A Survivor’s Perspective

Guest Expert: Beth Conerly

Yale Cancer Center Answers is a weekly broadcast on WNPR Connecticut Public Radio Sunday Evenings at 6:00 PM

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Welcome to Yale Cancer Center Answers with Dr. Francine Foss and Dr. Lynn Wilson. I am Bruce Barber. Dr. Foss is a Professor of Medical Oncology and Dermatology, specializing in the treatment of lymphomas. Dr. Wilson is a Professor of Therapeutic Radiology and an expert in the use of radiation to treat lung cancers and cutaneous lymphomas. If you would like to join the conversation, you can contact the doctors directly. The address is canceranswers@yale.edu and the phone number is 1-888-234-4YCC. Joining Francine as co-host this evening is cancer survivor Peter Lamothe, and they continue their series of survivor stories with Beth Conerly, a breast cancer survivor. Here is Francine Foss.

Foss Let us start off by having you tell us a little bit about your diagnosis of cancer.

Conerly Glad to. I was diagnosed with stage I non-metastatic invasive ductal carcinoma with lobular features after I detected a hard lump in the side of my ribcage. I had it looked at, it was biopsied, and that was the diagnosis.

Foss I am interested by your description of your cancer, five or six words thrown in together, did you understand any of those words before you were diagnosed?

Conerly No. I did not have a clue. It was a huge learning curve.

Lamothe What was your initial reaction when you found out that you had cancer?

Conerly My initial reaction was, oh my gosh! My children, who were then eight-and-a-half and seven, my husband, my family, I was very, very nervous for myself.

Foss Did you notice this lump for a little while, or did it just pop up all of a sudden?

Conerly I happened to be on the phone with my sister and I was balancing the phone with my arm crossed across my chest and I felt it, it was a hard pea-size thing, so I had it looked at right away.

Foss Was it your impression right away that this could be cancer?

Conerly Yes.

Foss Had you had a family history of cancer, or was there any other reason that you were worried about cancer at that point in time?

Conerly My maternal aunt, at this point in time, had had breast cancer and she had had a radical mastectomy with no other treatment, and had lived.

Foss So you have this lump, you went to the doctor, and they obviously thought it was suspicious.

Conerly I went for another mammogram, a diagnostic mammogram, and the radiologist came out to see 2:27 into mp3 file http://yalecancercenter.org/podcast/nov2810-cancer-answers-conerly.mp3
me, which was not always the case, typically I dealt with a technician, and she said, this looks like it is something we need to biopsy, and I was terrified.

Foss How long did it take to actually get the diagnosis?

Conerly About a week and a half.

Foss So that is a very short time for a very big diagnosis like that.

Conerly Yes.

Foss I know, Peter, that you have also been through this. Either one of you, can you tell me what goes through your mind when you hear that word?

Lamothe For me it was enormously overwhelming. I think, Beth, you would agree.

Conerly Absolutely!

Lamothe Perhaps you felt like you had fallen off a cliff and you were in a free fall and you had no idea when that free fall was going to end.

Conerly Absolutely, and I remember the day, it was a beautiful April day, April 21st, and I went out on my back steps to take the call because my mother was inside, she is elderly and I did not want her to hear what we were talking about, and after I got the diagnosis that it was cancer from my breast surgeon, I just went into business mode. It was the only way my brain could handle it. I had to get a piece of paper and a pen and write everything down and ask lots of questions.

Foss One of the questions and issues I have heard from patients is that they do not actually like to get a diagnosis like that over the phone. Sometimes it is a toss up between finding out as soon as possible versus being told in a setting where perhaps you can have a support person with you.

Conerly Absolutely!

Foss What is your feeling about that?

Conerly I chose the phone. I am a proactive person. Dr. Grube asked if I would prefer to hear by phone or come in. I would have just worried all the way in from Guilford if I did that.

Lamothe Beth, when you say that you went into business mode immediately afterwards, what did that entail? What type of things did you do?

