

Moving Forward after Cancer Treatment



Follow-Up Care Plan

➤PART 3 OF 3



Information and resources for
cancer patients in Manitoba
after completion of treatment.



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Introduction

Moving Forward after Cancer Treatment

This booklet is Part 3 (of 3) of the Follow-Up Care Plan package. This booklet will focus on:

- wellness
- health promotion
- how to lower your risk of your cancer coming back or developing a new cancer
- resources and supports that you may find helpful after treatment

Part 1 - Your Follow-Up Care Plan and Treatment Summary will tell you:

- how often you need to be seen
- what tests you may need and how often
- the treatments you received

If you need a copy of Part 1, call your oncologist's office.

Part 2 - provides information on:

- the type of cancer you were treated for
- follow-up care
- side effects you may have and what you can do about them
- programs available to help you recover

Part 2 and 3 are available online at:

www.movingforwardaftercancer.ca

Please feel free to print off as many copies as you would like.

You can also go to **www.movingforwardaftercancer.ca** for more information that you may find helpful, including videos and links to various websites.



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Important Caution: This summary document does not prescribe or recommend any particular medical treatment or care for cancer or any other disease and does not substitute for the independent medical judgment of the treating professional.

Feeling Well After Cancer Treatment

Now that you have finished cancer treatment, you may find that you have an unexpected mix of emotions.

It is important to know that there is help available for you after treatment.



Please see the 'Additional Supports and Resources' section in this booklet. It has many resources that you can use to help manage some of these issues as you move forward after treatment.

Emotional Impact of Cancer and Treatment

Living Beyond a Cancer Diagnosis

A diagnosis of cancer is stressful and upsetting, and treatment is often hard on you mentally and physically. When treatment is over, many people expect that the difficult times are behind them, and that life can now return to "normal". For most, moving forward after cancer treatment brings new, and sometimes unexpected challenges, including an unexpected mix of emotions.

You may feel:

- Happy that treatment is over
- Anxious or fearful about recurrence
- Sad about some of the changes to your health and to your body
- Frustrated that some of your physical symptoms or side effects like fatigue are still hanging on

The good news is that all of these reactions are normal. Just know that recovery takes time; it can take weeks, months or even longer. Everyone is different. It is important to find ways to help you recover; ways that will help you to move forward and live well.



Many people find it helpful to seek support after treatment. You can talk to a counsellor about the effect your cancer had on you and your loved ones.



People who are moving forward after treatment for cancer have some specific needs including:

- **Informational** needs such as dealing with symptoms that affect your quality of life (e.g. feeling tired, trouble sleeping, sexual issues, menopause, relationship issues, pain, and eating or nutrition concerns). Learning about ways to promote healing, reduce the risk of recurrence and what your follow-up care plan is. Many of these needs can be met by understanding the information shared by your cancer care team. CancerCare Manitoba Patient & Family Resource Centre has helpful books and pamphlets and can connect you with supports and services. Call 204-787-4357 or 1-866-561-1026.
- **Psychological** needs such as dealing with fear, anxiety, stress, self-image, and fatigue. You may need to begin and practice new strategies to help you deal with these feelings or continue with strategies that have worked for you in the past. Counselling, support groups and programs are also available from CancerCare Manitoba after treatment to help people learn new ways of coping.
- **Social issues** including communication and relationship concerns. Dealing with cancer is stressful for any family, and sometimes it can be helpful to talk about how to support one another. Counsellors at CancerCare Manitoba can assist you with this.
- **Spiritual** questions such as the need to find meaning, and life in general as you move forward. Support around these issues may be available from CancerCare Manitoba as well as community supports.
- **Practical and financial** needs. Sometimes financial concerns can feel overwhelming. Help is available to assist you with these issues. *(Adapted from The Emotional Facts of Life with Cancer prepared by the Canadian Association of Psychosocial Oncology, 2012)*

CancerCare Manitoba Newsletter: The Navigator



The Navigator Newsletter lists the education sessions and the support programs and groups available to help you in your recovery. Call 204-787-2109 or toll-free 1-866-561-1026 to receive a copy by mail or for more information. Go to www.cancercare.mb.ca/Patient-Family/support-services/programs-and-support-groups.

Where Do I Go to Get Help?

If you have questions about new symptoms, pain, being tired, sexual problems, feelings of anxiety, depression or any other feelings that are concerning to you, you can talk with your family doctor, oncologist, nurse, counsellor, a nurse navigator or other healthcare providers. If you are in need of support or other kinds of help with your recovery Patient and Family Support Services at CancerCare Manitoba is here to help with counsellors, activity and educational programs, information, and the opportunity to meet with others who have been through a similar experience.

Patient and Family Support Services

Patient and Family Support Services at CancerCare Manitoba offers information and support to families affected by cancer before, during and after treatment. Services include counsellors who specialize in working with people affected by cancer (patients and those who care about them), support groups, and programs that offer education and exercise to help with recovery. Counselling is available for individuals, couples and families at the McDermot and St. Boniface sites. Some of these services are also available in regions outside of Winnipeg (see pages 23 & 24).

