



Honoring Breast Cancer Survivors

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Together for Breast Cancer Awareness

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In honor of breast cancer awareness month, Cascade Medical is offering free mammograms to those without insurance. Same-week appointments, 3D imaging, and fast results. Call 548-2512 for details.

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Wellness Place
compassionate cancer support

We give compassionate support and **FREE** resources to individuals, their families and caregivers through their cancer journey, from diagnosis to survivorship.

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www.CancerSupportNCW.org

We honor and remember.

Breast Cancer
-AWARENESS MONTH-

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Kathy Bangsund
Survivor: 25 years and 19 years.
Occupation: The Dwelling Place



Diane Bateman
Survivor: 18 years
Occupation: Retired Leavenworth Post Office



Marjory Blake
Survivor: 10 years, 6 months
Occupation: Retired -Cascade Medical



Pamela Brulotte
Survivor: 5 1/2 years
Occupation: Owner of Munchen Haus and Icicle Brewing Co. and Wellness Place Board member 2020

Breast Cancer Glossary

COMPILED BY CAROL FORHAN
Survivor

Educate yourself on these terms when your doctor talks to you about breast cancer.

Adjuvant therapy: Treatment such as chemotherapy, hormonal therapy, or radiation used following surgery to cure, reduce, or control cancer.

Aspiration: The use of a hollow needle and syringe to suction out fluid or cells from a cyst or tumor.

Atypical lobular hyperplasia: Abnormally shaped cells multiplying excessively in the normal tissue of a breast lobe.

Axillary: In the armpit.

Benign: Not cancerous.

Biopsy: Tissue or cells removed from the body and examined microscopically to determine whether cancer is present.

Calcifications: Small calcium deposits in breast tissue that can be seen by mammography.

Carcinoma: Cancer that arises from epithelial tissue (tissue that lines a cavity or surface); occurs often in the breast.

Chemo-prevention: The use of drugs or chemicals to prevent cancer.

Chemotherapy: Treatment of cancer with powerful drugs that destroy cancer cells.

Core needle biopsy: Use of a hollow needle to extract a sample of a lump or other suspicious tissue for examination.

Cyst: A lump or swelling filled with fluid or semifluid material.

Duct: A channel in the breast that carries milk from the lobule to the nipple during lactation.

Estrogen: A female sex hormone produced chiefly by the ovaries.

Estrogen receptor: A site on the surface of some cells to which estrogen molecules attach.

False negative: Test results that incorrectly indicate that the tested disease or substance is not present.

Fibroadenoma: A benign, fibrous tumor commonly found in the breast.

Free radicals: Toxic atoms produced by chemical reactions within a cell.

Hematoma: A swelling formed of blood. Infrequently occurs at the site of surgery, such as in a biopsy cavity after a lumpectomy.

Hyperplasia: Excessive cell growth.

Infiltrating cancer: A cancer that has spread from its site of origin into surrounding tissue.

In situ: Latin for "in place." As part of the term "ductal carcinoma in situ," it means that cancer cells exist and are still contained within the ducts of the milk-producing gland.

Lobules: Milk-producing glands of the breast.

Lymphedema: An accumulation of lymph fluid in the arm, hand, or breast that may develop when lymphatic vessels or nodes have been removed or blocked by surgery, or after radiation therapy. It can appear immediately after treatment or many years later.

Lymph nodes: Small, bean-shaped organs linked by lymphatic vessels. As part of the immune system, they filter out germs and foreign matter. Also called lymph glands.

Malignant: Cancerous.

Metastasis: The spread of cancer cells from the site of origin to another part of the body.

Metastases: Secondary cancers that form after cancer cells spread to other parts of the body.

Neoadjuvant therapy: Therapy with

anticancer drugs or radiation given before surgery in order to shrink a tumor.

Palpable: Able to be felt.

Progesterone: A hormone produced by the ovaries and adrenal glands; essential for healthy functioning of the female reproductive system.

Radiation therapy: The use of x-rays at very high doses to treat or control disease.

Seroma: An accumulation of lymphatic fluid under an incision. Content provided by MammoSite Breast Cancer Information. www.mammosite.com

Screening saves lives by helping find breast cancer early. Finding cancer early may give you more treatment options, including Breast Conserving Therapy instead of a mastectomy. Get your mammogram. Tell your friends, mothers, sisters, aunts and daughters to do the same. Be a Friend. Tell a Friend. Get Your Mammogram.

