

Journeys

News and inspiration for
Dignity Health Cancer Institute
patients and family

June / July 2017



In This Issue

Vitamin D: Do I need to Supplement?

What Goes Around Comes Around

Retirement of Quincey Roxburgh,
RN, RRT

Local High School Students Give Back
to Cancer Patients

Bonnie J. Addario Walk -
Next Step Is Cure

Oncology Research

A Valentine's Thank You

10 Cancer Symptoms
Men Shouldn't Ignore

Cancer Institute Complementary
Classes & Support Groups

Brain Cancer Awareness

Symptoms of brain cancer depend on several factors, including the tumor type, size, location and extent, as well as the patient's age, health history and more. The symptoms may be subtle or develop gradually. They are influenced by the part of the brain involved and the functional system it affects (e.g., motor control, sensory perception or language). Any tumor that is significantly large can create multiple symptoms because of the pressure created by the mass. Every case is unique, but here are some common features to be aware of.

Symptoms

- **Headaches:** Having a headache could be related to many causes. A noticeable change in the frequency and intensity of headaches may indicate a brain tumor.
- **Vision changes:** A tumor on or near the optical nerve could cause blurred or double vision. Other types of brain tumors may cause abnormal eye movements or changes in vision, depending on the size and location of the tumor.

continued on page 2

June is Men's Cancer
Awareness Month

July is UV Safety
Awareness Month



Dignity Health™
Cancer Institute
of Greater Sacramento

- **Loss of motor skill:** A brain tumor can affect certain areas of the brain responsible for motor functions, like balance, coordination or movement. Weakness of facial muscles may result from a tumor within the cranial nerves.
- **Nausea and/or vomiting:** These symptoms, especially early in the morning and unrelated to other conditions, may indicate a brain tumor.
- **Seizures:** The onset of new seizures or convulsions can be the result of a tumor forming in the brain.
- **Speech problems:** Some brain tumors can cause difficulty with speech.
- **Cognitive problems:** A brain tumor can impact cognitive abilities and result in memory problems, poor concentration, confusion, difficulty thinking clearly or processing information, and language difficulties.
- **Weakness or numbness:** Some brain tumors cause weakness on one side of the body or other paraneoplastic syndromes, like peripheral neuropathy (numbness or tingling in the hands and feet).
- **Change in personality:** The brain is responsible for many functions. Sometimes a tumor on the front part of the brain can cause gradual changes in behavior, personality and thinking.
- **Hormonal disorders:** The pituitary gland, located at the base of the brain, is vital to the production and regulation of hormones. Tumors within this area may impact the hormones, resulting in symptoms similar to certain endocrine disorders.

Risk Factors

The cause of brain cancer is still largely unknown. Although there are some genetic conditions and environmental factors which may contribute to the development of brain cancer, the risk factors are much less defined for brain cancer than for other cancers in the body. Also, the risk of developing primary brain cancer is very low. The American Cancer Society estimates the risk over a lifetime is less than one percent. It's important to remember that a brain cancer risk factor only affects the probability of developing

brain cancer over a lifetime. For example, if you've received radiation therapy to treat another cancer, or if you've worked in an industry where you handled potentially cancerous chemicals, you may want to discuss with your doctor what it means for your individual risk of developing brain cancer.

- **Gender:** There is no general rule that covers all brain cancers. Certain cancers, like meningiomas, are twice as likely to develop in women. Medulloblastomas are more frequently found in males.
- **Age:** In general, the frequency of brain cancer increases with age, with more occurrences in individuals age 65 and older. The age factor varies depending on the cell type and location of the tumor. Adults have a very low risk of developing medulloblastomas, while gliomas are most common in adults. The incidence of meningiomas and craniopharyngiomas are far more frequent in adults over age 50, but again, these tumors may occur at any age.
- **Compromised immune system:** Some people with compromised immune systems have an increased risk of developing lymphomas of the brain.
- **Genetic links:** Family history may affect the likelihood of developing certain diseases. Von Hippel-Lindau disease, Li-Fraumeni syndrome, and Neurofibromatosis (NF1 and NF2) are inherited conditions that have been found in families with a history of rare brain tumors. Otherwise, there is little evidence that brain cancer runs in families.
- **Chemical exposure:** Exposure to certain industrial chemicals or solvents has been linked to an increased risk in developing brain cancer. Although it is not conclusive, there is evidence that there is a higher incidence of certain types of brain tumors in individuals who work in oil refining, rubber manufacturing and drug manufacturing.
- **Radiation treatment:** Exposure to radiation therapy, particularly at a young age, may increase the likelihood of developing brain cancer.

