
- Do not put anything in the rectum such as suppositories, enemas or rectal thermometer
- Clean mouth gently with a soft toothbrush. Avoid floss or toothpicks.
- Avoid commercial mouthwash, which can be drying — there are products like Biotene that are for cancer patients
- Protect skin from cuts and scrapes; wear slippers or shoes
- Prevent skin dryness by using lotion
- Shave only with an electric shaver
- Avoid rough sports
- Don't use tampons, use sanitary pads. Avoid douching.

How your caregiver can help:

- If a nose bleed should occur, have the patient sit up with his or her head tilted forward (to prevent blood from dripping in the back of the throat). Pinch nostrils and place ice on the nose and on the back of the neck.
- For bleeding in other areas, apply pressure with a clean dry cloth until bleeding stops

When to call the doctor:

Call your doctor if you experience any of the following:

- Any blood in your urine, bowel movement or vomit
- Unusual vaginal bleeding (not regular mensus)
- Bleeding gums
- Bloody sputum
- Bruising
- A pinpoint rash
- Dizziness
- Confusion
- Bad headaches
- Visual changes
Pain:

Pain can be caused by the cancer or the treatment and it might be the symptom you feel the most. Pain is not a normal part of having cancer. **You have a right to be treated for your pain.** Pain can be controlled or relieved. When pain is controlled, you will be able to sleep, eat better, enjoy being with family and friends, and continue with work and hobbies.

Tell your health care team about your pain. Only you know how much pain you are in. Pain is easier to treat when it first starts. It can also be an early warning sign of the side effects of cancer treatment, growth or spread of the cancer or some other problem. Tell your health care team about any pain medicines you have taken in the past whether prescribed or over the counter and what reactions you had. When taken as directed, pain medication does not cause addiction. Together, you and your health care team can talk about what will work best, how to treat your pain and how the treatment is working.

Pain medication may cause side effects such as constipation or drowsiness. However, most side effects go away after a short time, but not constipation. Constipation is a very common side effect of most pain medicines. A bowel regimen should be discussed with your doctor and/or nurse prior to use of narcotics. Your doctor or nurse will tell you what to take for constipation.
How Cancer and Cancer Treatments May Affect You

**Pain**

**Be on the look out for:**

- Pain that doesn’t seem to go away or that seems to go away, then comes back before your next dose of medicine is due. (This may indicate that your medicine plan needs to be changed.)
- Trouble sleeping
- Not wanting to do things that you used to enjoy
- Worry about things that were not a concern before
- New areas of pain or a change in your pain
- Reduced ability to move around or less physical activity

**What you can do for yourself:**

- Work with your health care team to find the best ways to control your pain
- There are other ways to help pain. Try relaxation, massage, heat, cold packs, acupuncture or any activity that takes your mind off your pain. This includes movies, TV, music, humor, and keeping in touch with family and friends. There are relaxation techniques in this self-care guide.
Find out about:
- Different types of pain and how each type is treated
- Different types of pain medicines
- Other ways to help manage pain

Take medicines as prescribed.

Avoid crushing or breaking pain pills unless discussed with health care provider.

Keep a diary of pain. Write down how bad it is, what makes it worse, what makes it better and how often you take your medicine. Rate pain using a pain rating scale, such as 0 = no pain to 10 = the worst pain you can imagine. You can use this scale to explain your pain to others.

Keep at least a one-week supply of pain medicines on hand. Most pain medicines cannot be refilled by telephone, so you will need a written prescription. Call before you run out. Some pharmacies don’t keep certain pain medications in stock. Call first to check if they have your prescribed medicine.

What your caregiver can help you with:

Your caregiver should:

- Watch for signs of unrelieved pain such as grimacing, moaning, tension, loss of appetite, anger, crying or reluctance to move around in bed.
- Try giving the individual warm baths or warm washcloths on painful areas. (Avoid areas where radiation was given.) If this doesn’t help, try ice or cool packs.
- Watch for confusion and dizziness, especially after new medicines are started or when doses are changed. Help the patient with walking until he or she can do it safely.
- Encourage pleasant distractions that the individual enjoys.
- Plan activities for when the patient is most comfortable and awake.
How Cancer and Cancer Treatments May Affect You

Pain

What your caregiver can do:

- Offer plenty of fluids and food with fiber
- If the patient seems forgetful, help the person keep track when pain medicines are due to avoid over- or under-dosing
- Help the patient remember to take stool softeners and laxatives that the doctor suggests to prevent constipation. If the individual is having frequent, severe pain, talk with the doctor about medicine that he or she can take around the clock. If the individual’s pain "breaks through," find out if there is another medicine to use between doses of the main pain medicine.
- If the patient is having trouble taking pills, talk with the doctor about medicines that come in liquids, suppositories, skin patches, or other forms.
- Check with the doctor, nurse, or pharmacist before crushing or dissolving pain pills to make them easier to swallow. Some pills can cause a dangerous overdose if broken.

When to call your doctor:

- If you have any new or more severe pain
- You cannot take anything by mouth, including the pain medicine
- You do not get pain relief, or if the relief doesn’t last long enough with the medicines that have been prescribed
- You have trouble waking up, or if you have trouble staying awake
- You become constipated, nauseated, or confused
- You have any questions about how to take the medicines
- You develop a new symptom (for instance, you can’t walk, eat, or urinate)
How Cancer and Cancer Treatments May Affect You

Nausea and Vomiting

Nausea and/or vomiting can be caused by cancer or its treatment. Nausea is having a sick or queasy feeling in the stomach, and vomiting is bringing up food or liquids from the stomach through the mouth. It can be caused by food that you ate, medications, cancer treatments or the cancer itself.