Information from American Cancer Society

October is Breast Cancer Awareness Month

CAROL L. FORHAN
Survivor

Pink Ribbons, Pink Shirts, walks, runs, fundraisers, and now in 2020 because of the COVID-19 we have virtual auctions, benefits, and other events that we hope will help raise more AWARENESS and money in our communities.

What is so special about this month of October?

It is like other months that bring awareness of a special need and every disease or affliction now has a colored ribbon to commemorate their cause, whether it is Heart Month, Diabetes Month, Alzheimer's Month, and so on. October 1-31 is a campaign month intended to educate people about the importance of Early screening and Detection of Breast Cancer. But this month is personal for me. It was my personal fight with breast cancer at a young age that had no actual known cause. At the age of 43 I had my first mammogram, and I had just learned how to do breast self-exam by watching a TV program on self-exam. I had a close friend at the age of 39 years old diagnosed with breast cancer and she encouraged me to get a mammogram after I felt a lump in my armpit. I am so thankful for her encouragement because I felt she saved my life, as I was then diagnosed with Stage 2B-breast cancer with all of my lymph nodes involved on the same side.

Breast cancer effects 1 in 8 women who will get diagnosed with cancer in her lifetime, but some men actually can get breast cancer too. Many years of research has been done

on this disease, and breast cancer comes in many forms and stages. We know about the BRAC genes, but not all breast cancer is inherited and HER-2. Great strides have been made in research to find the cause and medicines and therapies are developed to kill the cancer cells. Some treatments can make one lose a breast(s), hair, self-esteem and dignity, and unfortunately some die.

We can replace a breast with a prosthesis or with reconstructive surgery or do nothing, our hair will grow back as well as our self-esteem and dignity. Many women work through the process day by day, whether at a job or career and/or keeping up a home, children, spouse, daily chores and just day to day living.

Many kinds of friendships develop, help and encouragement from another survivor, and support groups may become a part of your life for now, (if you choose too.) We move on, some tell others of their survivorship some tell no one. When we do the survivors' page, in our NCW Media newspapers the first week of October, we are happy to show our smiling faces that we are surviving and thriving. If you know of someone that didn't tell then that is a personal choice and is respected.

Thirty years ago in October while living in Montana, as I mentioned before, I was diagnosed with breast cancer, with no known family history. I survived the treatments of surgery, Chemo and other drugs and therapies. I joined a support group, and called on a Reach to Recovery support person at the American Cancer Society, all while I still worked

at 2 jobs, and cared for my family, and my family and friends cared for me. Support is very important to recovery.

I recovered through a long process because of the best treatments available at the time and most of all my Faith. I promised God if I get through this I will always continue to be his servant. I became involved in research, funding, and education. After my final treatment, I started a women's support group and I became an ACS Reach to Recovery volunteer helping the newly diagnosed and her family understand what they will be going through. I continued to be an advocate for all women to get free education, and low-cost and free mammograms for the under-served. I became an advocate and president of a California organization associated with the Y-ME National Breast Cancer Organization headquartered in Chicago, now called * Breast Cancer Network of Strength - a 24-hour breast cancer hotline, 1-800-222-2141 and Networkofstrength.org, they have help in all languages.

Breast Cancer was my #1 fighting cause and it still is. I just wanted to give back and help someone else through the process.

Though it is scary, Cancer does not have to be a death sentence, and cancer is not a one person disease, it affects the whole family.

A few things that are very important to remember and you will be reminded especially in October Awareness Month.

Get a mammogram. Know your family history, if a relative like, mom, grandmother, aunt have or had breast cancer,

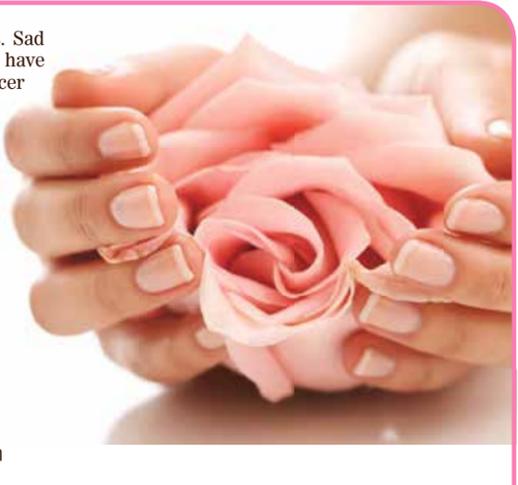
depending on your age, recommended year is 45 or earlier if you have a family history and a consultation with your doctor. Learn to do breast self exam. While living in California, we were invited into the health classes in the schools to teach the young girls about breast cancer and self-exam. Contact your doctor or hospital and the American Cancer Society for free information. 1-800-ACS, or www.cancer.org