Article provided by: Cancer Treatment Centers of America

Vitamin D: Do I Need To Supplement?

What is Vitamin D and what does it do?

Vitamin D is a fat soluble vitamin produced when UVB rays from the sun hit the skin and convert cholesterol into previtamin D. The liver then converts the previtamin D to calcidiol and then the kidneys convert it into the active form of the vitamin, calcitriol. Vitamin D regulates levels of phosphorus and calcium in the body to enable bone growth and remodeling. It is also a key factor in activating the immune system and inhibiting inflammation at the gene level.

In the store, you may see both vitamin D2 as well as Vitamin D3. Vitamin D2 is often used to fortify foods. It is made by some plant life (such as mushrooms) in response to UV radiation. Vitamin D3 is made by the body in response to sunlight. It is also found in a few food sources such as fatty fish and fish oils.

How much Vitamin D do I need?

The RDA for Vitamin D (assuming minimal sun exposure) is:

- Up to age 70, or pregnant/lactating: 600 IU per day
- 71 years and older: 800 IU per day

Serum concentration of calcidiol with a lab test is the best indicator of vitamin D status.

- The U.S. Institute of Medicine recommends serum level ≥ 20 ng/ml while the Endocrine Society recommends >30 ng/ml for optimal bone and muscle health
- Each 1,000 IU vitamin D helps increase serum levels by 10 ng/ml
- Toxic levels do not result from sun exposure, as heat on skin photodegrades Vitamin D as it forms; it is not likely to result from food sources but may happen due to high supplement use

What are the best Sources of Vitamin D?

80-90% of vitamin D is obtained from sun exposure to UVB

- Exposure of skin without sunscreen for approximately five to 30 minutes between 10 a.m. and 3 p.m. three days/week is generally adequate



- The amount of vitamin D produced varies with age, skin type, season and time of day
- Body fat stores vitamin D and releases it during periods of no sunlight
- Exposure indoors through a window does not produce vitamin D, as UVB does not penetrate glass

Food Sources of Vitamin D

- Fatty fish – salmon, tuna, mackerel (three ounces of salmon has 450 IU, tuna has 150 IU)
- Fish liver oils (one tablespoon cod liver oil has 1360 IU)
- Small amounts found in beef liver, cheese, egg yolks (40 IU in one egg yolk)
- Fortified foods – breakfast cereals, some orange juice, margarine and eggs (one cup milk has 115 IU)

What does current research show regarding vitamin D and cancer risk?

There is mixed evidence as to the intake of vitamin D (with and without additional calcium) and the reduction of cancer risk, especially breast and colorectal. Some research links increased calcium intake with reduced risk of colorectal cancer, but the effect is not seen with low vitamin D levels. Other research suggests taking vitamin D and calcium is not associated with lower risk colorectal cancer or breast cancer. In short, more research is needed.

Susan Liebert, MS, RD, CSO, CDE, Clinical Dietitian

What Goes Around Will Come Around

Something wonderful happened a few weeks ago on a rainy Monday morning in Woodland. As I was driving up to the pick-up window, the barista informed me that my coffee had already been paid for by the gentleman in front of me. What a great surprise! The wonderful effects of this kind gesture from a stranger stayed with me all day. I felt special, a little bit like it was my birthday. Later that evening, during dinner, I shared with my family what had happened. Immediately my bubbly daughter expressed her delight. “Oh really? That is so awesome!” she said. “I cannot believe this could actually happen. I read about this in a book last year, but I thought it was all made up! Now you have to ‘pay it forward.’”

The book my daughter referred to is *Pay It Forward* by Catherine Ryan Hyde. It became an immediate bestseller when it was first published in 1999. Warner Brothers later turned it into a movie with Kevin Spacey and Helen Hunt. In it, the author tells the story of 12-year old Trevor who decides to earn extra credit in his social studies class. The assignment requires him to come up with a plan to change the world. Trevor decides to do a good deed to three people, and then asks the recipients to do the same for three others, thereby creating a chain. Eventually, random acts of

kindness reached epidemic proportions, and one journalist goes on a quest to find its source — a twelve year old in a small California town. The story is heartwarming.