Be on the look out for:

- Changes in eating habits
- Bad smell coming from the mouth
- Yellow or green foul-smelling fluids on bedclothes
- Feeling queasy or having an upset stomach
- Increased saliva, clamminess, and sweating that may come before vomiting
- Unable to hold food in your stomach after eating.

Tell your doctor about the nausea because there are medicines that can help you. Take medicine ordered for nausea as your doctor prescribes it. It is better to prevent nausea than treat it after it starts.

What you can do for yourself:

- Take anti-nausea medicine at the first signs of nausea to help prevent vomiting
- Eat bland foods, such as dry toast and crackers
- Eat frequent, small meals and have a snack at bedtime
- Drink clear liquids served cold and sipped slowly. (Clear liquids are those that you can see through, such as ginger ale, apple juice, broth, tea, etc.) Also try Popsicles or gelatin. Gatorade and Pedialyte can help replace salt and other minerals lost in vomiting.
- Suck on hard candy with pleasant smells, such as lemon drops or mints, to help get rid of bad tastes
- Eat food cold or at room temperature to decrease its smell and taste. Avoid fatty, fried, spicy, acidic or very sweet foods.
- Experiment to find foods that will work for you and when is the best time to eat them
- Try to rest quietly while sitting upright for at least an hour after each meal
- Distract yourself with soft music, a favorite television program, or the company of others
- If you are experiencing nausea, relax and take slow, deep breaths
- Accupuncture helps some patients, but may not be covered by insurance
How Cancer and Cancer Treatments May Affect You

Nausea and Vomiting

For vomiting:

- If you are in bed, lie on your side so that you will not inhale the vomit.
- Request that medicines be prescribed in suppository or dissolvable form, if possible. Take medicine at the first hint of nausea to prevent vomiting.
- Try liquids in the form of ice chips or frozen juice chips, which can be taken slowly.
- Rinse mouth after vomiting.

Keep a record of how much you have vomited and how much urine you have passed.

What your caregiver can do:

- Offer to make meals or ask others to make meals to reduce food odors. Use kitchen vent fans to reduce smells.
- Have patient avoid the kitchen.
- Cover or remove foods with strong or unpleasant smells.
- Try plastic forks and spoons rather than metal ones, which may cause a bitter taste.
- Weigh the patient at the same time each day to help decide whether dehydration is getting severe.
- Talk to the doctor about medicines to help prevent vomiting.
- Watch the patient for dizziness, weakness, or confusion.
- Try to help the patient avoid constipation and dehydration. Either of these can make nausea worse.
- Try small amounts of foods high in calories that are easy to eat (such as pudding, ice cream, sherbets, yogurt, and milkshakes) several times a day. Use butter, oils, syrups, sauces, and milk in foods to raise calories. Avoid low-fat foods unless fats cause upset stomach or other problems.

When to call the doctor:

- The patient has inhaled some of the vomited material.
- The patient vomits more than three times an hour for three or more hours.
- Vomits contain blood or material that looks like coffee grounds.
- The patient cannot take in more than four cups of liquid or ice chips in a day or cannot eat substantial foods for more than two days.
- The patient cannot take his or her medicines.
- The patient becomes weak, dizzy, or confused.
- The patient loses two or more pounds in one to two days (may be dehydrated).
- The patient develops dark yellow urine and doesn’t have to urinate as often as usual.
Fatigue happens when a person gets tired easily and has less energy to do the things they normally do or want to do. It is the most common side effect of cancer treatment. It can be caused by the cancer or the treatment. **Cancer fatigue is real and should not be ignored.**

**Be on the look out for:**

- Sleeping more than normal
- You don’t want to do normal activities or you’re not able to do normal activities
- You’re paying less attention to how you look and feel
- You feel tired even after sleeping
- You have trouble thinking or concentrating
- You have trouble finding words and speaking
How Cancer and Cancer Treatments May Affect You

Fatigue (Tiredness)

What you can do for yourself:

• Get plenty of rest between activities
• Tell the healthcare team about the fatigue
• Plan important activities for when you have the most energy
• Schedule important activities throughout the day rather than all at once
• Get enough rest and sleep. Take short naps and rest breaks when needed and try to get 8 hours sleep every night.
• Good pain control will help your sleep
• Remember that fatigue caused by treatment is short term and that your energy will slowly get better after treatment has ended
• Ask for help. You cannot do all that you did before you became ill. Family and friends like to help. Don’t do everything. Choose activities you enjoy. These can include laughter, television, art, music or short non-tiring visits with friends and family.
• Exercise regularly to help keep your energy level high
• Exercise can be as simple as walking around your room. Try to increase the amount you do each day. For example, walk six minutes tomorrow if you can walk five minutes without trouble today.
• Try to have a positive attitude that will help you to accept the changes in your activity level
• Eat a balanced diet that includes protein (meat, eggs, cheese, and legumes such as peas and beans), and drink about 8 to 10 glasses of water a day, unless the health care team gives other instructions

What your caregiver can do:

• Assist the patient with household tasks, shopping, food preparation, transportation, babysitting, etc.
How Cancer and Cancer Treatments May Affect You
*Mouth and Throat Problems*

Cancer treatment may make your mouth or throat sore or dry. You may also have trouble swallowing. You can help yourself by following these tips.

