

Questions to Ask Your Doctor about Cancer

Learning that you have cancer can be a shock, and you may feel overwhelmed at first. When you meet with your doctor, you will hear a lot of information. These questions may help you learn more about your cancer and what you can expect next.

Questions about Your Diagnosis

- What type of cancer do I have?
- What is the stage of my cancer?
- Has it spread to other areas of my body?
- Will I need a specialist(s) for my cancer treatment?
- Will you help me find a doctor to give another opinion on the best treatment plan?
- How serious is my cancer?

Questions about Cancer Treatment

- What are the ways to treat my type and stage of cancer?
- What are the benefits and risks of each of these treatments?
- What treatment do you recommend? Why do you think it is best for me?
- When will I need to start treatment?
- What are the possible side effects of the treatment?
- Are there any lasting effects of the treatment?
- Would a clinical trial (research study) be right for me?

Other Questions

- What other services are available to help and support me during and after treatment?
- How do I contact you if I have more questions?

Content modified from *Questions to Ask Your Doctor About Cancer* from the National Cancer Institute.

You may have questions about other topics, certain types of cancer, or treatments.

For more help and information, contact the G. Mitchell Morris Cancer Learning Center at Huntsman Cancer Institute:

Phone: 1-888-424-2100 toll free

Email: cancerinfo@hci.utah.edu

What is Melanoma?

What is Melanoma?

Melanoma is a skin cancer. This type of skin cancer begins in cells called melanocytes. Melanocytes give color to the skin and other tissues. Most often, melanoma begins in a mole on the skin. Sometimes it happens in other areas such as the eye.

Doctors rate cancer by stages after making a diagnosis. Staging helps the doctor plan the best treatment. Stages for melanoma run from stage 0 to stage IV. The higher the stage of cancer, the more severe the disease.

Melanoma is more dangerous than other skin cancers. Melanoma can often be found early when it is easier to treat. If not found early, it can spread to other parts of the body. This makes it harder to treat.

Types of Melanoma

- Superficial spreading melanoma
 - Grows along the top portion of your skin before growing into the deeper layers.
 - Most common type diagnosed in younger people.
- Nodular melanoma
 - Grows quickly towards the second layer of your skin (dermis).
 - The second most common type of melanoma.
 - Often diagnosed after it has spread to other layers of the skin.
- Lentigo maligna melanoma
 - Slow growing
 - Found in areas that have had a lot of exposure to the sun in older adults (face, ears, or arms).
- Acral lentiginous melanoma
 - Not related to ultraviolet light exposure.
 - Found on the palms of the hands or soles of the feet, including fingernails and toenails.
 - The least common type of melanoma.
- Mucosal melanoma
 - Found in tissues that line body cavities and hollow organs. This tissue is mucosal tissue.
 - Most commonly found in the mouth, nasal cavity, and esophagus.
 - Less commonly found in the rectum, urinary tract, and vagina.

- Ocular melanoma
 - Melanoma found in the eye
 - Two types of ocular melanoma:
 - Uveal
 - Conjunctival

Melanoma Risk Factors

- Exposure to ultraviolet (UV) rays through tanning beds or sun.
- Fair skin and blue, green, gray, or light-colored eyes.
- Blonde or reddish hair.
- More than 50 moles.
- Personal or family history of melanoma.
- Atypical mole and melanoma syndrome (AMS): when an individual has a large number of atypical moles.

Tests Used to Diagnose Melanoma

At an appointment with your doctor, they will review your medical history. Your doctor will provide a physical exam, along with a full-body skin exam. If they find anything of concern, they may choose to perform a biopsy.

A biopsy removes all or part of a tumor. A doctor called a pathologist will look at it under a microscope. There are many different types of biopsies. Your doctor will choose the best one for you.

1. Excisional biopsy: The doctor removes the entire tumor.
2. Incisional biopsy: The doctor removes a piece of the tumor.
3. Punch biopsy: The doctor removes a small but deep piece of the tumor.
 - a. This biopsy is done if on the face, ear, finger, toe, and palm of the hand or sole of the foot.
4. Shave biopsy: The doctor removes the top two layers of the skin (epidermis and part of the dermis).

After a skin biopsy confirms melanoma, doctors may recommend a biopsy of the lymph nodes to check to see if cancer has spread.

- Lymph node biopsy
 1. Sentinel lymph node biopsy-surgery: The doctor removes one or more nearby lymph nodes to test for cancer cells.
 - a. The sentinel lymph node is the first lymph node to which cancer cells will likely spread from the primary (first) tumor.
 2. FNA (fine needle biopsy): The doctor collects a sample of a lymph node or lesion felt by the doctor, using a fine needle done in the clinic.
 3. Excisional lymph node biopsy: The doctor removes enlarged lymph nodes through a small surgical incision in the skin.

Your doctor will receive a pathology report with results from the biopsy. This report provides details about the tumor. Your doctor can look at this report, and share them with you, to help make treatment decisions.

Talk with your doctor if you are interested in learning what your pathology report says. The pathology report includes many important details pertaining to your tumor.

New Diagnosis of Melanoma

Disease Staging

Cancer stages show whether cancer has spread within or around the skin or to other parts of the body. Cancer spreads in the body in three ways: through tissue, the lymph system, or the blood. Knowing about the different stages can help doctors decide what treatment would be best.

