WHAT IS THE COST OF MY CANCER CARE?

WHAT THE PINK SISTERHOOD MEANS TO US

CELEBRATING SURVIVORSHIP FOR 45 YEARS

THE POWER OF “AND”

ERIN GRANT’S New Strength
October is Breast Cancer Awareness Month.

Sixteen professional women surfers will submit their top surf video clips in an online competition for a chance to win Ambry Genetics BRCA1/2 testing vouchers for a cancer clinic or foundation, so women can be empowered to understand their risks and take charge of their health.

Join the battle! Vote for your favorite surf clip in October!

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FALL 2016
MORE THAN A MAGAZINE
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when you’re living with breast cancer

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Dear friends,

We can choose to see ourselves as so much more than the label of being a patient and more than the identity of our gender and more than a diagnosis of a disease.

Our choices in life do not always have to be exclusive one of another. In many instances we can have more of our healing needs met by ramping up the word “and” in our daily conversations. When we exercise our options to ask for this and more, it might surprise others, but oftentimes this shifts our way into receiving something greater for our healing needs.

We can ask substantive questions using this powerful little word: What does this cancer care cost and how will it benefit me? Will you please read my chart carefully before meeting with me and then speak with me respectfully and in terms that I can understand? Will you help me find transportation to my chemo treatments and can you recommend a support group? Will you pray for me and the pink sisterhood?

In this issue, I invite you to carefully read the article on choosing both mammography and medical-grade thermography to help screen for breast cancer and breast cancer recurrences. The process is very simple and non-intrusive but it is important to know to make your appointment with a medical-grade thermographer.

In this issue, you will read about four women and how their “and” continues:

- Erin Grant, a stage IV thriver, realized that she wanted to arise with strength and she wanted to give meaning to her life by standing up for other women facing stage IV breast cancer.  
- Karen Kmetz, a stage IV thriver, exemplifies the power of having her needs met as a patient and as a person by engaging in new hobbies, interests, breast cancer retreats and cruises, and having special time with family and friends.
- Teresa Rhyne, an attorney from California, was guided by her dog on how to thrive after hardship and during treatment and in her post-cancer life by her dog.  
- Kathleen Capasso, a 45 year thriver, had the best birthday of her life at age 80 and the celebration continues.

I invite all of us to lean on the value of “and” by consistently engaging this powerful little word into our daily lives:

- We can pray healing and wellness for ourselves and we can pray this for others.
- We can forgive our trespassers and we can receive forgiveness for ourselves when we have trespassed against others.
- We can ask for the best of all medicines and we can do our best to empower ourselves.

How can you use the power of this little word to receive more of what you need?

Be a Thriver on your terms, in your style!

Publisher and 24 Year Breast Cancer Thriver

NOMINATIONS OPEN OCTOBER 1

Submit your nominations October 1 for the BCW Annual Awards. Visit www.breastcancerwellness.org for more information.
Why is Medical-grade Breast Thermology (MGBT) important for women who have been diagnosed with breast cancer and women who are concerned about their breast health?

MGBT can evaluate women with a diagnosis of breast cancer for additional sites of disease that require treatment. MGBT can also evaluate the effectiveness of adjunctive (non-surgical & non-traditional chemotherapy) means of treatment for breast cancer.

MGBT is effective for:
- Women of all ages.
- Women with dense breast, fibrocystic disease, women with large or small breasts, pregnant or nursing women and women with breast implant(s) and those who have had breast reduction.
- Detecting Ductal, Lobular and Inflammatory Breast Cancer (IBC).

What are the benefits of MGBT?

MGBT is:
- Oftentimes able to provide the first indication of breast cancer after treatment.
- Completely passive (no radiation or magnetism) and involves no physical contact with technicians or equipment.
- Completely compression free and does not use any injected dyes.
- No physician referral needed.
- Effective for women of all ages and isn’t compromised by dense breasts, fibrocystic disease, breast size, breast implants or breast reductions.
- The least expensive means of screening for breast cancer.

What is Medical-Grade Thermography?

Medical-grade Breast Thermography (MGBT) is the process of obtaining highly detailed and sensitive infrared images of the human body. Those images are then analyzed and reported by a Board-Certified medical specialist using a scientific method.

Be aware that not all providers of breast thermography provide Medical-Grade Breast Thermography.

Medical-grade thermography is oftentimes referred to as thermology, digital infrared imaging, diagnostic infrared imaging, infrared mammography or tele-thermology. It involves the use of a highly resolute and sensitive infrared (thermographic) camera.

Medical-grade thermography offers a safe, non-invasive procedure that evaluates the levels, patterns and behavior of the skin’s temperature.

- Thermography is accepted by the US Dept. of Health and Human Services as an adjunctive diagnostic procedure for breast disease.
- Medical-grade breast thermography (MGBT) is derived from more than sixty (60) years of extensive clinical development and has a sound basis in medical science.
- Medical-grade breast thermography (MGBT) evaluates tissue function and is distinctly different from structure-based diagnostic methods, such as X-ray mammography, MRI and ultrasound.

The process for professional medical-grade breast thermography (MGBT) screening takes only minutes. A special infrared camera takes images of the bare breast or breast area and the images taken provide valuable data for thermologist to evaluate for further diagnostic testing. No technician or equipment comes in contact with the client.

More details about MGBT screening are available at thermascan.com.

Why do you need both mammography and MGBT?

Outcome studies of the large-scale mammography screening programs have proven that mammography by itself doesn’t provide effective screening for women before menopause, women with dense breast tissue or women with fibrocystic disease.

Moreover, screening mammography has
resulted in problems with the ‘over-diagnosis’ of breast cancer that has resulted in a great deal of unnecessary, expensive and dangerous treatment. Evaluation of mammography is based on tissue structure. Mammography can provide specific locations for biopsy (tissue sampling) for an actual diagnosis of breast cancer.

MGBT can provide an effective screening for women for whom mammography isn’t effective. MGBT is based upon tissue function and complements mammography, ultrasound and MRI by its ability to indicate breast cancer in a completely different manner. MGBT can indicate the relative aggressiveness of breast cancer and off-set the over-diagnosis issue of mammography. MGBT can’t locate a suspicious breast cancer with sufficient precision to perform a biopsy (tissue sampling).

You and your medical team will be relieved to know that MGBT:
- Is based on tissue function (physiologic) rather than tissue structure (anatomic).
- Can indicate breast cancer at its earliest stages which oftentimes enables the best options for successful treatment.
- Can indicate the more aggressive types of breast cancer that need more aggressive treatment.
- Has a diagnostic sensitivity of approximately 95% and a diagnostic specificity of approximately 90%.

How often is MGBT screening recommended?
- Most women only need annual screening and most women should begin routine thermography screening in their early 30’s.
- Women at higher risk for breast cancer (by familial or personal risk factors) may need to begin screening at younger ages and shorter intervals.
- Women with equivocal results of other means of screening or prior MGBT usually require more frequent and multi-modality screening.
- Women already treated for breast cancer also need more frequent screening against the possibility of persistent or recurrent disease.

What is the range of costs for MGBT?
Costs range from $150 to $350 depending on location in the country. There are insurance codes for MGBT but at this time no known insurance companies are covering the costs. This investment for your life can be provided through your health savings account or through personal crowdfunding or as a special gift to yourself.

Just about everyone reading this article has a direct experience with breast cancer that has given them personal knowledge. All knowledge comes with a teaching obligation that, in this instance, can benefit and even save the lives of our friends and family. Discover more about MGBT by visiting http://www.thermascan.com.

Therma-Scan™ is medical grade. All images are compliant with HIPAA regulations.