**What you can do for yourself:**

- Look at your mouth for sores at least once a day
- See the dentist for a complete oral health exam at least two weeks before cancer treatment, if possible
- Review dental hygiene with dentist; ask about the best techniques for brushing and flossing. Use a soft toothbrush. Rinse the tooth brush in hot water to further soften it. Go easy on the gums, floss gently once a day. Do not start flossing if you never flossed. Rinse mouth with a solution of 1 teaspoon of baking soda and ½ teaspoon of salt in 1 quart of warm water (make this fresh everyday). If this solution is too salty, leave out the salt and just use the baking soda. Rinse before and after meals and before bedtime. Rinse every 1-2 hours if mouth is sore or tingling, then rinse with plain water.
- Avoid commercial mouthwash as it is drying
- Wear dentures only when eating
- Stop or limit smoking
- Avoid alcohol and acidic drinks like orange, grapefruit and tomato juices
- Avoid spices or spicy foods
- Use bland, soft or cool foods such as custards, jello puddings, yogurt, soups and eggs
- Chew sugar-free gum or have hard candies or nuts to increase saliva
- Serve foods with sauces or gravy
- Avoid hard foods such as toast, crackers, popcorn or pretzels
- Keep lips moist with lip balm or a petroleum jelly
- Talk to a nutritionist or a dietitian about eating a well-balanced diet. Good nutrition can help to deal with the stress of cancer treatments, maintain energy, fight infection and rebuild tissue. You may benefit from supplemental nutrition drinks such as Ensure until your mouth heals.
- Sucking on ice chips while getting chemotherapy may help prevent mouthsores. Ask your doctor if this is something you can do.
- Low level laser therapy, if available, and palifermin have also been shown to help. Ask your doctor.
- If you experience hiccups, breathe slowly and deeply into a paperbag for 10 breaths at a time, drink water slowly.
How Cancer and Cancer Treatments May Affect You
*Mouth and Throat Problems*

**What your caregiver can do:**

- Use a flashlight to check the patient’s mouth for red areas or white patches, which often become sores.  
  If the patient wears dentures, remove them before looking
- Offer liquids with a straw, which may help bypass the sore area in the mouth
- Mash or puree hard foods in a blender to make them easier to eat
- Try coating mouth sores with Anbesol® before meals to numb the sores during eating
- Offer pain medicines a half hour before mealtime
- If the patient has hiccups, watch the patient to be sure he or she is able to drink enough liquids.  
  If medicine is given for hiccups, watch for dizziness. The patient may need help getting up or walking.

**When to call the doctor:**

- Sore, white patches or reddened areas in the mouth
- Not able to swallow
- Feel pain in your mouth
- Sore throat
- Temperature above 100.5

There are medicines to make you feel better. If your mouth feels painful, ask your doctor to order something for relief. Sometimes liquid pain medicine helps more. Take it as directed and be sure to take it before you eat.
How Cancer and Cancer Treatments May Affect You

*Decreased appetite or taste changes*

Desire for food may decrease. Food may taste or smell differently. A poor appetite can be caused by many things, such as trouble swallowing, depression, pain, nausea, or vomiting or change in smell. Good eating helps your body heal, fight infections, and saves energy.

Treatments may cause:

- Lack of interest in food
- Refusal to eat favorite food
- Weight loss
- Complaints of foods not smelling good or having any taste or flavor. A common complaint is a metallic taste to foods

What you can do for yourself:

- Eat in pleasant surroundings
- Eat small, frequent meals (5-6 times a day)
  - Drink 30 minutes before the meal instead of with the meal
- Avoid high fat food. Eat high protein, and high carbohydrate foods such as cheese, milk, eggs, yogurt, beans or meats, puddings
- Try strong flavorings
- Eat with people you like
- Don’t force yourself to eat; eat what you can, when you can.
- Discuss any change in your eating with your doctor. There may be medicines to improve your appetite.
How Cancer and Cancer Treatments May Affect You

Decreased appetite or taste changes

What your caregiver can do:

• Add powdered milk and/or ice cream to instant breakfast for a high protein meal or snack.
• Use different seasonings and spices unless the patient has mouth sores.
• Use gravies or sauces. These help with swallowing.
• Marinate meat
• Offer starchy foods (such as bread, pasta, or potatoes) with high-protein foods, such as fish, chicken, meats, turkey, eggs, cheeses, milk, tofu, nuts, peanut butter, yogurt, peas, and beans
• Keep cool drinks and juices within the patient’s reach
• If the smell of food bothers the patient, offer bland foods served cold or at room temperature — it may be helpful for your loved one to avoid the kitchen if odors are troublesome
• Offer fruit smoothies, milkshakes, or liquid meals when the patient doesn’t want to eat
• Try plastic forks and knives instead of metal if the patient is bothered by bitter or metallic tastes
• Don’t blame yourself when the patient refuses food or can’t eat

When to call the doctor:

• You feel nauseated and you’ve been unable to eat for a day or more
• You’ve lost 5 pounds or more
• You feel pain when eating
• You haven’t urinated for an entire day or you haven’t moved your bowels for 2 days or more
• You are not urinating often, and when you do, the urine comes out in small amounts, smells strong, or is dark colored
• You vomit for more than 24 hours
• You are unable to drink or keep down liquids
• You have pain that is not controlled
How Cancer and Cancer Treatments May Affect You

Lymphedema (Fluid in Your Arm)

Your arm may fill with fluid if lymph nodes were removed during your surgery. The following tips help prevent swelling, and protect your arm from an infection or injury. Contact your doctor immediately if your arm becomes red, warm or swollen.