There are two types of staging; clinical stage and pathologic stage. The clinical stage is based on the physical exam and skin biopsy. The pathologic stage is based on the results of the biopsy.

Two different ways to explain your cancer stage are TNM and 0-IV. TNM staging helps describe the Tumor, Nodes, and Metastasis, in detail. We use this staging to help us group tumors into different stages ranging between 0-IV.

T (Tumor): Refers to the tumors size.

N (Node): refers to the number of lymph nodes that have cancer.

M (metastasis): Refers to whether the cancer has metastasized. Metastasized means the cancer has spread to other parts of the body.

Stages of Melanoma:

Local Melanoma

Stage 0: Also known as melanoma in situ. At this stage, the melanoma is in its original site.

Stage I: There is no cancer in the lymph vessels, lymph nodes, or distant organs.

Stage II: This stage is divided into 3 groups (A, B, and C) based on tumor thickness and ulceration status. There is no cancer in the lymph vessels, lymph nodes, or distant organs.

Regional Melanoma

Stage III: The melanoma has spread to nearby lymph vessels, lymph nodes and/or nearby sites.

Distant Metastatic Melanoma

Stage IV: The melanoma has spread to one or more distant sites.

Treatment options for Stage 0-IV Melanoma

Treatments for melanoma may be different depending on the stage of melanoma. Talk with your doctor about what treatment options are best for you.

Local Excision

During this surgery, your doctor will remove the tumor and a rim of the healthy skin around it. The doctor will look at the healthy skin to see if the cancer has started to spread.

Staged Excision

The goal of a staged excision is to remove the cancer and keep as much healthy tissue as possible. This is done in the clinic under local anesthesia. Your doctor will send the removed tissue to a lab. Doctors look through a microscope to make sure all the cancer has been removed. You will be bandaged up and asked to wait while the tissue is looked at. This takes about two hours. If the tissue shows they got all the cancer, your doctor will repair your wound. If there is more cancer, your doctor will take more tissue and send it to the lab. The doctor will repeat the procedure until all the cancer is gone.

Sentinel Lymph Node Biopsy

The doctor takes a sample (biopsy) from the sentinel lymph node to check for cancer cells. A sentinel lymph node is the first lymph node to which cancer cells are likely to spread from the original tumor.

Your doctor may do a lymphoscintigraphy test to find a sentinel lymph node.

Wide Excision

In this surgery, your doctor will remove the tumor and the rim of healthy skin around. After surgery, if the area removed is large, you may need skin grafting to help heal.

Therapeutic Lymph Node Dissection (TLND)

This procedure takes out healthy lymph nodes around the cancerous lymph nodes. This helps prevent the cancer from spreading to other parts of the lymphatic system.

Immunotherapy

This therapy works with the body's immune system to fight melanoma. Interleukin-2 and ipilimumab are examples of immunotherapies used for stage IV melanoma.

Chemotherapy

These drugs kill cancer cells and prevent them from spreading to other areas of the body.

Targeted therapy. These medicines stop the growth and spread of cancer by blocking molecules involved in tumor growth.

Clinical Trials

These studies test new cancer treatments. Talk with your doctor if you would like to participate in a clinical trial or have questions about research studies.

Palliative Therapies

Used to relieve symptoms and improve quality of life, these therapies include surgery to remove lymph nodes or tumors and radiation therapy to the brain, spinal cord, or bone.

Most people will receive more than one type of treatment. Some treatments help shrink a tumor before the primary treatment. Other treatments kill any remaining cancer cells after the primary treatment. Each of the above treatment options may fall under any of these categories, with surgery often considered the primary treatment for melanoma.

Making Treatment Decisions

Deciding on which treatment option is best for you can be hard. Do whatever you need to do to feel confident about your diagnosis and treatment plan. Here are some options that may help you make treatment decisions.

- Obtain a second opinion.
- Join a support group. Every treatment option has risks and benefits. Talking to others may help you learn about benefits and risks you have not thought of.
- Talk with your doctor
 - Your doctors know the science behind your plan but you know your concerns and goals. By

working together, you can decide on a plan that works best for you when it comes to your personal and health needs.

- Ask a health educator for resources and information on treatment. Specialists can answer your questions and locate helpful information in our free cancer resource library, the G. Mitchell Morris Cancer Learning Center
 - Call toll free 1-888-424-2100
 - Visit the sixth floor of the cancer hospital
 - Email cancerinfo@hci.utah.edu
 - Text 801-528-1112 (text only)

What Can I Expect After Treatment?

Regular Visits to Your Doctor

The risk that your melanoma could return is high. You should follow up with your doctor every three months for the first year after surgery and every six months for two to five years after. After that, your doctor may recommend a follow-up exam every year.

Skin Self-Exams

1. Examine your skin once a month to get familiar with your own moles and freckles.
2. Look at your body from all sides in front of a mirror. Bend your elbows and check your forearms, upper arms, and palms.
3. Look at the backs of your legs and feet, including the soles and spaces between the toes.
4. Check the back of your neck and scalp with a hand mirror, parting and lifting the hair. Also, check your back, buttocks, and genital area.

Look for any of the following:

- A new mole
- A change in the size, shape, texture, or color of a mole
- A sore that does not heal

If you see anything abnormal, visit your dermatologist as soon as possible.

