



October 2016

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If you know someone who might enjoy or benefit from receiving the Lifeline, please submit the person's name and address to:

H.O.P.E.
P.O. Box 175
Shrewsbury, PA 17361

H.O.P.E. LIFELINE



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 with offices on the second floor of the New Freedom Community Center at

150 East Main Street, New Freedom, PA 17349

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) 227-2824

H.O.P.E. Holiday Craft & Vendor Show

Saturday, October 22
8:30 a.m.—2 p.m.

**New Freedom Community
Building**
150 E. Main Street

50+ Crafters and Vendors
Chinese Auction/Raffle

**Delicious food provided by
Tasteful Occasions Catering**

**Admission: 2 cans of food for
the H.O.P.E. food pantry**



Support Group Meeting

Date: Wednesday October 12, 2016
Time: 7:00 p.m.
Location: H.O.P.E. Serenity Room
Speaker: To be Announced
Topic: To be Announced

H.O.P.E. Basket Bingo & Non-Perishable Food Drive

Sunday, November 6, 2016
Doors Open at 12:30
Bingo Starts at 2:00

New Freedom Community Bldg.

Tickets \$15 before November 4
\$18 at the door



Retired, Current, Limited Edition
Baskets

Refreshments for sale by
Tasteful Occasions

Donate Items for Food Pantry for
Chance to Win Prizes!

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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 717-227-2824.



*“You’ve gotta
dance like
there’s nobody
watching, love
like you’ll never
be hurt, sing like
there’s nobody
listening, and
live like there’s
heaven on
earth.”*

-William W. Purkey

FROM THE EDITOR’S DESK

As everyone is well aware, October is breast cancer awareness month. More money and attention are paid to this cancer than any other. Here are some 2016 statistics:

- About 1 in 8 U.S. women (about 12%) will develop invasive breast cancer over the course of her lifetime. A man’s lifetime risk of breast cancer is about 1 in 1,000.
- Breast cancer incidence rates in the U.S. began decreasing in the year 2000. Women under 50 have experienced larger decreases.
- For women in the U.S., breast cancer death rates are higher than those for any other cancer besides lung cancer. It is also the most commonly diagnosed cancer (besides skin cancers).
- A woman’s risk of breast cancer approximately doubles if she has a first-degree relative (mother, sister, daughter) who has been diagnosed with breast cancer. However, less than 15% of women who get breast cancer have a family member diagnosed with it.
- About 5-10% of breast cancers can be linked to gene mutations (BRCA1 and 2 are the most common). On average, women with BRCA1 have a 55-65% lifetime risk of developing breast cancer, while those with the BRCA2 mutation have a 45% risk.
- About 85% of breast cancers occur in women who have no family history of breast cancer. These occur due to genetic mutations that happen as a result of the aging process and life in general. The most significant risk factors for breast cancer are gender and age.

Throughout the remainder of this month’s newsletter will be information about breast cancer, including the basics as well as recent developments.

ON A POSITIVE NOTE...

Dr. Ann Partridge, senior physician at the Susan F. Smith Center for Women’s Cancers at Harvard-affiliated Dana-Farber Cancer Institute., said in a recent article in the Harvard Women’s Health Watch that there is no question that breast cancer treatment is improving. She made the following three points:

- DCIS patients now have tests that help determine the likelihood of their cancer progressing or recurring. “We are now better able to spare women who are at low risk from some treatments, including surgery, radiation, and chemotherapy,” Dr. Partridge said.
- Genomics and molecular biology are also contributing to improvements in both quantity and quality of life for women undergoing chemotherapy.
- For breast cancer survivors today, life is longer and better than it was for women who had breast cancer a generation ago. More than 90% of women are alive five years after their diagnosis, and they have fewer side effects.

H.O.P.E.’S ANGEL CORNER

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



Our kids went back to school with filled back packs and brand new clothes. In addition to the school supplies required by their schools, each child also received \$75 in gift cards for school clothes. And each family received groceries to supplement breakfasts and lunches.