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That entailed asking lots of questions about what would come, their statistics for women of my age with that stage of cancer, for me it also entailed trying to figure out exactly what the next steps would be, and my doctor spent a very long time with me, gave me her mobile number, and we talked it all through.

When you went for that first appointment, did you go by yourself?

For the first appointment after my diagnosis, no, I did not go by myself, my husband came with me. I had been advised to always bring someone with me, and to always bring a pad and paper and take notes, and I wholeheartedly recommend that to everyone that I know.

How did you actually break this news, say, to your husband? You found out, and I guess your mother was home.

Yeah.

So, how do you break the news to family members? That must be a very, very difficult thing?

It is really challenging because you are already going through, as the cancer patient, something that you do not even understand. I think I kind of just blurted it out to my husband. I called him at work, actually got him on the phone and said, I just got my results and it is cancer.

Beth, many people think that cancer only affects the person who is diagnosed, but it certainly affects their family members, their loved ones, coworkers and friends, can you say a little bit about how your family responded, how your friends responded, when they found out?

My husband told his office that he needed to leave and came home immediately, and he was a brick, maybe too much of a brick because that is another role that sometimes spouses go into is not getting enough for themselves by taking care of you. He came home, we talked it over, and we decided we would not tell the children until we had a plan, and he said, what can I do for you? It was a gorgeous day, and I have two big Rhodesian Ridgebacks, and I said, I need to go for a hike, get the kids off the bus. We then waited about three weeks while we went through all of the processes of getting an MRI, which found another tumor, a second tumor in the same breast on the left side, and at that point in time, we tried to keep it as much away from the children as possible, lots of doctors’ appointments, and a wonderful team at Yale that we assembled and we told my children, I will never forget, on a Friday night after having sushi in our kitchen before Mother’s Day, and that was probably the thing that bothered me the most, was having tell my children.

Can you tell us again how old your children were?

My children were at the time about seven and eight-and-a-half, roughly.

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Foss  So that is a very tough message for children that young.

Conerly  Yes it is. We knew people who had had breast cancer, and we know people who have had breast cancer recurrences, but not personal friends of ours. So they never had been in the inner sanctum of it.

Foss  That was a question I had, did you at any point in time talk to anybody, any of your caregivers about how you convey that kind of a message to young children?

Conerly  Yes, I did.

Foss  Is that something that you think we need to be doing more about on our part as the physicians and as the healthcare institutions to help women and men in this position convey those kinds of messages?

Conerly  I think we cannot be too over-prepared for something like that. It rocks the child’s world at the exact moment when you need support, you are giving support to your children.

Foss  So it sounds like this has been a very difficult time, the first couple of weeks you were, as you said, in business mode.

Conerly  Yes.

Foss  When did you switch over and actually sit down and think about what was going on with you?

Conerly  I would say, the week after. My husband had participated in the Pan-Mass Challenge, which you may or may not have heard of, raising $30 million plus for cancer, for years prior to my diagnosis for a good friend named Sue who had leukemia. The first thing he did was call Billy Starr up in Boston who is associated with Dana Farber, and Billy immediately sent back and said, you need to get this wonderful book, and now I am blanking on the author, of course, must be that Femara brain we talked about but I worked through reading that, looking at Dr. Love’s Breast Book and then I really focused on getting the right team. I wanted doctors who looked me in the eye, told me directly what was happening with me, and yet were compassionate. So it was a tall order.

Foss  In that whole process of going through the diagnosis and the work up, how many different doctors did you meet?

Conerly  The first day at Yale, we met with the breast center, in the old building, and then they had us meet just preliminarily with a medical oncologist and then we met with a social worker, and I am trying to think of who else we met with. We had one other doctor at that time. Dr. Higgins was scheduled for us as well, who is my radiation oncologist. I did not even know there were two kinds of oncologists at that time.