Mole Mapping

Mole mapping uses photos to track changes in your skin over time. Melanoma is the most serious type of skin cancer. If found early, it can be treated. Regular skin checks can help you track any changes in your skin. Mole mapping uses pictures to track changes in your skin over time.

Mole mapping helps dermatologists find melanoma and other types of skin cancer early. Pictures are taken once. When you come for visits later, your doctor compares your moles to the photographs. The photos make it easy to see skin changes that might be melanoma.

Who Can Mole Mapping Help?

Mole mapping can help people who have a higher risk of getting melanoma. You may have a higher risk if any of these apply to you:

- You have many moles.
- You have moles that look different from others on your body:
 - Irregular shape
 - More than one color
 - Raised areas
 - You have had melanoma.
 - Melanoma runs in your family.

Pros and Cons to Mole Mapping

PROS:

- Original photos help find any changes that might be of concern.
- Your dermatologist can see changes of concern, and remove them early. This helps lower the risk of surgery and melanoma.
- If new changes that are not harmful are found, new photos are taken to help track any future changes.
- By taking pictures, we see if areas that were of concern are changing. This helps us know if the changes are likely to be melanoma.
- Patients and providers can have reassurance about areas of concern.

CONS:

- Melanoma can still go undetected in areas like the scalp and genitals that are difficult to photograph.
- Early melanoma can look like a normal mole, or other non-cancerous changes, making it possible to miss.

Using Pain Medicine Safely

Take your medicines exactly as your doctor directs.

Mistakes, misuse, or overdosing can cause serious health problems or death.

Pain medicines can help you live comfortably day to day. They manage pain, but they cannot always take it away entirely.

Prescription pain medicines are very strong drugs. Taking too much can cause serious side effects or death. Lowering your dose too quickly may make you feel very sick. This is withdrawal.

Pain Medicine Side Effects

- Drowsiness
- Confusion
- Dry mouth
- Nausea
- Vomiting
- Constipation

Prevent Side Effects

- Take your pain medicine with food.
- Drink plenty of water.
- Take a stool softener if needed.

Avoid Overdose and Accidents

Overdose is when you take too much of a medicine. Overdose with pain medication can be dangerous.

- Watch for the signs of pain medicine overdose:
 - Severe sleepiness
 - Difficulty waking up
 - Trouble breathing
 - Confusion
 - Blue lips or fingernails
 - Cool, moist skin
- When you are taking prescription pain medicines, do NOT drink alcohol. Mixing the two can be deadly.
- When you are taking prescription pain medicines, do NOT drive or operate machines.

- Never take more than 3,000 mg of acetaminophen in 24 hours. Taking more than that may damage your liver. Many medicines have it. These include Tylenol®, Lortab®, Vicodin®, Percocet®, as well as many over-the-counter products, especially those for colds. If you are not sure if a medicine is safe for you, ask your doctor or pharmacist. **Take your medicines exactly as your doctor directs.**

Avoid Misuse

- Keep all your medicine in a safe, secure place. Make sure small children cannot get to it. They often think pills are candy. Other people may be tempted to steal or abuse your medicines.
- Never share your medicines. Never take someone else's medicines. This is illegal, and it can be deadly.
- Never take medicines after the expiration date on the label.
- University of Utah Health Pharmacies have 12 areas where you can get rid of your medicines that you no longer need. Bring any medications to our drop off bins to get rid of them safely. For more details and locations visit <https://healthcare.utah.edu/pharmacy/medication-disposal.php>. Your local police station can also tell you how to get rid of them safely. NEVER pour medicines down the drain or toilet.
- Tell your doctor all the supplements, vitamins, and medicines you take. Pain medicines can be dangerous when mixed with other medicines or supplements.
- Use the same pharmacy for all your prescriptions. Your pharmacist can tell you more about medicines you should not combine. They can explain how to take your pain medicine safely.

If you suspect an overdose, call 911 immediately!

Side Effects of Steroids

Steroids are like the hormones your body makes at times of stress. When given as medicine, steroids can help reduce swelling and fatigue, improve appetite, and more.

There are many types of steroids. These are some common names: dexamethasone, prednisone, methylprednisolone, and hydrocortisone.

Steroids may have side effects based on how long you take them. Your doctor will try to give steroids for the shortest time possible to help with your symptoms.

The lists below show the most common side effects from steroids given over a short amount of time (one month or less) and a long amount of time (more than one month).

Side Effects	Self-Care Tips
Common Short-Term Side Effects	
More hungry	Continue to eat a healthy, well-balanced diet.
Trouble Sleeping	If you take a steroid once a day, take it in the morning. If you take a steroid twice a day, take one in the morning and then one in the afternoon, no later than 5 p.m.
Heartburn	Take with a snack or food. Your doctor can also prescribe a drug to help prevent heartburn.
Hiccups	Your doctor may decrease your dose or prescribe a drug to relax the muscle that causes hiccups.
High blood sugar	Your care team may check your blood sugar during each clinic visit. If you have diabetes, your doctor may need to change the dose or type of drugs you take to control your diabetes.
High blood pressure	Your care team will check your blood pressure during each clinic visit. If you already have high blood pressure, your doctor may need to change the dose or type of drugs you take to control it.
Changes in mood	Steroids can make you feel restless or moody. Being active such as going for a walk can help. Let your doctor know if changes in mood seem to be too much.
Common Long-Term Side Effects	
Infection	Steroids can make your immune system weak over time, which increases risk of infections. Your doctor may recommend you get a flu shot every year. You may also be prescribed a drug to help prevent a type of lung infection.
Osteoporosis (weak bones)	Your doctor may recommend you take an over-the-counter calcium and vitamin D supplement daily.
Changes in vision	You should make an appointment with your eye doctor once a year while on steroids.
Muscle weakness	Major muscle weakness can happen if you are on steroids for a long time. Stay as active as you can each day. Exercising 30 minutes each day can help keep your muscles and bones strong.
Round “moon face”	Your face may develop a moon-like shape due to extra fat buildup. Tell your doctor if this bothers you.
Swelling in legs or feet	Your doctor may recommend wearing compression stockings. Tell your doctor if you have swelling that bothers you.