CancerCare Manitoba Patient and Family Support Services

Phone: 204-787-2109, or toll-free 1-866-561-1026 extension 2109

Cancer Navigation Services: Cancer Navigation Services can be a resource and support for you and your family now and in the future. Navigation can help you with coordinating your follow-up care as well as help you with any issues you may be experiencing after cancer treatment. Navigation services will answer your questions and offer strategies and practical tips to assist you.

A **Nurse Navigator** is an experienced cancer nurse who serves as a link between patients, family physicians and the cancer care system.

Psychosocial Oncology clinicians are concerned with understanding and treating the social, psychological, emotional, spiritual, quality-of-life and functional aspects of cancer.

Health Authority - Cancer Navigation Services	Toll-Free Phone Number
Winnipeg Cancer Navigation	1-855-837-5400
Southern Health - Santé Sud	1-855-623-1533
Interlake - Eastern Regional Health Authority	1-855-557-2273
Northern Regional Health Authority	1-855-740-9322
Prairie Mountain Health	1-855-346-3710

Going Back to Work: It is normal to need time following treatment to recover physically and psychologically. It is important to talk with your healthcare team and workplace and/or insurance company to determine what is right for you. Your treatment team and the counsellors at CancerCare Manitoba can help people sort through some of these issues and provide helpful resources in print and online. For those considering a return to work, a good place to start is www.cancerandwork.ca

Things to think about when going back to work:

- **Gradual return to work:** Many people who have completed cancer treatment find it helpful to return to work slowly over a period of time. This allows you to get used to being back at work. This can be anything from working shorter hours per day to working fewer days or both. You can slowly increase your work until you are able to return to the number of hours you worked before cancer.
- **Type of work:** Depending on the type of work you will be doing it may be harder for you to return right away. Consider what type of work you do before going back. For example, if you have to lift heavy objects at work are you able to?
- **Take your breaks:** Your brain and body need time to relax. When you are at work go for a walk or get up and stretch.
- **Communicate & Document:** if you are finding it hard to do your work, write a note about it and let your boss know so they can make changes and give you some support. If you do not tell anyone you are having difficulty they will not know.
- **Be kind to yourself:** You may be frustrated that you are not able to do what you used to. It takes time so do not worry or get down on yourself if you are unable to do everything right away.

Primary Care, Medical Tests and Screening

After cancer treatment, you will begin to have follow-up care. This means you will have scheduled appointments and tests to monitor your recovery and health after cancer. At the scheduled appointments, you may need a physical examination and answer questions about your health. Follow-up care is different for every person. It will depend on:

- what type of cancer you had
- the type of treatment you received



Your family physician or nurse practitioner (also known as a primary care provider) will have received information from your CancerCare Manitoba doctors throughout your treatment. Your primary care provider may be in charge of your follow-up care and schedule the appointments and tests needed. Sometimes your primary care provider will share your follow-up care with your CancerCare Manitoba team.



The Part 1 Follow-up Care Plan: Personalized Information is part of a package that you will receive. It will explain who is in charge of your follow-up care. Appointments and tests will likely happen less often. Appointments may also be very different from the visits you had with your oncologist or hematologist. Your primary care provider has also received the same follow-up guidelines and personalized information you received with your Follow-up Care Plan Package.



What should I do next?

- Make an appointment with your primary care provider soon after you are done treatment and are starting follow-up care.
- Take your Follow-Up Care Plan Package with you to arrange the required follow-up tests and visits.

It is important that you see your primary care provider for follow-up care and general health. They can check new problems in a timely way and support you and your family as you move forward after cancer treatment. If your primary care provider has any concerns they can refer you back to CancerCare Manitoba.

If you don't have a family physician or nurse practitioner, let us know and we can help.

We recommend that you contact the Family Doctor Finder program with Manitoba Health.



Family Doctor Finder

Phone: 204-786-7111 / Toll-free: 1-866-690-8260 (code: 702)

Register Online: www.manitoba.ca/familydoctorfinder

It is important that you continue to have age and sex appropriate cancer screening practices even after you have a cancer diagnosis. You may be at risk of developing a second cancer because you have had a cancer and have received treatment. Cancer screening is for people who have not had that type of cancer. If you have had that type of cancer, please refer to and use the Part 1 Follow-up Care Plan from this package. Your family doctor or nurse practitioner can talk with you about these tests.

Yearly Physical with Primary Care Provider: Have a physical exam with your family doctor or nurse practitioner at least once a year. Note: your follow-up care plan likely recommends that you see your primary care provider more than once a year after completing treatment.

Breast Cancer Screening: Most women age 50-74 should have a screening mammogram every 2 years. Transgender men and women may also need regular mammograms. Call BreastCheck at 1-855-95-CHECK to book a screening mammogram appointment.

If you are under age 50, or if there is a family history of breast cancer, talk with your primary care provider to see when you should start breast screening and how often.

If you had breast cancer and did not have a double mastectomy, you need a mammogram once a year at a diagnostic mammogram clinic.