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Lamothe  What did that team of physicians and caregivers tell you to expect and what would be coming down the line for you and your family?

Conerly  Well, we had not at that moment discovered the second tumor, and so I was told I could probably have a lumpectomy. I was a small-breasted woman, it might deform my breast, I may have to go for a mastectomy as well. Bilateral was not even mentioned, but it was in the back of my head. Then the doctors basically said to me, it is not definite but you will likely have chemotherapy. So, I went about finding a different medical oncologist that I really liked and ended up with Dr. Lyndsay Harris, who is phenomenal.

Foss  When they mentioned that word “chemotherapy”, was that the scariest word that you heard?

Conerly  I think cancer was scarier than chemo. I have a warrior spirit. The name of my business is Artemis Design and I am one of those “let’s push through it and get through it, good and bad” type of person, but we can talk about that later, you do not really face what you are going through.

Foss  Had you had previous experience with chemotherapy through any of your family or friends?

Conerly  I had a friend who had breast cancer, probably 15 years ago in Boston who went to Brigham and Women’s, and I sat with her through some chemotherapy and my father had radiation but not chemotherapy.

Lamothe  We talked a little bit about how you went into business mode and began to communicate to friends and family, and I am curious to know if people that you knew who had cancer stepped forward, or people who you did not know had cancer stepped forward to say, I know what this is like, I can help you? What type of support network did you begin to build or form around you at the onset?

Conerly  People were just amazing. The folks who stepped forward, I would like to mention some names?

Foss  Absolutely!

Conerly  Rose Tradilo, who is just an amazing person, lives in my town just a couple of streets over and our children know one another, Melissa Burns, who has moved to Atlanta but was in the pink group out of Guilford, a friend of mine was diagnosed around the same time I was and our children went to school together. I think there were four of us at Calvin Leete School in Guilford at the same time due to chemotherapy.

Foss  I have heard this story from multiple women that they had no idea how many women out there had breast cancer until they had a diagnosis and all of a sudden all these people just come out of the woodwork.

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Conerly: Yes, they do, and folks that did not talk about it in years past are now talking about it, which I think is wonderful because you need that support.

Lamothe: I think you do, especially from people who have had a similar experience because it is enormously difficult for people who have not been to say the right things or to feel that they should be stepping forward to help you and oftentimes people think it is a very personal disease. I think people who are affected by cancer suddenly become very open and inclusive of lots of people to help them.

Conerly: Absolutely, and what was also really helpful for my children was seeing other women surviving, and I have since taken on that position for friends of mine, Leslie Hyman, a friend, was diagnosed with breast cancer just as I finished my radiation process at the end of 2008, and her kids could see me moving on and working through these things and it was so good. Also, a friend of mine that I met, we were probably on the surgical gurneys at the same time when I had my bilateral and reconstructive surgery, the big 10-hour, 12-hour one, with Dr. Grube and Dr. Fusi. We met in Dr. Fusi’s office. She had a different surgeon, but she had the same plastic surgeon, and neither of us would have ever been in a plastic surgeon’s office, so that is a very strange place to be, but we were there, we met, she had that kind of warrior spirit as well. We hit it off and we started calling each other our Bosom Buddies. It was really helpful.

Foss: You talked a little bit about what your children saw, and having the other children see you basically come through this, when you were being treated, what did your children actually see, did you try to hide the effects of the treatment from the children, or were you completely honest with them?

Conerly: I did not hide anything from my children, I was wide open unlike some of my friends and it is certainly a very personal decision. I shuddered to show them my reconstruction and the surgery because of four drains and I had them for 45 days, my drains, because I had several infections. That is just an ugly thing for a child to have to see, but they were young enough at the time that I thought if I show them I am doing okay with this, and I can still function as a mom most of the time, then that is a better thing for them to see then to be shielded.

Foss: Can you talk about what treatment you got, you mentioned surgery, can you talk about the other aspects of your treatment?