ABOUT THERMA-SCAN™

With more than four decades of experience with thermal imaging, Therma-Scan™ was founded in 1972 by Phil Hoekstra, PhD. and his late father. Therma-Scan™ is located near Detroit Michigan and is the world’s premier source for the analysis and reporting of medical thermology.

Therma-Scan’s commitment to innovation, integrity and the highest ethical, technical and professional standards in the practice of diagnostic infrared imaging has evolved into Therma-Scan™ being the most experienced and accomplished provider of medical thermology in the world. Dr. Hoekstra is proficient and certified by the American Board of Thermology in oncology, neuroscience and vascular thermology. Dr. Hoekstra has have combined these abilities in each of the sub-specialties to develop a dynamic (Cold) challenge as a powerful component of a quantitative analytic system for the earliest indication of breast cancer. In a practical sense, Therma-Scan™ invented medical thermology.

In an absolute sense, Therma-Scan™ invented the reference laboratory for medical thermology in 1975. They have analyzed and reported more than one million patient studies for more than forty network partners worldwide, all using medical-grade digital infrared cameras and imaging technique according to rigorous standards.

Therma-Scan™ is medical grade. All stages of data transmission and storage are compliant with HIPAA regulations.
What’s the cost?

THE QUESTIONS YOU NEED TO ASK & THE ANSWERS YOU DEMAND TO KNOW ABOUT THE COST OF YOUR CANCER CARE

BY MOLLY MACDONALD

Note from the author: If you are reading this article, you may be a new Survivor, experiencing a recurrence; or just like reading my columns. Whatever the case, I hope you will find the following information helpful to you or someone you know.

Getting the News

After the shock wears off from hearing the words that often begin with “I’m sorry,” and end with “you have breast cancer,” we survivors work with our healthcare team to create a treatment plan to save our lives.

For many of us it’s a long road, riddled with multiple surgeries, and physical, mental, and emotional side effects that vary patient to patient.

Your doctors will discuss your treatment options, while doing their best to minimize what can often be very challenging side effects. They will prescribe medications, and may make suggestions for integrative care like acupuncture.

They may also suggest joining a support group at your hospital, at your church or in your community or reaching out to national breast cancer organizations that support survivors such as Cancer Support Community, Gilda’s Club, Young Survival Coalition, or Living Beyond Breast Cancer to manage some of the emotional and psycho social aspects of cancer treatment.

But there is one side effect that is most often not discussed, and that is financial toxicity: the cost of care and out of pocket co-pays and deductibles. Adding insult to injury, the cost of lost wages when you must take time off from work for treatment and recovery can make you feel a little like Alice when she tumbles down the rabbit hole, going into financial freefall.

In May of this year DailyWorth.com reporter, Julia Sonenshein, wrote “a 2009 study in Pharmacoeconomics estimated people with breast cancer could pay between $20,000 and $100,000 in co-pays, depending on their health care coverage, length of treatment, type of care, and other variables.”

Those numbers alone make one’s head spin, before adding in the cost of lost wages.

A 2014 story in The ASCO (American Society of Clinical Oncologists) Post, reported 37% of cancer survivors surveyed experienced a financial or work-related hardship and said they had to make at least one work modification due to a cancer diagnosis. Just ask a group of breast cancer survivors about work and cancer and they will often admit to the financial hardships that come from loss of income.

Some survivors are eligible to take a medical leave under the Family Medical Leave Act. FMLA will allow up to 90 days of UNPAID leave in a calendar year. While this will ensure you can return to work, it will not ensure your checkbook stays in the black.

And unless you are one of the few and far between, who have been able to sock away at least three to six months cash savings, this unpaid leave can result in unpaid bills and the potential for catastrophic financial losses, including the loss of one’s health insurance.
It is fair to ask and get an answer about the cost of a particular treatment. Remember, you are in charge of not only your physical health but your financial health. Asking and getting an answer, may not change your treatment plan, but it may well change how you plan to pay for it.

residence, car and the shut-off of utilities. The result is the emotional, mental and physically debilitating, often life-threatening financial side effects induced by cancer treatment,” according to S. Yousuf Zafar, MD.

I know this all too well as I experienced it myself in the summer of 2005.

At the time of my diagnosis I was transitioning between jobs, unprepared (aren’t we all?) for a cancer diagnosis which detoured my career plans to the off ramp while I underwent treatment. My early stage disease spared me from the ravages of chemotherapy, but the loss of my income and the cost of a COBRA health insurance premium of $1200 a month, ravaged our financial health.

In the Journal of National Cancer Institute, Volume 108, Issue Five, Zafar goes on to say, “Chemotherapy related physical toxicity is a central focus of the cancer treatment process, but a nationwide survey shows we need to pay more attention to and create a dialog about the effects that financial burdens have on breast cancer treatment strategies and outcomes.”

So what is a patient to do?

The reality is we must face the facts that cancer treatment is expensive. And we must arm ourselves with knowledge.

Our lives and financial health are worth it!

This means having the hard conversations about how to financially manage the cost of treatment and the potential for lost wages. Growing up, my parents constantly reminded me of four topics of conversation that were off limits:

• Religion
• Politics
• Sex, and
• Money

One’s financial health or lack thereof was a private matter. You were not to discuss it nor ask about it. So I know talking with others about your personal financial concerns can be difficult.

Particularly when you are already feeling vulnerable. To have to talk about our fears around money and the cost of cancer care can be embarrassing. But believe me, this is not the time to bury your head in the proverbial sand and hope it will all go away. It is the time to be proactive. But how?

In the words of Dr. Susan Love, author of Dr. Susan Love’s Breast Book, “Get yourself an advocate.” Ask your most assertive friend or family member to speak on your behalf. Dr. Love suggests asking your meanest, take no prisoners type. The friend who won’t let anyone off the hook until he or she gets the answers YOU need.

Take this friend to your appointments and ask them to take notes. You could even record the visits, as so much is lost in translation. We know from detectives interviewing witnesses of crime scenes, people who have been in the same place at the same time, tell vastly different stories of what they saw and heard. It is the PTSD syndrome, which applies to cancer as well, and can happen in a treatment setting. We are under duress, trying to process so much information. Our minds are racing. Even your friend could get it wrong.

Begin by asking the doctor’s permission. Say, “I really need to record this in order to properly process and understand it.”

However, be prepared, permission may be denied. Here is a link to the Cullman Regional Medical Center where their Good To Go Discharge instructions can be used on an Apple device. If your doctor balks, feel free to share this link as a recommended best practice. http://www.cullmanhospital.com/for_patients_guests/good-to-go_discharge_instructions.aspx

On a side note, we record our Board meetings at The Pink Fund. When the minutes are being written for consideration, I am often surprised and say, “oh that did not happen that way,” until our Secretary sends me the recording, confirming in fact, it did.

Money Talk/What to Ask First

According to Cancer.net, the first questions you ask your doctor should be:

“I am worried about costs related to my cancer treatment and my ability to work while in treatment. Can we talk about my concerns?

Who handles concerns and questions about health insurance in this office or medical center?

Will this person help me work with my health insurance provider?

Will this person help me figure out my medical bills and the codes to make sure they are correct?

This is critical. Mistakes can result from typos or overcharges. I just had a tomosynthesis mammogram and was assured when I booked the appointment, it would be 100% covered. So imagine my surprise when I received a bill for a $39.72 co-pay. I called the hospital and disputed the amount and it was removed. And while $39.72 is not a great deal of money, it represents the cost of one tank of gas, or my monthly Chardonnay budget.
Small numbers add up. Question everything. How much is my co-pay for each doctor visit?