The notion of repaying others for a good deed instead of the original benefactor is not new. It was reflected in a key plot point in a play from ancient Athens. In his 1841 essay “Compensation,” Ralph Waldo Emerson wrote, “We cannot render the benefits to those from whom we receive them. But the benefit we receive must be rendered again.” In fact, Michael Macy, professor of sociology at Cornell University, found that people who are the recipients of good deeds are more likely to sustain the cascade of kindness than somebody who is just observing an act of kindness. We have already internalized the famous saying of St. Francis, who declared “It is in giving that we receive.” Now we know it is also reversible. The effect of receiving also encourages us to give. The message is powerful. One single act of kindness has the power to ripple through a whole social network. So the next time you take a moment out of your day and stop to help a stranger, remember you may not be just helping this one particular individual but potentially many others downstream.

Eva Lukas, MA, LMFT

Retirement of Quincey Roxburgh, RN, RRT

After 26 years of service at Dignity Health, Quincey Roxburgh, RN, retired as the Director of Clinical Operations. Quincey joined Mercy San Juan in 1991 as a respiratory care manager and was named director shortly thereafter. She has served as director for numerous other departments at Mercy San Juan, including pulmonary lab and rehab, neuro-diagnostic lab, non-invasive cardiology lab, EKG, hyperbaric therapy, wound care, GI lab, and the sleep lab. Quincey tirelessly represented and improved all of the departments she managed, encouraging her staff to always put patients first. With her expert leadership skills and supreme compassion for her work, Quincey mentored and developed many outstanding future leaders along the way. “Quincey boosted my confidence by challenging me to exercise autonomy, take the initiative, and follow through,” said Jason Close, interim director of the Dignity Health Telemedicine Network.

Her greatest accomplishment is the development of the Dignity Health Cancer Institute, which Quincey joined in 2011. With her expertise and vision, Quincey expanded the program to include one genetic counselor, one marriage and family therapist and dietician, six nurse navigators, four research coordinators, as well as a community outreach coordinator and yoga instructor. “Quincey truly embodies the ‘Hello humankindness’ mission and has reflected it consistently through her daily interactions with everyone,” said Rachel McConachie, Director of Clinical Operations, Dignity Health Cancer Institute. All of Quincey’s contributions, including her competence, character, professionalism, and leadership will be greatly missed. Heartfelt congratulations on Quincey’s retirement!





Local High School Students Give Back to Cancer Patients

Recently the Mercy Cancer Institute was privileged to have three seniors from local high schools treat patients with their senior project creative efforts. Jason Downing played beautiful guitar in the Mercy Cancer Center lobby for patients and staff one afternoon. Adrian Carr made colorful reversible blankets, then shared them while visiting with

patients at the Mercy Cancer Center. Annie McGonigle creatively sewed gorgeous bags especially needed for patient necessities pre-and post-surgery. Patients and staff were amazed at the kindness and spoiling. The seniors were so grateful for the opportunity to help and give back to others with cancer.

Bonnie J. Addario Walk - Next Step is the Cure

The “Your Next Step is the Cure” Sacramento 5k run/walk at William Land Park raised \$80,000 for patient services and clinical research projects supported by the Bonnie J. Addario Lung Cancer Foundation (ALCF), a nonprofit organization known nationally for its work in fighting lung cancer. About 550 people ran/walked in the event including 22 Dignity Health lung cancer patients. The event’s co-chairs included Costanzo DiPerna, MD, MBA, thoracic surgeon and medical director of Dignity Health Cancer Institute; and Trevor Williams, MD, MPH, FACS, thoracic surgeon of Mercy Medical Group.



Through the generosity of our donors, Mercy Foundation is proud to support programs and services of the Dignity Health Cancer Institute of Greater Sacramento.

To make a gift or learn more, call 916.851.2700 or visit supportmercyfoundation.org

FROM 1954 UNTIL THE END OF NEED

For over six decades, Mercy Foundation has partnered with the community to further the mission of the Sisters of Mercy. Together, we help feed the hungry, shelter the homeless, educate the underserved, and care for the sick at local Dignity Health hospitals and clinics.