Conerly: I had six surgeries, as it turns out. I had a bilateral surgery and reconstruction. The other therapies that I had were chemotherapy and I had Taxotere/Cytoxan. I only had to have four treatments at the Long Wharf facility, everyone was wonderful and the most difficult thing was I came out of my bilateral mastectomy, which was in June, and then three weeks later, started chemotherapy, and then I got an infection that was encapsulated Dr. Fusi thought, so I ended up having surgery at midnight with Dr. Fusi at Yale taking everything out, and I was in the hospital five days after for massive doses of antibiotics, and my hair started falling out, which was ground I had not gone into mp3 file http://yalecancercenter.org/podcast/nov2810-cancer-answers-conerly.mp3
over, but I had this idea that it was going to kind of fall off on the pillow, like it started to do. It does that at first, but then one day I decided I was well enough to wash it, and a whole handful, a whole gob of hair just fell right out of my head, just released from the hair follicles, and I felt like a freak.

Foss  Do you think that the medical folks did not prepare you well enough for how that hair loss was going to happen?

Conerly  I think we could tell people more. I think they do not want to scare you, and I had done a lot of reading and was up on a lot of things, but I think there is nothing that can prepare you unless someone has seen this gob of hair and grabs your hair and says, this is all going to fall out, all at once, and even then you are probably not prepared.

Foss  Was that a big shock for your children?

Conerly  Yes, a very big shock. My husband and my son Sam decided to shave their heads and my daughter wore a kerchief for a while. I had gone out and gotten wigs ahead of time and I got one really sexy long wig for fun and I got one that looked like mommy because that is what my daughter wanted. It is really challenging for the kids.

Foss  I can tell everybody in the audience that Beth’s hair looks absolutely beautiful, blonde. It grew back really well. Was it blonde before?

Conerly  No, it was getting blonder as I got older, but it grew back black with all gray shot through it, and once I could, I decided to go ahead and change that again.

Foss  Absolutely, go for it.

Conerly  I had very tight, tight corkscrew curls, and I had had a little bit of wave.

Lamothe  You certainly have a terrific spirit and it is clear that you applied some humor to the cancer experience. Can you talk a little bit about the ups and downs of the journey and how important things are to getting well that are not necessarily medical?

Conerly  I was having some back issues from the pulling and tugging of the reconstruction and the drains and all of that, so I used a combination of physical therapy. A woman named Donna Segnere at Integrative Physical Therapy helped me and Malton Chiropractic helped me, and I did some Reiki.

Lamothe  Beth, after the break, let us come back to that. We are going to take a short break now for a medical minute, please stay tuned to hear more about Beth’s story of survivorship.
This year, over 200,000 Americans will be diagnosed with lung cancer, and in Connecticut alone, there will be over 2000 new cases. More than 85% of lung cancer diagnoses are related to smoking, and quitting even after decades of use can significantly reduce your risk of developing lung cancer. Each day patients with lung cancer are surviving, thanks to increased access to advanced therapies and specialized care. New treatment options and surgical techniques are giving lung cancer survivors more hope than they have ever had before. Clinical trials are currently underway at federally designated comprehensive cancer centers, like the one at Yale, to test innovative new treatments for lung cancer, an option for lung cancer patients in need of surgery at Yale Cancer Center is a video-assisted thoracoscopic surgery, also known as a VATS procedure, which is a minimally invasive technique. This has been a medical minute; more information is available at yalecancercenter.org. You are listening to the WNPR health forum on the Connecticut Public Broadcasting Network.

Welcome back to Yale Cancer Center Answers. This is Peter Lamothe and we are joined today by Beth Conerly, and we are discussing her story of survivorship. Beth, before the break we were talking a little bit about alternative medicine, complementary therapies, and other ways for cancer patients to get better during their cancer experience. Can you say more about your experience?