Cervical Cancer Screening: Most women age 21-69 who have ever had sexual contact should have a Pap test every 3 years. Transgender men and women may also need regular Pap tests. Individuals with total hysterectomies for a disease other than cervical cancer or endometrial cancer do not need Pap tests. Pap tests can be done by your doctor or nurse, or you can contact your local health centre. Check your Pap test history by calling the CervixCheck at 1-855-95-CHECK

Colon Cancer Screening: Most people age 50-74 should do a home screening test every 2 years. For more information or to request a test, call 1-855-95-CHECK or visit www.GetAColonCheck.ca

Prostate Cancer Screening (men, Transgender: MTF): Discuss whether you should get a PSA blood test every year or two (plus a prostate exam when possible) with your health care provider. Recent studies suggest that for most individuals, screening for prostate cancer with PSA testing causes more harm than good. However, prostate cancer risk increases with a family history of prostate cancer and for those who have had pelvic radiation. It is important that you discuss screening with your primary health care provider.

Diabetes Screening: Have a fasting blood test every 3 years starting at age 40.

Cholesterol Screening: Have a fasting cholesterol test at age 40 if you are a man, or age 50 if you are a woman. Start at a younger age if you have diabetes, early heart disease in a close relative, if you smoke, or if you are overweight. This should be repeated every 2-3 years.

Immunization: Get a flu shot every fall. Get the pneumococcal vaccine (pneumonia shot) once you are 65 and older or have diabetes, heart, or lung problems. **You should AVOID the shingles vaccine** if you have persistent immune suppression or if you are on any medications which may lower your immune system.

Blood Pressure Checks: Get your blood pressure checked every 2 years or more often if you have other risks for heart disease.

Bone Density Screening: Older patients who have received radiation treatment or who have received high doses of steroids for long periods of time are at a higher risk of breaking their bones later on due to thinning of the bones (osteoporosis) related to radiation. Women who are on aromatase inhibitors for breast cancer treatment also have increased risk and should talk to their primary care provider about proper bone density screening.

Skin Assessment: Get a skin assessment done by your family doctor or nurse practitioner once a year. They will look for changes in moles (colour, size, shape), and new spots or moles.

Heart Assessment: You will need assessment for factors that increase your risk for heart disease or other heart-related problems such as high blood pressure, smoking, obesity or high cholesterol. If you had radiation to the chest, received Herceptin, or had an anthracycline-based chemotherapy (R-CHOP, AVBD, FEC, or AC), this will increase your risk of heart problems.

Eye Exam: Some chemotherapy treatments can affect your eyes. Make sure to get an eye exam once a year. Depending on the therapies you continue to take, or have had, you may be able to have your eye exam covered by Manitoba Health. Talk to your doctor about having your eye exam covered.

Reducing the Risk of Recurrence: Quit Smoking

Many people find that this is a time when they think about changes they want to make in how they take care of themselves. Healthy living can help you feel better physically and emotionally and may reduce your chance of recurrence or of developing a different cancer. This is an important start to living a healthy life. If you already had good lifestyle habits, you may be trying to figure out how to get back to them with your 'new normal.' You will be more successful at making these changes when you have support from those you live with and see on a daily basis. Get your family and friends involved!

The information & resources listed below can help you get started and maintain a healthy lifestyle.

Avoid Smoking / Chewing Tobacco



Quitting smoking can be hard to do, but there are Quit Smoking programs available in Manitoba. A program is the best way to help you quit smoking. It may include individual counselling, on-going support and quit smoking tools (as required).

Continuing to smoke has been shown to:

- increase the risk of cancer recurrence.
- increase the risk of developing a second cancer by about 30%.
- cause more treatment-related side effects (e.g. dry mouth, mouth sores).
- decrease the effectiveness of treatment.
- cause an increased health risk due to heart and / or breathing problems.

Quit Smoking Resources

CancerCare Manitoba Quit Smoking Program: Offers one-on-one support, counselling, on-going follow-up, as well as medications to help you quit. Call for more information or to join the program.

- Phone: 204-787-1202 or toll-free 1-888-775-9899

Your **family physician** or **nurse practitioner** also has information and support to help you stop smoking. Check with your local **Community Health Clinic** about quitting smoking programs near you.

Smoker's Helpline (Canadian Cancer Society Manitoba Division): Provides telephone support and has many resources available, including the "One Step at a Time" booklets.

- Phone: Toll-free 1-877-513-5333

Is Vaping Fine?

Preliminary research has shown that vaping does cause harmful effects on the body. Many of the health effects associated with vaping are still being researched. If you want help quitting, please call 204-787-1202 or Toll-Free 1-888-775-9899 and leave a message. All stop smoking aids are provided for free.

It is important to note that E-cigarettes and vaping is not part of an evidence-based approach to quitting smoking. The risks and benefits of e-cigarettes are unknown due to a lack of long-term studies conducted by non-industry researchers. There is evidence of potentially hazardous chemicals and particles in the liquid.

Reducing the Risk of Recurrence: Limit Alcohol, Be Sun Smart, and Healthy Weight

Limit How Much Alcohol You Drink

Research shows that drinking alcohol increases your chances of getting certain types of cancers. The less alcohol you drink the better. If you choose to drink alcohol, limit it to no more than 1 drink per day for women and 2 drinks per day for men.