When or if you are diagnosed, you have the right to get a second or even a third opinion. Surgery is not always the answer, talk to your team of doctors and nurses, and other caregivers. BE an advocate for yourself, or take someone with you to be an advocate. Ask questions, do your research, but do not just rely on internet information, it can be misleading. There are also some great books and magazines you can read. One of the best books about the breast anatomy and tons of information, is Dr. Susan Love's Breast Book. There are different therapies and opinions out there. Thirty years ago I was not expected to live "5" years, and years ago I heard the phrase "I want to see Breast Cancer eradicated in my life time", and it still hasn't been eradicated. I still have Hope and Faith that it will happen before my 4 granddaughters have to deal with it. I thank God everyday that I have another day to enjoy, by continuing my faith career as an ordained deacon in my church. A business owner, a community leader and supporter of many causes. Have Faith my friend, I will support you as well. *Sincerely, Carol Forhan, 30 years, Surviving and Thriving!*

During our 20 years of compiling the Breast Cancer Survivors' pages, many of these ladies have moved, no longer are participating at this time or have died. Our sincere Best

Wishes to all of our Survivors. Sad remembrances of those who have passed away either from the cancer or other causes throughout these twenty years.

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|---------------------|---------------------|--|
| Joan Baldwin | Wendi Krieg | Wendy St. Germain |
| Gale Bates | Verna Lotts | Dorothy Spanjer |
| Carla Carey | Beverly Lobe | Lori Vanderbrink |
| Bev Carlson | V Gay Neese-Sweet | Camieon Voss |
| Janice Clark | Mary Ellen McKinney | Julie Williams |
| Terri Clarke | Jodi Ostrem | * In Memory of these ladies who have passed away. |
| Floy Detwiler, M.D. | Dorene Parise | * Grace Clausen |
| Joy Fields | Elizabeth Peyrollaz | * Jessica Green |
| Elsie Fogelstrom | Winnifred Pflugrath | * Mary Newberry |
| Carol Hanson | Kelley Rose | * Marie V. Peck |
| Pat Hills | Terri Scenard | * Judy M. Peck-Cameron |
| Sonja Hurt | Kara Shephard | * Charlotte Turner |
| Jordi Kimes | Dorothy Shipley | |
| Dorothy Kellison | Camille Stemm | |





Breast Cancer Awareness Month



Carol L. Forhan
Survivor: 30 years
Occupation: NCW Media, co-owner & ad manager, Ordained Episcopal Deacon, and UVCares Board member.



Lisa Halseth
Survivor: 5 years, 2 months
Occupation: Wine,Hats/Toys, and Hi-Tech Specialis



Deborah Hartl
Survivor: 13 years, 10 months
Occupation: HR Director, Sleeping Lady, Trail runner



Rebekah Nugent
Survivor: 13 years, 11 months
Occupation: Retired



Kris Taylor
Survivor: 12 year, 4 months.
Occupation: Financial Advisor



Carolyn Wilson
Survivor: 14 years
Occupation: Leavenworth City Council, Law Enforcement

Q: I'm starting radiation soon for breast cancer. How can I help keep the treatments from burning my skin?

During radiation treatments for cancer, nearly 8 out of 10 people will develop some form of skin irritation, called "radiation dermatitis". Radiation often creates redness and warmth to the area, much like having a mild rash. Skin may also become more sensitive to touch and feel "tight." As radiation treatments continue, skin will often feel "dried out", start itching, and can eventually peel off to expose raw, red patches that ooze a clear fluid. Your skin is more likely to become irritated by radiation if you have another skin surface rubbing up against the skin being treated, like under large breasts or your armpits. People who smoke, are diabetic, or who had a previous surgical procedure in the treated area are more likely to develop radiation dermatitis. Post-radiation skin irritation tends to peak about a week after treatment. To reduce your risk of radiation dermatitis, treat your skin gently. Avoid rubbing or

scratching the area being radiated. Drinking plenty of water and applying moisturizing cream to the area faithfully can help keep your skin from peeling. It's okay to wash with soap. Washing your skin gently with mild soap and water has been shown to cause less skin reaction than just rinsing with water. Most patients starting radiation treatment are advised to use a "mild, non-alkaline soap, preferably unscented." Unfortunately, there isn't much agreement about which soaps are best and no clear evidence that any specific soap is superior. Mild soaps like Dove®, Ivory®, or Neutrogena® are considered safe to use, while most experts agree that highly scented soaps such as Coast® and Irish Spring® should be avoided when undergoing radiation treatment. You can safely wear deodorant or antiperspirant during treatment unless the skin of your armpit develops a