Do you offer a payment plan?
NEVER OFFER UP A CREDIT CARD.
This is the time to ask to speak to a nurse navigator or financial counselor at the hospital. I negotiated my co-pays in half and then agreed to a payment plan in writing of $100 a month. It took me three years to pay it off, but I did so faithfully.

What is my prescription co-pay for this drug?
If I cannot afford the recommended treatment plan, can we consider other treatment options that don’t cost as much?

Supersizing Treatment
My friend and sister survivor Laurie Tennent, not-so-kiddingly talks about “supersizing your treatment” She says, “well we are going to do an MRI and give you a side of fries with that, and it can cost you $800 dollars, but they don’t tell you because they don’t know.”

Well, you need to know.

It is fair to ask and get an answer about the cost of a particular treatment.

Remember, you are in charge of not only your physical health but your financial health. Asking and getting an answer, may not change your treatment plan, but it may well change how you plan to pay for it.

What about working?
As reported in the October 2014 edition of the ASCO Post, the Palliative Care in Oncology Symposium “of nearly 1600 cancer survivors indicate a high prevalence of financial and work-related difficulties. Women were disproportionately burdened by these challenges.”

Knowing this, ask:
Are there ways to adapt my treatment schedule to my work schedule so I lose as few work days as possible?

Other Questions to Ask
These questions and more covering every aspect of treatment and recovery can be found here: www.cancer.net/navigating-cancer-care/financial-considerations.

The Good News
The good news is physicians are beginning to understand and realize the need to have the hard conversations around the cost of care.

Nandita Kera, MBBS, MPH Division of Hematology/Oncology, MayoClinic, Phoenix, AZ wrote in the September 2014 Journal of Clinical Oncology, “If we, as a profession, believe that financial toxicity is an important effect of cancer treatment that can be as devastating as other adverse medical events, it behooves us to find a way to capture the full impact of cost on the lives of our patients and to discuss this frankly, and openly, with the same rigor as any other treatment-related toxicity.”

The Better News
Survivors are becoming more empowered to be their own advocates, ask the right questions and demand answers. Your life and livelihood are worth it.

As always email me, Molly@ThePinkFund.org or visit our website for a list of additional financial resources, www.thepinkfund.org.
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I had such a wonderful time meeting so many of you on the Thrivers Cruise! It was an amazing opportunity to come together and share our stories, to laugh and cry, and to marvel at our combined strength as powerful women! For those who were not lucky enough to cruise this year, and as a reminder to those who were, here are some “tips” that I find helpful. I hope you do too!

TIPS FROM TERESA

• Listen to your body
• Surround yourself with positive people
• Keep active
• Don’t take yourself too seriously – laugh!
• Look good to feel good.
• Pamper yourself!

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— Raquel Welch, Creative Director, Raquel Welch Wig Collection

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CALL 800-663-3758 OR VISIT RAQUELWELCHWIGS.COM
Our body accumulates toxins from many sources every day, including the air you breathe, the food you eat, the water you drink, personal care products, cleaning products, and even natural chemicals produced from the negative emotions that you feel. These toxins clog your system and interfere with its ability to function well. They are also known to increase your risk of many different diseases, including breast cancer. According to Ayurveda, the ancient system of holistic medicine from India, these toxins obstruct the flow of your inner intelligence, which prevents it from keeping you well.

Your body has the ability to naturally detoxify itself. But, you can give it a huge boost by using the ancient purifying technique from Ayurveda known as panchakarma. Research shows that panchakarma is very effective at getting toxins out quickly—even those that have been stored in your fat for years. It’s not painful or unpleasant—quite the opposite. In fact, it’s one of my all-time favorite, personal-pampering experiences. Panchakarma literally means “five actions.” It is an integrated precise sequence of soothing treatments done in a spa-like setting with medical supervision over the course of several days. The treatments are gentle and deceptively simple, but their effects are remarkably powerful. The healing intelligence of the body is given such a boost through the techniques of panchakarma that it’s capable of triggering phenomenal purification and healing.

**DISLODGING IMPURITIES AND TOXINS**

A study published by Bob Heron and John Fagen in 2002 in the journal *Alternative Therapies, Health, & Medicine* found that, in test subjects undergoing panchakarma, their levels of polychlorinated biphenyls (PCBs) and pesticides, including DDT, dropped by 50 percent after just one five-day series of treatments. Dr. Heron also tested subjects who had gone through panchakarma an average of twice a year for more than nine years. Every toxin the subjects were tested for came back negative. In other words, no toxins were present in levels high enough to be detected. The researchers concluded that regular panchakarma treatments are effective at removing toxins from your body and keeping your toxin load extremely low. In fact, research shows that the only known effective therapy that rids body fat of toxic chemicals is panchakarma.

As you know, your body accumulates and stores hundreds of toxins from the environment and the foods you eat. You
Financial Assistance for Breast Cancer Patients

The Pink Fund is a not for profit 501(c)(3) public charity. Your donation will be used to help cover non-medical cost-of-living expenses, such as health insurance premiums, housing, transportation and utilities.
also accumulate impurities from the waste products that are created by normal cellular metabolism. In Ayurveda, all toxins in the body form ama. Too much ama leads to disease. According to Ayurveda, one of the main purposes of panchakarma is to get the ama out.

Panchakarma also profoundly balances the mind/body and prevents or reverses the development of disease. Preliminary research indicates that it may slow the aging process, too. The first time I went through this series of gentle but powerful techniques, within forty-eight hours, I looked ten years younger and had never felt better in my life! That experience made me a believer in the power of Ayurveda.

The majority of panchakarma is done in a medical spa-like setting over a period of time of between several days and several weeks. For the best results, you should go for a minimum of three days and ideally stay five to seven days. But before you arrive at the spa, you begin the initial steps of panchakarma at home. “Home prep” is designed to begin the process of softening impurities and toxins, and mobilizing them from your fat.

After completing the first phase of panchakarma, you are ready for the relaxing and enjoyable part: the in-residence treatments at an Ayurvedic medical spa. When you arrive at the clinic, an Ayurvedic physician, called a vaidya, takes your pulse and asks you a series of questions. The vaidya picks up a lot more information from your pulse than just your heart rate. In fact, an expert in pulse diagnosis can feel, with remarkable precision and accuracy, the state of balance and imbalance in all your body systems and tissues.

The vaidya has many treatments to choose from, each with its own special benefits and purposes, but all with the ultimate purpose of restoring balance. Two examples are abhyanga—an herbalized, sesame-oil massage and shirodhara. Abhyanga is performed by two technicians who apply warm oil simultaneously to each side of your body using synchronized movements designed to facilitate getting the toxins out while soothing and balancing the nervous system. The pressure is soft, and the movements are extremely relaxing.

When both sides of your body are stimulated in the same way at the exact same time, the brainwaves in the two hemispheres of your brain will synchronize. This brainwave phenomenon is also seen during the practice Transcendental Meditation. Not surprisingly, people who practice this highly effective form of meditation report the experience of “transcending” during abhyanga.

Researchers have observed that there is a strong correlation between the synchronicity of brainwaves and depression. Depression is characterized by very asynchronous brainwave patterns, meaning that the brainwave patterns emitted by one hemisphere of the brain are very different from those emitted by the other side. Researchers have found that when a person experiences relief of depression, their brainwave patterns become more synchronized. Panchakarma synchronizes your brainwaves. Researchers think that this may be why it’s so effective at easing depression.