Communication Tips

When a loved one is coping with cancer, communication may be difficult for everyone involved. Stress, anxiety, and depression can make it hard to talk. These suggestions may help:

When Communicating

- Be patient with yourself and others. Allow for mistakes and be forgiving.
- Listen carefully. Be open to other points of view.
- Admit your thoughts and feelings. Be open to having some discomfort. If you feel uncomfortable, you can decide whether to talk about it or let it go.
- Avoid gossip. Speak first-hand and directly with family members.
- Ask permission to vent. If you need to express strong feelings about a situation, make sure those you speak with know you are not blaming them.
- Use “I” messages. Give specific examples such as “I feel... when...”
- Offer regular updates to family members about a loved one’s condition. Use tools such as e-mails, webpages, and the telephone to make information available to everyone.

When Making Decisions

- Include all who will be affected.
- Tell all the important information to help everyone make a good decision.
- Offer time frames when possible.
- Consider both group and individual needs.
- Assume every family member has good intentions.
- Trust family members and close friends.
- Respect each other and praise success.

When Dealing With Conflict

- Stay focused on the present. Let go of issues from the past.
- Listen carefully. Try to see other points of view. This is most important when there is conflict.
- Consider all sides of the problem. Let everyone involved feel their ideas and opinions are valued.
- Avoid judging and labeling right or wrong.
- Try to understand the feelings of people who judge or find fault.
- Take a time-out or suggest talking later if the conflict is getting worse.
- Don’t be afraid to ask for help.
- Look for a compromise. If you cannot find a solution, work on letting go.

The social workers of Huntsman Cancer Institute’s Patient and Family Support team are a resource for more information about communicating with loved ones.

Our team is available Monday-Friday
from 8 a.m.-4:30 p.m.

To learn more or make an appointment,
call 801-213-5699.

www.huntsmancancer.org/pfs

How a Chaplain Can Help

When you have cancer, you may want care for your spirit as well as your body. Chaplains can help. They listen to you. They support you when you need it, whatever your religion or spiritual path. Huntsman Cancer Institute chaplains are available to visit with you. Call the number below or talk with your care team to ask for a chaplain visit.

A Chaplain's Role in Your Treatment and Care

A chaplain can support you and your loved ones.

- Speaks up with your care team and loved ones for your well-being of spirit, emotion, and body
- Helps you talk with your loved ones and care team about your concerns and feelings
- Finds support and approaches to cope with stress and other concerns
- Helps resolve conflicts

A chaplain can help work through big questions.

- Gives you support for coping with grief and loss
- Helps you explore or manage feelings such as anger, fear, and guilt
- Helps you work through hard decisions
- Helps you define your quality-of-life goals
- Helps you prepare for the end of life

A Chaplain's Role in Faith, Religion, and Spirituality

Having cancer may open you to new thoughts about spirituality. A chaplain can help you:

- Explore your beliefs
- Find and talk about meaning in your life
- Talk with you about the experience of illness and suffering
- Hear confessions or regrets about thoughts, words, actions, or failures to act
- Find literature, sacred objects, or teachers to help your spiritual practice
- Do ceremonies important to you
- Arrange care for a loved one's body after death

If you belong to a church or follow a spiritual path, a chaplain can support your needs:

- Offer help with your spiritual practices
- Pray (aloud, silently, with others, or alone) for you or a loved one
- Read sacred texts or scriptures you choose
- Help connect you with local religious communities
- Help resolve separation from your faith community

For Spiritual Care Services, dial FAITH from your hospital phone or call 801-213-2484.

Adapted with permission from *Chaplaincy Interventions Defined*, Texas Medical Center Project, © Brent Peery

Caregiver Burnout

What is caregiver burnout?

Caregiver burnout is a normal response to caring for a loved one who is sick. The effects of burnout are similar to feeling depressed.

Taking care of a person who has cancer takes time, work, and effort. Caregivers often forget to take care of their own physical and emotional health. In fact, studies show more than 50% of caregivers experience burnout.

What are signs of caregiver burnout?

People feel burnout differently, but it often has physical, emotional, and spiritual aspects:

- A feeling that something bad is going to happen
- Anger
- Anxiety
- Fatigue
- Hard time concentrating
- Hard time making decisions or problem solving
- Headaches
- Feeling tense
- Sleep problems
- Shaking or trembling
- Feelings of sadness or grief

It is important to know about caregiver burnout so you can recognize any signs. The more you know, the better you will be able to care for yourself and your loved one with cancer.

What can I do?

