



GUIDE TO  
**Chemotherapy**  
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**Chemo 101**  
Everything You  
Need to Know

**Key Steps  
to Successful  
Treatment**

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## Chemotherapy 101:

## Fighting Cancer from Head to Toe

“*Tomorrow is my first chemotherapy treatment. I’m scheduled to have four IV infusions, each three weeks apart. As I write this, my hands feel cold and clammy. Will it hurt? Will I feel sick? My oncologist says chemo affects everyone differently. I’m just hoping I’ll feel well enough to get up every day, get dressed, and do what I have to do.*”\*

Here’s the good news: If you need chemotherapy as part of your cancer treatment and are feeling worried or even scared, that’s completely normal!

The better news: You don’t have to go through chemo—or fight cancer—alone. Plenty of help is available. So sit down, make yourself comfortable, and read this guide. It will help you stay educated, strong, and healthy as you prepare for, undergo, and complete your chemo treatments. It will also

help you work with your doctors and stay on your treatment schedule, which is key to achieving successful results.

Chemotherapy, or “chemo,” is getting better and easier to handle! Today, treatments are kinder and gentler than they used to be. In fact, many people are able to continue to work and take care of their families throughout their treatments. And, thanks to a range of medical advances, effective therapies can help ease chemo side effects, if and when they occur.

Of all the things you should know about chemo, here’s the most important one: It may be your single best chance to rid your

body of all cancer cells. In fact, getting your chemo treatments on time every time is one of the best things you can do for yourself.

In the following pages, you’ll learn what chemotherapy is, how it works, and what the treatments are actually like. You’ll also hear from patients who’ve been through chemo—and come out happy and healthy on the other side!

**This guide will take you through the key steps to a successful chemo experience.**

They are:

1. Learn about it
2. Plan for treatment
3. Follow through
4. Thrive during it

Let’s look at them one at a time...

\*This narrative is adapted from the writings of a seven-year breast cancer survivor.



“The first treatment wasn’t nearly as scary as I’d feared. I get my treatment in a room called a ‘chemo suite.’ Several large chairs are lined up against one wall with partitions between each. About half a dozen people are there to receive chemo at the same time I am. Some people read; others chat with family members or just relax. The oncology nurse had a little trouble finding a vein in my hand to insert the ‘butterfly’ needle, but she got it on the second try. The chemo drugs are held in clear plastic bags hooked to an IV pole. As the chemo flowed slowly into my veins, I felt a slight queasiness, but that was about it. Afterward, I was able to go home and make dinner.”

### What is chemo?

Chemo is an umbrella term for cancer-treatment medications designed to travel through the body to zap cancer cells wherever they are. The drugs are powerful agents against cancer; they stop the growth of cancer cells. But, unable to differentiate among cells, chemo medications affect normal cells, too—especially fast-growing ones like hair. The normal cells, though—unlike most cancer cells—generally bounce back after treatment is completed.

Chemo can be used on its own or in combination with other treatments, such as surgery and radiation. Primarily, there are three scenarios:

- Chemo may be given before surgery or radiation, in what is called the *neoadjuvant* setting. Neoadjuvant chemo aims to shrink tumors before other therapies are given.
- Chemo may also be given after surgery, in what is called the *adjuvant* setting. The goal of adjuvant therapy is to destroy any remaining cancer cells that may have been left behind.
- For advanced cancer, chemo can be admin-

## Your Chemo Care Team

During your chemo treatment, you will receive care from several healthcare professionals. Some of the most important include:

- **Medical oncologist.** Your medical oncologist is responsible for planning and supervising your chemotherapy. She or he will determine the type, dosage, and schedule of your chemo drugs.
- **Oncology nurse.** Oncology nurses are trained in the science of cancer and specialize in taking care of people with cancer. An oncology nurse may administer your chemo, treat medical complications such as reactions to chemo, answer your questions, and provide educational materials.
- **Primary care physician (PCP).** A PCP is a doctor who manages your general health care. Yours may have been the first person who suspected you had cancer and referred you to a specialist. Although your PCP may not play an active role in your chemo treatment, he or she will remain involved with you and with the other healthcare providers on your team. Your oncologist may speak regularly with your PCP to discuss your ongoing treatment.