Shirodhara is another example of one of many techniques used in panchakarma. This procedure is designed to relax your mind, soothe and nourish your nervous system, and detoxify your body. A gentle stream of slightly warm herbalized sesame oil is applied to your forehead. Shirodhara is actually considered a cooling treatment. Your eyes are covered with cotton balls and a washcloth. A soft roll is placed under your neck so that your head is tilted slightly backward. The technician applies a very slow stream of sesame oil back and forth across your forehead in an infinity (or figure-eight) pattern. Most people experience deep relaxation and an expanded state of consciousness when undergoing this procedure.

Shirodhara is particularly good for alleviating anxiety, insomnia, nervousness, and worry. It also improves malaise and stabilizes the mind. And it’s good for your skin, too. Many people notice a distinct glow to their complexion following a soothing, relaxing, peaceful session of shirodhara.

MANY IMMEDIATE AND LONG-TERM BENEFITS

After completing panchakarma, people report having greater energy, clarity of mind, and a sense of well-being. They also report relief of symptoms and improvements in disorders of both the mind and body. Research shows that panchakarma rebalances the physiology and significantly reduces oxygen free radicals, which are known to increase your risk of cancer and other degenerative disorders. In 1993 in the Journal of Research and Education in Indian Medicine, H. Sharma, M.D., documented those patients undergoing panchakarma had an initial rise in lipid peroxidase, an enzyme that goes up in the presence of oxygen free radicals. But following the therapy, lipid-peroxidase levels fell far below pretreatment levels. These findings correspond to the rise of toxins in the blood as they are mobilized during treatment and the fall of toxins after they are eliminated from the body.

Researchers have also found psychological improvements in patients following panchakarma. Standard psychological tests show that these people are less anxious, less depressed, less distressed, and less fatigued. In 1988, researcher Rainer Waldschütz
used the Freiburg Personality Inventory, a standardized test that measures twelve different personality scales, to evaluate patients who had just finished panchakarma treatments. These post-panchakarma patients showed improvements in six of the twelve scales: decreased body complaints, reduced irritability, less bodily strain, fewer psychological inhibitions, more openness, and greater emotional stability. *Panchakarma* also significantly improves several cardiac risk factors.

Blood samples taken from patients shortly after they completed panchakarma showed many beneficial changes. For example, vasoactive intestinal peptide (VIP)—a substance that dilates coronary arteries—increased by 80 percent. The “good” kind of cholesterol (high-density lipoproteins; HDL) increased by 75 percent, and total serum cholesterol decreased.

**HOME DETOXIFYING PROGRAMS**

If you cannot go to a *panchakarma* clinic, you can do a modified detoxification program at home. Although home detoxification programs are not as powerful as *panchakarma*, they can effectively remove toxins. Simply begin with the home-prep program for *panchakarma* described above. Then for two weeks following the prep, take herbs that detoxify the liver, kidneys, and colon. You can work with a knowledgeable herbalist to determine which herbs to take at what dosages or you can purchase a detoxification kit, such as Whole Body Cleanse from Enzymatic Therapy, from your local health shop. Also, follow a pure diet—lightly cooked fresh organic fruits, vegetables, and whole grains. Be sure to avoid alcohol, sugar, chocolate, cold foods, meat, drugs, cigarettes, and canned, preserved, and/or processed foods.

---

**Christine Horner, M.D.**

**Ginger Tea**

Treat yourself to an invigorating cup of ginger tea with this easy, tasty recipe. The secret to making really flavorful ginger tea is to use lots of ginger (more than you think you will need) and I like to add a little lime juice and honey.

1. In small pot, bring ginger and water to boil, lower heat, cover, and simmer at least 10-15 minutes. For stronger and tangier tea, boil 20 minutes or more, and use more slices of ginger.
2. Remove from heat and add lime juice and honey to taste.

**NUTRITIONAL NUGGET:** Ginger is an immune boosting root, long believed to have medicinal properties – helping with nausea and upset stomach, also having anti-inflammatory benefits.

**SERVING SIZE:** 1

**PREP TIME:** 5 minutes

**COOK TIME:** 15 minutes

**PER SERVING:** Calories 3 kcal, Calories from Fat 0%, Fat 0g, Saturated Fat 0g, Cholesterol 0 mg, Sodium 11 mg, Carbohydrates 1 g, Dietary Fiber 0 mg, Total Sugars 0 g, Protein 0 g, Dietary Exchanges Free

**Terrific Tip!**

Use a peeler to remove skin off ginger.

---

**Gingerbread Muffins**

This awesome muffin has all the flavor of your favorite spiced cookie in a moist anytime snack or breakfast muffin.

1. Preheat oven 325°F. Coat muffin pans with nonstick cooking spray or line with papers.
2. In large bowl, combine both flours, ginger, cinnamon, and cloves. Set aside.
3. In medium bowl, whisk together sugar and oil. Add molasses and eggs whisking until blended. In glass measuring cup combine water and baking soda. Stir to dissolve. Pour in egg mixture and whisk until blended. Add egg mixture to flour mixture, stirring just until combined.

**NUTRITIONAL NUGGET:** Ginger has been shown to help nausea symptoms so these muffins may be just the ticket to feeling better.

**SERVING SIZE:** 20

**PREP TIME:** 20 minutes

**COOK TIME:** 25 minutes

**PER SERVING:** Calories 161, Calories from Fat 25%, Fat 5g, Saturated Fat 0g, Cholesterol 19mg, Sodium 140mg, Carbohydrates 28g, Dietary Fiber 1g, Total Sugars 14g, Protein 2g, Diabetic Exchanges: 2 starch, 1/2 fat

**Terrific Tip!**

Freeze muffins to pop out when not feeling well and need a boost. All-purpose flour may be used, if that’s what you have.
The Breast Reconstruction Awareness campaign is sponsored by the American Society of Plastic Surgeons (ASPS) and The Plastic Surgery Foundation (The PSF). The goal of the Breast Reconstruction Awareness Campaign is to educate, engage and empower women to make the reconstruction decision that is best for them following a diagnosis with breast cancer.

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I have performed many makeovers.

I’ve seen the recipients’ lives’ change in an instant, and viewing this transformation first hand is breathtaking.

Having said this, I know in my heart that there is more to this story. Witnessing this process got me thinking. I wanted to go deeper, go beyond the serums and creams promising a temporary change and towards a truer, more authentic beauty. I wanted to uncover the meaning of an ultimate makeover.

An amazing woman came on my show promoting her book on journaling. Who knew such a simple exercise would open the doors to my heart and soul? Speaking one’s truth can sometimes be a bit confronting; possible resentments and disappointments left unresolved. My emotional load had become very heavy, and I didn’t even know I was carrying one.

Once I started journaling, I couldn’t stop. I committed fully into looking at my own life and how I HONESTLY felt about certain events. I realized that I made some decisions about myself along the way; decisions as a young girl that were not accurate and currently no longer serve me. Quite possibly, living my life from this place actually may be keeping me stuck and not living at my highest potential. I started to realize that I was not speaking my truth. So now I’ve decided to face my fears/truths.

Through journaling, I chose to look over my past experiences with a fine toothed comb; actually, I looked over every last thought. The good, the bad, and the ugly put down on paper and then released - burned, cut up, or thrown away in the nearest coffee house trashcan. What a concept! Finally getting rid of the junk in the trunk (so to speak...) that I’ve carried around unconsciously for years, just gone and tossed away.

What have I discovered, you ask? Well, let’s just say, the truth. My truth. Not anybody else’s. I now understand that uncovering and releasing my personal truths without judgement is the most freeing thing I’ve ever done. Now I have the space for the new and beautiful possibilities that lay before me. I believe this is the path to connecting to our real true beauty at our core. This is the “Ultimate Makeover.”