Protect your arm from cuts or scratches:

- Use rubber gloves to do dishes
- Use long oven mitts to reach into the oven
- Use a thimble when sewing
- Use gloves when gardening
- Use insect repellent to avoid bites or stings
- Use sunscreen and avoid sunburn
- Use moisturizing lotion without fragrance several times a day
- Remind health care workers not to take blood pressure, draw blood or give injections of any kind on the arm where lymph nodes were removed
- Wear a medic alert tag stating “lymphedema potential — no injections or blood pressure measurements on arm”
- Use only an electric razor to shave under the affected arm
- Protect your arm from any injury
- Avoid exposure to very hot (sauna, hot tub) or very cold temperatures
- Consider a compression garment during strenuous activity

Do not:

- Pick or cut your cuticles or hang nails on this arm
- Carry anything heavy with this arm
- Wear clothing with elastic or tight fitting jewelry on this arm
How Cancer and Cancer Treatments May Affect You

**Constipation**

**Constipation** may occur from inactivity, decreased food and fluid, disease, chemotherapy or narcotics. Treatment depends on the cause.

**What you can do for yourself:**

- Talk to your doctor about how often you go to the bathroom, what the bowel movement looks like
- Drink at least 8 glasses a day unless told otherwise by health care team
- Eat a diet that includes fruits, vegetables and grains such as whole wheat bread or whole grain cereals such as oatmeal
- Exercise daily even if you only pull in and push out your stomach muscles and/or move your arms and legs while in bed or a chair
- Try to go to the toilet to move your bowels at the same time each day
- Take medicine for constipation as directed
- Write down when you go to the bathroom

**What your caregiver can do:**

- Offer prune juice, hot lemon water, coffee, or tea to help stimulate bowel movements
- Encourage the patient to drink extra fluids
- Help keep a record of bowel movements
- Offer high-fiber foods, such as whole grains, dried fruits, and bran
- Talk with the doctor before using laxatives
- Write down when the patient goes to the bathroom and how the stool looks

**When to call the doctor:**

- No bowel movement in three days
- You have blood in or around the anal area or in the stool
- You experience leakage of soft, liquid stool that looks like diarrhea
- You cannot move bowels within one or two days after taking laxative
- You have cramps or you have vomiting that doesn't stop
- Stomach is getting bigger and you are passing a lot of gas
How Cancer and Cancer Treatments May Affect You

Shortness of breath

If you are having trouble breathing, your body might not be getting enough oxygen. Either your lungs can’t take in enough air, or the body can’t get enough oxygen through the bloodstream. A number of different problems can cause this, including chronic lung disorders, blocked airways, pneumonia, weak breathing muscles, or obesity. It can also be caused by pain, immobility, poor nutrition, stress or anxiety, allergic reactions, surgery, anemia, the side effects of chemo or radiation treatment, a tumor, fluid in or around the lungs, heart failure, and other problems.

What to look for:

- Shortness of breath or trouble breathing when resting, eating, or talking, or with exercise
- Chest pain
- Faster breathing
- Faster heartbeat
- Pale or bluish-looking skin, fingernail beds, and mouth
- Cold and clammy feeling skin
- Nostrils flaring when inhaling
- Wheezing

What you can do for yourself:

- Stay calm
- Sit up or raise the upper body to a 45º angle by raising the bed or using pillows
- Take medicine or treatments prescribe for breathing (for example, oxygen, medicine for relief of wheezing, inhalers, or nebulizers)
- If you are not in a lot of distress, check your temperature and pulse
- Inhale deeply through your nose and exhale through pursed lips for twice as long as it took to inhale. (This is called pursed-lip breathing.)
- If you are still not breathing easier after 5 minutes, sit up on the side of the bed with your feet resting on a stool. Have your arms rest on an overbed table or side table with pillows on it, and tilt your head slightly forward.
- If you’re coughing and spitting, note the amount of sputum and what it looks and smells like
- Talk with your doctor about how your breathing problem affects you, especially if you avoid some of your usual activities to keep from getting out of breath
- Try muscle relaxation to reduce anxiety. Anxiety makes breathing problems worse.
- If you keep having trouble breathing, ask your doctor about medicines you can use to help
• **Call 911** if new shortness of breath starts suddenly and does not get better; your skin looks pale or blue; or if you have chest discomfort, trouble speaking, dizziness, or weakness.

**What your caregiver can do:**

- Using a watch with a second hand to check the patient’s pulse, count the number of beats per minute. (If you also count the number of breaths per minute, do it without telling the patient. If the patient knows when you are counting, he or she may slow down or speed up breathing without realizing it.)
- Check the patient’s temperature to see if he or she has a fever
- If the patient is short of breath, remove or loosen tight clothing
- Have the patient sit up in a resting position that feels comfortable to him or her
- Remind the patient to breathe in slowly and deeply, then exhale slowly
- Keep the patient away from extreme temperatures, especially heat, which can make it harder to breathe
- Note when the patient becomes out of breath (for instance, during strenuous activity, normal activity, or when he or she is at rest). Also, note if it happens when the patient is standing, sitting, or lying down.
- Putting the patient in front of an open window or placing a fan that blows gently on the face may help some people
- Offer medicines or inhalers prescribed for shortness of breath
- If home oxygen is prescribed, be sure that you know how to set it up and what flow rate to use. (Do not change the flow rate without first talking to the doctor.) Don’t allow smoking or fire when oxygen is in use.

