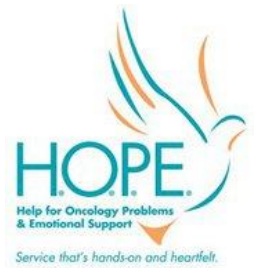


# H.O.P.E. LIFELINE



**H.O.P.E.**  
**President/Co-Founder**  
Barb Titanish  
**Assistant Director**  
Carol Nelson  
**Board of Directors**

Buddy Hart—Chair  
Cheryl Schroeder—Vice Chair  
Sue Holtzinger—Secretary  
Jack Tillett—Treasurer  
Melissa McDade  
Pete McGraw  
Deb Peters  
Dr. Doug Prince  
Jessica Rader  
Barbara Spurlock  
Amanda Pross  
Craig Sharnetzka  
Stacey Orndorff

**H.O.P.E. Lifeline**  
**Production Volunteers**

Jean Lillquist—Editor  
Jo Huber  
Kay Joy  
Cindy Moran  
Lynn Snook  
Marty Streett  
Rita Stephenson  
Pat Cosden  
Maria Ellis  
Mae Liggitt  
Roxanne McKinney  
Norma Lingenfelter

P.O. Box 279  
Stewartstown, PA 17363

H.O.P.E.'s Office Hours are Monday through Friday, 9:30—3.  
**Please call in advance** to set up an appointment for:  
• Intake  
• Wigs/hats/scarves  
• Pantry  
Please direct all calls to the H.O.P.E. office at 717-244-2174.

H.O.P.E. (Help for Oncology Problems & Emotional Support) is an all volunteer cancer support network that provides free assistance to cancer patients and their families facing the challenges of cancer. H.O.P.E. is a 501 (C)(3) non-profit funded through donations. Our office is located at 13275 Blymire Hollow Road, Stewartstown, PA. The official registration and financial information of Help for Oncology Problems and Emotional Support may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1 (800) 732-0999. Registration does not imply endorsement.

H.O.P.E. does not receive funding and is not affiliated with the American Cancer Society. Funding comes from donations made by private individuals and the civic/business community. Phone: 717-244-2174 or 717-244-2161.  
(E-mail: [barb@hopeforcancerfamilies.org](mailto:barb@hopeforcancerfamilies.org) [www.hopeforcancerfamilies.org](http://www.hopeforcancerfamilies.org))

***We're Coming Back.....***

*We may not have dates yet, but here are some events you can look forward to, in the order in which they'll occur.*

Pasta Dinner      H.O.P.E. Yard Sale

Country Fair and Auction      Golf      Vendor Show

Road Rally      Markets of Shrewsbury Yard Sale

Bull Roast      Voices for Hope Banquet

Bingo!

### Support Group Meeting

Still no in-person support group meetings, alas, and none planned for the foreseeable future.

But you know we're still here for you, and there is a wealth of information available on our Facebook page and website ([hopelifeline.org](http://hopelifeline.org)).

### INSIDE THIS ISSUE...

From the Editor's Desk	Pg. 2
Angel Corner	Pg. 2
March is Colorectal Cancer Month	Pg. 3
Coffee, Aspirin, and Cancer	Pg. 4
Valuable Info on Healthcare Directives	Pg. 5
Free Tax Assistance	Pg. 5

## FROM THE EDITOR'S DESK

What a difference a few weeks makes. Compared with a national peak of 314,093 cases reported to the CDC on January 8, 2021, the daily number of Covid-19 cases has declined by 69%. (Although the 97,309 cases reported on February 11 remains higher than what was seen during either of the first two peaks in the pandemic.) As of that same date, 46.4 million vaccine doses have been administered. Overall, about 34.7 million people have received at least one dose of vaccine, which is 10.5% of the U.S. population, and about 11.2 million people have received two doses of vaccine, about 3.4% of the population. Hospitalizations are down, and after a peak on February 4, 2021, of 5,189 deaths, that rate has fallen 30%.

We're not out of the woods by a long way, but spring does seem to be (metaphorically, at least) around the corner. Like the first flowers that poke their heads through the newly thawed ground, people are cautiously emerging from their homes to rejoin the world. An air of optimism is mixing with the winter air that still has us in its grip, and that optimism will strengthen just as the sun does to restore much that has been missing from our lives. Pause, take a deep breath, and pat yourself on the back for getting through a year like no other.