You can take steps to relieve stress related to caregiver burnout. Here are some tips:

- Ask for help. Family members, friends, and neighbors may be able to step in.
- Let someone else take over duties when they offer so you get a break.
- Talk it out. Consider meeting with a social worker or support group.
- Let yourself grieve—to cry, to feel numb, to be angry, or to feel however you are feeling.
- Pay attention to your health. Eat well, exercise, and get enough rest.
- Take things one day at a time. Understand you will have good days and bad days.
- Educate yourself. Knowing all you can about your loved one's cancer may help you feel more in control and help you set realistic expectations.

Huntsman Cancer Institute's Patient and Family Support social workers can help people experiencing caregiver burnout. To learn more or make an appointment, call 801-213-5699.

The Linda B. and Robert B. Wiggins Wellness and Integrative Health Center offers classes and services for caregivers, including art, acupuncture, cooking, massage, group fitness classes, and meditation. For more information, call 801-587-4585.

Fatigue

It is very common to feel tired and weak during treatment for cancer. Feeling fatigue can lead to distress, as it may lower your ability to do the things you are used to in daily life. If you have fatigue, you may feel you need to rest more than seems normal or reasonable.

Symptoms of Fatigue

- General weakness or limb heaviness
- Lower concentration or attention
- Problems with memory and thinking clearly
- Less interest in usual activities
- Hard time doing daily tasks
- Sleep problems such as unable to sleep or still feeling tired after waking up

Cancer-related fatigue is different than other types of fatigue. It can be overwhelming. Resting doesn't always help it go away, and it can take a while for fatigue to get better, even after treatment ends.

FEELING WEAK AND TIRED IS A COMMON SIDE EFFECT OF CANCER TREATMENT. TALK TO YOUR HEALTH CARE TEAM IF IT IS TOO MUCH.

If you feel overwhelmed, it may help to remember

- Fatigue is normal during cancer treatment.
- Fatigue does not mean the cancer is getting worse.
- Fatigue does not mean the treatment is not working.
- Fatigue is not caused by a lack of willpower. It is OK to ask for help if you need it, and tell your care team.

How Your Doctor or Nurse Can Help

Your health care team will review your overall health to find out if other factors are making your fatigue worse:

- Anemia
- Emotional distress or depression
- Infection
- Nutrition problems
- Pain
- Other illnesses
- Sleep problems

Your health care team can recommend medicines to improve your energy level or help you sleep. Be sure to talk to your care team before taking any over-the-counter medicines, and keep them updated about how you feel, especially if you notice any sudden changes.

Ways to Help Manage Fatigue

Walking and other exercise can help you feel better. Ask your health care team what level of exercise is right for you.

The Linda B. and Robert B. Wiggins Wellness and Integrative Health Center at Huntsman Cancer Institute (HCI) offers many services that can help with fatigue.

These include one-on-one exercise programs with a cancer exercise specialist, group fitness classes, acupuncture, dietitians, and more. Call 801-587-4585 or visit www.huntsmancancer.org/wellnesscenter.

More Tips to Manage Fatigue

Save Your Energy

- Set priorities and give tasks to others who offer to help.
- Take short naps and rest often. Avoid sleeping too much during the day, which makes it hard to sleep well at night.
- Use a cane or walker for assistance if you need it.

Find Relaxing Activities

- Get together with small groups of friends and family for short periods of time.
- Share your feelings and experiences by keeping a journal or joining a support group.
- Listen to music.
- If it is hard to concentrate, read short stories and articles.
- Stay connected with friends and family through e-mail and social media websites.
- Go outside to bird watch or visit a park.

Other Ideas

- Meet with a dietitian from the HCI Wellness Center who can suggest dietary changes to help with fatigue.
- Go to bed and wake up at the same time each day.
- Avoid caffeine.
- Exercise early in the day instead of before bed.

HCI Resources to Help You Feel Better

The Linda B. and Robert B. Wiggins Wellness and Integrative Health Center: 801-587-4585 or www.huntsmancancer.org/wellnesscenter

Patient and Family Support Social Workers:
801-213-5699 or www.huntsmancancer.org/pfs

G. Mitchell Morris Cancer Learning Center:
1-888-424-2100 or www.huntsmancancer.org/clc

Tips to Save Your Energy

When you are recovering from cancer treatment, you are likely to get tired very easily. This is called fatigue. It is important for you to use the energy you have wisely. Here are ideas to help you get more done and still have energy for things you enjoy.

Plan your day.

- Decide what really needs to be done today and what can wait. Choose the two or three most important tasks. Set realistic goals that match your energy levels.
- It's OK to say no to tasks and activities that will tire you out too much. Think about whether you are the best person to do a job.
- Ask for help when you need it.
- Break large jobs into smaller tasks. Think about the steps needed to complete a job.
- Think about ways to make activities easier—for example, changing your body position and organizing your work area.
- Switch between rest and activity through the day.
- Your body tires faster in extreme temperatures. In hot weather, avoid activity at the hottest part of the day. In cold weather, layer clothing to stay warm.

Pace yourself.

- Work slowly. Move in a comfortable rhythm.
- Limit activities that require quick bursts of energy.
- Stop an activity that makes you tense, angry, or frustrated. Try again later.
- Do some gentle stretches to warm up before you start an activity. Stretch again to cool down afterward.

Rest when you start to feel tired.

- Listen to your body. Learn to match activities to your energy level.
- Take short naps of 15–20 minutes.
- Rest after meals, exercise, and strenuous activities.
- Stress drains your energy. Learn skills such as meditation or guided imagery to help you relax.