1 standard drink =

Beer - 360 mL (12 fl. oz) of regular beer (5% alcohol)

Spirits - 45 mL (1.5 fl. oz) of spirits (40% alcohol)

Wine - 150 mL (5 fl. oz) of wine (12% alcohol)



Be Sun Smart

Protect yourself and your family from exposure to UV (ultraviolet) rays from the sun or tanning beds, and check your skin regularly for any changes. UV exposure can cause wrinkles and age spots over time, as well as increase your risk for developing skin cancer. Protect yourself from harmful sun exposure by doing the following:

- Avoid the sun from 10am - 4pm and protect yourself outside during these times by seeking shade.
- Avoid tanning beds and sunlamps.
- When you are in the sun:
 1. Wear clothing to cover your arms and legs.
 2. Put on a wide-brimmed hat and sunglasses.
 3. Use sunscreen (minimum SPF 30) about 30 minutes before you leave the house and be sure to reapply it hourly.
 4. Remember when you are outdoors on a sunny day in the winter, sunscreen is still recommended.

Maintain a Healthy Body Weight



Maintaining a healthy body weight is key to good health. This is true for everyone, including people who have had cancer. Having extra fat on our bodies increases the risk of many diseases including cancer, heart disease, diabetes, stroke, hypertension, arthritis, and dementia. **Talk to your primary care provider and/or a Registered Dietitian in your community about your body weight if you have concerns or want to make changes.**

You can use Body Mass Index (BMI) and Waist Circumference (WC) as general guides to determine if your body weight is in a healthy range.

Waist Circumference is an indicator of abdominal fat. Extra fat around the waist and upper body (also described as an 'apple' body shape) is associated with greater health risk. A waist circumference at or above 102 cm (40 inches) for men and 88 cm (35 inches) for women is associated with increased risks.

Use the Body Mass Index chart on the next page to see if your body weight falls into the healthy range.



Reducing the Risk of Recurrence: Healthy Weight and Eat Well

Body Mass Index Chart

BMI →	Under-weight	Normal							Overweight					Obese							Extreme Obesity		
	18-	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40+
Height ↓ ft'in"	Weight(pounds)																						
4'10"	86	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191
4'11"	89	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198
5'	92	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204
5'1"	95	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211
5'2"	98	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218
5'3"	102	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197	203	208	214	220	225
5'4"	105	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232
5'5"	108	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240
5'6"	112	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	223	229	235	241	247
5'7"	115	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255
5'8"	118	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262
5'9"	122	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270
5'10"	125	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278
5'11"	129	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286
6"	133	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258	265	272	279	287	294
6'1"	136	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302
6'2"	140	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311
6'3"	144	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319
6'4"	148	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328

The following guidelines for eating well will help you achieve and maintain a healthy body weight.



Eat Well

The tips in this section will help you use Canada's Food Guide to make sure you eat all the foods you need to reduce your risk of obesity and lessen your risk of chronic diseases including certain types of cancer.

Keep in mind that if you experience long-term side effects from your cancer treatment, these recommendations may not be right for you. It is strongly recommended that you meet with a Registered Dietitian who can make a plan specific to you. Refer to [Part 2 of your Follow-Up Care Plan](#) for some specific dietary recommendations based on the type of cancer you had and tips to help you manage difficulties you may be experiencing as a result of your treatment.

Eat a Variety of Colourful Fruits and Vegetables

Vegetables and fruits, in a rainbow of colours, provide the vitamins, minerals and fibre you need. A diet that includes a variety of vegetables and fruit instead of higher fat, higher-calorie foods can help you stay a healthy weight.

Tips:

- Add fruit and vegetables to meals: top cereal with fruit, start dinner with salad or vegetable soup, or add a layer of vegetables to a sandwich
- Eat at least one dark green vegetable such as broccoli, wild plants, or spinach each day
- Eat at least one orange vegetable such as carrots, sweet potatoes or winter squash each day
- Frozen or canned vegetables and fruit are a good option when fresh is not available
- Enjoy vegetables steamed, baked or stir-fried instead of deep-fried
- Choose vegetables and fruit instead of juice

Focus on Choosing Whole Grains over Refined Grains

Whole grains are foods that contain all parts of a grain such as whole-wheat bread, brown rice, oatmeal, & buckwheat. Refined grains are foods such as white bread or white rice. Whole grains are beneficial because they contain lots of nutrients for good health, some of which may help prevent cancer. Whole grains also provide dietary fibre, which is important for a healthy digestive tract.

Tips:

- Read food labels when you are shopping – look for whole grains as the first ingredient in the list.
- Eat a variety of whole grains such as barley, brown rice, oats, wild rice, quinoa and wheat berries.
- Enjoy whole-grain bread, bagels, bannock, tortilla wraps or whole wheat pasta.
- Start the day with an unsweetened, fibre-containing cereal such as oatmeal or bran flakes.

Choose Healthy Protein Foods

Meat and alternatives provide essential protein, vitamins, and minerals for your body's growth and repair.

For cancer prevention:

- **Limit processed red meats** such as sausages, bacon, ham, bologna, hot dogs and salami.
- **Reduce your portions of red meat** such as beef, pork, lamb and wild game to 12 to 18 ounces or less per week.