As I have said, I have gone through many surgeries, re-surgeries, re-reconstruction, chemotherapy, and radiation, and that is a lot for a body to handle. I found that within the first year of completing my diagnosis I really needed some complementary medicine. I needed some Reiki to kind of pull things together and calm me down and help me heal, because infection is very prominent. I also needed some back adjustments and neck adjustments from all of the different positioning and sutures and drains that have been in my body and Malton Family Chiropractic helped me there in Guilford. With the Integrative Physical Therapy, I started to go because I had tissue contracture which is like taking your pointer finger, putting it in Saran Wrap and twisting it. That is what happens when you have radiation. I could not raise my arm. I was very limited and it started to pull through the fascial system of the body, my hip, my knee, and Donna Segnere who is dedicating herself to helping, especially breast cancer patients, was another huge help to me.

How hard is it for a cancer patient to find these alternative services?

I think it is harder than it needs to be. I have a dream in my head to get the word out through some sort of website that people can access or partnering with Yale Cancer Center or with Smilow, with doctors that I know, to help with a list of things that you can do.

In fact, one of the major areas of focus for the American Society for Clinical Oncology is looking at these complementary care issues, and ways for patients to access those, so hopefully in the future we will see some grant money going in that direction as well to help to develop those programs.
That would be fantastic, and just to add, I put exercise in a complementary therapy bin. As I said, I have two dogs, and I love to walk my dogs. So whenever I could manage them, I would walk. I also have a dear friend, Joy Scott who has Body-N-Motion in Guilford, and she teaches Pilates and has yoga and all of those things, and that was just fantastic therapy for my body.

What about diet? A lot of patients ask questions about supplements, herbal medicine, what kind of dietary interventions they should be taking while they are getting chemotherapy. Did you get into that area at all?

A little bit. I was estrogen-positive and progesterone-positive for my tumors and my doctor recommended that I not do melatonin because it can mimic estrogen. So there are things that you should not take, as you likely know. I did try to eat well with fresh fruits and vegetables, cauliflower, broccoli; the cruciferous vegetables seem to be really high on the list of helping. I did try to drink lots of milk and lots of water to flush the toxins from my system. That is the kind of protocols I used.

I think with diet, of course, goes exercise, and you look like you are very physically fit and very active, is that something you also used to combat the disease?

Yes, I started very physically fit and active. I have always been that way and it was for my brain as much as for my body. I really, really needed to do this. One thing that really helped me along, was a woman named Siobhan Thompson through the LIVESTRONG grant with Yale School of Nursing. They have an exercise intervention trial going on. It is called Yale Fit, and I was selected as part of the study. We exercised three times a week with a trainer for six months, 40 minutes of cardio, leg machines and sit-ups. I happened to be randomized with my best friend Leslie, and it was just a sheer pleasure to work with the trainers and Siobhan is just an amazing person, keeps us going.

In the recovery phase, now that you are a couple of years out from cancer, are you continuing that exercise program?

I am. I have to say though that there was a fall out for me after cancer, and I know I am not the only one. I am sure you have had patients that have this. You have to adjust to the new normal. I am following a regimen of exercise and I am still in the Yale Fit Program, although I do not have the trainer. I have had numerous injuries. I had to have a brain scan because of something that happened with a fear of metastasis in my brain when I did not pass certain tests. I have had a bone scan to check on things, and just today I was with Dr. Radebold, my internist, going over a possible compression fracture in my heel, tendonitis, and plantar fasciitis, which Femara can up your chances of fracture. So, getting used to this new normal is a whole category that I think is under addressed.

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Foss       Just to let the audience know, how long will you be on the Femara?

Conerly    I started on tamoxifen and then I moved to an aromatase inhibitor, and typically it is five to ten years, we had originally discussed five years of some kind of combined adjuvant therapy, another new word I learned, after the other big therapies of chemo and radiation.

Lamothe    Beth, what you just said reminded me of what we often hear and what cancer patients often hear, which is that you can be cancer free, but not free from cancer.

