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from the publisher

There is probably no greater fear for a woman, than receiving a breast cancer diagnosis. That's one of the reasons why Windsong Comprehensive Breast Cancer (WCBC) wants people to know that help is available, and that not all news is terrible. In fact, there is a lot of good news.

First, there is help. Also, in recent years there has been a reduction in female breast cancer rates among women ages 50 and older. Death rates have also declined, due to better screening, early detection, a decrease in prescribed hormone therapy, increased awareness, and improved treatment options.

Here in WNY, Windsong Comprehensive Breast Care (WCBC) is a team of experts that combines the expertise of Windsong Radiology Group (Windsong) and CCS Oncology (CCS) in providing cutting edge improved treatment options for patients. Windsong was the first local imaging center to offer same-day breast imaging and biopsy, and many of their board certified radiologists are fellowship trained in women's imaging. CCS Oncology attends to patient oncologic needs, including surgery, medical management and radiation treatments, determining the best treatment for each patient.

Together with a team of local partners WCBC provides all required support services, including plastic surgery, genetic and high risk cancer screening, nutritional guidance, psychosocial support and counseling, education, and physical therapy. Certified breast patient navigators and specialized trained oncology nurses walk down the road to survival with each patient offering support, education, and resources.

I hope this special issue of Buffalo Healthy Living provides hope to all those who are vigilant in maintaining their health, and to those who are fighting the battle to restore their health. We are fortunate to have a strong, dedicated team in WCBC available to lead the way.

Sincerely,

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do you need 3D mammography?

windsong radiology has the answers

by Dr. Anna M. Chen, DO

The newest breakthrough in mammography is called tomosynthesis or 3D mammography, and was approved by the FDA in February 2011. A 3D mammogram uses low dose x-ray screening to provide a clearer, more accurate view of breast tissue. This new technology makes it possible to identify abnormalities on the many women who have dense breast tissue. Do you need 3D mammography?

What are the benefits of 3D mammography for a routine or diagnostic exam? 3D mammography helps differentiate normal overlapping tissue from abnormal tissue, resulting in a more accurate diagnosis. This reduces the need to return for additional imaging if a questionable abnormality is seen with traditional 2D mammography.

What can I expect during the exam? A patient having 3D mammography will not notice any difference in her experience. During the exam, the x-ray arm sweeps in a slight arc over the breast, taking multiple images in a matter of seconds. The computer produces a 3D image of breast tissue in one-millimeter slices, providing improved visibility for the radiologist.

Is 3D mammography a separate exam, or part of my usual mammogram, and how long does it take? 3D mammography is a separate procedure performed at the same time as your regular exam. The exam takes about 4 seconds longer per view during compression.

What is the cost? Many health insurance plans cover breast tomosynthesis. If your health plan does not, Windsong has made it a policy to never charge more than \$50 for out-of-pocket expenses associated with 3D mammography. 3D mammography is also an eligible expense through flexible spending accounts. The 2D portion of the exam is billed to your insurance as usual.

How much radiation will I be exposed to? 3D mammography uses a comparable radiation dose to a traditional mammogram. The dose is roughly twice when doing a standard mammogram along with a 3D mammogram, but the radiation dose of the combination study is still below the FDA regulated limit for standard mammography. The FDA says the combination of 3D mammography and standard mammography is safe and effective.



What if I choose not to have a 3D mammogram? A state of the art standard 2D digital mammogram will be performed.

Should I have a breast tomosynthesis exam yearly? We typically recommend alternating a 3D mammogram with traditional ultrasound and 2D screening each year. A 3D mammogram is typically performed every other year.

What if my doctor did not mention 3D mammography to me? 3D mammography can be elected by the patient. Many physicians know about the technology, and have been very positive. If you need additional information to help you make your decision, simply let the front desk know that you would like to speak to a technologist.

Why is Windsong offering 3D mammography? One in eight American women will develop breast cancer in her lifetime. The stage at which breast cancer is detected influences a woman's chance of survival. If detected early, the five-year survival rate is 98 percent. Windsong prides itself on the highest quality patient care, was first in the region to offer this revolutionary technology, and remains the area's largest provider of 3D mammography.

Doctors and scientists agree that early detection is the best defense against breast cancer. Our Windsong team strongly believes that 3D mammography benefits our patients and our community. All four Windsong locations offer 3D mammography. To make an appointment, call 716-631-2500. Visit http://www.windsongradiology.com to learn more.

About the Author: Dr. Anna M. Chen, DO is the Director of Women's Imaging at Windsong Radiology. Learn more at www. windsongradiology.com or call 716-631-2500.

windsong comprehensive breast care program

wny's first fully accredited program

by Julie L. Schisler, CN-BC

In 2011, the National Accreditation Program for Breast Centers (NAPBC) granted Windsong Comprehensive Breast Care (WCBC) accreditation, making it the area's first and only fully accredited program. After satisfying requirements of a recent three-year review, that designation remains today as Windsong Radiology Group and CCS Oncology continue to work closely with other supportive partners to provide the most comprehensive breast care services in the region. They remain the only comprehensive outpatient facility with a specialized focus on breast disease.

