

# Coping with Cancer

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 Cancer Prevention and Control

WVU Mary Babb Randolph Cancer Center and Appalachia Center Network  
 A Program of the National Cancer Institute

## Objectives

*Participants will:*

- Learn some of the side effects of radiation therapy and chemotherapy
- Understand the difference between fatigue and depression
- Understand the role nutrition plays in relieving side effects
- Understand how to access more information on tobacco use through the National Cancer Institute's (NCI) Cancer Information Service at 1-800-4-CANCER (1-800-422-6237).

## Introduction

After you have been treated for cancer, you will have two ongoing health needs. First, you will want to take the health steps that doctors suggest for anyone your age. Second, you will have special needs in caring for your body based on your type of cancer, treatment, and current state of health.

Some survivors may need help in dealing with emotional or nutritional problems, and others may seek pain control therapy. To get a good picture of your individual needs, ask your doctor. He or she can let you know what you need to do this year—and in the future—to take care of your health.

## Basics of health care for cancer survivors

- Get regular checkups. In general, people who have been treated for cancer return regularly to the doctor every three to four months at first, and once or twice a year later. Ask your doctor how often you should be rechecked.
- Have good health habits: Eating right and getting enough sleep and exercise will help you feel better.

## Tips for managing your care

- Keep accurate, up-to-date records of all the medical care you receive for cancer and other conditions. Future decisions about your care may depend on how you have been treated in the past. If you move or go to several doctors, no one but you will have your complete history.
- Do things you enjoy, even if you don't feel perfect. Pleasure can be a powerful tool for health.

## Ask questions

You need information to carry out your role in managing your care. These facts are as important to quality of care as any other aspect of treatment. With this in mind, no question you have about your care is “dumb.” Many people take a tape recorder, write notes, or ask a friend along to help them remember everything that's said. It is also a good idea to take a list of questions when you visit your doctor. The following are some questions you may want to ask:

- What changes might I see that are not danger signs?
- What kind of diet should I have?
- What treatment options do I have for handling chronic pain, the return of cancer, or the long-term effects of therapy?

## Pain

Cancer pain can be managed effectively in most patients having cancer or a history of cancer. Although cancer pain cannot always be relieved completely, therapy can lessen pain in most patients. Pain management improves the patient's quality of life throughout all stages of the disease.

To treat pain, it must be measured. The patient and the doctor should measure pain levels at regular intervals after starting cancer treatment, at each new report of pain, and after starting any type of treatment for pain. The cause of the pain must be identified and treated promptly.

### **Patient self-report**

To help the health care provider determine the type and extent of the pain, cancer patients can describe the location and intensity of their pain, any aggravating or relieving factors, and their goals for pain control.

### **Management with drugs**

Pain management begins with drug therapy. It is effective, relatively low risk, inexpensive, and usually quick-acting.

People respond differently to drugs, even those within the same family of drugs. The World Health Organization (WHO) developed a 3-step ladder for pain management. Following this ladder, different drugs within a category should be tried before switching therapy:

- Use the simplest dosage schedules and least invasive methods of pain management first.
- For mild to moderate pain, use (if possible) aspirin, acetaminophen, or nonsteroidal anti-inflammatory drugs (NSAIDs).
- When pain lasts or increases, the doctor may add an opioid to aspirin, acetaminophen, or NSAIDs.
- If pain persists, the doctor may increase opioid potency or dose.
- The patient should take doses regularly (at scheduled times) to maintain a constant level of the drug in the body; this will help prevent a recurrence of pain.
- The doctor may prescribe additional doses of a drug that can be taken as needed for pain that occurs between scheduled doses.

### **Suggested program activities**

- To start, simply ask the questions that make up each section of the study topic before you hand out the lesson. Compare the participants' answers with the answers in the lesson.
- Gather additional information about coping with cancer from newspapers and magazines. Ask participants what they have seen on television news or talk shows. Discuss what participants have read or watched and compare it with the factual information provided in the lesson.
- Use the supplemental educational materials to give participants more information about coping with cancer.
- Make a list of those who will call the Cancer Information Service at 1-800-4-CANCER to talk with an information specialist about side effects and other cancer-related topics.
- Make a list of those who will "take the challenge" described in this lesson and follow up with them to see how they are doing on their project.