None of this would have been possible without the wonderful support we got from everyone who sent in money. Nearly a hundred people donated thousands of dollars to help purchase the school supplies and gift cards. We’ve even been able to assist our newest families as a result of the donations.

Thanks also goes out to the customers of BB & T, People’s, and Fulton banks and J & B’s Restaurant for their donations of school supplies, and to the employees of BB & T who had fun one evening getting back-to-school items for our kids.

Breast Cancer Basics

Breast cancer often has no symptoms, but you may notice something you want the doctor to check. Keep an eye out for:

- A painless lump in the breast
- Changes in breast size or shape
- Swelling in the armpit
- Nipple changes or discharge

The earlier you find the disease, the easier it is to treat. Mammograms, an X-ray of the breast, can show tumors before they get large enough to feel. The American Cancer Society says women with an average risk level should get a yearly mammogram beginning at age 45. Continue them as long as you're in good health. The U.S. Preventive Services Task Force says until you're 50 you should talk to your doctor about your need for testing. After that, get a mammogram every 2 years from age 50 to 74. You don't have to stop at 75; the group just doesn't assess the pros and cons. You can work it out with your doctor.

Don't panic if a tumor is found. Eighty percent of breast lumps aren't cancerous. They often turn out to be harmless cysts or tissue changes related to your menstrual cycle. Also, let your doctor know right away if you find anything unusual in a self-check. If it is cancer, the earlier it's found, the better. And if it isn't, testing can give you peace of mind.

The only sure way to know a lump is cancer is to do a biopsy. This means removing a sample of the lump so it can be examined. Your doctor may be able to do this with a small needle. But you might need surgery to take part of or the entire lump for testing. The results will show whether it's cancer, and if so, what type. There are several forms of breast cancer, and treatments are carefully matched to each type.

Some types of breast cancer are fueled by the hormones estrogen or progesterone. Your doctor will call these receptors – they're proteins that pick up signals from the hormone that tell cells to grow. A biopsy can show if a tumor has receptors for estrogen (it's ER-positive) and progesterone (it's PR-positive). About two out of three breast cancers are hormone sensitive. There are several medications that keep the hormones from causing further cancer growth.

HER2-Positive Breast Cancer

In about 20% of patients, breast cancer cells have too much of a protein called HER2. This type is known as HER2-positive, and it tends to spread faster than other forms. It's important to know whether a tumor is HER2-positive, because there are special treatments for this type of cancer.

Breast Cancer Stages

If breast cancer is the diagnosis, the next step is to figure out how big the tumor is and how much of your body it affects. This process is called staging. Doctors use stages 0-IV to describe whether cancer is only in the breast, or if it has moved into nearby lymph nodes or spread to other organs, like the lungs. Knowing the stage and type of breast cancer will help your health care team create a treatment plan.

Survival Rates

The odds of beating breast cancer are strongly tied to how early you find it. The American Cancer Society says 100% of women with stage I breast cancer live at least 5 years, and many women in this group remain cancer-free for good. The more advanced the cancer, the lower this figure becomes. By Stage IV, the 5-year survival rate drops to 22%. But these rates will rise as more effective treatments are found.

Radiation Therapy

This treatment kills cancer cells with high-energy rays. It may be used after breast cancer surgery to wipe out any cancer cells that remain near the tumor site. It might be paired with chemotherapy to treat cancer that has spread to other body parts. Side effects include fatigue and swelling or a sunburn-like feeling where you were treated.

Chemotherapy

This treatment uses drugs to kill cancer cells anywhere in the body. They're often given by IV, but they can be taken by mouth or a shot. You might have it before surgery to shrink a large tumor or after to lower the odds of your cancer coming back. In women with advanced breast cancer, chemo can help control the cancer's growth. Side effects may include hair loss, nausea, fatigue, and a higher risk of infection.