Who are the WNY partners providing comprehensive breast care services?

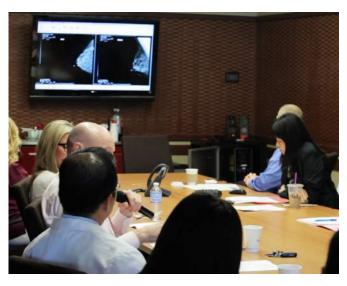
WCBC partners that are providing the area's most comprehensive breast care services are Windsong Radiology, CCS Oncology, Cancer Counseling Services, Center for Plastic Surgery, Kaleida Health, XCell Laboratories, Orthosports Physical Therapy, WNY Nutrition, and AuNaturel Boutique. This partnership makes it possible to provide a full spectrum of resources and care for patients with breast disease. The breast patient navigators assist patients with referrals and resources, providing guidance and support at this time of uncertainty. This is welcome oversight for those patients who are newly diagnosed and overwhelmed by all that lies on the horizon.

What is NAPBC accreditation?

NAPBC accreditation is only granted to those centers that have voluntarily committed to provide the highest level of quality breast care. The program must undergo a rigorous evaluation process and on-site review of their performance, meeting 29 standards in order to qualify. The standards incorporate specialized training, nationally recognized clinical standards and multidisciplinary care.

What does an NAPBC accredited breast care program provide?

As an NAPBC accredited breast care program, the partners utilize nationally recognized standards of care to develop an individualized treatment plan. The breast surgeons lead a weekly conference to discuss



newly diagnosed breast cancer patients with support from the radiologist, pathologist, medical and radiation oncologist and the referring physician. The physicians can then develop the best plan of care and provide patients appropriate treatment options.

How else does a team approach benefit patients?

Collectively, the team is able to provide the latest in technology and standards of care not found in other outpatient facilities. Dr. Anna Chen, Director of Women's Services at Windsong Radiology Group summarizes our team approach, "When a patient comes to us she can have confidence in knowing that she is in the hands of a caring, experienced medical team."

Community outreach and education is part of WCBC's NAPC accreditation.

Windsong Comprehensive Breast Care provides outreach and support to multiple community resources. Educational sessions for newly diagnosed patients and hosting the Look Good, Feel Better program are among them. The program has strongly supported the American Cancer Society's Making Strides Walk and the Mother's Day Breast Cancer Canal Walk, which supports Mary's Wig Room.



Thousands of dollars have been raised and donated to support research, lodging, transportation, and supportive services. The team of supportive partners within WCBC truly believe that "it takes a team to fight breast cancer." To learn more about this program, please call (716) 631-2591 or visit www.windsongbreastcare.com.

About the Author: Julie L. Shisler, CN-BC is a comprehensive breast care coordinator at Windsong Radiology Group.

questions and answers about breast cancer for newly diagnosed patients

a unique program to debunk myths about treatment

by Christine M. Bylewski, LCSW-R, BCD

No woman wants to hear the word cancer. Even with all the advancements in medicine in this 21st century, it still elicits fear and anxiety. Windsong Comprehensive Breast Care (WCBC) has been working diligently to try and soften this reaction through a unique question and answer (Q&A) program designed by Dr. Janet Sung, the founder of Windsong Radiology Group.

Every other Monday WCBC invites newly diagnosed breast cancer patients to an informative and educational Q&A session. Conducted by a panel of oncology specialists, its goal is to help educate and debunk myths about the treatment of breast cancer. The panel consists of a radiologist, breast surgeon, medical oncologist, and radiation oncologist, who provide a brief overview of their specialty and role in managing breast cancer. Each specialist explains what a consult with them will be like, and how they work together as an interdisciplinary team.

This unique team approach is paramount to the mission of Windsong Comprehensive Breast Care, which is, "It takes a team to fight breast cancer." One of the most important messages of these sessions is that each person is different, as is each breast cancer diagnosis. Understanding this helps dispel the erroneous assumption that all breast cancers are alike and therefore, treated equally.

The panel of experts also includes a psychotherapist, nutritionist, and physical from a therapist. The role of each of these professionals to the overall health and wellness of the newly diagnosed breast cancer patient is underscored during the Q&A session. Hearing what a patient can do for herself during the development of a treatment plan offers the patient an opportunity to exercise some control over her situation. Recognizing areas of control is critical to the management of anxiety and fear. Knowing that



there are multiple ways to enhance coping through nutrition, exercise, and psychotherapy helps empower α patient at α time when she feels overwhelmed and emotionally paralyzed.