Tips:

- Choose fish (such as salmon, herring, mackerel, sardines, trout, pickerel or white fish) and poultry more often.
- Use cooking methods such as roasting, baking or poaching that require little or no added fat.
- Canned tuna, salmon or eggs make great sandwich fillers.
- Choose legumes (beans, lentils, peas) more often as a meat alternative. Add them to soups, casseroles, salads and chili.
- Enjoy a small handful of nuts as a snack, and use peanut butter as a spread.

Milk and alternatives provide important calcium, vitamin D, and protein. Both calcium and vitamin D in milk may help reduce your risk of certain cancers. Calcium and vitamin D have also been shown to help prevent osteoporosis (a bone-weakening condition).

Tips:

- Have 500 ml (2 cups) of milk (skim, 1% or 2%) or a fortified unsweetened soy, almond or cashew beverage every day.
- Canned milk is also a great option when fresh milk is not available.
- Fat-free yogurt is great for shakes, dips and snacks.
- If you are lactose intolerant choose a milk alternative such as soy, almond or cashew beverage.

Avoid Sugary Drinks and Limit Your Intake of High-Calorie Foods

Food and drinks with added sugar and fat (energy-dense foods) have lots of calories but usually contain few nutrients. Consuming a lot of these foods and drinks may cause unhealthy weight gain and obesity, which can increase your risk of cancer recurrence and other chronic diseases.

Tips:

- Limit your intake of foods and beverages high in sugar and fat such as soda, fruit juice, candy, sports drinks, flavoured milk, cake, desserts, pie and other baked goods.
- Choose healthy alternatives such as naturally sweet fruit or yogurt smoothies to satisfy your sweet tooth.
- Choose air-popped popcorn or veggies and low-fat dip to replace snacks high in fat and sugar.

Limit Highly Processed Foods

Limit the use of processed foods such as canned and packaged soups, crackers, sauces and gravies, condiments (ketchup, mustard, mayo etc.), ready-made meals and snack foods.

Reducing the Risk of Recurrence: Eat Well

Supplement Wisely

The best source of nutrients is from the food you eat. However, there may be a benefit to taking a daily, standard multivitamin/mineral supplement if you are not getting these nutrients from your diet. In addition, there is growing evidence that vitamin D may reduce the risk of some types of cancer. Talk to your doctor or dietitian about whether vitamin D or other supplementation is appropriate for you.

Tips:

- The Canadian Cancer Society recommends adults consider taking 1000 IU of vitamin D in the form of a supplement.
- Take a daily, standard multivitamin/mineral supplement, especially if you are having difficulty eating a variety of foods.

Focus on a Healthy Diet

A simple way to make sure you are eating a balanced diet is to think about setting up your dinner plate in a healthy way. Use this diagram as an easy guide to help you plan a healthy meal. Drink water throughout the day.

Recommended Resources

Create a personalized healthy eating guide by using “My Food Guide” at www.healthcanada.gc.ca/foodguide

Have plenty of
vegetables and fruits

Eat protein foods

Make water
your drink
of choice

Choose
whole grain
foods



Is My Diet Balanced?

Take a minute to answer **yes or no** to the following questions. Your answers will tell you where your eating habits could be improved.

1. I eat a variety of fruits and vegetables in my daily diet.
 Yes No
2. I choose to eat whole-grain bread, cereals and pasta most often.
 Yes No
3. I limit my intake of sugary beverages and make water my drink of choice.
 Yes No
5. I limit highly processed foods (with long ingredient lists) and choose healthier menu options when eating out.
 Yes No
6. I use soy products, nuts, lentils, or beans as meat alternatives.
 Yes No

If you answered no to any of the questions, do not be discouraged.

Remember to make healthy dietary changes one at a time and build on your successes. Over time, you can shift your whole eating style to become healthy and balanced.

Having Trouble Eating Well?



We know that some cancer survivors may have difficulty eating a healthy diet and following the guidelines in *Canada's Food Guide* due to long-term side effects of treatment. Remember to **refer to Part 2 of your Follow-Up Care Plan** for some specific dietary recommendations for the type of cancer you had and tips to help you manage difficulties you may be experiencing as a result of your treatment. In order to get the most benefit from your diet, seek the advice of a Registered Dietitian.

Make an Appointment with a Dietitian at CancerCare Manitoba

Nutrition education from a registered dietitian specializing in oncology is available for patients at CancerCare Manitoba. Call CancerCare Manitoba's Patient and Family Support Services at 204-787-2109 or toll-free at 1-866-561-1026

Reducing the Risk of Recurrence: Exercise and Activity

Exercise

Research has shown a link between exercise and decreased rates of cancer recurrence and increased rates of survival in certain cancers. Exercise can also reduce the side effects of fatigue and sleep disturbances.

Always check with your doctor before starting an exercise program.