March officially ushers in spring (March 20), and normally we would be reminding you of upcoming events. Well, yes and no. **Golf** is a for sure—August 21. The **Voices for Hope Banquet** is tentatively set for September 16. We're also having our **bull roast** later that month and Carol is planning another neat fall **road rally**. **Bingo** will be back in November! The **pasta dinner** may be held in May, and summer will include a **flea market** and possible **auction**. Everything of course is contingent upon Covid, and every event will be held with all of the recommended precautions. So keep your fingers crossed and your (double?) masks on.

March is **colorectal cancer awareness month** and you can find information about that on page 3, on page 4 read about new positive research involving coffee and aspirin and cancer. Make sure you take time to read a very important article on page 5 about **advanced directives, living wills**, and more. This information was provided by the law firm of CGA and they have generously given us permission to share Tim Bupp's article entitled "Advanced Directives for Health Care: More Important Now Than Ever." As Mr. Bupp says in his introduction, "The current Covid-19 epidemic has brought into focus the importance of good estate planning. Wills, powers of attorney, and health care documents are more important now than ever. Preparing sound advance healthcare planning now can be simple, inexpensive, and can avoid confusion and stress later when health care is required but a patient is unable to express their wishes."

(Information for the articles on pages 3, 4, and part of 5 found in Cancer.org, Everydayhealth.com, Healio.com, Sciencedaily.com, and the New York Times.)

## H.O.P.E.'S ANGEL CORNER

BY BARB TITANISH, PRESIDENT & CO-FOUNDER H.O.P.E.



I only met Jane Snook a couple times, but there was no doubt that she adored and was proud of her three sons. And she had every right to be proud! Now, I'm sure as teenagers they gave her a run for her money, but their assistance has saved us a small fortune.

Oldest son **Craig** retired from working for the government and within a week he was volunteering for H.O.P.E. nearly full time. Craig is one of the Three Amigos who handles everything from mowing, to splitting, loading, and delivering wood. He worked with the Kinsley crew on renovations of the Haven and office and helped oversee the River Rock kids who volunteered.

Youngest son **Kurt Snook** and his son, **Nick**, helped us move from New Freedom to the Haven. He talked his boss into letting the company loan us use of a 26-foot box truck to move that day back in January 2020. Three loads of furniture were packed in so tightly a piece of paper wouldn't fit in between, thanks to Kurt's expertise.

Fast forward to 2021 and middle son **Kevin** steps up to help us with snow removal. Lots of snow removal! The Snook brothers have their own angel in heaven looking down smiling and saying, "Those are my boys!"



*"First, a  
howling blizzard  
woke us,  
Then the rain  
came down to  
soak us,  
And now before  
the eye can  
focus—  
Crocus.*

- Lilja Rogers

If you would prefer to receive our newsletter by email (and help us save postage), please send a note to our Assistant Director Carol Nelson, at [assistant@hopeforcancerfamilies.org](mailto:assistant@hopeforcancerfamilies.org), and she'll put you on our list. (And it will have color!)  
Thanks!

# March is Colorectal Cancer Awareness Month

An estimated 148,000 people in the United States will be diagnosed with colorectal cancer this year and about 53,200 will die of the disease, according to the American Cancer Society. Colorectal cancer is the second leading cause of cancer mortality in the U.S.

And it's no longer a disease associated only with older people. In fact, in a study published in 2017 in the Journal of the National Cancer Institute, it was found that people born in 1990 had double the risk of colon cancer and quadruple the risk of rectal cancer as someone born in 1950. In response to this, the ACS changed its guidelines in 2018 to recommend that regular screening for people at average risk of colorectal cancer begin at 45, rather than 50.

## Risk Factors

Here are the ones that we can control:

- Obesity or excess weight, especially around the midsection.
- A physically inactive lifestyle.
- A diet that includes lots of red meat (beef and lamb) and processed meat (certain luncheon meats and hot dogs).
- Smoking.
- Heavy alcohol use.

Risk factors not under a person's control include:

- Age (Although individuals can develop colorectal cancer at any age, people older than 50 are still at a higher risk.)
- A personal or family history of colorectal cancer or polyps.
- A personal history of inflammatory bowel disease, such as Crohn's disease or ulcerative colitis.
- African-American or Eastern-European Jewish heritage.
- Type 2 diabetes.