The program concludes with a demonstration from a representative of Au Naturel Boutique. Au Naturel is dedicated to the clothing needs of women undergoing breast surgery. Multiple products are presented that are designed to help the breast cancer patient adjust to her new figure and body image. Feeling beautiful in any outfit is a critical component to emotional and physical healing following diagnosis and treatment of breast cancer.

WCBC offers this special Q&A program to any newly diagnosed patient in the Western New York community. Patients undergoing treatment at any facility outside of WCBC are also invited. Family members and friends are also invited to attend. and participants attest to the benefit of this early intervention. As one patient stated, "I felt more confident after the Q&A. Knowing I had a team of professionals who had my back, made all the difference."

Windsong Comprehensive Breast Care (WCBC) sessions are located at 55 Spindrift Drive, Williamsville, New York 14221. Contact WCBC's breast care coordinator at 716-631-2591. Learn more about WCBC's interdisciplinary approach at http:// windsongbreastcare.com.

About the Author: Christine Bylewski is a licensed clinical social worker and co-chair of Hope for Two, The Pregnant with Cancer Network. Christine is a former clinical professor at UB, facilitates a bimonthly support group, and can be reached at 716-565-2092.

why are breast patient navigators at windsong so special?



In 2009, Maureen Connors told Windsong Radiology founder, Dr. Janet Sung she was concerned about newly diagnosed breast cancer patients. Maureen wanted patients to knowthat someone was there for them to help them navigate through the process of scheduling appointments, reaching out to their primary care physician, and be a caring partner.

When Dr. Sung said, "Sure, go ahead – start a program," Maureen was thrilled. She now shares the job with Pat Smith, and both are nationally certified Breast Patient Navigators in Imaging. Their roles, training, and knowledge are unique and they are dedicated to making a difference.

Maureen explains, "It starts with the 24-hour call. After a patient is diagnosed, we reach out to them within a day of learning they have cancer. We tell them what happens next, help schedule appointments, second opinions, and be a supportive friend. It usually takes about two to three weeks from the time of diagnosis to confer with the primary physician, schedule an appointment with the surgeon, and undergo a breast biopsy, MRI or more imaging, if necessary. If patients have questions, they have someone they can call – even after hours."

The navigators encourage patients to attend a bimonthly question and answer session at Windsong Radiology. Patients can bring adult family members or friends to meet with a panel of physicians who answer their questions, regardless of where the patient chooses to receive treatment. Maureen says, "We speak to each patient about 10-12 times during the process. We tell them not to Google. We let them know that they have a team that will care for them - that they're in the right place.

Maureen Connors can be reached at 716-631-2500, ext. 2115 and at mconnors@windsongradiology.com.

laura's story

they made my life so much easier by being there every step of the way



It had been seven months since Laura had a normal mammogram, but on this particular day she felt a lump, and knew something was wrong. She called Windsong Radiology, returned for testing, and within two days learned she had breast cancer. Like most patients, Laura was in a state of shock.

Laura can't say enough about the people who helped her through what was one of the most difficult times in her life, and praises Windsong's breast patient navigators. "They were awesome, helped with my appointments, and made my life so much easier, just by being there every step of the way."

Laura is especially thankful for her surgeon, Dr. Katherine O'Connell. "Having my entire team of doctors in one location was a big help. It was also reassuring to know that I was receiving care at the area's only Nationally Accredited Program for Breast Centers (NAPBC). And knowing all of the doctors on my team meet, discuss my case, and stay in touch with one another was wonderful."

The medical campus at 45-55 Spindrift Drive in Williamsville includes radiology, surgery, medical and radiation oncology, chemotherapy and radiation treatment.

"Having Dr. Yap and Dr. Krabak in the same building made everything easier," says Laura. She adds, "It's not a big institution – you just park in front and walk in, and you're surrounded by people that know you, that care, and who help make a difficult time so much less stressful."

Like the professionals who cared for Laura during one of the most difficult times in her life, Laura believes that "it takes a team to fight breast cancer." To learn more about the team, call 716-631-2591 or visit www. windsongbreastcare.com.

the "WAIT"

by robyn meyer

After 2010, routine check-ups will never be the same. That April, I began my usual series of medical visits, starting with my primary care physician. After an uneventful exam, I scheduled all ensuing procedures - bloodwork, mammogram, etc. My mammogram came first.

While waiting for my results, a young woman squirmed anxiously in her chair. She said she'd been there a long time and was worried something was wrong. I assured her that the doctors were probably behind, and all will be fine. I was right. Her mammogram was perfect. I never gave a second thought to my test results. After all, I've had more than 20 mammograms all with good outcomes. When called, I confidently sat next to the radiologist who started with, "Your right breast looks good." Then she uttered the dreaded word - "BUT." She did not like what she saw in my left breast and straightforwardly told me I needed to get α biopsy. She estimated there was a 40%-50% chance that this was not cancer. Thus started my journey into tests, more tests, percentages and WAITING.

