“My new philosophy is that every day is a joy,” says Hannah Huryk, a breast cancer survivor from Rib Mountain. “My surgery was in January (2007) and my birthday was in February, and I was so happy to be here and be able to experience that.”

Huryk was not completely taken by surprise when her doctor’s office notified her about an abnormal finding on her mammogram. Her mother and her aunt both are breast cancer survivors and, because her cancer was detected early, she didn’t panic. Also, based on this family history and results of her biopsy, she elected to immediately have both breasts removed. Her choice to perform the procedure was Jessica Wernberg, M.D., a general surgeon at Marshfield Clinic Marshfield Center.

“I could have had it done at Weston but I really have a thing about women doctors,” said Huryk. (The Wausau-Weston area is now served by Marshfield Clinic general and plastic surgeons who are women.)

“My mom and my aunt lived out east and had their treatment in Philadelphia. They wanted me to come out there, but I said the best care I can get is right here in Marshfield. I really was not concerned about that because I knew I would do well here,” she said. She trusted her Marshfield Clinic Weston Center family practice doctor, Jeanette le Noir, M.D., who recommended Dr. Wernberg as well as Plastic Surgeon Victor Gottlieb, M.D., also of Marshfield Center, for the breast reconstructions.

She followed with chemotherapy through Oncologist Adedayo Onitilo, M.D., of Marshfield Clinic Weston Center. He was always willing to answer her many questions, she said, without ever making her feel like she was wasting his time or asking about something she couldn’t possibly understand.

“I’ve talked to a lot of women with breast cancer who are still stuck even though the cancer was years ago,” she said. To Huryk, cancer was about $\frac{1}{4}$ of her life at that point and does not define who she is. “It was the hardest thing I had done in my life, but I’m on the other side of that now. I’ve added cancer survivor to who I am, but it’s just a piece of who I am.” Among the hats she wears...
Sexuality is an integral part of existence and a significant contributor to quality of life. It includes an individual's behavior, desire and attitude related to sex and physical intimacy with others.

Nearly all individuals diagnosed with cancer experience sexual function issues after treatment. Sexuality may not be a major focus initially, but because of sexual changes, relationship concerns or infertility issues, individuals with cancer will likely see an effect at some point. Sexual function issues can be related to body changes from cancer surgery, chemotherapy, radiation therapy, hormone changes, fatigue, pain, nausea and vomiting, medications that can reduce libido (sex drive), fear of cancer recurrence, stress, depression or anxiety.

Communication with your partner and your health care provider is vital in addressing sexual function issues. Health care providers can provide information about sexual changes that may occur after treatment and how to find solutions if problems with sexual function develop. Health care providers can help explain typical responses to a particular cancer treatment and refer you to a health care professional who specializes in treating sexual issues, if needed.

Even though treatment for cancer may affect sexuality, individuals with cancer can resume healthy sex life after treatment.

For women with gynecologic cancers, surgery may affect sexual function. Chemotherapy or radiation therapy to the pelvis may cause a loss of estrogen production in the ovaries. This can lead to symptoms of menopause, including hot flashes, thinning of the vagina, also known as vaginal atrophy, or vaginal dryness, which can cause pain with intercourse. Hormonal therapy for women with breast cancer may cause menopausal symptoms as well.

Women who experience vaginal pain or dryness may benefit from:
• Vaginal moisturizers or lubricants
• Vaginal dilators, which gradually help expand the vagina after vaginal atrophy
• Anesthetic gels to help with pain control
• Hormone replacement therapy (for types of cancer that will not be affected by hormonal treatments)

Men with cancer in the pelvic area and older men are more likely to experience difficulty resuming intercourse after treatment. The most common side effect of cancer treatment is erectile dysfunction. Other side effects are difficulty climaxing, orgasm without discharge of semen, weaker or less satisfying orgasms, loss of libido, pain during intercourse and less energy for sexual activity. Not every man with cancer in the pelvic area will experience sexual side effects.

For men with erection problems, the following may help:
• Medications to achieve and maintain an erection
• Penile implants
• Medications to increase blood flow to the penis

Sexuality is an important part of most people's lives, bringing pleasure, closeness and helping define who we are. So, even if it seems embarrassing or difficult to discuss, it's important to try and talk to your partner and your health care provider about any sexual issues that the cancer or its treatment may have caused.

Information on sexuality issues following cancer treatment can be found through www.marshfieldclinic.org/WINGS site, the survivorship coordinator at the Clinic location nearest you or on these Web sites:
• American Cancer Society www.cancer.org
• www.cancer.net/sexualdysfunction
• Livestrong.com
IMPOR TANCE OF A CAREGIVER
By Colette Zunk, C.S.W., Palliative Care Specialist, Sacred Heart-St. Mary’s Hospital, Rhinelander

Having a diagnosis of cancer changes many things in a person’s life. Not only are there new physical issues to deal with, but emotional, social and spiritual issues must be addressed too. This is a time when being independent can be challenging.

Cancer patients benefit in many ways from having a support system in place. It’s good to have someone to listen, to share your feelings, someone to add humor or help out when you need it. An extra pair of ears at appointments can help ensure you hear all the information presented and understand the instructions given.