Hormone Therapy

This is for women with ER-positive or PR-positive breast cancer. These cancers grow faster in response to the hormones estrogen or progesterone. Hormone therapy can block this effect. It might be used after surgery to help keep the cancer from coming back. Doctors sometimes give it to women with high risk factors to reduce the chances of getting breast cancer.

Targeted Treatments

These newer drugs pinpoint specific things inside cancer cells. For example, women with HER2-positive breast cancer have too much of a protein called HER2. Targeted therapies can stop this protein from making cancer cells grow. These drugs are often used along with chemo because they tend to have milder side effects.

Recent Developments and Findings in Breast Cancer

The MammaPrint Test

Testing and treatment of all types of cancers are changing by the minute. The MammaPrint is a new genomic test made by Agendia, a molecular diagnostics company, that is being used to analyze the activity of certain genes in early-stage breast cancer. Research suggests this test may eventually be widely used to help make treatment decisions based on the cancer's risk of recurrence within 10 years after diagnosis.

The MammaPrint test looks at the activity of 70 genes and then calculates a recurrence score that is either low risk or high risk. This can help doctors understand how a cancer is likely to behave and respond to treatment. Knowing if a woman has a high or low risk of early-stage breast cancer coming back might help women and their doctors decide if chemotherapy or other treatments to reduce risk after surgery are needed.

The MammaPrint test can be performed on fresh or freshly frozen breast cancer tissue or tissue that has been treated or "fixed" with a special solution to preserve genetic material. The test can also be done on a sample of preserved tissue that was removed during the biopsy or surgery.

Some insurance companies will pay for the total cost of the MammaPrint test, while others may pay a portion of the cost.

Exercise and Chemotherapy

Many women treated for breast cancer say they have problems remembering, thinking, and concentrating during and after treatment. These problems are commonly called "chemo brain" or "chemo fog" - though women treated with hormonal therapy also complain about memory issues. Doctors call these issues "cognitive impairment" or "cognitive problems." In a study conducted with over 1,400 women who had been treated with breast cancer, researchers found that women who self-reported more moderate or vigorous physical activity reported fewer memory problems.

Moderate to vigorous physical activity includes brisk walking, biking, jogging, or aerobic exercise class. Women who did more physical activity also had more self-confidence, less stress and anxiety, and less fatigue.

Another study looked at peripheral neuropathy (also called chemotherapy-associated neuropathy), a side effect that can be caused by some chemotherapy medicines. Peripheral neuropathy is nerve damage in the hands, feet, arms, or legs caused by chemotherapy. Symptoms include burning, tingling, or numbness in the hands and feet.

This study suggests that maintaining a healthy weight and exercising five or more hours per week may help reduce the risk of neuropathy in women being treated with taxane chemotherapy for breast cancer.

Communicate, Communicate, Communicate

A study suggests that women who talk to other people online shortly after being diagnosed with breast cancer may be more satisfied with their treatment decisions.

To do this study, the researchers surveyed 2,460 women who had been recently diagnosed with breast cancer about their use of online communication tools and their satisfaction with the treatment decision-making process.

The women were ages 20 to 79, and all were diagnosed with stage I to stage III breast cancer. They tended to use social media sites and web-based support groups to interact about treatment options and physician recommendations. Women also reported using all of these outlets to deal with the negative emotions and stress around their breast cancer diagnosis. They're using these communications to cope.

Remember: H.O.P.E. offers a support group the second Wednesday of every month. Participants include current and former cancer patients. It's a great forum for support and exchange of ideas.



*“You don’t always
have to
hold yourself
together.”*

II Corinthians



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, and she'll put you on our list. Thanks!

More Reversals(?) in the Science World

A "Roundup" Update

If you recall last year we wrote an article warning against the chemical herbicide glyphosate, known by its trade name Roundup, used by farmers to control weeds. Last year the International Agency for Research on Cancer announced that the chemical was probably carcinogenic.