It took two weeks to confirm that I did have breast cancer and another few weeks to see the doctor regarding next steps. More waiting ensued until surgery, surgery outcomes, and test results to determine the best course of treatment. While I was not prepared to have breast cancer, I had no idea how to handle the "WAIT" that followed. Fortunately, immediately after my mammogram results, I was linked with the breast navigators at Windsong Radiology. They supported and guided me through the "WAIT."

I have to admit that I chuckled when I was told to see the breast navigators. I envisioned them on a breast-shaped ship fighting the briny seas of cancer. However, two compassionate, well-educated women provided support and advice to my husband and me. They understood the elongated and agonizing process from diagnosis to treatment and were there every step of the way with reassuring and helpful hands. Most importantly, they explained how to handle the "WAIT." They said I needed to eat, sleep, breathe and exercise. At first I was insulted. Really! Who doesn't know that! However, I soon realized the wisdom of this strategy. My focus had to be on what I had control over, and I needed to take care of myself while the medical process unfolded. They also advised not to consult the Internet until I knew my exact diagnosis. Without the right information about my particular cancer, they cautioned, my anxiety and confusion would only increase. I was scared and worried by my diagnosis. I didn't know what to do, so I heeded their advice. (Well,

have mav cheated on the exercise part!)

I focused on each moment, which proved to be a busy enterprise. dabbled vegetarianism, and my daughter taught me how to cook healthier



meals. I approached each day with a heightened sense of awareness. Honestly, I was not daft. I had anxious moments. However, I was determined to beat the "WAIT" by listening to my breast navigators. They steered my ship to calmer waters and gave me the key for conquering the "WAIT."

About the Author: Robyn Meyer has enjoyed a long career as a mental health professional. Aside from maintaining a healthy lifestyle, she devotes her time to volunteering as a mentor and board member for Compeer of Greater Buffalo and also serves on the board of her temple.



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breast cancer myths - true or false?

the truth about risks, symptoms, and more

By Michael Peyser, MD, FACS

Finding a lump in your breast means you have breast cancer.

False: Only a small percentage of breast lumps are cancer, but if you discover one or notice any changes in breast tissue, it should never be ignored. It is important to see a physician for a clinical breast exam. He or she may order breast-imaging studies to determine if the lump is cause for concern. Performing routine breast self-exams, establishing ongoing communication with your doctor, getting annual clinical breast exams, and scheduling routine mammograms starting at age 40 is important.

Men do not get breast cancer; it affects women only.

False:

Men also have breast tissue and can develop breast cancer or other benign tumors or disorders. 2,360 men were diagnosed with breast cancer in 2013, equating to about 1% of all breast cancers in the US. The percentage is small, but men should perform periodic breast self-exams and report any changes to their physicians.

Breast cancer is always painful.

False:

Only about 10% of patients diagnosed with breast cancer report associated pain. Pain in breast tissue is often caused from cysts or infections but all changes should be reported to your physician for evaluation.

Most women with breast cancer have a family history.

False:

While women with a family history of breast cancer are at greater risk, more than 75% of women diagnosed have no family history of the disease. If you do have a first degree relative with breast cancer, you should consider regular diagnostic imaging starting 10 years before the age of your relative's diagnosis. Remember, risk factors don't cause cancer; they just affect your chance of getting cancer.



Breast cancer is contagious.

False:

You cannot catch breast cancer or transfer it to someone else's body.

If the gene mutation BRCA1 or BRCA2 is detected in your DNA, you will definitely develop breast cancer.

Only 5-10% of all breast cancer patients have a genetic mutation and not every woman with a BRCA1 or BRCA2 mutation will develop breast or ovarian cancer. However, a woman who has inherited a mutation in BRCA1 or BRCA2 is about five times more likely to develop breast cancer than a woman who does not have the mutation. The good news is proactive measures are available to reduce risk, including taking hormonal therapy or surgical prevention. A genetic mutation is sometimes, but not always, passed on through generations. Evaluating family history is important to determine your risk and need for genetic testing.

Everything causes breast cancer.

False:

Researchers are not aware of any conclusive evidence linking the use of coffee, underarm antiperspirants or deodorants, underwire bras, cell phones or breast implants, and the subsequent development of breast cancer.

About the Author: Michael Peyser, MD, FACS is a board certified surgeon at Windsong Comprehensive Breast Care. He has an extensive medical background in surgery and oncology. Dr. Peyser has received many outstanding achievement awards and is a leader in the breast program.

preventive mastectomy to avoid breast cancer

(MC) People around the world were shocked to learn that actress and activist Angelina Jolie opted to have a double mastectomy to reduce her risk of breast cancer. Jolie, who was 37 years old at the time of the procedure, reportedly learned that she carries a mutation of the BRCAl gene, which sharply increases her risk of developing breast cancer and ovarian cancer. In addition, the actress has a family history of cancer. Her mother Marcheline Bertrand, died of ovarian cancer in 2007 at the age of 56.