Precautions:

Following treatment, you may need to take special precautions. Below are some things to be aware of:

- If you have severe anemia (low red blood cells) do not exercise until the anemia is improved.
- If you have weakened immune function avoid gyms and other public places until your white blood cell count is normal. If you had a bone marrow transplant, your doctor may tell you to avoid exposure to public places such as gyms (where the likelihood of exposure to germs is high) for a year after your transplant.
- If you have significant peripheral neuropathy (nerve damage) from your cancer treatment that affects your coordination and/or balance (such as numbness, tingling, or burning in your fingers, hands, feet or legs), your ability to exercise may be limited. Focus on 'stable' exercise such as a stationary reclining bicycle, rather than walking outdoors or on a treadmill.
- If you are experiencing severe fatigue as a result of your therapy, you may not feel up to exercising. Start with basic movements and activities such as stretching or tai chi.
- You should not exercise if you are at risk of infection, are in pain or experiencing other side effects that are not well-controlled.
- If you have physical challenges, it is recommended that you be referred to a physiotherapist or an exercise professional. You may need to learn a new way of doing an activity and/or a program that meets your specific needs and abilities.
- If you have low bone density, weight bearing exercise (ex. walking) and light resisted upper and lower body exercises are recommended to help build bone density. Any intense exercise involving jumping, hopping, running, or high impact activities should be avoided, as these can lead to a broken bone.
- If you have heart problems related to cancer or not, a proper medical exam should be done before you start any exercise program.
- If you are taking anti-inflammatory medications, be careful not to "overdo it" and take care of any injuries immediately. These types of medications may hide or "mask" the pain and there is a risk of pushing yourself too far.
- If you have recently had surgery, discuss exercise with your surgeon to make sure you are safe to start.

Getting Started:

When you are recovering from your treatment, exercise can be a great way to help with fatigue, relieve some stress, have personal time, or socialize with family and friends. Having a partner (friend or family member) exercise with you can be a great way to get started.

Start Slowly:

Listen to your body! Walking is a free and easy activity to do first, especially if you are unsure of what you can do. If you haven't been active, stick close to home for your first walk and keep track of how long until you feel the need to stop. Try walking out from your house for 5 minutes and then 5 minutes coming back to your house. Gradually add 1 to 2 minutes over several days or weeks. If you need to rest, do so! Find a bench to sit on or stop for a drink of water.

Pedometers are a great way to keep track of your progress. Health experts recommend that the average, healthy person set a goal of 10,000 steps per day; however, you need to set your own goals based on how you feel. You may be starting at 1000 steps a day and working up slowly from there!

Plan to exercise when you are most rested during the day – make a plan for the same time each day.

Keep Track:

Write down your exercise and activities and also make notes on how you felt. This can be great information to have to see what you have done in the past and help you set goals for the future.

Build Gradually:

Add time to your activity first. When you are able to reach the 30-minute minimum, you can keep adding time, or try increasing the difficulty. The exercise does not have to be 30 minutes in a row; it can be broken down into as little as 10 minutes at a time.

Set a Goal:



Goals can help you keep focused on your exercise plan. You can be creative and have fun with your goals or keep them basic. Getting friends involved in your goals can add additional support for your exercise! Goals can be simple, such as walking for a length of time or for a number of steps, completing a route in a specific time or exercising 6 days per week. You can challenge yourself to participate in an event or join a team! You can have a friendly competition with friends or family where you support each other in exercising.

Use the acronym “**S.M.A.R.T.**” to help you set your goal:

- S**pecific think of “Who, What, Where, When and How”
- M**easurable number of steps, reps, or length of time
- A**ttainable keep it simple, a single thing, a goal you can accomplish in 1 week or 1 month
- R**elevant something that you are both willing and able to achieve AND it matters to you
- T**ime-based have a target date to achieve the goal

Soreness:

You may experience some muscle soreness after the first few days, this is normal! If you can barely move – then you have exercised too hard! Reduce the time or intensity. If it is mild or you do not have any soreness, then continue with your activity.

Be Aware:

You will have easy days and hard days. On the hard days, listen to your body, but still, try to get activity in – you may be surprised that you may feel more energetic after.

Dress for Success:

Make sure you are wearing the proper shoes and clothing for your activity. Nothing can stop exercise faster than blisters on your feet and exercise clothes that do not fit. If you experience hot flashes as a result of treatment, make sure to dress in layers. That way you can adjust your clothing while you exercise in order to stay comfortable.

Try Something New:

You may have physical challenges as a result of treatment, or fatigue that does not allow you to jump back into the sports you used to play or the activities that you used to do. Make sure you talk to your primary care provider, physiotherapist or exercise professional to understand any limitations you may have and discuss ideas for adjusting those activities, or suggestions for other things you can do.

Reducing the Risk of Recurrence: Exercise and Activity

Recommendations for Exercise

The following exercise information is based on what Health Canada recommends for all Canadians and what you should work towards doing in your daily life after cancer treatment.

Remember to seek advice from your doctor before starting any exercise program.

Strength Training: It is beneficial to add strengthening activities using big muscle groups at least 2 times per week.

Cardio Exercise: any exercise that raises your heart rate. Every week do at least **150 minutes of moderate to vigorous cardiovascular exercise** for at least 10 minutes at a time. For example, 30 minutes per day for 5 days a week. Examples of cardiovascular exercise would be walking, jogging, and swimming.