So, ladies, you can try all of the different beauty tips and tricks you like, and believe me, a lot of them do work. But perhaps consider “The Ultimate Makeover.” This long-lasting, deep makeover might just be the best investment you’ll ever make.

—Jan Ping

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New Seeds of Strength

“Nothing has more strength than dire necessity.”

— EURIPIDES

Since childhood people close to me have described me as stubborn, resourceful, determined, strong. Strong. That word, wrapped up in so many implications and layers, always stuck. I knew by definition what it meant. But I didn’t realize what it meant to me, and just how strong I really was, until I was forced to.

You see, I was diagnosed with metastatic breast cancer at the uniquely young age of 31. Doctors had no idea what to do with me – nothing about my case was standard, and I was informed there was no treatment protocol for me. Despite this lack of a typical course of action, I was immediately hurled into what would become years of unrelenting treatment.

In just a few hours my existence as a healthy woman in the prime of my life, boundless future ahead, came to a startling halt. I was suddenly cast as “cancer patient,” fated for a darker existence, an unclear future, and catapulted headfirst into a whirlwind of change.

It was 2009 when I was diagnosed and I was living 3,000 miles away from my friends and family with a man I believed was the man of my dreams. He said all of the right things, at all of the right times, even promising me in our wedding vows, through earnest tears, that “not even cancer could keep us apart.” We were in our early 30’s, young and invincible.

Things began to change as the reality of my situation revealed itself: I was no longer able to have children, the many rounds of chemotherapy affected my fertility, and metastatic breast cancer was something I was told I would be facing for the rest of my life.

BY ERIN GRANT

Gone was the promise of weathering the storm of cancer hand in hand. The news of my physical condition and future limitations sparked an anger in him that I hadn’t known existed, and he eventually grew psychologically and verbally abusive. In some ways, I got it: it wasn’t the future that he had imagined. He wanted a family. He wanted biological children. He wanted a healthy partner – not a wife deemed “terminal” with no cure in sight. He wanted the life we had before I was sick. So did I.

I simply decided I would no longer accept abuse in my life and I decided to end my marriage.

I was running a restaurant full-time and earning my graduate degree in social work while getting chemo, which for one period of time meant having an uncomfortable port fastened to my head. Some might call this “strength” – the balancing act of professional duties and cancer treatments. But for me, this was just my day-to-day activities.

Ending my marriage and accepting that I would not be able to have biological children – a change that was arguably on par with my cancer diagnosis in terms of trauma – was the first time that I truly knew what being strong meant.

I felt serious disappointment and sadness transitioning from the life I had imagined to the new one I inhabited. But I had also surmounted, and I found a new kind of courage to lift me up. Thus began the next chapter of my life. I had chosen to shift my focus and life’s mission on healing my life. I wouldn’t be a wife or a mother, but I also refused to be just a patient: I willed myself to embrace my new role with heartfelt determination, resolution and strength.

When I was first diagnosed with breast cancer, I told myself that I could handle whatever came my way: the treatment, the side effects, the stress, the sadness. The truth is, while I couldn’t anticipate just how much would change, and the physical and emotional pain that was to follow, I knew that I would rather be facing breast cancer than seeing one of my best friends, or my mother, or my sisters go through it.

Once my treatments began, there were many feelings that surprised me: knuckle-whitening nervousness, a longing for my pre-cancer self, blinding fear of the unknown. Early on I also experienced a ton of anxiety living from scan to scan — something many of us call “scanxiety.”

And then one day I had a breakthrough. It was as if the clouds parted, and all that I had been through – my emotionally abusive marriage, my atypical diagnosis, my need to push my professional aspirations to the backburner – came cascading down. I thought to myself, what is the worst thing that my doctors will tell me, that I have cancer? That I have to do chemotherapy again? I had already been diagnosed with cancer and had survived that. I had already undergone chemotherapy and knew that I could get through it. So why was I allowing the stress of scan results to eat me up from the inside out? Whatever they told me, it would be okay, because I’d already seen it all. I’d been in the trenches of cancer. I’d crawled on
my arms through darkness and grasped for light wherever I could. I was a veteran. I was strong. I could do whatever was next.

For me, it was about harnessing the strength that kept arising in me and that had crystallized in my post-marriage self. I vowed that my failed marriage and infertility would not define me as a woman and would not limit my capacity to enjoy more of life.

Through these seven years since diagnosis, I found something else that propelled me forward – meeting other survivors and hearing their stories. In the first few years of treatment I focused on keeping my head up and simply surviving. But then I began to grasp for something more – for a greater meaning in all of this. My story wasn’t really about being alone, or all the things that were taken away from me while in treatment. My story was about finding something bigger and greater than just me and my own struggle. I realized that I wanted to repay these women, and the cancer community, by sharing my own story and by standing up for women like me.

When I was speaking at a breast cancer conference and at the end of my speech, a young woman approached me with tears in her eyes. She told me that she had never met a woman her age living with metastatic breast cancer, and that everyone she knew who had fought this disease had passed away. I remember her eyes lighting up with hope after we spoke for only a few minutes. I, like this woman, had also yet to meet a young woman living with metastatic breast cancer, and was equally filled with hope after meeting her.

Through my breast cancer advocacy, and moments like the one with the other young survivor, I had begun to take back some of the power that I had unknowingly let cancer take from me. When everything seemed out of my control with the disease and with my personal life, I reached for the opportunity to speak with other women, to talk with them about the radiation burns, the chemo brain, the scars and the challenges in this journey. These shared experiences helped bring control back into my hands. It also gave me purpose and direction.

Through my story, I help other women understand that building upon their seeds of strength is a practice of recognizing strength in others, and when we recognize strength in others, we can more easily recognize strength in ourselves. Another tool for building upon my strengths is to do things that I truly enjoy and helping other survivors brings me joy. Living my life in a city I love with my closest friends nearby brings me joy. But the greatest joy comes from living my most authentic life with the knowledge most people search a lifetime for; that every moment is precious and is meant to be lived to the fullest.

Today I am thankful. My first oncologist told me I would make it to age 34 if I was “lucky.” Well, I must be exceedingly lucky, because I’m turning 38 this fall.

My plans for the future are simple: To open my windows each morning and relish in the sunlight, to walk down my city street and admire a colorful patch of flowers, to slow down, to talk, to connect, to keep finding new seeds of strength – for myself, for other women facing metastatic breast cancer.

Erin Grant is a clinical social worker, an active fundraiser for the nonprofit Metavivor and a patient ambassador. She currently lives in Brooklyn, close to friends and family. You can contact her at ErinLeigh912@gmail.com.
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I am 52-years old and am married to my wonderful husband David. We have an old Golden Retriever named Hannah. I am a web graphic designer for the Duquesne University School of Nursing in Pittsburgh, PA. I create graphics for our public web site, student intranet site, PowerPoint shows for faculty, posters for faculty, flyers and other assorted materials.

I was diagnosed on August 7, 2008, a date I will never forget. How can you forget when you hear those words “You have breast cancer.” As I went through all the testing and scans, I found out that it was also in my liver, so here I was with stage IV breast cancer at age 45. After six rounds of the TCH protocol (Taxatere, Carboplatin, Herceptin) it was gone from my liver and the breast tumor was responding well, so I was on Herceptin for another two years until the tumor stopped responding. At that point, it was time for a modified radical mastectomy. The surgery went well and I was off work about ten days for healing. I went back on Herceptin for another two years until a tumor showed up on my adrenal gland, of all places! So more surgery to remove the adrenal gland – there are days I feel like Frankenstein with all the scars.