By having a preventive mastectomy, Jolie reduced her breast cancer risk from 87 percent to 5 percent, according to an op-ed piece she authored in The New York Times. Jolie is not the only well-known actress to opt for a preventive mastectomy, as fellow thespian Christina Applegate had a similar procedure in 2008 after learning she had a mutation of the BRCA1 gene. These highly publicized cases have left many women wondering if a preventive mastectomy is something they should consider.

BRCA stands for "breast cancer susceptibility genes," a class of genes known as tumor suppressors, according to the National Cancer Institute. Mutations in these genes have been linked to hereditary breast and ovarian cancer. "A person's risk of developing breast and/or ovarian cancer is greatly increased if he or she inherits a harmful mutation in BRCA1 or BRCA2," says Katherine O'Donnell, breast surgeon with Windsong Comprehensive Breast Care. She adds, "Mutations in these genes could also put a person at increased risk for other cancers '

Genetic tests can check for mutations in BRCA genes. During such a test, a blood sample is taken, and if a mutation is found, a person may get genetic counseling and work with a doctor to develop a plan of action. Dr. O'Donnell reminds patients that, "It is important to understand that not all people with a genetic mutation will get breast cancer or ovarian cancer." The National Cancer Institute's "SEER Cancer Statistic Review" states that a woman who has inherited a harmful mutation in BRCA1 or BRCA2 is about five times more likely to develop breast cancer than a woman who does not have such a mutation.

Although there is no surefire way to determine if a person with a mutated gene will develop breast

cancer. many women are considered high risk for α preventive mastectomy reduce their risk. Women have a family history of breast cancer. have received positive



results from gene testing, have already had cancer in one breast, or have dense breasts that make testing difficult, may want to get a preventive mastectomy.

"The decision to get a preventive mastectomy is not one to take lightly," cautions Dr. O'Donnell. WCBC is staffed with breast-health specialists, genetic counselors, breast surgeons, and reconstructive surgeons that can help patients make the best decision. Second opinions are strongly recommended for women considering a preventive mastectomy. Women should understand the options available to them if they have an extremely elevated risk of breast cancer or ovarian cancer.

Did you know?

When a person is diagnosed with breast cancer, tests are then conducted to study the cancer cells. According to the National Cancer Institute, such tests are used to determine how quickly the cancer may grow and the likelihood that the cancer will spread throughout the body. These tests also may help doctors determine α course of treatment and if a patient is likely to experience a recurrence of the cancer down the road. One such test is the estrogen and progesterone receptor test, which measures the amount of estrogen and progesterone receptors in cancer tissue. The cancer may grow more quickly in patients who have more of these receptors than normal. In addition to measuring the amount of these hormones in the cancer tissue, an estrogen and progesterone test can determine if a treatment aimed at blocking estrogen and progesterone may prevent the cancer from growing.

WNY Resource: Katherine ODonnell, M.D. is a board certified general surgeon and medical director of Windsong Comprehensive Breast Care. She conducts biweekly question and answer sessions for newly diagnosed breast cancer patients and is program leader for a multidisciplinary team of radiologists, medical and radiation oncologists, pathologists and local referring physicians. She can be reached at 716-626-6300.

exercises after breast surgery

breast surgery can affect arm movement

by Annette Pinder

Many women with breast cancer have some kind of surgery or other treatments that can affect the breast and surrounding areas. Treatments can include breast biopsy, lymph node biopsy or removal, lumpectomy, mastectomy, breast reconstruction, chemotherapy and radiation. Surgeries can affect shoulder and arm movement, result in weakness, and affect simple daily activities, such as dressing and combing your hair. Radiation therapy and chemotherapy often result in fatigue and nausea.

According to Donna Gulick, PT, DPT, CLT of Orthosports Physical Therapy, and partner in Windsong Comprehensive Breast Care program, "It is important to exercise following surgery to get the arm and shoulder moving again." Donna adds, "Exercises help to decrease any side effects of your surgery and help you get back to your usual activities. For those who require radiation following surgery, exercises are even more important to maintain flexibility. Radiation, even without surgery, can affect the arm and shoulder, making exercise important."

Donna tells patients it is important to speak with their doctor before starting any exercises. Your physician may suggest a physical therapist, occupational therapist, or cancer exercise specialist who is specially trained to design an exercise program just for you. While some exercises should wait until drains and sutures (stitches) are removed, others that increase shoulder and arm mobility can usually be started earlier.

Donna offers the following information to patients:

- Use your affected arm (the side where your surgery was) as you normally would when you comb your hair, bathe, get dressed, and eat.
- Lie down and raise your affected arm above the level of your heart for 45 minutes, two or three times a day. Put your arm on pillows so that your hand is higher than your wrist and your elbow is a little higher than your shoulder, to help decrease the swelling.
- Exercise your affected arm while it is raised above the level of your heart by opening and closing your hand 15 to 25 times. Next, bend and straighten your elbow.