## Symptoms

Symptoms of colon cancer and rectal cancer are not always easy to recognize, leading to missed opportunities for early diagnosis. This is especially true in younger adults, one factor leading to their rise in cases. Many people don't experience symptoms at all until the disease has reached a more advanced stage, when it is more difficult to treat. Whatever your age, the following symptoms should prompt a visit to the doctor:

- A change in bowel habits – such as diarrhea, constipation, or narrowing of the stool that lasts more than a few days.
- A feeling that you need to have a bowel movement that's not relieved by having one.
- Rectal bleeding with bright red blood.
- Blood in the stool, which may make it look dark.
- Cramping or abdominal pain.
- Weakness and fatigue.
- Unintended weight loss.

Although people with colorectal cancer may not have rectal bleeding or blood in the stool, these are, for many people, the most identifiable signs of the disease. These symptoms occur when cancer bleeds into the digestive tract. This may occur slowly over years and can lead to a low red blood cell count, a condition called anemia. Blood tests that diagnose anemia may be the first step in the process of getting a colon cancer diagnosis or a rectal cancer diagnosis.

*[Continued on next page]*



*“Life is mostly froth and bubble, but two things stand like stone: friendship in another’s trials and courage in your own.”*

- Princess Diana

## Coffee, Aspirin, and Cancer

In a large group of patients with metastatic colorectal cancer, consumption of a few cups of coffee a day was associated with longer survival and a lower risk of the cancer worsening, researchers at the Dana-Farber Cancer Institute and other organizations reported in a study conducted last year. Investigators found that in 1,171 patients treated for metastatic colorectal cancer, those who reported drinking two to three cups of coffee a day were likely to live longer overall, and had a longer time before their disease worsened, than those who didn’t drink coffee. Participants who drank larger amounts of coffee – more than four cups a day – had an even greater benefit in these measures. The benefits held for both caffeinated and decaffeinated coffee.

In another study, published last month in the BMJ (British Medical Journal) researchers examined data from 16 studies enrolling over one million men in North America, Europe, and Japan. Overall, they found that drinking just one additional cup of coffee a day increased protection from prostate cancer by one percent. Those who drank the most (two to nine cups) had a nine percent lower risk of prostate cancer. The protective effect of coffee was even greater for advanced disease (producing a 12 percent lower risk) and the risk of dying (16 percent lower risk).

The reasons for coffee’s protective effects are not entirely clear, but researchers point to its anti-inflammatory effects, antioxidant properties, and its beneficial effects on blood sugar levels. Caffeine might also prove to be an important factor, for, unlike the colorectal cancer study findings, decaffeinated coffee did not appear to have the same benefits on prostate cancer.

For people who have a strong family history of cancer taking two aspirins a day has been found to reduce the risk of cancer. A study was done by the Universities of Newcastle and Leeds in which 861 patients with Lynch syndrome (an inherited condition that increases the risk of colon cancer, endometrial cancer, and several other cancers), which affects about one in 200 people. These people have a genetic problem with DNA repair. A group of 427 took two aspirin continuously for two years and 434 took a placebo. They took the aspirins/placebos for five years and were followed up five years after that. By the end of the tenth year there had been 19 new bowel cancers among those who had received aspirin and 34 among those on placebo. Said one of the researchers, “Before anyone begins to take aspirin on a regular basis they should consult their doctor first as aspirin is known to bring with it a risk of stomach complaints, including ulcers and bleeding. However, if there is a strong family history of cancer then people may want to weigh up the cost and health benefits of taking aspirin for at least two years.”

Another study involving aspirin conducted by researchers from the National Cancer Institute revealed that using aspirin at least three times a week appeared to improve survival in older adults with breast or bladder cancer. Aspirin use did not appear to increase survival in other cancers that were investigated in the study (esophageal, gastric, pancreatic, and uterine). The findings showed that participants who reported using aspirin at least three times a week had at least a 33 percent lower risk of dying from bladder cancer and a 25 percent lower risk of dying from breast cancer. However, aspirin use did not appear to influence risk for developing cancer altogether.

[Continued from previous page]

## March is Colorectal Cancer Awareness Month Screening

Because the increase in colorectal cancer diagnoses among people younger than 50 is on the rise, the American Cancer Society has adjusted its recommended first screening for people at average risk from age 50 down to 45. People who are in good health and expected to live at least 10 more years should continue regular screening through the age of 75.

There are several test options for colorectal cancer screening. In stool-based tests, the highly sensitive fecal immunochemical test (FIT) should be done yearly. The highly sensitive guaiac-based fecal occult blood test (gFOBT) should be done every year. The multi-targeted stool DNA test (MT-sDNA) should be done every three years. For visual exams, a colonoscopy is recommended every 10 years, a CT colonography (virtual colonoscopy) every five years, and a flexible sigmoidoscopy (FSIG) every five years.