**When to call the doctor:**

- You have trouble breathing or chest pain
- You have thick, yellow, green, and/or bloody sputum
- You develop pale or bluish skin, nail beds, or mouth; or if your skin feels cold and clammy
- You have a fever of 100.5°F or higher
- You have flared nostrils during breathing
- You become confused or restless
- You have trouble speaking
- You experience dizziness or weakness
- You have swelling of the face, neck, or arms
- You develop wheezing
How Cancer and Cancer Treatments May Affect You

Diarrhea

Diarrhea occurs from cancer or its treatment. Infection, medicines, diet changes or untreated constipation can also cause diarrhea. Diarrhea can lead to loss of water in your body and skin irritation.

What you can do for yourself:

- Avoid whole grain bread, nuts, bran or high fiber cereals, fresh fruit and vegetables, high fat products and fried foods
- Eat smaller, more frequent meals
- Eat food such as bananas, applesauce, boiled white rice, cream of rice cereal and or tapioca
- Drink at least 6-8 glasses of fluid a day. Include water, broth, sports drinks, ginger ale and clear juices. If diarrhea is worse after milk or milk products, avoid them.
- Take medicine as ordered
- Avoid caffeine
- Monitor the amount and frequency of bowel movements
- Clean anal area with a mild soap after each bowel movement, rinse well with warm water, and pat dry.
  Or use unscented (without perfumes) baby wipes to clean after each bowel movement.
- Apply a water-repellent ointment, such as A&D Ointment® or petroleum jelly, to the anal area. Radiacare is an effective skin product if your diarrhea is related to radiation treatments.
- Sitting in a tub of warm water or put water in a pan on a chair and sit in it called a sitz bath which may help reduce discomfort

What your caregiver can do:

- See that the patient drinks about 3 quarts of fluids each day. Have the patient drink several ounces at a time
- Keep a record of bowel movements to help decide when the doctor should be called
- Check with the doctor before using any over-the-counter diarrhea medicine. Many of these contain aspirin, which can worsen bleeding problems. Talk to the doctor about using a prescription medicine.
- Check the anal area for red, scaly, broken skin
- Protect the bed and chairs from being soiled by putting pads with plastic backing under the buttocks where the patient will lie down or sit
- Help the patient change his or her undergarments as soon as they are soiled
When to call the doctor:

- You have 3 or more loose bowel movements in a day
- You see blood in or around anal area or in stool
- You lose 5 pounds or more after the diarrhea starts
- You have new abdominal pain or cramps for 2 days or more
- You haven’t urinated for 12 hours or more
- You haven’t drunk any liquids for 24 hours or more, feel dehydrated, dizzy or confused
- You have a fever of 100.5° F or higher
- You get a puffy or swollen belly
- You have been constipated for several days and then you begin to have small amounts of diarrhea or oozing of liquid stool, which could suggest an impaction

Diarrhea may occur with some cancer treatments. Your doctor or nurse can tell you what to do or take if you get diarrhea. Make sure you know what to expect and what to do. You may have to take more medicine than usual to stop it. Follow your doctor’s instructions carefully.
How Cancer and Cancer Treatments May Affect You

Skin Care

You may have skin problems. Some drugs darken your skin. Your skin may be sensitive to sunlight. Some may cause the palms and fingers of your hands and the soles of your feet to become red, scaly and peel (called hand-foot syndrome) or cause itchiness. Radiation can cause a skin reaction in the area being treated.

If you have red, scaly skin, always protect it. Apply fragrance free moisturizer to your skin frequently.

What you can do for yourself:

- Protect skin when doing activities such as cooking or gardening. Apply fragrance free moisturizer to skin frequently.
- Use mild soap
- Avoid tight fitted clothing
- Use sunscreen with a number 15 or higher (SPF). Put it on 15-30 minutes before going out in the sun. Repeat with excessive sweating and/or after water activities.
- Wear sunglasses to protect eyes
- Wear sunglasses and protective clothing even on cloudy days
- Avoid the sun between 10am and 3pm
- Avoid tanning booth

- Sun protection should continue throughout treatment and for at least several months after therapy. Ask your doctor how long to stay out of the sun. Protect yourself from the sun no matter what your skin color.
- If you experience itchy skin, ask your doctor about antihistamines, if itching keeps you awake or if you scratch during your sleep, wear cotton gloves which may help reduce the itchiness
For skin reaction due to radiation:

- Do not use heat lamps, hot water bottles or ice packs on the radiated area
- If your doctor put marks on your skin, do not wash off any skin marks. If the marks come off, do not try to redraw them. Tell your health care provider at your next visit.
- Use warm water and cream-based soap to wash
- Pat – don’t rub – dry
- Use only lotions or creams approved by radiation team
- Wear soft, loose, cotton clothing over the treatment skin
- Do not scratch the area being treated. Dust cornstarch lightly over any itchy area. Do not use cornstarch if the treated area is wet and draining
- Ask your doctor if a product like Radiacare will help you

What your caregiver can do:

You should look for:

- Any open areas
- Red, scaly areas
- Dry areas
- Apply lotions or oils on hard-to-reach places
- Offer extra fluids to the patient

When to call the doctor:

Call your doctor if you:

- Have any sores or blisters
- Develop very rough, red, or painful skin
- Have signs of infection, such as pus or tenderness near broken skin
Hair loss is a temporary side effect of some chemotherapy. Not everyone loses their hair. Ask your doctor or nurse whether you should expect hair loss. Radiation to the head causes hair loss. Sometimes your eyebrows and eyelashes may fall out. You could even lose your pubic (groin) or underarm hair.