Repeat three to four times a day to reduce swelling by pumping lymph fluid out of your arm.

• Practice deep breathing exercises (using your diaphragm) at least six times daily. Lie down on your back and take a slow, deep breath. Breathe in as much air as you can while trying to expand your chest and abdomen (push your belly button away from your spine). Relax and breathe out. Repeat this four or five times to help maintain normal chest movement, making it easier for your lungs to work.



• Do not sleep on your affected arm or lie on that side.

Donna also points out that, according to recent evidence, women who exercise after completing breast cancer treatment live longer and have less reoccurrence. "Several recent studies suggest that higher levels of physical activity are associated with a reduced risk of the cancer returning, and a longer survival after a cancer diagnosis," said Kerry Courneya, PhD, professor and Canada Research Chair in Physical Activity and Cancer at the University of Alberta in Edmonton, Canada.

According to WebMD, what experts suspected has now been proven. In studies of several different cancers, being overweight after completing treatment was associated with shorter survival times and higher risk of cancer recurrence. As a cancer survivor, exercising could help you live a longer life - free from cancer.

To learn more, including descriptions of exercises following breast cancer surgery, visit http://www. cancer.org/cancer/breastcancer/moreinformation/ exercises-after-breastsurgery.

WNY Resource Donna Gulick, PT, DPT, CLT is a physical therapist at Orthosports Physical Therapy. To learn more visit www.orthosportspt. com or call their Amherst or Williamsville location at 716-839-3705 or 716-634-1578.

alcohol and breast cancer risk

did you know?

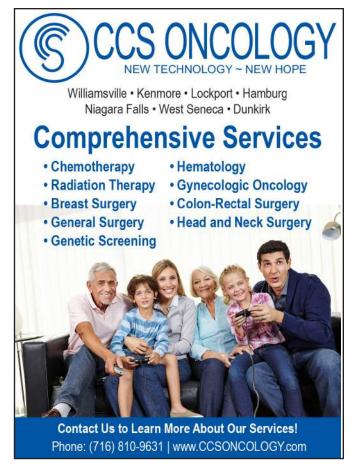


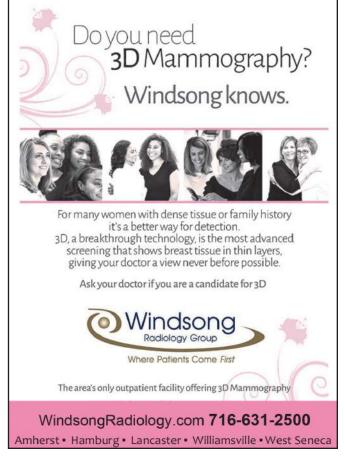
Research has consistently shown that consuming alcoholic beverages increases a woman's risk of hormone-receptor-positive breast cancer.

According to the American Cancer Society, a woman's risk of developing breast cancer increases with the amount of alcohol she consumes. When compared with nondrinkers, women who consume one alcoholic beverage per day have a slightly higher risk of developing breast cancer. But the risk of developing breast cancer is roughly one and a half times greater for those women who consume between two and five alcoholic beverages per day when compared to nondrinkers.

Breastcancer.org notes that experts estimate that a woman's risk of developing breast cancer increases by 10 percent for each additional drink she consumes each day.

The risk is considerable for young girls who consume alcohol as well. Teen and tween girls between the ages of nine and 15 who drink three to five drinks per week have three times the risk of developing benign breast lumps, which have been linked to a higher risk of breast cancer later in life. TF148421





life after breast cancer

by Christine Bylewski

The good news about breast cancer is that more and more women are surviving its diagnosis. However, life after treatment is more complicated than one might imagine.

Once a woman completes treatment there is an expectation that she should feel relief and perhaps even joy. Well-meaning family and friends often want to celebrate the end of this difficult time. However, this is not the end - it is actually the middle. Diagnosis and treatment is phase one. Recovery from treatment is phase two. I often remind patients that their physical and emotional recovery from breast cancer can be measured by looking in the mirror. For those who have lost their hair due to chemo, watching the hair grow back takes weeks to months. This is an excellent barometer of how much emotional healing is taking place, and often takes longer than physical healing. Following treatment, women need to be kind to themselves, and have realistic expectations of how quickly they can reengage in their previous life.

Fear of recurrence is challenging for most patients. With less frequent physician visits it is not unusual for a patient to question, "How can I live knowing that this cancer can come back?" As much as a patient may have disliked her treatment protocol, being seen frequently by a physician and/or nurse provided reassurance. Now, without that vigilance, anxiety about the future becomes more pronounced. Finding strategies to deal with this anxiety is paramount to quality of life. Focusing on what a woman can control is very helpful. Exercise, nutrition, and restorative sleep are essential to a woman's health and wellness plan as she recovers.