# Vital Information For Health Care—Power of Attorney, Living Will, and ‘POLST’

Information written by Tim Bupp and published originally in the CGA Law Firm Newsletter.

## Power of Attorney

A healthcare POA appoints another person—perhaps a spouse, family member, or friend—to make health care decisions for you should you be unable to do so yourself. The document guides such a surrogate decision-maker so that no one needs to guess about your desires. By providing clear directions, family and friends can assist a loved one without mistaking their healthcare choices, and without confusion or stress to the family.

## Living Will

A living will provides directions for health care under the extreme circumstances of a terminal condition or permanent unconsciousness. In such circumstance, a living will might direct that futile life-sustaining treatments be withdrawn, and that health care be limited to palliative or pain-reducing care. A living will is often combined with a healthcare POA in a form known as an Advance Directive for Health Care and can be easily prepared for you by an attorney as part of your estate planning.

## POLST

Another document which supplements health care planning is a Physician’s Order for Life-Sustaining Treatment or POLST. A POLST provides more detailed instructions to one’s physician and caregivers regarding a patient’s preferred treatment, in preparation for last years or end of life. A POLST might give guidance to physicians regarding palliative care, hospice, or other end-of-life wishes. These instructions can aid loved ones in knowing your wishes at the time when such knowledge is critical.

## Be Certain to Follow Through

After your documents are prepared and signed, it is essential to assure that agents are in a position to access and use the documents as needed. Your documents should be shared with the agent, either by placing the documents in their possession or making the agent aware of their existence and location. Your treating physician should be made aware of or given your documents and contact information for your agent. Your attorney could also upload your documents directly into the records department of local hospitals, who can make sure that information would be available as needed by other doctors or facilities across the nation.

## Have ‘The Conversation’

Finally, it is most important to communicate your wishes with your family and agent. A sit-down talk that frankly addresses the need for end-of-life documents may be daunting to begin, but can be rewarding for all concerned. Having ‘The Conversation’ allows you to clearly communicate your wishes to your family and can provide understanding and peace of mind, both for them and you.

**Buy A Brick**

Brick Sizes  
4 x 8 \$100    8 x 8 \$250  
12 x 12 \$1000    24 x 24 \$2500

PLEASE VISIT  
[WWW.HOPELIFELINE.ORG/BUYABRICK](http://WWW.HOPELIFELINE.ORG/BUYABRICK)  
TO DOWNLOAD YOUR APPLICATION  
OR ORDER ONLINE VIA PAYPAL

Engraved commemorative bricks  
will be laid around our  
"Vacation from Cancer Retreat"

For more information  
Call the office 717-244-2174 or  
[assistant@hopeforcancerfamilies.org](mailto:assistant@hopeforcancerfamilies.org)

Help  
**H.O.P.E.**  
Support  
*H.O.P.E. Haven*

## Get Your Taxes Done For Free

Beginning February 4 and continuing through April 15, AARP Foundation is providing in-person tax assistance and preparation through its Tax-Aide program—and it’s completely free. AARP membership is not required. Here are the locations in York County:

Living Word Community Church  
717-771-9042  
Messiah United Methodist Church  
717-771-9042  
Dover Area Community Library  
717-292-6814  
Aldersgate United Methodist Church  
717-771-9042  
Hanover Church of the Brethren  
717-633-6353  
Union Fire Company Manchester  
717-771-9042  
Trinity Lutheran Church Wrightsville  
717-478-8588  
Red Land Senior Center  
717-938-4649  
Wrightsville Hope UMC  
717-479-8588

**H.O.P.E.'S**  
**NEW ADDRESS**

**Physical Address:**

13275 Blymire Hollow Rd., Stewartstown, PA 17363

**Mailing Address:**

P.O. Box 279, Stewartstown, PA 17363

Phone: 717-244-2174



*"Of all the forces that make for a better world, none is so powerful as hope. With hope, one can think, one can work, one can dream. If you have hope, you have everything."*

Visit Us on the Web  
www.hopelife.org  
http://www.hopeforcancerfamilies.org  
"Like" Us on Facebook:

RETURN SERVICE REQUESTED

H.O.P.E.  
Help for Oncology Problems & Emotional Support  
16580 Green Valley Court  
Stewartstown, PA 17363  
(717) 244-2174

Nonprofit Org  
U.S. Postage Paid  
Permit No. 61  
Shrewsbury, PA 17361