



# Heart & Soul



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[www.cancercounseling.org](http://www.cancercounseling.org)

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## A Newsletter from Living With Dignity

*Providing professional counseling and support services to individual and families living with Cancer & AIDS*

### The ABC's Of Treatment

#### "A"

##### Ask Questions

Once the shock and numbness of a cancer diagnosis has dissipated, and you have had time to collect your thoughts, the discussion and planning of treatment begins. This process can bring with it another course of feelings, such as anxiety and fear, but these emotions are normal and are always present when facing the unknown. The key to decreasing anxiety and fear is to collect all pertinent treatment information then make choices about the treatment options. Information is power. The more informed and educated you are the more in control you will feel. Your oncologist will present you with the regimen specific to your disease, and the process of questions and answers will begin.

There is a great deal of medical information and terminology to become acquainted with. It is recommended that you take a family member or friend with you to your doc-

tor visits to help document the information. Having a second pair of ears will ensure that you have the details from your medical visits accurate and will help eliminate unnecessary stress.

If you are unclear about what has been discussed with your doctor, call him or her back. Don't be afraid to ask the question(s) again. Your doctor would prefer that you ask them again, rather than be riddled with anxiety. Starting a treatment log will serve as a history keeper for both you and your doctor and become a great friend to you. Creating a legend of symptoms, e.g. "F" for fatigue, "N" for nausea, etc., will give you a sense of control and competency during treatment. There is such an emotional depletion after being diagnosed that creating simple disciplines can rebuild your sense of autonomy. [\(continued on page 2\)](#)

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## Weeping Willow

### Anticipatory Grief

**G**rieving and mourning have always been associated with the finality of death of a loved one. But often feelings of grief and loss can be experienced before the death of a loved one. We call it "anticipatory grief." Anticipatory grief is similar to those grief reactions after a death, except that they occur concurrently, while the person is still alive.

There are two important aspects that determine anticipatory grief. The first is how intense the attachment is to the terminally ill person. Secondly, what are the past, present and future losses that have and will occur as a result of the dying process and death. It is important to emphasize that anticipatory grief does not, nor can it, replace the state of bereavement that occurs after the death of a loved one. There are no short cuts in grieving a loss.

The attachment that existed prior to illness and the one that takes shape with the dying process can bring on grief reactions in both subtle and dramatic ways. Caregivers have described that they cry a lot, that they [\(continued on page 3\)](#)

## ABC's of Treatment continued from page 1

Regard treatment as your current job and you're the boss. This will create a more positive experience.

### TREATMENT OPTIONS

The three major types of treatment are surgery, chemotherapy and radiation. The protocol of treatment will be determined by the staging, grading and type of cancer. Tumors are staged from one to four (I to IV) based upon how far the cancer has spread from its point of origin. The grade of a tumor is how similar the cells are to normal cells. The doubling rate is how fast or slow a tumor grows in size.

In order to determine type, stage and grade of cancer, surgery is performed and a small piece of tissue or tumor is removed. This is called a biopsy. The complete removal of a malignant tumor is called a resection. Reducing the size of a tumor is referred to as debulking, which is often done so that other treatment can be more successful. Palliative surgery is performed to minimize symptoms and create a better quality of life. Reconstructive surgery is done after the removal of cancer. For example with breast cancer, a mastectomy is performed and a reconstructed breast is created.

Chemotherapy is the dispensation of medication designed to destroy or immobilize malignant cancer cells. Chemotherapy can be admin-

istered through intravenous, intramuscular, subcutaneous injection or by oral medication.

External radiation is the use of machines that produce gamma rays or x-rays that target tumors for reduction or arrest. Radiation is also used for palliative reasons in decreasing pain and discomfort from advanced stages of disease. Internal radiation is the use of radioactive substances like radium implanted directly in or near the tumor site. Unlike chemotherapy, radiation does not affect healthy cells;

- **A** – *Ask Questions*
- **B** – *Be Gentle With Yourself*
- **C** – *Count on Your Survival Kit*

however, it does have its common side effects.

There is enormous trepidation surrounding chemotherapy and radiation but it is imperative to understand that everyone responds differently to these treatments. What may cause side effects for one person may not affect you. Chemistry is unique to the individual and the response to medication, even over-the-counter drugs, differs for each person. Preparing yourself mentally and emotionally will make a world of difference, and this is where being gentle with yourself comes into play.

### "B"

#### *Be Gentle With Yourself*

People have a tendency to make expectations of themselves based on ideals about being "strong." When they start experiencing fear or insecurity many people become self-punishing and depressed. Being a strong person does not mean you can't or won't experience these emotions. There is no right nor wrong way to feel. Much of the stress connected with treatment focuses on the treatment's side effects. Rest assured that your oncologist can prescribe medications to ease the side effects. The key component will be how you take care of your emotional and spiritual needs.

From a cognitive view, understand that treatment is temporary, it is not forever. This truth, if used as a mantra, will help to get you through the challenging moments of treatment. Another way to promote well being and a sense of control is to use a calendar. Cross off each day that you complete treatment and say to yourself that you are one day closer to being finished. This positive framing is empowering.

### "C"

#### *Coping*

The coping tools a person uses to face the challenges of cancer is what I call their "Survival Kit." Courage is the ability to confront fear; taking an honest inventory of your strengths and weaknesses will prepare you for your journey. ([cont'd on page 3](#))

**ABC's** continued from page 2

Although it is very important to depend on loved ones for support, you are your best ally: no one knows you better than you know yourself.