As your hair grows back, it may feel different and even be a different color for a short time. Treat your head and scalp gently during this time. New hair is very fragile.

What you can do for yourself:

- Obtain a wig before you lose your hair. This is frequently covered by insurance.
- Call the American Cancer Society for help
- More information on websites is available in the Resources section of this guide
- Use a mild shampoo
- Pat hair to dry it, don’t rub
- If receiving radiation to the head, ask healthcare team what shampoo to use
- Use a wide tooth comb
- Do not use electric curlers or rollers
- When using an electric hair dryer, use the lowest setting and hold it 4 inches from head
- Do not use dyes or permanent waves
- Avoid rubber bands, braids or ponytails
- Protect scalp from hot and cold. Wear a hat to hold in body heat during the cold weather. Do this even when you sleep. Wear a hat when outdoors to protect newly exposed skin from the sun. If you don’t wear a hat, use sun block number 15 or higher.

Remember most hair loss is temporary.

What your caregiver can do:

- Apply sunblock
- Go wig shopping for the patient
- Do not use electric curlers or rollers on the patient
How Cancer and Cancer Treatments May Affect You

Anxiety “Nervous or Jumpy Feeling”

At any time from when the doctor tells you that you have cancer to getting treatment, you may experience some anxiety. It is normal to feel this way. Fear of what will happen to you may cause you to have panic attacks, anxiety or depression. You may get any or all of these feelings during the course of the treatment. People with cancer often feel anxious or depressed. The stress of dealing with an illness like cancer can cause many uncomfortable feelings.

Anxiety can be described as:

- Nervousness
- Fear
- Tension
- Feeling something terrible is going to happen
- Panicky feelings
- Feeling like you’re losing control

When anxious, you may also have sweaty palms, chest pain, upset stomach, and tight feelings in your stomach, shaking or tremors, difficulty breathing, your heart beating very fast, headache, weakness in your body, or a hot, flushed face. These may come and go or last for awhile. Pay attention to how you feel so you can discuss with your health care team and your family.

What you can do for yourself:

- Talk to others who have been through something similar
- Ask your nurse about a support group. Places to call about support groups are listed in the back of this book.
- Find someone who has gone through what you are going through – like a buddy.
  ‘Reach to Recovery’ is an example of a program to help breast cancer patients. It is an American Cancer Society program.
- Try relaxation techniques. There are also relaxation audiocassette tapes, podcasts, and DVDs available.
  You may find them in a local bookstore or library or on the internet. Relaxation can be learned but it requires practice. As you practice you will find yourself relaxing more and more.
How Cancer and Cancer Treatments May Affect You

Anxiety “Nervous or Jumpy Feeling”

Many conditions are caused or made worse by anxiety.

What your caregiver can do:

- Go with the patient to support group meetings, or drive the patient to a support group
- Help the patient with relaxation techniques

When to call the Doctor:

- You are feeling terrified or overpowered
- Your anxiety lasts a long time
- Your anxiety starts to interfere with your life
- Your doctor can treat your anxiety. There are medicines that lessen anxiety, or you might find counseling helpful.
How Cancer and Cancer Treatments May Affect You

Depression

Depression is common in patients who have cancer. When faced with a diagnosis of cancer, you may feel extreme stress, anger, sadness, or a number of other strong emotions. While these feelings usually lessen over time, they can develop into depression. Based on how you describe your feelings your doctor may diagnose depression and it will be treated by a health care provider. Treating depression can help you manage your cancer treatment and improve your overall health. Recovery from depression takes time but treatments are effective.

Some of the feelings you experience include:

- Blue
- Irritable
- Low
- Withdrawn
- Sad
- Tearful
- Discouraged
- Unable to concentrate
- Hopeless
- Angry

You may notice poor appetite, have trouble sleeping or have very little energy. It is sometimes hard to know if this comes from feeling down or your cancer treatment. Some cancer medicine causes depression.

What you can do for yourself:

- Talk about your feelings with your family and friends or others who have cancer. A support group may help. Some support groups meet on the phone, internet or radio, so you don’t have to travel.
- Listen to your family and friends – they may notice a change in your mood or behavior before you do.
- Try to stop negative thoughts. Feeling bad does not mean you are bad. If you can’t stop the negative thought immediately, let one minute go by. Try to think about something you enjoy or the positive side of the thought. This takes practice but it can be learned.
- Think about a special time when you were very happy, if you have photos you can look at them to help your memory be clearer. Picture in your mind those happy times and talk to your friends or family about your special memory.
- Take an imaginary trip to a favorite vacation spot or any place you have wanted to go. Listen to music. If you try to fill your mind full of good thought there is less room for the bad thoughts. Try relaxation techniques.
How Cancer and Cancer Treatments May Affect You

Depression

What your caregiver can do:

- Help patient to look at pictures
- Listen to the patient when he or she talks about the happy times in the past
- Help the patient with relaxation activity so that the anxiety can go away
- Remind and help the patient with taking my medications for depression

When to call the doctor:

- Call your doctor if your depression lasts longer than two weeks or is becoming worse. If you were depressed before your cancer, you may be more likely to become seriously depressed.
- If you feel depressed most of the time, have no interest in life or people, or cannot concentrate, see your doctor as soon as possible. There are medicines to help you feel better and/or you may find counseling helpful.
- Remember it may take several weeks for your medicine to work fully or several sessions with a counselor before you see results
- Emotional illness needs treatment just as much as any physical illness does. If you get help early, you will feel and cope better.
Cancer may cause changes in your sexual life with your partner. Some treatments may cause infertility, early menopause, impotence or painful intercourse. Sexual desire can be lessened by side effects of treatment or cancer. You can talk about these problems with your doctor or nurse and your partner. You may find it difficult to talk about sexual matters, but it is important to your overall health. Once you break the ice, you may find it gets easier.
How Cancer and Cancer Treatments May Affect You

Sexuality

The following tips may help you:

1. Talk to your partner about the sexual changes. If you cannot do this, talk to a close friend, your doctor or nurse, or in a support group. They will be able to guide you with what to say when you talk to your partner.