Conerly    Very well put. Yes.

Lamothe    And I am curious to know, because I think cancer survivors would agree that there is not often enough preparation when you go from being a cancer patient to a cancer survivor, and so I am curious to know what your experience was and what you think healthcare providers could do for cancer patients who face a very favorable outcome.

Conerly    I think some of us are very good, as was I, at pushing through the treatments and getting through. I think I was mistaken in thinking that everything would go back to how it was afterward because you do not have time to really think about the future when you are just trying to get through it. I know there is a lot of talk right now about war, you know, fight a good battle, and people are feeling sometimes like, well, maybe I did not fight hard enough if things do not go the way they did. So I put it as surviving, present participle, I think that is a much better term. I am hoping, if more of us think of it that way that perhaps we can become more cohesive with our caregivers and providers at Yale and other hospitals, because I think that you are just not prepared. I still go to doctors and physical therapy, and my eyesight has changed. I have had issues with Femara. I had arthralgia so badly that when I would get up I would be able to bend my toes eventually after walking around for a while, and my fingers, I developed a trigger finger likely from the Femara. I have also had a cognition issue, which we call Femara brain, or it could be menopause because it happens overnight, it could be the treatments, it could be the Femara, it could be multitasking, but it really takes your body a long time to heal and a long time to adjust.

Foss       Do you see yourself as evolving through this survivorship process, have you seen yourself change over the last, say couple months, and what are you looking at in the future?

Conerly    In terms of?

Foss       This evolution of the issues that you have basically experienced since your treatment, do you anticipate that at some point down the road those are all going to be resolved?

Conerly    I hope so, I really hope so. I have had a lot of issues, and that has been a really difficult thing to be courageous about and keep moving. I think that they will be resolved, I think I need to be patient

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which is not my strong suit. One of the hardest things when you are finished with your big therapies, your surgery, your chemo, your radiation, is that folks who have not had cancer do not understand that you are not done. They are so thrilled for you and they mean it from the bottom of their hearts that you are done, but you are so not done.

Lamothe  
I think a lot of people think that you can just move on as if you can leave cancer in your background and I think, speaking for myself, that cancer will always be in some way a part of who I am.

Conerly  
And for me, it is reaching out to others, helping people selectively, and I am part of a Y-ME Group through Network of Strength, and they may be cutting our funding, which is not a good thing, but that is an opportunity for me to reach out to people and help and also benefit from other people’s information. I reach out to individual people, I give my name to different doctors and say, use me, have people get in touch with me selectively and I’ll try to help them through the process. A real good friend, Kristen Wall, who I was going to work with on my design, learned of my cancer as one of the first people in town, because she was meeting with me. We set up a meeting together to talk about business and I had to tell her I had cancer and could not be there because I had to start my therapies right away. She was just diagnosed with cancer almost two years to the day after mine and so reaching out to her has been very helpful on both sides.

Foss  
Can you talk about the fear word? Obviously that is a major issue for cancer survivors, that underlying fear that the cancer is going to come back or that something else is going to happen, how do you overcome that?

Conerly  
It is very hard to overcome. At the time that I was contacted about doing this segment with you, I had found a lump driving my son back from soccer, just something told me, reach under your left armpit. So I did, I listen to these voices now, because people have strange stories and there it was, a big lump under my left armpit. I was able to get in to see Dr. Grube who did a thorough exam and then I waited for several hours to be ultrasound tested and imaged and everything worked out fine, it’s scar tissue since I have had so many surgeries, but that kind of blip just rocks your world, to use my kid’s phrase, you think, okay, you are brushing your hair one moment and you are thinking, better brush it now because if I have got to do this again, I will. So I am scared. I cannot really have radiation in that area again. I could do chemotherapy again. I could do surgery again, and I would. I would do everything at the young age of 49 to take care of that with young children and my husband and friends and family, but it is terrifying.

