

# **Beyond Surviving**

A voice for the breast cancer survivor

Spring/Summer 2021

# A survivor's voice by Morgan Downs

October 31, 2017 to most people is Halloween, to me this date is marked as one of the worst days of my life, and always will.

When I came home from school that day, I knew something was off because my dad was home early. I walked into the house and stood in the kitchen, looked down the hall into the living room, where my dad was sitting. He got up and started walking toward me. I knew right there that the results came back that mom had breast cancer. With my backpack and shoes on, dad tried giving me a hug but I pushed him away and started bawling. He then told me that mom did in fact have breast cancer. Mum came into the kitchen where we were and gave me a hug but even though I was trying to get away she still hung on and wouldn't let go. She told me that this diagnosis "is not a death sentence."



Morgan and her Mom, Rachel Downs, running in the Campion the Cure race in 2018.

That sentence that my mom said stuck with me through the entire process. Some days it was extremely hard to remember that this wasn't a death sentence. For example, the first night after chemo she was trying to come up the stairs for bed when she passed out at the top of the stairs and dad rushed over and helped her. Or, when her hair was coming out in clumps because the poison that was being pumped into her--that is so necessary to fight the cancer--was killing every molecule and cell, even the good ones.

One thing that was very important to my mom was that she could do exactly that, be a mom. She came to every single one of my basketball games, even when she had chemo that day and I told her not to come, she did. She would sit in the stands with her mask on and cheer. She would come to my softball games even when she had deep third degree burns from radiation and she was in agonizing pain.



My mom showed great strength during the whole journey even though I know she was being strong for us kids, but I really struggled. I cried myself to sleep most nights hoping she would wake up in the morning, mentally destroying myself with worry and "what if" questions that I never talked about and felt like I couldn't. I felt as though I needed to step up as a mother figure for my four- year-old brother and my five-year-old sister.

My faith is really important to me and when this all happened, I cursed out God for doing this to me and my family. But God never gives us more than we can handle. I can look back now and look at the person I am today and see how much stronger I am. Not only did mom kick cancer's butt but so did I. It may have been hard most of the time, but I just kept looking to the end. Did my family get divided and fight a lot through it? Yes. Did we become stronger as a family? Yes, we did. What we went through really sucked, and I wouldn't wish this on my worst enemy.

This awful thing called cancer had one upside. We came together, mentally and physically, and walked the horse track on May 18, 2018 at the American Cancer Society's Relay for Life during the survivors' walk—this was the last day of my mom's treatments. That moment in time was the best feeling, because walking around the track just felt like we were finally done with this awful time. I will never forget this important part of my history, because I changed me for the better. We are a family of survivors.

# Lymphedema FAQ

# What is lymphedema?

Lymphedema is the buildup of lymphatic fluid that can cause swelling in the breast, arm, and/or hand. Lymphatic fluid is normally filtered through lymph nodes. Removal of or damage to lymph nodes as a part of cancer treatment that requires the lymph fluid to be rerouted and filtered through remaining lymph nodes which may result in swelling.

#### Who is at risk for lymphedema?

Up to 5% of patients who have had a sentinel lymph node biopsy may develop lymphedema throughout their lifetime. The risk increases to 20% if more lymph nodes are removed (axillary dissection) or radiation therapy to the axilla is a part of cancer treatment. Most cases of lymphedema occur within the first 18 months after treatment. Being overweight or obese can increase the risk of developing lymphedema.

## What are early signs of lymphedema?

- Swelling of the breast, arm, or hand.
- Heaviness, achiness, or fullness in the breast, arm, or hand.
- Sometimes the first sign is that clothing, a watch, or jewelry feels tighter than usual.

### Can you prevent lymphedema?

There is no medical evidence that lymphedema can be prevented but there are some recommendations which may reduce the risk of developing lymphedema.

#### Maintain a healthy weight and exercise

- There is strong evidence that exercise does not cause lymphedema.
- New research suggests that gradual progressive strengthening can minimize the risk of lymphedema.
- When beginning a new exercise program, start gradually and increase as tolerated, monitoring your body for swelling.

#### Blood pressure readings, injections, and blood draws

- There is no evidence that these will cause lymphedema.
- Research shows that you should avoid these things only if you have been diagnosed with lymphedema.