2. Plan private time for you and your partner.

3. Touching and holding are a satisfying part of sexual intimacy and become even more important when intercourse is difficult.

4. Use sexual positions that take less energy such as side lying.

5. Use water-based lubricants for vaginal dryness. Do not use petroleum jelly.

6. Men may need medicines or devices to have an erection.

7. Use condoms for safer sex at all times, but especially if either partner is receiving chemotherapy. Condoms should be used for 72 hours after chemotherapy.

8. Get rest before engaging in sexual activity to decrease feeling tired quickly.

9. Specific information is available in two booklets from the American Cancer Society— “Sexuality and Cancer for the Woman Who Has Cancer, and Her Partner” and “Sexuality and Cancer for the Man Who Has Cancer, and His Partner.” Call the American Cancer Society at 1-800-ACS-2345 to request them.
Spirituality can be described as a person’s sense of peace, purpose and connection to others and beliefs about the meaning of life. Although it maybe expressed through an organized religion or some other belief system it is not necessarily connected to a particular religion. Some people may find spirituality in the form of religious observance, prayer, meditation or the belief in a higher power. Still others may find spirituality in nature, music, art or a secular community. Spirituality is different for everyone, but most people think that they are both religious and spiritual. When faced with a diagnosis of cancer many people will rely on religious or spiritual beliefs and practices to help them cope with the illness.

Everyone has different spiritual needs, based on their culture, religious background.
Relaxation Exercises

Spiritual coping

- Prayer, meditation and relaxation activities may help to focus your thoughts and help you to find peace of mind
- Keep a journal to help you express your feelings and record your progress with the cancer treatment
- Seek out a trusted adviser or friend who can help you discover what’s important to you in life, and how to get through the changes in your body and your mental well-being
- Resume relaxing and creative activities such as painting, music or art to get that peace and stress relief that will help you to cope with the challenges of dealing with cancer and the cancer treatment
- Read inspirational stories about others who have successfully battled cancer to help you with your journey
- Discuss your spiritual beliefs with your health care team and your family so they can help you with setting up the supplies you need such as art supplies or communion

There are many relaxation techniques that you can learn to overcome anxiety and breathe more easily. You may need to try a few to find the best relaxation techniques for you.

Try this:

1. Close your eyes and breathe in slowly and deeply.
2. As you breathe, feel yourself relax.
3. Breathe out slowly by shaping your mouth like a whistle.
4. See relaxation soothe your muscles as you breathe in.
5. See tension leaving your body every time you breathe out.
6. Breathe in and out slowly and regularly, at whatever rate is comfortable for you.
7. Breathe in as you say silently to yourself — one, two, three.
8. Breathe out as you say — one, two, three or ‘relax’.
9. Repeat as often as you want.
Progressive Muscle Relaxation

1. Focus on one part of your body at a time.

2. Start at the top of your head and move all the way down to your toes.

3. Tell yourself to relax the top of your head and your scalp.

4. Repeat this to yourself several times.

5. Move down to your eyes; relax the muscles around your eyes.

6. Now focus on your mouth, relax it and let it go limp.

7. Move down to your neck and relax it.

8. Continue focusing on and relaxing parts of your body down to your toes.
Relaxation Exercises

Guided Imagery

1. Think of a special place that you have visited or would like to visit.

2. See the whole picture and see yourself in your special place.

3. What does it look like?

4. What do you hear?

5. Can you taste or smell anything?

6. What does it feel like?

7. You should see a place where you can relax without stress or worry. This can be a warm, sunny beach, a snowy mountain or lovely forest.

8. Whenever you feel you need a break or some “recharging” go to your special place in your mind.
    You can buy meditation or relaxation tapes at most bookstores or borrow them from many libraries.
Music Therapy

Music can be used to improve quality of life and promote healing. It has been used with some success in pain management and some studies have shown that music can help with nausea and vomiting caused by chemotherapy.