Caregivers may notice things about the cancer patient that are helpful for the health care providers to know, such as changes in eating patterns. Sometimes they notice that medications are not being taken properly or that there are concerns about forgetfulness. Caregivers also can help keep track of appointments.

If you have been diagnosed with cancer, give yourself permission to take life a bit easier. This is very difficult for many people, who tend to do more than they should. Taking care of yourself during treatment is one of the most important steps.

Most people have family members and friends who say, “let me know if there is anything I can do for you.” Now is the time to take them up on their offers. Let them run errands, shop, do laundry, change sheets, fill the bird feeder or take out the garbage. You’ll both feel good about this.

Using your support system does not mean that you cannot care for yourself. It means you recognize the value family and friends provide to help you to get through this journey.

“Sometimes the smallest things in life take us to the biggest spot in our hearts.”
Madison, age 10, Chippewa Falls
Completed CLIMB* (Children’s Lives include Moments of Bravery) program at Marshfield Clinic Cancer Care-Eau Claire

FALL FEAST: SQUASH
By Brittany Cook, UW-Stout dietetics student and cancer survivor

Squash is an excellent source of vitamin A in the form of beta-carotene and may help repair or prevent damage to our body’s cells. Vitamin A is required for the immune system to function normally. The cells that line the airways, digestive tract and urinary tract form the body’s first line of defense against infection. Vitamin A also affects the red blood cell count, helping to mobilize iron to a form the body can use.

Squash is also a good source of vitamin C, potassium, dietary fiber, Folate, omega-3 fatty acids, vitamin B1, copper, vitamin B6, niacin-vitamin B3 and pantothenic acid.

Butternut Squash Soup

- 2 tablespoons oil
- 1 small onion, chopped
- 1 stalk celery, chopped
- 1 medium carrot, chopped
- 2 medium potatoes, cubed
- 1 medium butternut squash – peeled, seeded and cubed*
- 32 oz. chicken broth
- ½ to 1 teaspoon curry powder (optional)
- Salt and pepper to taste
- ¼ cup sour cream
*May use 2 12-oz packages frozen squash and add after other vegetables have browned

Directions
Heat oil in large pot. Cook the onion, celery, carrot, potatoes and squash (if raw) for 5 minutes or until lightly browned. Add chicken stock. Bring to a boil. Reduce heat to low. Add curry powder, if desired. Cover and simmer for 40 minutes or until all vegetables are tender.

Remove from heat. Using a hand blender, puree the soup until smooth. (Caution: splatters will be hot.) Salt and pepper to taste. Serve with a dollop of sour cream.

For accurate information on nutrition, check out the American Institute for Cancer Research Web site: www.airc.org
LYMPHEDEMA: NOT SO ‘SWELL’ PART OF RECOVERY

By Lori Stress, Physical Therapist, Lymphedema Specialist and cancer survivor, Marshfield Clinic Eau Claire Clairemont Center

Swelling occurs after an injury and is a normal part of the healing process. Lymphedema is a chronic (lifelong) condition of swelling, often in an arm or leg that may occur months to years after treatment for cancer. Not everyone gets lymphedema, but chances increase as damage to the body’s lymphatic system increases. Surgery, lymph node removal and radiation can increase the likelihood of lymphedema. Research shows incidence rates of lymphedema vary:

- Breast cancer: 4 – 17 percent after sentinel node biopsy with radiation; and 24 – 49 percent after mastectomy
- Pelvic cancers: 5 – 67 percent
- Melanoma: 40 – 75 percent

Lymphedema can cause pain, heaviness, hardness, greater risk for infection and restricted motion and use in an affected arm or leg.

The good news is that you can take precautions and learn preventive techniques to help decrease the chance of getting lymphedema. Plus treatments are available to assist in reducing and managing lymphedema if you have it.

A specially trained therapist at Marshfield Clinic can work with you on a comprehensive program that includes precautions, education, skin care, lymphatic massage techniques, specialized progression of exercises, complete home program and use of compression bandages or garments as needed.

Talk to your physician about a referral to physical therapy. If you have specific questions, please call the Physical Therapy Department at Marshfield Clinic Eau Claire Center at 715-858-4694 or the Clinic cancer care location near you.

SNUFF OUT TOBACCO

Quitting tobacco is the single most important thing you can do to improve your health.

If you are thinking about quitting or are already trying to quit, Marshfield Clinic has smoking cessation counselors who can help. Counselors can meet with you individually and offer many options to assist you. If smoking cessation medications are recommended, you may qualify for an initial two-week supply at no cost.

Ask your health care provider or survivorship coordinator to help you make arrangements to see a smoking cessation counselor in your area.

BREAST CANCER SURVIVOR: ‘EVERY DAY IS A JOY’

(continued from the cover)

are being a mother, wife, Sunday school teacher and a reinsurance claim manager at Nationwide Insurance in Wausau.

“I got through this because of my faith, my family, friends and colleagues at work,” she said. “It was amazing to see how much I was loved and cared for. In fact, probably the best part of the whole thing was learning how many people do love me.”