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Oncology Research

Did you know that the Dignity Health Cancer Institute has many open clinical trials? We are currently enrolling patients with cancers of the breast, cervix, ovaries, fallopian tubes, peritoneum, prostate and lung. We also have registry studies for patients with prostate cancer or with one of a variety of hematologic malignancies (blood cancers). In upcoming issues of Journeys we will begin to focus on some of the studies we have open and let you know a little bit

more about what is happening in our Research Department. We can help you find a clinical trial or answer questions you may have about research in general. We can match you up to trials that are taking place here at Dignity Health, elsewhere in California or anywhere in the United States. We are always happy to help! You can call us at 916-863-8731 or 916-556-3128. You can email us at OncologyResearch@dignityhealth.org

A Valentine's Thank You

Lorraine and Jeff Katz once again helped spread love on Valentine's Day, a tradition that began in 2010 to mark the passing of Lorraine's husband and Jeff's father, Jules Katz. Jules passed away on February 14, 2009 after a five-year battle with colon cancer. For the last few years on the anniversary of his passing, Lorraine and Jeff commemorate his memory in a way that brings both of them comfort and helps others. Over the year Lorraine and Jeff gather many stuffed animals, blankets, cups, candy, playing cards and puzzles to share with patients at the Mercy Cancer Center as well as other facilities in Greater Sacramento. Lorraine and Jeff's items bring a great smile to the patients during such a difficult time in their lives.



10 Cancer Symptoms Men Shouldn't Ignore

Nagging back pain. Indigestion. Frequent urination. You may assume these are minor health issues that don't need a doctor visit. But think again.

Cancer symptoms are often vague. In fact, prostate cancer—the most common cancer in men—has some of the least obvious symptoms. Knowing what symptoms to look for can help your doctor find cancer early when it's most treatable. Remember, having one or more of these symptoms doesn't mean you have cancer. But if they're persistent, you need to go in for a checkup.

1. Abnormal lump

Have you recently felt a mass or lump right below your skin? This may be a sign of cancer. Lumps normally show up in the breast, testicles, lymph nodes and soft tissues, like tendons and ligaments. Here's what to do: Report it to your doctor immediately, especially if you just found it, or it has grown in size.

2. Changes in your testicles

Have you noticed changes in the size of your testicles, like one or both have gotten bigger? Maybe you've found a lump, or your testicles feel swollen or extra heavy. Any of these signs should send you straight to your doctor. Testicular cancer is most common in young and middle-aged men.

3. Changes in your restroom habits

Suddenly need to use the restroom all the time? Or have pain when you go? This may be a sign of bladder or prostate cancer. Other signs to look out for are blood in your urine or stool. Changes in your bowel habits, like constipation or diarrhea that won't go away, matter too.

4. Changes in your skin

If you work long hours outside or have a history of blistering sun burns, check your skin more closely. What you think are signs of hard work might actually be skin cancer. Look for unusual bleeding, scaling or sores that do not heal. Other signs include warts as well as moles and freckles that change color, size or shape. Bottom line: If you've got a strange spot on your skin, call your dermatologist.

5. Indigestion or trouble swallowing

A prolonged painful burning sensation in your throat or chest shouldn't be ignored—even if you suspect it's from eating spicy food. Don't think that regular indigestion or trouble swallowing is a normal part of aging either. It can be a sign of esophageal, stomach or throat cancer.

6. Persistent cough or hoarseness

Do you have a nagging cough? If it lasts more than three weeks, it's a sign that something's wrong. And whether you smoke or not, a cough that doesn't go away can be a sign of lung cancer. Persistent hoarseness, wheezing, shortness of breath or coughing up blood are also signs to call your doctor right away.

7. Changes in your mouth

If you smoke, chew, dip or spit tobacco, you need to pay close attention to changes inside your mouth. White patches inside your mouth or white patches on your tongue may be precancers. Left untreated, these areas can turn into oral cancer. Sores, unexplained bleeding, numbness or tenderness in the area around your mouth—like your tongue, lips and cheeks—should tell you it's time for a check-up.

8. Unexplained weight loss

Are you dropping pounds without changing your diet or exercise habits? Call your doctor—even if you think they're pounds you need to lose. Losing ten or more pounds for no known reason can be a sign of pancreatic, stomach, esophageal or lung cancer.