Not quite two years later, my scans showed spots on my lungs, liver and stomach lining (I didn’t know I even had an exterior stomach lining). So my doctors recommended more chemo, Perjeta, Herceptin and eventually I grew more new hair! It came back curly again, or as I called it, my “chemo curls.” All was well for another year until more spots on lungs, liver and stomach lining. So now the drug of choice is Kadcyla (TDM-1), one of the latest drugs for metastatic breast cancer. It uses Herceptin, but has chemo attached to it. When the Herceptin finds and attaches to breast a cancer cell, it releases the chemo only into that cell. They call it a “Trojan Horse” drug – amazing! The latest scans showed the spots were either shrinking or gone.

David took over much of the housekeeping duties, although I did the
laundry because once he put my jeans in the dryer and we ladies know what that means! He cooked all the meals (when I could eat), he encouraged me take a walk every day to keep up my strength, and he cleared my drain after my mastectomy because he knows how squeamish I can be.

Linda is my only sister and my close friend; through this cancer experience our relationship became more important for both of us. Linda is Executive Director of UPMC Schools of Nursing. She and my husband went with me to all of my doctors’ appointments and treatments. Sometimes we all heard the same thing and sometimes we each heard something much different. It really helped to have more than one set of ears.

I realized that I needed support and interaction with other women who were going through the same thing I was going through. I joined a local cancer group called Our Clubhouse which was formerly Gilda’s Club. They have wonderful support groups as well as lots of fun things to do such as jewelry making class, yoga, knitting, and helpful lectures. I also had the opportunity to participate in Casting for Recovery, a weekend for breast cancer survivors to learn how to fly fish. The setting was beautiful and the other survivors were awesome.

Another great opportunity was Camp Raising Spirits, a weekend retreat for adults with cancer, which is run by the Greater Pittsburgh Chapter of the Oncology Nursing Society. My sister and I went and met so many wonderful people. It was nice to forget about cancer for a while. We liked it so much that we have gone for several years and we are now both on the Planning Committee for the camp.

Before my diagnosis, I would hear about someone having cancer and think that I could never get through anything like that. I didn’t know how strong I was until I was diagnosed. I was scared, but even more when I found out that it was already in my liver. We came home from that appointment and I just started crying. My husband cried too, but after about five minutes, I stopped and said, “What am I doing? We have a game plan from the doctor, let’s get started and get through this.” That was the only time I cried.

This journey has definitely brought my husband and me closer together. He is not one to show emotion, but he became more
loving and attentive as time went on. When I was exhausted after a treatment, he waited on me hand and foot even though he had worked all day. Seeing him working so hard to make sure that I was comfortable gave me even more strength and incentive to get through the challenges of this disease.

I was able to work a lot during chemo treatments. I usually took the week of chemo off to recover, then went to work the following two weeks. I have a great support system at work – around 30 nurses, mostly women, with whom I talk about anything that is bothering me. Through their support and encouragement, I learned to accept help into my life which helped me to be stronger throughout this experience.

Because I am more than a disease and more than my work, I have other interests too. My hobbies include anything that does not require a computer, such as, jewelry-making, crocheting, cross stitching and other crafts. I enjoy playing volleyball and taking yoga and Zumba classes.

Before diagnosis, I wish I would have done more for myself, rather than putting things off for “later.” Don’t waste a day because none of us know how much time we may have left. I now take that vacation and buy those shoes and get that massage and enjoy my relationships. I let go of trivial things more easily and I don’t dwell on negative things that happen to me. I have learned to realize how precious every day is and to live my life better than I ever did before diagnosis because I have learned to ask for and accept what I need.

I value my friendships even more, I have been able to reconnect with friends from my childhood – two of whom, coincidentally, have had breast cancer too. I know that I have been blessed to have such amazing support during my journey and I thank God every day for the wonderful people in my life.

I am a thriver, wife, sister, co-worker, neighbor, pet-lover and friend. It is true that I am so much more than a diagnosis, and so are you. karenak23@gmail.com
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“A dog is the only thing on earth that loves you more than you love yourself.”

–Josh Billings
It was three in the morning when I gave up trying to sleep and slipped quietly out of bed. The chemotherapy was causing me night sweats, hot flashes, nausea, and indigestion. The shot they had given me to boost my white blood cell count brought pain in my leg and arm bones as well as my head. And that same day an allergic reaction to the chemo drugs had caused a rash to break out over most of my body.

I skulked into the bathroom, closed the door, and drew a lukewarm bath. I added an oatmeal bath lotion intended to soothe my flaring visceral rash, and sunk my bloated, inflamed body down into the too-small tub. It brought little comfort. Too quickly the water cooled. Nothing was working for me. I rose and reached for my robe, and as I did I caught a glimpse of myself in the mirror. Only it wasn’t me. It was some chemotherapy monster. Bald, bloated, streaks of bleeding rash marks where I had scratched myself relentlessly, an angry red welt across my right breast from the lumpectomy scar, and another under my arm from the lymph node removal. I was barely recognizable, even to myself.

How would I ever recover from this? How would I ever be me again? I couldn’t. I wouldn’t. There’s no way to come back from this. I looked away and sank to the floor, ready to unleash a Lifetime Television For Women ugly wail the entire neighborhood would hear. Instead, I heard him.

On the other side of the bathroom door, my beagle Seamus let out his own raspy, whiskey-soaked howl. It was urgent, demanding, and loud. So loud! I snapped out of my pity party, threw on my robe and flung the door open, desperate to quiet the dog lest he wake up my boyfriend Chris, who had not yet seen the horrific mess I’d become despite being with me at every appointment and by my side through everything.

Seamus raced away from me to the top of the stairs, then stopped, looked back at me, howled again, and went running down. I was to follow him. That was clear.

I hobbled down the stairs on my swollen neuropathic feet and followed Seamus into the kitchen. He stood there, wagging his tail, howling in the direction of what he wanted, what he needed, what he’d come to me to retrieve for him.

Chris slipped a tray of hot, fresh, peanut butter cookies out of the oven and side-stepped the howling beagle banshee, smiling at me.

Cookies. Of course. Seamus wants cookies. And that was when I was reminded again, at the time I needed it most, that I needed to follow my dog’s lead. Because this was no ordinary dog and this was no ordinary passage in my life.

I had rescued Seamus a few years before, shortly after going through a divorce. He’d been my companion, resident clown, and exercise motivator for that first crucial year. And then he was diagnosed with cancer. He was only two years old at the time. The specialist told me that even with chemotherapy and radiation he would live maybe a year. I decided we needed to change these odds.
I couldn't take another loss. And he didn't look nearly ready to give up. Three years later, he was very much alive and he was my first thought when I received my diagnosis of triple-negative breast cancer. He was why I was calm, why I understood the language of cancer—the biopsy, the clear margins, the lymph nodes, the varieties of chemo, and the real meaning of a prognosis—and why I felt courage rather than fear facing my own battle. I didn't realize it immediately, but my dog had begun guiding me then, and his guidance would continue.

My doctor had called late in the day on December 23rd to tell me my mammogram was “highly suspicious of malignancy” and that I needed to see a surgeon right away; I wasn't even to bother with a biopsy. When I couldn't find a surgeon who could see me sooner than a month's time out, Chris reminded me to do for myself what I had done for my dog. And I did. I searched and found the best doctors I could find and drove 60 miles away to get the care I needed.

I found a new, young, caring, surgical oncologist who could see me right away and provided excellent care—even coming to my biopsy with me, and later to the testing I'd volunteered for. He reminded me of the young veterinary oncologist I’d finally found for Seamus after his original doctor proved to be too difficult and unkind to continue with. When I had to do my chemo treatments locally and found I couldn't bear the oncologist, I again did what I had to do for my dog—I insisted on switching doctors to one who would listen to me, who understood that although she'd been through this hundreds if not thousands of times, this was my first time. If I had not had to do that for Seamus, I don't know that it would have occurred to me that I could, in fact, insist on a better doctor for myself.