Changes in body image can be significant for someone who has completed treatment. Losing a breast is traumatic. Whenever we lose a part of ourselves, it is important to grieve. Grieving is a normal process that helps women with healing and adapting to change. Experimenting with new undergarments offers many women an opportunity to feel feminine and attractive. Looking as they did before surgery on the outside aids with their internalized view of themselves. Physical therapy can also help with regaining strength and muscle tone, helping women feel stronger and healthier.

It is not unusual for a survivor to experience significant anxiety prior to her first set of tests following completion of treatment. Fear of recurrence may become

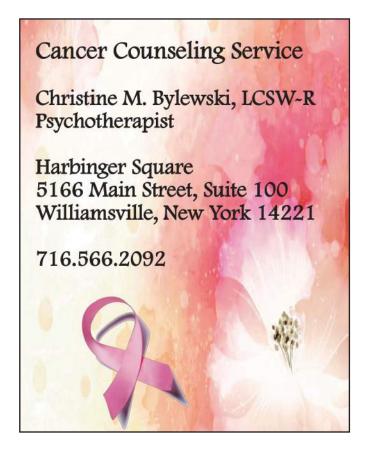


overwhelming. Learning how manage fear is an important part of coping. Realizing that every and pain is not α sign

of recurrence is an important goal for maintaining emotional health.

Support groups play a critical role in recovery from cancer. It helps to be with other women who have walked this walk and understand the nuances of living with a breast cancer diagnosis. The Breast Cancer Network of Western New York offers a monthly support group for this very reason. In addition, individual counseling, which is covered by insurance, can be beneficial. Learning strategies about managing negative thoughts and scary feelings is explored in a safe and comforting environment.

About the Author: Christine Bylewski is a Licensed Clinical Social Worker with over thirty years experience in helping cancer patients and their loved ones. Her office is located at 5166 Main Street, Suite 100, Williamsville, Call 565-2092 for information or to make an appointment.



educating young women about breast cancer



(Metrocreative) Young girls experience body and life changes that accompany adolescence. It's difficult to imagine that breasts that are just beginning to develop may contain cancer. But such is the reality.

Most women who are diagnosed with breast cancer are over 40. Only five percent are under 40. However, Vanderbilt University Hospital recently treated a 14-year-old girl who found a lump that was a rare form of breast cancer called a phyllodes tumor. In 2009, a 13-year-old from Arkansas found a lump in her right breast, and a 19-year-old from New Jersey underwent a bilateral mastectomy.

Fortunately, these cases are rare, but adolescent girls should be mindful of their breast health. Some organizations have increased breast cancer messages for young girls, and it is not uncommon to find young women participating in runs and fundraisers for breast cancer research. Some organizations conduct breast cancer workshops to educate teens about breast health.

Dorothy Paterson, a former Girl Scout leader and breast cancer survivor, conducts workshops for Girl Scouts. She doesn't want to scare girls. She simply wants them to be aware of changes in their bodies that may or may not be normal.

Some parents think educating children about breast cancer may cause them to worry unnecessarily especially since their risk of developing breast cancer is minimal. Advocates see it as important and believe any effort to help save lives and promote health is worthwhile.

Just as with older women, adolescents and teens should realize that eating healthy foods, exercising, avoiding alcohol and tobacco, and maintaining annual physical exams with a doctor are key ways to reduce the risk for cancer.

famous breast cancer patients

(MC) Often people believe that celebrity musicians. actors figures and sports invincible, but are like regular people, celebrities susceptible to the same illnesses as all of us. Each of these prominent figures can help shed light on just how pervasive breast cancer can be and how no one is immune. The list is extensive, but here are iust α few:



- Christina Applegate, actress
- Merideth Baxter.actress
- Ingrid Bergman, actress
- Shirley Temple Black, actress
- Judy Blume, writer
- Nancy Brinker, founder Susan G. Komen
- Diahann Carroll, actress, singer
- Sheryl Crow, singer
- Bette Davis, actress
- Melissa Etheridge, singer
- Edie Falco, actress
- Jane Fonda, actress
- Dorothy Hamill, Olympic champion figure skater
- Peggy Fleming, ice skater
- Betsey Johnson, clothing designer
- Hoda Kotb, TV host
- Joan Lunden, TV journalist and News anchor
- Linda McCartney, singer
- Olivia Newton-John, singer
- Nancy Reagan, former First Lady
- Lynn Redgrave,actress
- Robin Roberts, TV host
- Carly Simon, Singer
- Jaclyn Smith, actress
- Suzanne Somers, actress
- Dusty Springfield, singer
- Debbie Wasserman Schultz, politician
- Sandra Day O'Connor, first woman Supreme Court Justice
- Cynthia Nixon, actress, Sex in the City

fruits and veggies can help fight cancer



Cancer affects the lives millions of people across the globe. When detected early, cancer becomes a significantly less formidable foe, as survival rates for patients cancer whose cancer was detected early are much higher than those whose initial diagnosis came after the disease

had progressed into its later stages. But early detection isn't the only way to beat cancer.