## Asking Questions!

Asking questions is a great way to learn about and understand chemo. If you need clarification, or are unsure of even what questions to ask, read on—or talk to your doctor. Remember, the only “stupid” questions are the ones left unasked!

For a list of questions to ask your doctor, see the tear-out card in the center of this Guide.



istered in the *metastatic* setting, to ease symptoms, prolong survival, and improve a patient's quality of life.

### What does chemo look and feel like?

Chemo medications are typically delivered by intravenous (IV) infusion. Your infusion could take from one to five hours, depending on the types of medication in your “cocktail”—or combination of drugs—and their doses.

In many cases, chemo will be administered through a small needle inserted in a vein in your hand or lower arm. To protect your veins from the stress of repeated needle sticks, you may get an injection port instead. This is a small, round disc made of plastic or metal that's surgically inserted under the skin, usually in the upper chest. The port becomes the point of entry for all of your chemo infusions. It also allows your nurse to draw blood at any time during your treatments.

During and after your treatment, you'll be monitored for an allergic reaction. Be aware that your cancer treatment team is trained to nip any reactions in the bud, so let your oncology nurse know if you feel pain, burning, or itching at any point during your chemo session.

### Second opinions:

#### Two heads are better than one!

Once people are diagnosed with cancer, they usually want to start treatment right away. But before you do, get a second opinion. Most oncologists tend to agree on which treatments are the best all-around approaches for dealing with particular cancers. But your doctor should encour-

**ONLINE Support:**  
For expert answers to Chemo FAQs, visit [guide2chemo.com/FAQ](http://guide2chemo.com/FAQ).



## “My cancer was a detour... not a death sentence.”

Joanne Sapp, a psychiatric nurse and faculty member at Columbia University's School of Nursing in New York City, was a “first responder” on Sept. 11, 2001. As she was helping families whose loved ones died during the World Trade Center attacks, her personal challenges were about to begin.

A few days before the towers fell, Joanne had been diagnosed with breast cancer. A month later, she had a lumpectomy, followed by chemo and radiation.

Unfortunately, that wasn't the end of the story. Joanne later developed a local recurrence and had a double mastectomy followed by a rigorous round of chemo. After that, every test came back clean for three years. But in 2005, her cancer returned—this time in the form of a tumor in Joanne's neck. It was clear that she had *metastatic disease*—meaning the cancer was spreading—with more surgery and more chemo on the horizon.

So far, eight years after her first lumpectomy, Joanne is not only surviving—



she's thriving. “My cancer was a detour, not a death sentence,” she says. “But make no mistake: Metastatic cancer is a chronic illness, and I needed to get very good at managing it.”

Joanne describes her husband of 36 years and her extended family as “a source of unwavering

support.” And at this point, she has completed another round of chemo treatments. And she didn't experience any serious side effects. Usually, the treatments wear her out for a few days, but exercise, she found, was a great antidote to fatigue.

Joanne has also developed her spiritual strength and endurance. She relies on her minister for support, and has found a program called I Can Survive, based at a hospital near her home in northern New Jersey. There, she benefits from complementary approaches that take the form of humor, mental imagery, and a variety of East-West modalities. Full of life and as committed as ever to helping others, Joanne is happy “living in the here and now.”

age you to get a second opinion rather than rush you into treatment. A second opinion can confirm support for the treatment plan suggested by your original doctor or cancer care team. Also, it's smart to talk to at least one other expert to confirm that your doctor is up on the latest, greatest treatments.

So, don't be shy—or worried that your doctor will feel insulted. Getting a second—or even a third—opinion will help you learn about your options, build your self-confidence, and sharpen your ability to make the best possible decisions about your treatment.