Organize your work area.

- Set up your kitchen and other work areas so things you need are easy to reach.
- Work while sitting as much as you can.
- Keep your work area tidy so you don't have to spend energy looking for things you need.

Tips for Daily Activities

Showering

- Use a hand-held shower head. Sit on a shower stool.
- Use warm water. Hot water will tire you faster.
- Use a bath sponge with a long handle to reach your legs and back.
- Put on a terry cloth robe after your shower to save the effort of drying with a towel.
- Try showering at bedtime instead of during the day.

Housework

- Keep sets of cleaning supplies in different parts of the house so you don't have to carry them from place to place.
- Use a cart on wheels to move laundry, or tie a rope to the laundry basket to pull it.

Shopping

- Make a list ahead of time. Organize it by where the items are located in the store.
- Shop in familiar stores so it is easier to find what you need.
- Go when stores are not crowded.
- Use a shopping cart instead of a basket.
- Ask the bagger to put things that need to stay cold in the same bag. When you get home, put those things away first. You can put away the other things after a rest.

Nausea and Vomiting

How is nausea treated?

Nausea is treated with medicines called antiemetics. Sometimes it takes more than one medicine to get relief. Your health care team will help you find the best medicine for you. There are many types of antiemetics, so tell your doctor if your nausea is not under control within 24 hours.

What should I do if I have nausea?

- Fill your prescription for antiemetics.
- Take your antiemetics as prescribed.
- Eat five or six small meals during the day instead of one or two large meals.
- Choose foods that are low in fat.
- Choose cool foods rather than hot.
- Take medicine to control pain as prescribed.
- Breathe deeply and slowly to help ease nausea.
- Use distraction techniques such as walking, listening to music, watching a movie, or doing other activities you like.
- Turn lights low.
- Try fanning cool air on your face.
- Drink plenty of fluids.
- Take good care of your mouth. Brush your teeth three times a day and rinse with salt water solution.
 - Salt Water Solution
 - 1 cup warm water
 - 1/8 teaspoon salt
 - 1/8 teaspoon baking soda
 - Swish and spit small amounts and then rinse your mouth with plain water.

YOUR DOCTOR CAN PRESCRIBE MEDICINE TO HELP EASE YOUR NAUSEA. BE SURE TO TELL YOUR CARE TEAM IF YOU NEED RELIEF.

When should I call my doctor or nurse?

Call your doctor if any of these happen:

- You can't keep down fluid for 24 hours.
- You have vomited more than six times in 24 hours.
- You still have nausea and vomiting after you take antiemetics.
- Your symptoms of nausea or vomiting do not follow their usual pattern.

Helpful Suggestions

- Keep track of when your nausea occurs, what seemed to start it, and what helps make it better.
- Give your health care provider a list of all medications you take. Some medicines can cause nausea.
- Have someone with you the first time you take your antiemetic. Some medicines to control nausea can make you feel sleepy.

The Linda B. and Robert B. Wiggins Wellness and Integrative Health Center at Huntsman Cancer Institute offers acupuncture, massage, and other services that can help control nausea and other cancer-related symptoms. Call 801-587-4585 for more information.

Managing Constipation

What is Constipation?

Constipation is when it is difficult to have a bowel movement. The stool becomes hard and dry. Other signs of constipation include:

- Bloating
- Feeling full after a bowel movement
- Nausea
- Rectal pain
- Stomach cramping

What Causes Constipation?

Constipation occurring during cancer treatment has many causes:

- Bowel blockage
- Dehydration
- Decreased food intake or a low-fiber diet
- Some chemotherapy and pain medicines
- Surgery in the abdomen
- Tumor growth

How Can I Prevent Constipation?

You can help prevent constipation in these ways:

- Talk with your health care team about a plan to manage constipation before you start pain or chemotherapy medicines.
- Drink more water, juice, and other beverages that do not contain caffeine or alcohol.
- Be active. Ask your health care provider what kind of exercise is best for you.

It may be helpful to continue taking a stool softener daily.

How Should I Treat Constipation?

If you become constipated, you may try treating yourself at home. Certain products you can buy at the pharmacy or grocery store may help.

1. Take 2 Senna-S® (Senna + Colace®) tablets at night.
2. If you do not have a bowel movement the next morning, take 2 Senna-S tablets that morning and two more that night.
3. Drink 4 to 8 ounces of warm prune juice that evening. Prune juice can be a helpful part of a daily bowel management plan.
4. Once you have a bowel movement, stop taking Senna-S. It may be helpful to continue taking a stool softener daily.

When Should I Call My Doctor's Office?

If you do not have a bowel movement the morning after following steps 1-3 above, talk with your health care team. They can suggest additional remedies for constipation.

Important Precautions

- If you have kidney or urinary problems, ask your health care team before using milk of magnesia.
- Talk with your health care team before taking products that contain polyethylene glycol such as Miralax®.
- If you are taking chemotherapy, do not use enemas or suppositories.
- Talk with your health care team before changing doses of stool softeners or laxatives.
- Talk with your health care team about changes in your bowel habits. Bowel function is an important part of your overall health.

Eating Well During Cancer Treatment

Eating well is important when you are being treated for cancer. Good nutrition helps you feel better, raises your energy level, and can help lower the side effects from your cancer treatment.