- Listen to your favorite song; remember where you were and who was there with you when you first heard it
- Let the memory wash over you, sing as loud as you can to the tune and feel how the stress of the cancer disappears when you start singing
- Do it several times per day
- Discuss with your health care team if it helps or not
- You should not stop your treatments without your doctor’s approval even if you feel better
Relaxation Exercises

Pet Therapy

Having a pet may help you to cope with cancer and the challenges of treatment such as chemo therapy. Dogs and cats are mainly used in pet therapy if you are in a hospital or nursing home, but you can use any animal you have at home. Remember, you should not clean up after your pet. Ask your caregiver to help you with caring for your pet. Studies have shown that as few as 10-15 minutes per day maybe enough time for you to get some the benefit. You might find yourself smiling, less tired, less pain and feeling better.
Resources
Oncology Support and Information Services

American Cancer Society
www.cancer.org
800-ACS-2345
(800-227-2345)
Nassau..................................................800-227-4100
Queens..................................................718-263-2224
Brooklyn...............................................718-237-7850
Staten Island......................................718-987-8871
NYC/BX................................................212-586-8700
Westchester........................................914-949-4800

Share Cancer Support
www.sharecancersupport.org
Main......................................................212-719-0364

English Hotlines
Breast...................................................212-382-2111
Ovarian...............................................212-237-7850

Spanish Hotlines................................212-719-4454

Cancer Care
www.cancercare.org
1-800-813-HOPE
(800-813-4673)
212-712-8400

Leukemia Society of America
www.leukemia.org
1-800-995-4LSA
(800-995-4572)

Lung Cancer Alliance
www.lungcanceralliance.org
1-800-298-2436

The Group Room
(A Radio Cancer Support Group)
www.vitaloptions.org
airs on WEVD 1050AM Sundays, 4-6 PM
1-800-GRP ROOM
(800-477-7666)

National Brain Tumor Foundation
www.braintumor.org
1-800-934-CURE
(800-934-2873)

NCI National Cancer Institute
www.nci.nih.gov
1-800-4-CANCER
(800-422-6237)

National Center for Complimentary
and Alternative Medicine
www.nccam.nih.gov
1-888-644-6226
Resources

Organizational Resources

Cancer Research Foundation of America
www.preventcancer.org
1-800-227-CRFA

National Coalition for Cancer Survivorship
www.canceradvocacy.org

Ovarian Cancer National Alliance
www.ovariancancer.org
1-202-331-1332

Susan G. Komen Breast Cancer Foundation
www.komen.org/
1-800-IM-AWARE

Gilda’s Club
www.gildasclubnyc.org
1-888-GILDA-4-U

Financial Resources

Pharmaceutical Research and Manufacturers of America
www.phrma.org
1-800-762-4636

NeedyMeds
www.needymeds.com
1-215-625-9609

AARP
www.aarp.org/healthcoverage
1-800-523-5800

Health Insurance Information, Counseling, and Assistance Program
www.aging.ny.gov/healthbenefits
1-800-333-4114

Patient Advocate Foundation
www.patientadvocate.org
1-800-532-5274
Transportation Resources

Access-a-Ride
www.web.mta.info/nyct/paratran/guide.htm
1-646-252-5252

Corporate Angel Network
www.corpangelnetwork.org
1-866 -328-1313

Legal Resources

U.S. Department of Labor (FMLA)
www.dol.gov/whd/fmla

Advanced Directives
In 1991, Congress adopted the Patient Self-Determination Act which was designed to inform patients of their rights to accept or reject aspects of their own care. Patients have the right to direct their own care and to execute “advance directives.”

An advanced directive is a way to let your family, friends, and healthcare providers know what your treatment wishes are in the event that you are not able to make decisions for yourself. An advance directive protects your right to make your own choices and allows you to choose a “proxy” to speak for you when you cannot. You can rewrite or cancel an advance directive at any time.

If you have questions regarding advance directives, please speak with your doctor, nurse or social worker. More information can be found by going to www.nyc.gov/html/doh/html/living/adv-dir.shtml

Caring Connections
www.caringinfo.org/i4a/pages/index.cfm?pageid=1

Resources for Life After Cancer Program

This is a resource center for people who have been treated with cancer. It offers a wide variety of services assisting people in their adjustment to life after cancer treatment.

Services Include:

- Telephone information helpline
- Seminars and workshops
- Professionally-led educational support groups
- Individual family consultations
- Open-house group meetings for survivors to meet with each other and staff
- Practical advice on insurance and employment issues
- Reference and lending library

For Further Information:
Thanks to our generous donors, VNSNY is able to offer a vast range of direct patient services to the entire New York City metropolitan area, including those who otherwise could not afford care. For example:

- Providing urgent and long-term charitable health care to uninsured and underinsured New Yorkers as well as free health education and screenings to tens of thousands of New Yorkers.
- Caring for children with chronic illnesses and developmental delays and disabilities.
- Pairing first-time low-income mothers with nurses committed to improving their health, well-being and self-sufficiency.
- Purchasing life necessities, such as coats, medications, and transportation for our neediest patients, and offering free wigs to cancer patients.
- Improving health care quality and helping patients to manage chronic conditions and receive the most effective treatments possible in the comfort of their own homes thanks to vital research provided by VNSNY’s preeminent Center for Home Care Policy and Research.
- Supporting Aging in Place allowing older New Yorkers to remain independent in their own homes, and with greater dignity and quality of life.

Many of these programs are made possible only through the generosity of our donors. These contributions help to bridge the gap between what it costs us to provide our life-saving, life-altering, and life-enhancing philanthropic programs and the reimbursements we receive.

Won’t you join us in bringing this critical charitable care to our community’s neediest? VNSNY is a not-for-profit organization and we count on the public—our donors—for support.

Please mail your gift in the enclosed envelope or send it to:

**Visiting Nurse Service of New York**
Development Department
107 East 70th Street, 5th Floor
New York, NY 10021

You can also make contributions easily online. Please visit our website at www.vnsny.org/donate, or call our donation hotline at 212-609-1525.

Thank you! Together with your generous support, VNSNY will continue to provide the highest-quality, skilled and compassionate home health care in the New York metropolitan area.
A VNSNY SELF-CARE GUIDE
for the Management of Cancer

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