#### Try to avoid cuts and infections in the affected limb

- Regularly use a moisturizer to avoid skin cracking
- Avoid sunburns by using a sunscreen with SPF 30 or higher
- Protect yourself from insect bites by using insect repellant
- Wear gloves while gardening or performing housework
- Wash all cuts with soap and water

#### Airplane travel

- There is no evidence that you need to wear a compression sleeve if you have not been diagnosed with lymphedema.
- Stretch your arm often before, during, and after your flight.

#### Saunas and hot tubs

- There is no evidence that shows that hot tubs cause lymphedema.
- One study suggested that saunas may contribute to the development of lymphedema. If you use a sauna, start with gradual exposure, and monitor your body for swelling.

## What should you do if you think you have symptoms of lymphedema?

Contact your physician right away as early evaluation and treatment by a therapist that specializes in lymphedema care can be very effective.

# **Clinical Pearl – Tailoring Breast Cancer Treatment**



As we understand more about the biology of breast cancer at the molecular level (the DNA in cancer cells), the goal of therapy has increasingly aimed at providing the most effective therapy with the least toxic side effects. Although this is an ideal we have not quite reached, we are implementing precision care into some breast cancer treatments at the present time.

Oncotype DX Recurrence Score - This is a laboratory test performed on cancer cells from individual tumors that we use to determine whether the addition of chemotherapy provides ANY benefit in reducing the risk of late distant metastasis, for breast cancers that have been removed, are estrogen receptor positive, Her2/neu negative and with 0-3 positive lymph nodes. It is a 21 gene assay that shows relative expression of the genes in the panel and in turn, correlates to a score of 0 -100. For most situations, a score of 25 or

less suggests NO benefit for chemotherapy in addition to anti-estrogen endocrine therapy in terms of the risk of cancer metastasizing over the next decade. This test has allowed many people with breast cancer to avoid the more dangerous IV chemotherapy in favor of maximizing the more effective and less toxic anti-estrogen therapies.

Complete Pathologic response - For cancers that are Her2 amplified or triple negative (estrogen receptor, progesterone receptor and Her2/neu all negative) that present in a way that the plan is to start with chemotherapy treatment before surgery, we can use the pathologic response at the time of surgery to determine whether additional therapy is needed. It helps to determine what therapies work best in the post-operative setting. For Her2 positive breast cancer the pathologic response after the initial treatment helps to determine the best therapy needed after surgery to complete one year of total anti-Her2 therapy. We use the pathologic response to tailor post-operative medical therapy, often to omit toxic agents. For triple negative breast cancer, we use the pathologic response to either conclude that treatment is already complete, or that there is a benefit to adding additional chemotherapy either on or off a clinical trial.

## **Oven Roasted Salmon with Savory Strawberry Salsa**

This tasty salmon is lovely over fresh spinach or arugula. It is also wonderful with rice or couscous and roasted asparagus.

#### **SALMON:**

1 1/2 lbs Salmon

½ tsp Cumin

½ tsp Chili powder

½ tsp Sugar

½ tsp Salt

#### SALSA:

2 cup Strawberries, washed, hulled, diced, ¼ - ½" pieces

½ Jalapeno\*, seeds removed, minced

¼ cup Red onion\*, small dice, rinsed

1 clove Garlic, minced

2 T Cilantro, fresh, minced

1 T Lime juice, fresh

1 T Olive oil

½ tsp Cumin

½ tsp Salt

½ Avocado, diced, ¼ - ½" pieces

#### Directions:

- Cut salmon into 6 equal portions. Place on parchment or foil-lined baking sheet.
- Mix spices together and sprinkle evenly over salmon. Set aside.
- 3. To make salsa, mix all but avocado together.
- Taste. Adjust as needed. Add avocado and stir gently.
  Set aside.
- Place salmon into a 425-degree oven for about 10 minutes per thickness of fillets.
- 6. To serve, use a thin spatula to separate cooked salmon from the skin. Top with salsa.

#### \*Notes:

Jalapenos vary in size and heat. The heat is largely concentrated in the seeds and ribs. It's easier to add more than to pick it out, so keep that in mind. Wear gloves if you are sensitive and WASH YOUR HANDS when finished.

Soak or rinse onions in cold water to help to release some of the strong flavors and make them milder for this raw salsa.