Getting enough fluid is part of eating well. Try to drink at least 64 ounces (8 cups) of liquids without caffeine every day.

Getting enough liquid is an important part of good nutrition. Try to get at least 64 ounces (8 cups) of liquids without caffeine each day unless your cancer care team gives other directions. These things can count as part of the 64 ounces:

- Juice
- Soup
- Milk
- Sports drinks
- Popsicles
- Other drinks

Managing Side Effects

Some cancer treatments can make it hard to eat. You may have nausea. Foods may taste different. Your mouth and throat may be sore. You may feel too tired to make meals. Here are some tips that can help.

Nausea and Vomiting

- Have several small meals each day. Set timer for every 2-3 hours. Eat slowly.
- Relax after meals to help food digest, but do not lie down. Loosen your clothes. Breathing fresh air can help ease nausea.
- Avoid or limit foods with strong odors. Limit fried or spicy foods.
- Eat foods cold or at room temperature.
- When you have nausea, eat dry, bland foods such as crackers or toast.
- Do not eat your favorite foods when you have nausea. Eat them when you feel well.

Taste Changes

- Brushing your teeth or rinsing your mouth before eating may help.
- Use different seasonings, herbs, and spices.
 - Try adding basil, onion, garlic, and other flavors.
 - Try different flavors such as sour, bitter, tart, or sweet to see what tastes best. Try adding vinegar, lemon, lime, and orange to meals.
- Some foods may taste bitter or like metal. Sugarfree lemon drops, gum, or mints may help.
- If food tastes like metal, try using plastic or wood utensils.
- See the factsheet *Taste Changes during Cancer Treatment* for more ideas.

Sore Mouth or Throat

- Drink plenty of liquids. If your mouth is sore, use a straw.
- Choose soft, moist foods. Add extra gravies, cream sauces, or butter to meals. Cook food until it is soft and tender.
- Eat cold foods to help soothe your mouth and throat.
- Avoid citrus fruits and juices, spicy or salty foods, and rough, coarse, or dry foods.
- Rinse your mouth often. Ask your dentist about gentle cleaning products for your teeth and gums.

Fatigue

- When you have the energy, make and freeze meals to eat later.
- Let friends or family members cook for you.
- Keep snack foods on hand.
- Use plates and dishes you can throw away to save clean-up time.
- Make sure to keep hydrated and drink adequate fluids to help prevent dehydration which can lead to more fatigue.

Constipation

- Eat plenty of high-fiber foods such as whole grains, fruits, and vegetables.
- Eat at least five servings of fruits and vegetables every day.
- Add fiber to your diet slowly over 8 weeks with a goal of eating 25-38 grams of fiber each day.
- Drink plenty of liquids. Prune juice may help.
- Take walks and do light exercise often. *Check with your doctor before starting any exercise program.
- Ask your cancer care team before you take any stool softeners or laxatives.

Diarrhea

- Eat less high-fiber food such as whole grains, fruits, and raw vegetables.
- Eat several small meals each day.
Eating certain foods can help:
 - Applesauce
 - Potatoes
 - Bananas
 - Rice
 - Pasta
 - Toast
- Limit foods that can give you gas such as gassy vegetables, greasy, fried, or spicy foods.
- Drink plenty of liquids between meals.
- Try eating less milk and milk products such as ice cream, cheese, and yogurt.
- Ask your cancer care team if a soluble fiber supplement such as Metamucil® would help.

Weight Loss

- Try to eat four to six small meals each day. Set an alarm for every 2-3 hours.
- Plan ahead and keep snacks in your car, purse, or backpack.
- Eat slowly and take breaks during meals.
- If you get full too fast at meals, don't drink at mealtime. Drink liquids between meals instead.
- When you have a good appetite, make the most of it. Appetite is often best in the morning, so try to eat more at breakfast.

- Add protein to your diet with foods such as cheese, yogurt, milk, cottage cheese, nuts, seeds, peanut butter, meats, and beans.
- Put extra calories in food you already eat by adding one or more of these:
 - Butter or margarine
 - Mayonnaise
 - Honey
 - Peanut butter
 - Creamer
 - Powdered milk
- Be creative. Try making milkshakes or smoothies packed with protein and calories. See the factsheet *High-Calorie, High Protein Recipes* for ideas.
- Use a supplement such as Carnation Breakfast Essentials, Boost, or Ensure.

Call your cancer care team or Registered Dietitian if these tips do not help your nausea, constipation, diarrhea, or weight loss.

For More Information

Patient Education Resources

hci-portal.hci.utah.edu/sites/factsheets

Click on the Food and Nutrition icon to find the factsheet *High-Calorie, High-Protein Recipes*. The National Cancer Institute booklet "Eating Hints" is also here.

Linda B. and Robert B. Wiggins Wellness and Integrative Health Center

801-587-4585

The Wellness Center offers free counseling with registered dietitians for patients with all types of cancer. Call for more information or to make an appointment.

G. Mitchell Morris Cancer Learning Center

Visit the 6th floor of the cancer hospital

Call 1-888-424-2100

Email cancerinfo@hci.utah.edu

Text 801-528-1112 (text only)

The Cancer Learning Center has free cancer resources in their lending library and cancer information specialists who can help find what you want to know.

Sugar and Cancer

What is Sugar?

Carbohydrates are an essential part of a diet and include foods such as grains, fruits, vegetables, dairy, desserts, and candy. When carbohydrates break down in the body, a simple sugar called glucose forms. Glucose is the simple sugar in your body that gives your cells energy.