According to the American Cancer Society, a healthy diet that includes at least 2 1/2 cups of fruits and vegetables each day can help men, women and children lower their cancer risk. Fruits and vegetables that have the most color, such as those that are dark green, red, yellow, and orange, tend to have the most nutrients. Fruits and vegetables are typically low in calories as well, which helps people maintain healthy weights. That's a significant benefit, as the ACS Cancer Prevention Study showed significant increases in cancer occurrence in people who are the most overweight.

The link between cancer and obesity is especially strong with specific cancers, including breast cancer after menopause and cancers of the colon, rectum, pancreas, kidneys, esophagus, and endometrium. What's more, studies have shown that obese men and women have a harder time battling cancer upon diagnosis. So while α diet rich in fruits and vegetables can help lower cancer risk, such a diet may even make it easier to battle cancer if diagnosed. LS138438

WNY Resource Sarah Thompson DiPaolo MS, RD, CDN, WNY Nutrition PLLS, 716-316-3722, www.wnvnutrition.com.

light and luscious eggplant pizza

filled with cancer fighting nutrients

Serves 8



This dish can be cut into small pieces to serve as an appetizer, or it can be a delicious light entrée. The eggplant, artichokes and tomatoes are loaded with cancer-fighting nutrients, and count toward your five daily servings of fruit and vegetables. To avoid the bitter taste of eggplant, salt both sides of the slices, let stand for 30 minutes, then rinse well in cool water. Pat the slices dry and use according to recipe.

Ingredients

- 1/2 package frozen bread dough, thawed
- 1/4 teaspoon olive oil
- 1 medium eggplant, sliced crosswise into 1/2-inch slices and grilled until browned
- 8 Roma tomatoes, sliced crosswise into 1/2-inch slices
- 1/2 cup artichoke hearts
- 1 tablespoon black olives, chopped
- 1/4 teaspoon garlic salt
- 2 tablespoons fresh basil, chopped
- 1 tablespoon Parmesan cheese
- 1/3 cup mozzarella cheese

Directions

- 1. Preheat oven to 350 degrees Fahrenheit.
- 2. Press bread dough onto a pizza pan or cookie sheet, forming a crust. Rub dough lightly with olive oil. Top crust with eggplant, tomatoes, artichoke hearts, and
- 3. Sprinkle with garlic salt, basil, Parmesan, and mozzarella cheese.
- 4. Bake 15 to 20 minutes on middle rack of oven until cheese is bubbling and crust is lightly browned.

Per Serving (approximate) 290 calories, 7 grams of fat.

cherries with ricotta & toasted almonds

warm cherries topped with luscious ricotta cheese and toasted almonds makes for a rich-tasting—yet calorie-conscious—treat



Ingredients for one serving:

- 3/4 cup frozen pitted cherries
- 2 tablespoons part-skim ricotta
- 1 tablespoon toasted slivered almonds

Preparation

Heat cherries in the microwave on high until warm, l to 2 minutes. Top the cherries with ricotta and almonds.

150 calories; 6 g fat; 2 g sat; 3 g mono; 10 mg cholesterol; 20 g carbohydrates; 6 g protein; 3 g fiber; 39 mg sodium; 329 mg potassium.

Source: EatingWell.com

5 great reasons to eat cherries

- 1. Cherries are a good source of potassium. Increasing evidence shows that a diet rich in potassium may help to control blood pressure and reduce the risk for hypertension and stroke.
- 2. Cherries are a source of melatonin. Melatonin is an effective means for reducing jet lag and promoting overall healthy sleep patterns.
- 3. Cherries have anti-inflammatory properties which studies suggest may help to control arthritis and gout.
- 4. Cherries contain antioxidants. Antioxidants found in cherries may help to reduce the risk of cancer as well as heart disease.

Cherries are a healthy snack. A serving size of 21 cherries has less than 100 calories.



Cancer Resources

National Comprehensive Cancer Network (nccn.org) American Cancer Society (cancer.org) Susan G. Komen (komenwny.org) National Accreditation Program for Breast Cancers (napbc.org) Patient Resource Cancer Guide (patientresource.com) New York State Cancer Services Program (health.ny.gov) Cancer Care (cancercare.org) The Pink Fund (thepinkfund.org) Breast Cancer Network of WNY (bcnwny.org) Hope for Two (pregnantwithcancer.org) Hope Chest (hopechestbuffalo.org) Cancer Wellness of WNY (cancerwellness.org) Hereditary Cancer (facingourrisk.org) National Lymphedema Network (lymphnet.org) Breast and Ovarian Care (brightpink.org) Oncology Rehab Partners (oncologyrehabpartners.com)

You Are Not Alone!





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"Those that think they have no time for healthy eating will sooner or later have to find time for illness." Edward Stanley



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