9. Constant fatigue

Are you too tired to play with your kids? Or hang out with the guys after work? Are you constantly tired no matter how much rest you get? Don't brush it off. Constant fatigue can be a sign of leukemia as well as some colon and stomach cancers.

10. Persistent pain

Nagging back pain, a headache that won't go away, abdominal or stomach pains—your doctor needs to know. “No pain, no gain” doesn't apply to cancer. And, persistent pain, no matter the location, can be the first sign that something's wrong.

Complementary Classes & Support Groups

For more information on any of the listings below, call 916.962.8892

BREAST CANCER SUPPORT GROUP

1st Thursday of every other month, 6 – 7:30 p.m.
(Jan/Mar/May/Jul/Sep/Nov)
Mercy Cancer Center
3301 C Street, Sacramento, 95816

3rd Thursday of every month, 4:30 – 6 p.m.
Mercy San Juan Medical Center
6555 Coyle Avenue, Ste. 140, Carmichael, 95608

CANCER SUPPORT GROUP

Every Tuesday, 11 a.m. – 12:30 p.m. & 4 – 5:30 p.m.
Mercy Hospital of Folsom
1650 Creekside Drive, Folsom, 95630
Call 916.390.2661 for location

CAREGIVER'S SUPPORT GROUP

3rd Friday of every month, 11 a.m. – 12:30 p.m.
Mercy Cancer Center
3301 C Street, Sacramento, 95816
For more information, please contact 916.990.8454

GYNECOLOGIC CANCER SUPPORT GROUP

3rd Wednesday of every month, 11 a.m. – 12:30 p.m.
Mercy Cancer Center
3301 C Street, Sacramento, 95816

LEGACY SUPPORT GROUP (Lung Cancer)

1st Wednesday of every month, 11 a.m. – 12:30 p.m.
(MCC = Jan/Mar/May/Jul/Sep/Nov)
(MSJ = Feb/Apr/Jun/Aug/Oct/Dec)
Alternates every other month between
Mercy Cancer Center & Mercy San Juan Medical Center
Call 855.637.2962 for location

LIVING WITH CANCER SUPPORT GROUP

2nd Wednesday of every month, 2 – 3 p.m.
Woodland Cancer Center
Haarberg Building Conference Room

LOOK GOOD, FEEL BETTER

2nd Tuesday of every other month, 6 – 8 p.m.
(Jan 10/Mar 14/May 9/Jul 11/Sep 12/Nov 14)
Mercy Cancer Center
3301 C Street, Sacramento, 95816
4th Monday of every other month, 2 – 4 p.m.
(Jan 23, Mar 20, May 15, Jul 17, Sep 18, Nov 20)
Woodland Healthcare
515 Fairchild Ct., Woodland, 95695

MEDITATION GROUP

Every Tuesday, 1 – 1:45 p.m.
Dignity Health Cancer Institute
6403 Coyle Avenue, Carmichael, 95608
For more information, please contact 916.990.8454

MULTIPLE MYELOMA SUPPORT GROUP

1st Saturday of every month, 10 a.m. – noon
Mercy San Juan Medical Center
6501 Coyle Avenue, Carmichael, 95608

NUTRITION CLASSES

Quarterly, Tuesdays 2 – 3 p.m.
(Feb 7, May 16, Aug 8, Nov 14)
Mercy Cancer Center
3301 C Street, Sacramento, 95816
Individual appointments are available at Mercy San Juan
For more information, please contact 916.983.7598

OSTOMY SUPPORT GROUP

1st Saturday of every month, 10 a.m. – noon
Mercy San Juan Medical Center
6501 Coyle Avenue, Carmichael, 95608

PROSTATE SUPPORT GROUP

3rd Thursday of every month, 1:30 – 3:30 p.m.
(MSJ = Jan 19/Mar 16/May 18/Jul 20/Sep 21/Nov 16)
(UCD = Feb 16/Apr 20/Jun 15/Aug 17/Oct 19/Dec 21)
Alternates every other month between
Mercy San Juan Medical Center & UC Davis

YOGA CLASSES

Every Monday & Wednesday, 5 – 6 p.m.
1st Thursday of every month, 5 – 6 p.m.
Mercy Cancer Center
3301 C Street, Sacramento, 95816
3rd Thursday of every month, 3:30 – 4:30 p.m.
Mercy San Juan Medical Center
6501 Coyle Avenue, Carmichael, 95608