Foss  
That kind of fear, again, is probably something people that have not had cancer do not understand, friends that have not had cancer, so how do you get help with that?

Conerly  
This time, taking a cue from my friend Kristen who is a big Facebook person, I decided to post a little something on Facebook saying, alright friends, I need your help, I found another lump,
praying that my son would not check his Facebook for a little while because we were not telling
the children, so I said please send thoughts, prayers, karma, whatever you believe in, and I had a
lot of people kind of holding my hand from afar and through cyberspace and also in-person calling
to make sure things were okay, calling to see if we needed meals, calling to see if we needed any
help. Ironically, a friend of mine just had a DIEP flap surgery to reconstruct with her own tissue
being tunneled up to make a breast, and I was setting up something on this wonderful site Lotsa
Helping Hands, all of her food and care for her children and all of these things. So my feeling is,
yes I am scared, but we have a wonderful community, and if you reach out and you are public,
people will come and people will help you, and with one in seven women in Connecticut
diagnosed with breast cancer, we really need each other.

Lamothe  That is terrific! Would you say a little bit more about what advice you would give to people who
are going through a cancer experience now or who are coming out of one and feeling somewhat
helpless?

Conerly  It is real easy to isolate yourself. I am a super-outgoing person. I have a wonderful network of
friends and family, but at times I needed to put them at arm’s length and use email. Connect in
some way is my first advice, connect in some way, do not keep it to yourself, do not go down in
the bunker, as I put it. Try and reach out. Even if it is somebody dropping by a couple times a
week or letting someone come with you and help you. I think the most important thing in the
beginning is to understand that it is so incredibly overwhelming and to be well informed to read, to
ask your doctors what websites you should look at. I never got into chat rooms, I never got into
any of those things on the Internet. Focus on your diagnosis, your own recovery, your own team,
and then ask for help. Let people bring you things. I was always bringing other people things, and
I will tell you what, those dinners arriving, my kids would run out and say, oh, look who brought
dinner and what is it, so put a cooler outside your door, have someone set up a rotation, get help,
get help with your children. Dr. Grube said to me, you need to take it easy, but she did not realize
that taking it easy for me was kind of a regular day for a normal person. So you have to let things
knit back together. You also need to somehow connect with another cancer patient. My friend
Susan Johnson and I, when we weren’t sleeping at night, having surgeries, having infections,
would talk to one another on the Internet. We would call each other, we would support each other,
and nobody really understands what you are going through unless they have been through it. They
try and they are well-intended and they are wonderful people, and you are nodding your head
Peter, what did you experience?

Lamothe  That is absolutely the case. I think sometimes you are worried about taking care of yourself. You
also sometimes have to take care of other people who do not know quite how to act around you
and you need to tell them that it is okay, that you can talk about things that do not have to do with
cancer, that you want to hear about things in their lives that don’t have to do with cancer, you do
not have to always be talking about yourself, you can have complete conversations that do not
touch on how you are feeling or what you are fearing.

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Absolutely, and I have to say, another thing I think that we need to do to make this easier for women is that we need to make our children more aware of what is happening and what can happen, and one way that we did this with our children was this year during Breast Cancer Awareness month, the Killer Kiwis, my daughter’s U10 Soccer Team and my son’s premier U12 Team in Guilford, wore pink armbands with pre-wrap and dressed in pink for several games, and really got the awareness out there. Maysa Abu-Khalaf, who is also working with Dr. Harris, happens to be another mother on the team with her daughter Dina, so Clara, my daughter, and she really got the team involved and it was wonderful, and we are going to work with Guilford Soccer League next year to do it again.

Beth Conerly is a breast cancer survivor. If you have questions for the doctors or would like to share your comments, visit yalecancercenter.org, where you can also subscribe to our podcast and find written transcripts of past programs. I am Bruce Barber and you are listening to the WNPR Health Forum on the Connecticut Public Broadcasting Network.