I'd been amused when I realized that one of the chemotherapies Seamus and I were each given was the same—Cytoxan. I was less amused when after my first chemo infusion I realized I was suffering the same serious white blood cell crash that nearly killed Seamus during his treatment. But because I had been through this with him, I knew what was happening shortly after it started, and I knew to get help. Seamus guided me through it all. He showed me how to do it.

And that early morning, in the warm kitchen redolent with the scent of peanut butter cookies, he reminded me of the biggest lesson of all. He reminded me to focus on the cookies of life.

You see, when he was in treatment and for the two years of follow ups after, Seamus always bounded into the veterinary cancer group, as happy to be there as he was to be at home amongst his toys and treats. He never acted annoyed or tried to hide, as he did with regular vet visits. Eventually, I figured out why. Every person who treated him in big or small ways—whether it was to weigh him, give him a shot, take him back for chemotherapy, or set the infusions going—every person, always rewarded him with a dog cookie. For Seamus, this was not “the cancer place,” it was instead “the cookie place.” In true beagle fashion, he focused on the cookies. That’s how he got through it. And that night it was my turn. Sure, I could focus on the literal cookies, but this was bigger than that. I could focus on what I looked like, how I felt, the pain I was in, the road ahead. Or I could focus on the fact that Chris had woken in the middle of the night to support me, to bake me cookies, to stay up watching a movie with me, and that my dog—my living example of a true survivor—had rescued me at exactly the right moment.

I chose then and there to focus on the “cookies” in my life.

I will always remember that lesson. And now, seven years out from finishing treatment and still “NED” (No Evidence of Disease), I often find myself guided by Seamus’s coda and by my two new beagles. When Seamus did eventually pass (nine years after they said he would), Chris and I adopted two more beagles. Daphne came to us with a half-dollar-sized tumor on her chest, and since then has had five cancerous tumors removed. X-rays also revealed that her torso is riddled with buckshot. Because of her (and Seamus before her), I work to eliminate cancer-causing chemicals in our household and carefully consider the foods we eat. She's my candy-eyed, tail-wagging reminder of how and why we need to remain vigilant. My other beagle, Percival, was adopted from Beagle Freedom Project which is an organization that rescues animals used in laboratory research. He spent his first eighteen months as an unwilling test subject, living in a cage with minimal socialization or kindness, never having touched grass or felt the warmth of the sun. Helping him recover and learn to be a beagle is a constant reminder to us to shop for cruelty-free home care products, cosmetics, and cleaning supplies. Luckily, those tend to be healthier too. Seeing Percival grow into the mischievous, fun, people-loving, little imp he’s become, serves as a wonderful example of thriving after hardship. Because of each of these beagles in my life, I chose a more compassionate lifestyle and went vegan. They continue to be my guides.

While there are fewer actual cookies in my new lifestyle, because of my dogs, I’m much better at focusing on the figurative cookies in my life. Pets come into our lives for a reason. My dogs and I are all survivors, and they helped me thrive during treatment and in my post-cancer life. I can’t imagine a journey without that kind of joy.

Teresa Rhyne is the author of New York Times bestseller The Dog Lived (and So Will I) and its sequel The Dogs Were Rescued (and So Was I). She is a lawyer, writer, dog lover and breast cancer thriver (though definitely not in that order). http://teresarhyne.com
Suzie Humphreys has been broke, fired, divorced, disappointed, and diagnosed with breast cancer, but now lives her life with a passion to bring more laughter into the world for those who face hardships and unexpected challenges.

With her common sense and compassion, Suzie lifts, jolts and nurtures her audiences and they love every minute of it. She makes them laugh until they think they can’t laugh any more and then she “grabs” them again.

Suzie is the author of If all else fails, Laugh and Laugh, Live and Learn.

To book Suzie to speak at your breast cancer events, contact Patti Allen at patti@snwspeakers.com or call 704-458-2280.

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recently celebrated my 80th birthday. I threw a party at a local restaurant and invited 20 people who had been good to me since I had moved to South Carolina a year ago to be near my son.

This has been the best birthday of my life, and the celebration continues. I also wanted to celebrate that I am a 45 year breast cancer survivor! To me that is something to celebrate. I was 35 when I was diagnosed with breast cancer and had an eight year old son who I had gone through hell to have. I couldn’t bear the thought of leaving him.

My mother was dying of the same illness. I had to leave her hospital and go over the river to Manhattan where I would have my surgery. She cried for me and my future.

My surgeon was 84 years old and head of the American Cancer Society, and I believe the best surgeon in New York. He told me that I had a surgical cure. Chemotherapy was not the active protocol at that time.

I cried for two years, thinking I was going to die, and the medical authorities said to me was “You can get hit by a car.” My mother died six months later and there were many issues within the family.

My husband was very supportive and suggested I get a job to keep busy and not think about my illness. First I got a job part-time in a bank and then a full-time job which became my 28 year career. I always thought I would die before him, but in three weeks he died after having a stroke. He was in great health except he smoked.

So phase two of my life came along.

I joined organizations, went on trips, made many friends and created a good life for myself. Then at age 79, phase three came along. I became challenged with a variety of health challenges. My son had just moved to South Carolina. I had no other relatives so I moved to be near him. A doctor scared me that I could go into a coma and no one would know if I was alone. The thought of being in a hospital with no one to speak for me frightened me more than anything.

So last year I built a house near my son and am having another life here. Life is good. God has blessed me and kept me around. You never know what life has in store for you.
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What the Pink Sisterhood Means to Us

What the Pink Sisterhood means to me is that I didn’t have to face the journey alone. I know beyond a shadow of a doubt that my path would have been more difficult and felt unsurmountable had it not been for the Pink Sisterhood. This family of pink continues to create more awareness for early detection, advocates for greater funding and research, stands up to pink washing, supports us in our darkest moments, helps us find laughing moments along the way, encourages the energy of thriving from the moment of diagnosis, understands us like no one else and together we help each other to see truth and real beauty in our lives. The Pink Sisterhood is the lifeline that I didn’t know I needed.

Being an only child, I was very closed in, so the branches and leaves on my tree were limited. After being diagnosed I found myself becoming more isolated; until one day I was asked to share my story with another survivor. She encouraged me to come out of my shell by inviting me to a cancer retreat. After meeting women like me, my tree grew more branches—which grew more leaves...The Pink Sisterhood. Along my journey, I’ve met women who have helped my tree blossom. Being able to converse with someone face to face or via phone, who understands and gives the best advice and comfort is one of the best treasures of being part of The Pink Sisterhood.

Alysia Pringle “Pinkey”
St. Petersburg, FL

As a new mom at 29, I never expected to become a member of the pink sisterhood. I would not have joined if given the choice, but I embraced my circumstances and surrounded myself with other survivors. I now have a special bond of friendship with some of the most amazing women I have ever met. Conversing with long term survivors has given me a positive outlook on my own life. My network of sisters can offer advice, lend a shoulder to cry on, or give me space when needed. It is a group of women that truly understand what you are going through when you feel like the rest of the world just doesn’t understand.

Brittany Auclair
Tallahassee, FL

Sixteen years ago, when I was first diagnosed with Inflammatory Breast Cancer, I was told by a wonderful lady with IBC “Life is worth living as long as you do something nice for someone else every day.” Lee Smith has since passed on but I took her inspirational words to heart. Her positive attitude while she was in hospice taught me to enjoy life by giving to others. I joined a wonderful organization named Awesome Breastforms, that makes knitted and crocheted breast forms and sends them free to those with breast cancer. This last year, we have sent forms to 35 different countries. We make regular, lumpectomy and swim forms.