cut, scratch, or blister. Applying a moisturizer after radiation sessions is one of the best ways to protect your skin from dryness, irritation, and skin breakdown. Your skin consists of a series of layers of flattened cells that form a flexible, self-renewing barrier that protects your body against exposure to infection and toxins. Deep in your skin, your cells start out nice and plump, then gradually dry out, creating thin, overlapping layers that are water-resistant. As the top layer rubs or flakes off, it exposes the next layer down, continuing the cycle. Ceramide molecules support the barrier function of healthy skin. A lower level of ceramide is found in dry, damaged skin than in healthy skin. Applying ceramide-rich creams can help heal skin damage. Lotions and creams containing these vitally important compounds can restore skin integrity faster than creams containing only traditional moisturizing agents.

CeraVe® Moisturizing Cream has 3 essential ceramides. I compared it to my previous favorite, Arbordoun's Abundantly Herbal Calendula Cream because I wanted to decide for myself if the claims about ceramides were real or just good marketing. The CeraVe® was impressive! My skin absorbed it quickly, it didn't feel greasy, but it made my skin feel super smooth, even hours later. Another favorite moisturizer of mine is Arbordoun's Abundantly Herbal Calendula Cream, around \$15 for a 4-ounce jar. With olive oil, calendula, and lavender, Arbordoun's helps protect your skin from radiation damage. However, it takes a little time to absorb completely. I always let it soak into my skin for about 5 minutes before putting on clothes so the fabric doesn't stick to it. You can also apply pure Aloe Vera juice directly to your skin for protection. My stepmother, Joyce, used Trader Joe's Aloe Vera Juice

after each radiation session and didn't develop any burns. **Here Are 5 Tips to Help Protect Your Skin During Radiation Treatment:**

- 1. Avoid rubbing or scratching.** Itching causes the urge to scratch even when you sleep, so keeping your fingernails cut short and wearing cotton gloves or socks over your hands at night can really help.
- 2. Stay out of hot water.** Avoid using hot water or strongly scented soaps when washing or bathing.
- 3. Don't scrub.** Treat your skin gently. Avoid washing using harsh scrubbing tools like exfoliating cloths, rough washcloths, or loofahs.
- 4. Keep yourself hydrated.** Irritated skin loses water more quickly, making it feel dry and itchy. Drink plenty of water to help keep your skin well hydrated.
- 5. Apply a soothing cream.** Support the barrier function of your skin by protecting it after each radiation treatment. Moisturizing creams containing ceramides (CeraVe®, Curel®) or calendula can be incredibly helpful.

Dr. Louise Achey, Doctor of Pharmacy, is a 40-year veteran of pharmacology and author of Why Dogs Can't Eat Chocolate: How Medicines Work and How



Ask... Dr. Louise
YOU Can Take Them Safely. Check out her NEW website TheMedicationInsider.com for daily tips on how to take your medicine safely. ©2020 Louise Achey

- LOCAL SUPPORT**
- * Cancer Care of NCW, Inc. Our House, Wenatchee: 663-6964 or email: cancare@nwi.net
 - * Wellness Place, Wenatchee, 888-9933. Support groups, and resources.
 - * Cascade Medical, Leavenworth, 548-5815.
 - * Confluence Health/Wenatchee Valley Medical, 663-8711 x 64100
 - * Confluence Health, Breast, Cervical and Colon Cancer Health Program
 - * EASE Cancer Foundation, Cashmere: 860-1322 or www.easecancer.org
 - * Lake Chelan Community Hospital, Chelan, 682-3300
 - * Columbia Valley Community Health, 662-6000
 - * Three Rivers Hospital, Brewster, 689-2517
 - * Family Health Center, Brewster, 509-422-7629, 800-660-2129
 - * Seattle Cancer Alliance, 800-804-8824, www.seattlecca.org
- NATIONAL SUPPORT:**
- * American Cancer Society, (ACS) 800-ACS-2345, www.cancer.org. Programs include: I Can Cope, Look Good, Feel Better, LookGoodFeelBetter.org, 800-395-LOOK
 - Reach to Recovery, a one to one survivors' help program.
 - New Birthday Campaign: Less Cancer, More Birthdays. MoreBirthdays.com, Facebook and blog OfficialBirthdayBlog.com or Cancer.org/circleofsharing.
 - * American Society for Therapeutic Radiology and Oncology, 703-502-1550, www.astro.org.
 - * American Society of Plastic Surgeons, 800-514-4340, www.plasticsurgery.org.
 - * AVON Foundation, www.avonfoundation.org
 - * Blood & Marrow Transplant Information Network-Seattle, www.seattlecca.org/bmt, bmtinfo.net
 - * Breast Cancer Network of Strength -24-hour breast cancer hotline 1-800-222-2141. Networkofstrength.org/
 - * Dr. Susan Love Foundation for Breast Cancer Research, 1-310-828-0060 x 157
 - * Living Beyond Breast Cancer, 855-807-6386, www.lbbc.org.
 - * National Breast Cancer Foundation-1-972-248-9200, NationalBreastCancer.org
 - * National Coalition for Cancer Survivorship, Cancerversary.org
 - * Susan G. Komen For the Cure, www.komen.org
 - * The Breast Cancer Alliance, www.breastcanceralliance.org
 - * National Lymphedema Network, 1-510-809-1660, www.lymphet.org.
 - * SHARE (Breast Cancer Hotline), 1-866-830-4576, 844-ASK-SHARE, or www.sharecancersupport.org
 - * Vital Options International, 1-800-477-7666, www.vitaloptions.org
 - * Zero Breast Cancer: 1-415-507-1949, www.zerobreastcancer.org
- Free Cancer magazine: print and online: CancerToday, American Association for Cancer Research, 615 Chestnut St. 17th floor, Philadelphia, PA 19106