Does sugar feed cancer?

No. Sugar “feeds” all the cells in your body. Cancer cells need sugar to grow just like healthy cells do, but sugar does not feed cancer cells any more than it feeds the other cells in your body.

Can I Eat Sugar?

Yes. Avoiding all foods with carbohydrates can be unsafe during cancer treatment. When you avoid all carbohydrates, you can weaken your body and make it harder to fight cancer. Avoiding all sugars can also cause stress. Stress can raise the amount of sugar in your blood and decrease how well your immune system works.

Even if there is no sugar in your diet, your body will still make sugar from the protein and fat you eat. Although sugar doesn’t feed cancer, it is a good idea to limit the amount of added sugar you eat. Foods and beverages with added sugar include soda, sweet tea, candy, and baked goods. Eating a lot of added sugar can cause your body to produce more insulin. Insulin is a hormone your body produces to absorb glucose. Your body needs insulin to function, but it is unhealthy if you make too much of it.

Sugar can occur naturally in complex carbohydrates or be added to food. Eating a balanced diet with complex carbohydrates, protein, fiber, and fat will help your body process sugar in a healthy way. Complex carbohydrates such as fruits, vegetables, whole grains, beans, and lentils are broken down by the body slowly into simple sugars, which reduces the amount of insulin your body needs to absorb the simple sugars.

Tips to Manage Sugar in Your Diet

Read food labels. Avoid foods that have added sugar, brown sugar, corn syrup, high fructose corn syrup, or other sweeteners near the top of the ingredient list. Food labels

have been updated and now include a row that provides the amount of added sugars.

- Limit sugary drinks. Watch for soda, sports drinks, lattes, or sweetened teas with more than 10 grams of added sugar per serving. Choose water most often.
- Eat fruit instead of drinking fruit juice. If you drink juice, limit it to six ounces of 100% fruit juice once a day.
- Eat whole, unprocessed foods. Vegetables, fruit, whole grains, beans, legumes, nuts, and seeds have more fiber and are healthier for you.
- Limit desserts. If you eat dessert, stick to small servings a couple of times a week.
- Ask for advice. If you have a hard time getting enough nutrition during cancer treatment, talk to your doctor or dietitian.

Snacks that Help Manage Blood Sugar

These ideas help balance carbohydrates, protein, fat, and fiber.

- Almond butter and banana
- Fruit smoothie with milk and yogurt
- Greek yogurt and strawberries
- Hummus and whole wheat pita bread or veggies
- Nuts and dried fruit
- Peanut butter and crackers
- String cheese and vegetables
- Tuna salad and whole grain toast
- Turkey and avocado wrap
- Turkey chili soup and a baked potato
- Yogurt and apple slices

Dietitians from Huntsman Cancer Institute’s Linda B. and Robert B. Wiggins Wellness and Integrative Health Center offer personalized nutrition counseling for patients and their families. To make an appointment or for more information, call 801-587-4585.

Making Exercise Happen in Cancer Care

Exercise helps your body build strength and endurance. Before, during, and after your cancer treatment, exercise can help you in these ways:

- Quicker recovery
- Less pain
- Better rest and sleep

Find your own best reason to exercise—for example, being able to play with your kids or staying independent. Your ultimate goal is be active for at least 150 minutes per week. Start with what you can do, and work your way up.

Choose activities you like to do. That is the key to meeting your exercise goals.

Here are some tips to help you make exercise happen.

“I don’t have time.”

You can add exercise to things you need to do anyway.

- Walk or ride your bike to work or shopping
- Exercise while you watch TV
- Park farther from your destinations and walk in
- Walk the dog or play with children

Keep track of everything you do each day for a week. Try to find at least three days a week when you could do activities that add up to 30 minutes. Schedule exercise times on your calendar.

“I’m too tired.”

Remind yourself that exercising will actually give you more energy. It’s true. Try it!

Schedule exercise for times in the day or week when you have the most energy.

“I can’t get motivated.”

Invite friends and family to exercise with you.

Plan social activities that involve exercise such as dancing and outdoor games.

Join a group or class with an activity you like such as hiking or walking tours.

“I’m afraid I’ll get hurt.”

Choose activities with a lower risk of getting hurt:

- Walking instead of running or riding a bike
- Snowshoeing instead of skiing
- Water aerobics instead of step aerobics

Warm up before exercise and cool down afterward.

“I don’t know how.”

Choose activities that need no new skills such as walking, climbing stairs, or jogging.

Take a class to learn a new activity.

“I can’t afford equipment and classes.”

Many types of exercise such as walking and jogging need little special equipment.

Talk with your cancer care team about strength exercises you can do without gym machines.

You may find low-cost gyms and classes through schools, parks and recreation programs, or your workplace.

“I can’t exercise when I travel.”

Walk the halls and climb stairs in hotels.

Stay in places with a swimming pool or exercise room.

Walk through the local shopping area.

Bring a jump rope or your favorite aerobic dance music and exercise in your room.

Before you start, talk with your cancer care team about an exercise plan that is right for you.

For information about free and low-cost exercise classes and programs for Huntsman Cancer Institute patients, call the Linda B. and Robert B. Wiggins Wellness and Integrative Health Center at 801-587-4585 or visit www.huntsmancancer.org/wellnesscenter