Cancer is a disease, not a sickness. Separating the connotation of being sick with a disease will allow you to feel differently about yourself. You are not your disease, it is just another part of you. Who you are as a whole is what matters, and this is what will make you feel more like a victor and less like a victim. Your survival kit should include all the things that make you feel cushioned and centered.

Many times due to fatigue, people find they can't do the things they've enjoyed prior to their disease and feel helpless. Restructuring your boundaries and creating new goals of what you expect from yourself will make you feel like you are not losing yourself to your disease. For instance, you may find that you can only walk one of the three miles you usually walk. Instead of feeling defeated by your old routines, compensate for the transition. For example, if you become bed-bound during treatment, meditating, listening to music, reading or drawing with your children are alternatives that are both relaxing and meaningful. Just because you can't do the things that you used to do, your self-worth need not be diminished. Your worth comes from who you are, not what you do. ###

**Anticipatory Grief** continued from page 1

rehearse what their loved one may look like when they are dead; experience thoughts about how they will live without their spouse (or other family member); even express comments like, "I don't know how to pay the bills" or "fix the washing machine." These expressions can be indicative of anticipatory grief and considered a loss on their own. All these losses, whether they be past, present or future, can generate responses of grief and mourning. Each stimulates and prompts the need to cope with feelings of loss.

It is an arduous task to take care of someone who is dying. If you are the one providing direct care, the feelings of loss can be overwhelming; it is therefore important to recognize the signs of anticipatory grief, due to the high risk of burnout, of trying to be prepared for something that is unpredictable. Seeking help, like joining a support group, talking to your clergy or seeing a grief therapist, will help you with these feelings.

There are two important features to understand about anticipatory grief. One is that it can provide us with opportunities to forgive and have closure for both the dying person and the caregiver. Second, it allows time to incrementally accept the reality of our losses. This in itself is a monumental subject. Resolving past conflicts can provide enormous healing for the living, as well as for the

dying person. Sharing feelings, good or bad, even from the past, will not advance the death of a terminally ill person. It is never too late to have intimacy with someone you love. There is no better time to say "I love you," or "I'm sorry," or both than when a person is dying, if these feelings have not already been communicated. If not shared, you may spend the rest of your life tormented with guilt and regret about what you could have said or things you always wanted to know from that person. Remember once someone you love dies, the opportunity for closure dies with that person.

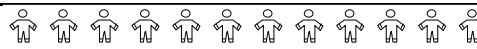
Anticipatory grief can be a motivating factor. Practical things like preparing a will or organizing financial matters can be put into motion and settled, thereby allowing you, as the caregiver, an opportunity to spend quality time with your loved one. It can also give you a head start on changing your own persona and current outlook on what your life means to you. Death has a way of changing the definition of our lives, if we allow it. Including the dying person in your future goals and plans will derail the feelings of betrayal people commonly have when they go on with their lives. It allows intimacy and unconditional love to bloom. ###





### Comfort Corner:

- ☞ Think about what gave you pleasure as a child and try to recreate it.
- ☞ Forgive yourself for your mistakes, you're allowed to be human.
- ☞ Send yourself a bouquet of your favorite flowers.
- ☞ Cuddle or take a nap with your pet.
- ☞ Make a list of all the people you have loved and who have loved you in your life.
- ☞ Have faith that everything that happens to you has a positive meaning, even though it may not be obvious at the time.



### Group Programs

**SONATA™** is a bereavement support group for those individuals who have lost a loved one to a long-term illness.

**AVALANCHE™** is a bereavement support group for those who have lost someone through sudden death.

**TEDDY BEAR CLUB™** explains death, dying, grief, bereavement and mourning to children ages 5-9 years old who have lost a loved one.

**KALEIDOSCOPE™** helps children 10-15 deal with the process of grief.

**HEART & SOUL™** is a support group for couples touched by cancer. This program deals with the issues related to the affects on marriage, children, finances, and sexuality.

**BREATHING ROOM™** This program is designed to meet the emotional needs of anyone who has been diagnosed with lung cancer.

**Living With Dignity, A New Jersey Non-Profit Corporation** is a 501(C)(3) tax-exempt organization. Services to the community are made possible through public and private grants and donations.

Should you wish to learn more about how you can become an active participant with **Living With Dignity** by donating your time, talents, gifts in kind, a direct donation to the organization, or by holding a fundraiser, please contact:

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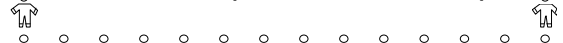
**e-mail:** cancercounseling@att.net  
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**PEERING THROUGH™** offers an opportunity for individuals who have lost a spouse to cancer to meet with "peers." It allows individuals to share their experiences through a unique blend of social activity and professional support.

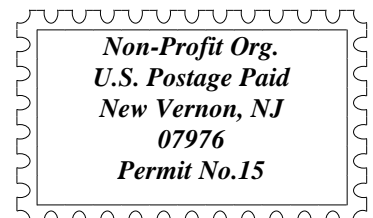


**SANCTUARY - A Two Day Retreat for Women Living With Cancer™** is specifically geared towards meeting the emotional and physical needs of women living with cancer, through various therapies and workshops.



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