As fitness improves, you can gradually increase the time you exercise or how hard you exercise.

Intensity: Research has shown that more vigorous cardiovascular exercise can further reduce your risk of future illness. An easy way to judge intensity is by your breathing.

- **Moderate Exercise** – With moderate exercise you should be able to talk with a mild sweat. Examples are brisk walking or cycling.
- **Vigorous Exercise** – With vigorous activity, talking is possible in short phrases but not long sentences. After 10 minutes of vigorous exercise, you should be sweating. Examples are jogging, cross-country skiing or lap swimming.
- **Rating of Perceived Exertion (RPE)** – Another easy way to judge intensity is by rating how you feel when you are exercising. Choose a number between 0 – 10 to rate how much effort you had to use. Aim for an RPE level of 5 to 8 for moderate to vigorous exercise.

Use the chart below to measure how active you are:

0	No effort – lying down and not moving	6	Strong effort – can still talk, but not sing – I am slightly breathless
1	Minimal effort – awake, sitting and moving occasionally	7	Vigorous effort – can talk in short phrases, sweating, breathing heavier
2	Lighter effort – moving around comfortably and could do this “all day”	8	Intense effort – speak with one word, can only keep up the pace for a short period of time
3	Light effort – moving comfortably but breathe slightly harder than normal	9	Major effort – cannot talk, the biggest effort for only a few seconds
4	Medium effort – sweating a little, but can carry on a conversation effortlessly	10	Maximum effort – the hardest I would ever go, only if my life was in danger
5	Moderate effort – just above comfortable, sweating more and can still talk		

- **Heart Rate Zones** can also be used to determine your intensity level.

Heart rate is the number of heartbeats per minute (bpm) or how fast your heart is beating. Your intensity ranges (or zones) are based on your Maximum Heart Rate, which is the upper limit to your heart rate.

Your Maximum Heart rate can be estimated by subtracting your age from the number 220.

Moderate Intensity is considered to be approximately between 60-75% of your Maximum Heart Rate.

Vigorous exercise is in the range of 75-90% of Maximum Heart Rate.

You can use a heart rate monitor or check your pulse to determine your heart rate while you exercise. Use the example below to figure your heart rate zones out.

Figuring Out Your Heart Rate Zones

Example: If 65 Years Old

Max Heart Rate: $220 - 65 = 155$ beats/minute (bpm)

60%: $155 \times 0.60 = 93$ bpm

75%: $155 \times 0.75 = 116$ bpm

90%: $155 \times 0.90 = 140$ bpm

Moderate Zone = 93 - 116 bpm

Vigorous Zone = 116 - 140 bpm

Age: _____

Max Heart Rate: $220 - \underline{\hspace{1cm}} = \underline{\hspace{1cm}}$ bpm

60%: "Max Heart Rate" $\times 0.60 = \underline{\hspace{1cm}}$ bpm

75%: "Max Heart Rate" $\times 0.75 = \underline{\hspace{1cm}}$ bpm

90%: "Max Heart Rate" $\times 0.90 = \underline{\hspace{1cm}}$ bpm

Moderate Zone (60-75%) = $\underline{\hspace{1cm}} - \underline{\hspace{1cm}}$ bpm

Vigorous Zone (75-90%) = $\underline{\hspace{1cm}} - \underline{\hspace{1cm}}$ bpm



Checking Your Pulse:

1. Place the tips of your first, second, and third fingers on the palm side of your other wrist, below the base of the thumb or place the tips of your first and second fingers on your neck, on either side of your throat.
2. Press lightly with your fingers until you feel the blood pulsing beneath your fingers. You might need to move your fingers around slightly up or down until you feel the pulsing. If you are still having trouble, try to avoid any distractions.
3. Use a watch with a second hand or digital display, or look at a clock with a second hand. Count the beats you feel for 15 seconds. Multiply this number by 4 to get your heart rate (pulse) per minute.

Types of Activities:

You can use a variety of activities for exercise, anything from walking the dog, taking the stairs at work, joining a sports team or club, or going for a bike ride.

Walking at a brisk pace is the easiest and cheapest activity to do! It is also easy on your joints and can be mixed into your day in many ways.

- While you are walking, pay attention to your body. Think about your posture – head up, shoulders back and relaxed, stomach in, arms swinging loosely by your side and avoid shuffling your feet. Pay attention to your breathing and the feelings in your legs and arms, pick up the pace or slow it down if you need to. Calm your mind and look at your surroundings.
- Make sure you have comfortable walking shoes with good support. If your feet or joints start getting sore, it may mean that you need a new pair of shoes. For winter walking on snow and ice, consider getting a pair of slip-on ice cleats. Walking poles can provide extra support as well as a way to build strength and range of motion in your arms, shoulders and back.

Experiencing Cancer-Related Fatigue? Exercise May Help!

Go to the Living Well with Cancer-Related Fatigue Video Series for tips to help manage your fatigue

Find Support, Pace Yourself, Manage Stress, Be Active, Eat well

www.cancercaremb.ca/side-effects and click on Fatigue



Reducing the Risk of Recurrence: Exercise and Activity



Dress for the Weather – with moderate to vigorous exercise dress as if the temperature outside is 5-10 degrees warmer.