BREAST CANCER FACTS

COMPILED BY CAROL FORHAN

Survivor
The two main risk factors for breast cancer are: Being female and getting older.

Statistics
Breast cancer is the second most common cause of cancer for American women except skin cancer, and the overall cause of cancer death in women between the ages of 20 and 39. In the United States, one in 8 women will develop breast cancer in her lifetime. An estimated 276,480 new cases of invasive breast cancer are expected to occur in women in 2020, with an estimated 48,530 additional cases of in-situ (non-invasive) breast cancer. 64% of breast cancer cases are diagnosed at localized stage for

which the 5-year survival is 99%. There are more than 2.4 million women in the United States with a history of breast cancer. 42,170 or 1 in 39 women (3%) will die. But there are 3.8 million survivors in the USA. In the United States, breast cancer is expected to be newly diagnosed every three minutes, and a woman will die from breast cancer every 13 minutes.

Breast cancer in men
Though rare, 2,620 new cases of invasive breast cancer are expected to be diagnosed, in men in 2020. 520 will die. Black men have the highest breast cancer incidence over all, Hispanic men have the lowest. Median age of diagnosis for men in the U.S. is 68 years old. Breast cancer in ethnic groups African American women have a

higher breast cancer death rate than women of any other racial or ethnic population. American Indian/Alaska Native females have the lowest breast cancer incidence rates.

Breast cancer and age
The risk of breast cancer increases with age: About 18 percent of diagnoses are among women in their 40's and 77 percent of women with breast cancer are older than 50 when they are diagnosed. White women have a higher incidence of breast cancer than African American women after age 40, while Africa American women have a slightly higher incidence rate before age 40.

Risk and recurrence of breast cancer
Postmenopausal women with early breast cancer are at their greatest

risk of disease recurrence during the first five years after diagnosis. The absolute number and percentage of recurrences in the first five years after surgery is much highest than the following five to 10 years. Treatment received during these first five years is paramount in combating the disease.

Early Detection
One of the earliest signs of breast cancer can be an abnormality that shows up on a mammogram before it can be felt. The most common signs of breast cancer are a lump in the breast, abnormal thickening of the breast, or a change in the shape or color of the breast. Finding a lump or change in your breast does not necessarily mean you have breast cancer. Additional changes that may also be signs of breast cancer include: Any new, hard lump or thickening in any part of the breast/and armpit. Change in size or shape.

Dimpling or puckering of the skin. Swelling, redness or warmth that does not go away. Pain in one spot that does not vary with your monthly cycle. Pulling in of the nipple, nipple discharge that starts suddenly and appears only in one breast. An itchy, sore or scaling area on one nipple. It is important for women to practice the elements of good breast health. It is suggested women obtain regular mammography screening starting at the age of 45, or earlier if you have a family history. Obtain annual clinical breast exams, perform monthly breast-self exams and obtain a risk assessment from a physician.

This information was acquired from the American Cancer Society, 1-800-ACS-2345. Or www.cancer.org. and The Susan G. Komen organization.



Early Detection is the Best Protection.

Breast Cancer
AWARENESS MONTH

confluencehealth.org