But just as always seems to happen in the ever-changing worlds of medicine and science, others have studied the same collection of data and come to contrary conclusions. The European Food Safety Agency convened a group of experts who concluded that glyphosate probably does not cause cancer. So did the UN's Food and Agriculture Organization. And now the EPA (Environmental Protection Agency) has issued its own report which comes to the same conclusion. Outside scientists will review the report this month.

What are the "Good" Soaps?

In the most recent conclusions by the FDA (Food and Drug Administration) consumers do not need to use antibacterial soaps, and some may even be dangerous.

Last month the FDA issued a rule banning the use of triclosan, triclocarban, and 17 other chemicals in hand and body washes. There is some evidence that these chemicals can disrupt hormone cycles and cause muscle weakness, according to a senior attorney at the Natural Resources Defense Council, which originally asked the FDA to ban these. The FDA has given companies a year to take these ingredients out of their products or remove the products from the market. The ban applies only to consumer products, not to antibacterial soaps used in hospitals and food service settings.

The ruling is part of a broader effort by the FDA to encourage consumers to skip so-called antibacterial soaps and simply use regular soap and water. "There's no data demonstrating that over-the-counter antibacterial soaps are better at preventing illness than washing with plain soap and water," the agency said in a press release. Granted, this may not be easily done in public restrooms and other similar places, but it can certainly begin in the home.

Ho Ho Ho—Already!

- H.O.P.E.'s Annual Christmas Party is Sunday, December 4, 2 - 4 p.m., at Westminster Place in Stewartstown (like last year).
- Christmas Tea in the Woods is Monday, December 5 at Marty Streett's lovely log cabin. Seating for this popular event is limited, so call H.O.P.E. soon if you wish to attend (717-227-2824).
- To all our H.O.P.E. families with children: Marty the Christmas elf needs your wish list no later than October 14.



Veteran's Day Indoor Picnic

Friday 11/11/16

New Freedom Community Center

Doors Open at 6:00 p.m., Dinner Served at 6:30



Veterans, Seniors, and H.O.P.E. families are free

Hotdogs, Door Prizes, Ice Cream, Music, Fun

(\$5.00 Donation at the Door)

Get Your Red Hot Ravens Tickets Here!

Raffle for Club Level Tickets to see the Ravens beat the Dolphins.

Sunday, December 4 1 p.m.



Drawing on November 6

\$5.00 each or 5 tickets for \$20.00

Call 717-227-2824

One More Round of Golf for H.O.P.E!

Sunday, October 9 at the Bon Air Country Club

2287 Club House Road, Glen Rock

717-235-2091



(Or, if you would like to help by donation, sponsorships are available and silent auction items are being sought.)

The next time you dine out you may see news about H.O.P.E on TV!

- Mason Dixon Family Restaurant
- Seven Sports Bar & Grille
- Sons of Sicily Pizzeria & Grill
- Mignano Family Restaurant
- Messina Italian Restaurant
- Mamma's Pizza & Italian Restaurant

will be running information about H.O.P.E. as well as our coming events. Stay tuned!

Visit Us on the Web
<http://www.hopeforcancerfamilies.org>
"Like" Us on Facebook:
H.O.P.E. (Help for Oncology Problems and Emotional Support)

Upcoming Events

H.O.P.E.'s Support Group Meeting
2nd Wednesday of every month at 7pm
H.O.P.E.'s Serenity Room in the New Freedom Community Center
150 East Main Street, 2nd Floor (Elevator Available)

Everyone is Welcome!
(Cancer patients, care givers, families and friends)
Need transportation to the Support Group Meeting?
Call 717-227-2824



"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."

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H.O.P.E.
Help for Oncology Problems & Emotional Support
16580 Green Valley Court
Stewartstown, PA 17363
(717) 227-2824
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