Heather Goodes
Niagara Falls Ontario, Canada

My name is Erin Robinson. I was diagnosed with stage 3 inflammatory breast cancer in December 2015; it was just days before my 35th birthday. I was broken and devastated. My doctor explained to me that IBC is an aggressive and rare form of breast cancer. I felt very scared and so alone. The information I could gather from the Internet was confusing and terrifying. I felt like I was going to die. I remember reading an article about IBC on Facebook. It was then, a women named Terry told me of an IBC support group full of women who have gone through or are currently battling the same disease I was facing. I couldn’t believe it, an entire group! From the moment I joined the group, my outlook completely changed. Connecting with others who understood exactly what I was going through was invaluable. Talking with women who have faced this disease gave me such strength and hope! My attitude completely changed. I started to believe that I could win this battle too! I believe in my heart that these women saved me. They were there for me in ways that no one else could be. They had walked the walk, they gave me advice on how to make it through the hard times. They were my bright light on the darkest of days. I can’t explain it. The connection we have with one another is of love and admiration. I don’t know what I’d do without them!

Erin Robinson
Crestview, FL
I have a lot of BFFs — not my long time best friends forever; these are my “Breast Friends Forever.” They range in age from 30 to 80 (I’m somewhere in the middle) and come from many different walks of life. We all have one thing in common; we’re members of a club no one asked to join. But they’ve got my back... and my front! They understand when I’m down or scared or anxious. They don’t need to ask why; they know. They just get it because they’ve been there, done that. You can have all the family and friends behind you when you are facing breast cancer, but you also need your pink sisters by your side for this journey. And you better believe they will be there every step of the way.

BETHANY KANDEL
(www.BreastCancerFreebies.com)
New York, NY

My pink slip came in 1996 when I was also diagnosed with breast cancer. Getting a pink slip meant that my services were no longer needed but being a single mother at 45 years of age my children needed me. So I entered hormone therapy and radiation looking for a cure. After being cancer free for seven years, the dreaded disease was back. It was found on mammography this time. I opted to have a double mastectomy; the doctors said they got it all and I remained cancer free for another seven years. In 2014, I began to suffer from a chronic cough and unexplained pain in my ankles. My primary doctor failed to diagnose what turned out to be stage IV cancer. My immediate response was OMG, why me? I had already given up my breasts that nursed two babies and now they were adults with children of their own. Before I was diagnosed I had retired and relocated. Some how I connected with LBBC and met several younger women who were also stage IV. A pink sisterhood, and the face of one inspiring woman, the beautiful Sarita Joy. After meeting her I stayed in contact as she posted blog after blog. She was my Shero living each day to the fullest. From her and other cancer survivors I learned to thrive. Age is just a number, I am still praying for a cure for all my pink sisters and me.

JACQUELINE BREEDLOVE
Raleigh, North Carolina

For the past couple of days, since I received this magazine, I don’t know how many times I’ve read it and each time is like the first time. Each testimonial that I read is so touching and a part of each story sounds like my own. It’s just so amazing the bond that we all share. We are so much alike that it seems unreal. I’ve basically been using all of the “ah-ha moments” talked about in the magazine as my “Encouragement to get over Discouragement.” I’m not ashamed to say that I have my moments often and I’m a work in progress, but I will give credit where it is due and you, Ms. Beverly, along with Ms. Cherrie Brice and all my Pink Sisters on that Thriver’s Cruise as well as with their supporters and mine are the bomb. I can pick up the phone and call one of them anytime and they always have time for me. I know you didn’t see a whole lot of me on the ship because I tried my best not to come around the crowd when I was in a “down” or “depressed” mood because that mood can be contagious and we were there to have a good time. I met some great people on that ship. That was the best thing that I could have done. I mean that. I remember a lot of them by name but the most touching thing happened one day on the ship with one lady and I didn’t know her name but I happened to see her in the magazine and I immediately said, “that’s her!” I still do not know her name but I know her daughter’s name is Michelle Bodden because she received an award for the “Thriving Caregiver.” The day that we had the Pink Party was one of the days that I was having a “not so good day.” I didn’t say anything about it to anyone or show any emotion that I was aware of and Michelle Bodden’s mom came up to me, out of all of the people that were in that room, and said I feel that you are having a pretty hard time with this and I want you to know that I love you and I want you to have this and read it as often as you need to. It was a key chain that listed ten things that cancer can not do. I hugged her neck because she just didn’t know how much I needed that right then. She didn’t even have to give it to me, she could have just read the words to me and that would have been comforting enough. I felt like that was so sweet of her. That was a true “Sisterhood” bond. She felt that something wasn’t right with me and she came to my rescue. That’s what it’s all about, having each other’s backs and picking each other up when needed because we all fall short sometimes. Everyday I passed by Ms. Cherrie on the ship, she was making sure I was okay. My Mom always said, “If you’re gonna worry, why pray and if you’re gonna pray, why worry?” The Pink Sisterhood is my version of “The Little Engine That Could.”

LAPEATRA ANDERSON
Conway, South Carolina

Strength:
1: the quality or state of being physically strong
2: the ability to resist being moved or broken by a force

I realized how strong I am when I was diagnosed in December 2004. During chemotherapy, I discovered the Young Survival Coalition website which connects women under the age of 45. Breast cancer is much different for younger patients; fertility, relationships, chemo long-term side effects, surgery options, etc. The feeling of togetherness, sharing and understanding our fears, while building a life-long sisterhood is how I gained strength. I’ve been a member of this amazing organization for 10 years now. While I may have matured from the initial target audience, I am thrilled to connect with the newly diagnosed to give them hope during their own courageous battle. Let’s face it, “The initiation sucks, but the Sisterhood is forever”.

CYNTHIA CONNELLY
Woodbine, GA

In October 2000, I found a lump while doing a monthly breast self-exam. I was 32 years old and just finished graduate school. My mother died from breast cancer at the age of 34. I had a lumpectomy, chemotherapy, radiation and hormone therapy.

Mrs. Ethel, my manager at the time, was a breast cancer conqueror and a Christian, which was a double blessing of strength, understanding and compassion. She accompanied me to my appointments, prayed with me and was a comfort. My family lived in New York, so God gave me an extended family in Florida.

Having her in my life during that time was priceless and will never be forgotten. The power of the Pink Sisterhood is precious as diamonds and pure as gold.

CHARRON WALKER
Conway, South Carolina

My family lived in New York, so God gave me an extended family in Florida. My family lived in New York, so God gave me an extended family in Florida. My family lived in New York, so God gave me an extended family in Florida.
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A pioneer who pushed through federal and state legislation ensuring that breast reconstruction after a mastectomy would be paid for by insurance companies, Dr. Horner lost her own mother to breast cancer. She decided then that her mother’s death would not be in vain.

Using the metaphor of the Warrior Goddess, this book explains what Ayurveda, an ancient system of healing, describes as our “inner healing intelligence.” It also explores the various foods and supplements that enable women to prevent and successfully fight breast cancer, as they claim the healthy body that should be theirs. Dr. Horner has added research from more than 500 studies to the updated third edition of her award-winning book, as well as information on risk and the BRCA1 gene mutation (the genetic condition Angelina Jolie was found to have), and a new chapter on “The Spiritual Journey of Breast Cancer.” In it, she describes why cancer is a wakeup call, a time-out in which women can turn inward to evaluate their lives with the intent to restore good health and learn how to receive, trust, and surrender as they cultivate their relationship with their intuition and a higher power.

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