### **"Take the Challenge" activity**

Encourage participants to take one or more of the following challenges:

1. Call the Cancer Information Service!  
Call the Cancer Information Service at 1-800-4-CANCER and talk with a cancer information specialist about side effects or other cancer-related topics. Fill out the evaluation form at the end of your call and hand it in at one of your meetings.
2. Go online! Choose one of the following Web sites and find the answers to one or more of the following questions:

*<http://www.nci.nih.gov>*; NCI's primary Web site contains information about the Institute and its programs.

<http://cancertrials.nci.nih.gov> CancerTrials™; NCI's comprehensive clinical trials information center for patients, health professionals, and the public. Includes information on understanding trials, deciding whether to participate in trials, finding specific trials, plus research news and other resources.

<http://cancer.net.nci.nih.gov> CancerNet™; contains materials for health professionals, patients, and the public, including information from PDQ® about cancer treatment, screening prevention, supportive care, and clinical trials; and CANCERLIT, a bibliographic database.

- (1) What are some side effects of radiation treatments?
- (2) What are some ways to relieve pain from cancer?

Make time at future meetings to have participants report and share the information they gathered.

### Supplemental resources

Supplemental educational materials are available for this lesson. The Cancer Information Service's Partnership Program has NCI materials on coping with cancer for you to use with this study topic. Please see the order form for details.

Sources of National Cancer Institute information  
You may want more information for yourself, your family, and your health care provider. The following National Cancer Institute (NCI) services are available to help you.

### Telephone

Cancer Information Service (CIS); Provides accurate, up-to-date information on cancer to patients and their families, health professionals, and the public. Information specialists translate the latest scientific information into understandable language and respond in English, Spanish, or on TTY equipment.

Toll-free: 1-800-4-CANCER (1-800-422-6237)

TTY (for deaf and hard-of-hearing callers):  
1-800-332-8615

### Internet Web sites that may be useful:

<http://www.nci.nih.gov>; NCI's primary Web site; contains information about the Institute and its programs.

<http://cancertrials.nci.nih.gov> CancerTrials™; NCI's comprehensive clinical trials information center for patients, health professionals, and the public. Includes information on understanding trials, deciding whether to participate in trials, finding specific trials, plus research news and other resources.

<http://cancer.net.nci.nih.gov> CancerNet™; contains materials for health professionals, patients, and the public, including information from PDQ® about cancer treatment, screening, prevention, supportive care, and clinical trials; and CANCERLIT, a bibliographic database.

### E-mail

Cancermail; includes information about cancer treatment, screening, prevention, and supportive care. To obtain a contents list, send e-mail to [cancermail@icicc.nci.nih.gov](mailto:cancermail@icicc.nci.nih.gov) with the word "help" in the body of the message.

### Fax

CancerFax®; includes NCI information about cancer treatment, screening, prevention, and supportive care. To obtain a contents list, dial 301-402-5874 from a fax machine hand set and follow the recorded instructions.

### Reference

*National Cancer Institute. Cancer Rates and Risks. 4<sup>th</sup> edition. National Institutes of Health, 1998.*

**Coping with Cancer Lesson Order Form**

**Date mailed** \_\_\_\_\_

To order supplemental materials, you may call **1-800-4-CANCER (1-800-422-6237)** and follow the prompt that explains ordering process.

1. **Mail** the order form to:

Coping with Cancer Lesson  
Cancer Prevention and Control  
WVU Mary Babb Randolph Cancer  
PO Box 9350  
Morgantown, WV 26506-9350

2. **Fax** the order form to Carol Mangone at (304) 599-1552

**(Please allow 4-6 weeks for delivery)**

**Please mail to:**

Your name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

County: \_\_\_\_\_

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