- If it is windy, put a wind-resistant layer on the outside. Sunscreen can help to protect against windburn along with sunburn.
- In hot weather, wear a hat, sunglasses and sunscreen (there are lighter “sport” sunscreens that feel less greasy and allow you to sweat) and take water with you if you are going for more than a ½ hour.
- In cold weather dress in layers, with the base layer being a fabric that will pull the moisture away from your body (wicking material that is usually polyester, microfibre or silk based), wear a hat or toque, and don’t forget the sunscreen and sunglasses.
- In the rain, water-resistant fabrics may slow the process of getting wet, but won’t stop it completely. Water-proof fabrics tend to not breathe so you may be hotter and wet with sweat instead. Make sure to remove damp clothes (from sweat or the weather) right after activity.
- If the weather is too poor, consider going to the mall for your walk or drop-in to a local gym with a track, treadmills or elliptical trainers.

Exercise Within Everyday Activities:

Take the stairs instead of the elevator, take a walk for your coffee break or at lunch, try walking to work or the store, or parking farther away from your destination (remember to plan to leave a little earlier!). When doing chores around the house, try adding some extra energy to the job or doing it “old school” such as washing the car by hand, scrubbing the bathtub & shower, dancing with the vacuum or mop, or working in the yard with a hand mower and pruning shears.

Joint Friendly Activities:

Swimming, water aerobics, bike riding (stationary or outdoor), elliptical trainers, yoga, tai-chi and Pilates are all activities that are easier on your joints and have a lower risk of injury. Make sure you are following all the appropriate safety recommendations, such as wearing a helmet or working with a qualified instructor.

Couch Potato Workout:

In a typical 1-hour prime time television show, there are 12-15 minutes of commercials. Instead of flipping the channels with your remote, try jogging on the spot, doing jumping jacks, dancing around your living room, or skipping rope. In 2 hours of TV you can get your ½ hour of activity, just remember to get your heart rate high enough!

Join a Gym or Exercise Program:

Make sure the activity is right for you and that there are qualified instructors involved. Check with CancerCare Manitoba Patient and Family Support Services and ‘The Navigator’ newsletter for exercise programs available to cancer patients in Winnipeg. Outside of Winnipeg, talk to your local health care providers for information on programs.

Cancer-Specific Exercise Programs

- **Yoga and Cancer** is an eight-week program offered free of charge by CancerCare Manitoba in partnership with Yoga North. Patients who are on treatment or who have completed treatment within the past 12 months are welcome to register by calling CancerCare Manitoba Patient and Family Services at 204-787-2109 or toll free 1-866-561-1026 and ask for Patient and Family Support Services.
- **Cancer Management Exercise Program** - Rady Jewish Community Centre - call 204-477-7510
- **Cancer Rehab Pilates Class:** Open to anyone that has undergone treatment for cancer of any kind. Call Donna Sarna Physiotherapy & Rehabilitation at 204-475-6940.

After Treatment Programs

After Treatment Programs

The **Moving Forward After Cancer Treatment Wellness Program** is offered by CancerCare Manitoba in partnership with the Reh-fit Centre on Taylor Avenue. This 10-week program is available free of charge for those who have completed treatment for cancer within the past two years. Participants meet twice a week to exercise at their own pace with an exercise specialist. In addition to the exercise sessions, the program includes five yoga sessions alternating with five group sessions that focus on topics such as nutrition, medical follow-up, and the emotional and psychological challenges many people face when treatment is over. For more information and to register, call CancerCare Manitoba Patient and Family Services at 204-787-2109 or toll-free 1-866-561-1026 and ask for Patient and Family Support Services.



Get Better Together is a free 6-week workshop designed to help Manitobans with ongoing health conditions take control of their health. Topics include healthy eating, communication, physical activity, and pain management (supported by Manitoba Health and Regional Health Authorities). To register, call 204-632-3927 or visit www.getbettertogether.ca to participate online or to get more information.

CancerCare Manitoba Newsletter: The Navigator

The Navigator Newsletter lists the education sessions and the support programs and groups available.



Support Groups (different cancer types)
Young Adult Cancer Support
Caregiver Support Group
Remembering Bereavement Support Group

Moving Forward after Breast & Gyne Cancer
Brain Fog
Expressive Art Group
Narrative Practice Support Group- Who am I now?

For a complete listing of all the groups and programs:

- Go to www.cancercare.mb.ca/Patient-Family/support-services/programs-and-support-groups
- To receive a copy by mail or for more information, call the Patient and Family Support Services: 204-787-2109 or toll-free: 1-888-561-1206 ext. 72109.

Rehabilitation Therapy Services

You may need a physician's referral to access the services of a physiotherapist, occupational therapist, or athletic therapist for insurance coverage. For individual assessment, you may want to contact:

Manitoba Physiotherapy Association	204-925-5701 or toll-free at 1-877-925-5701	
	www.mbphysio.org	
Manitoba Society of Occupational Therapists	204-957-1214	www.msot.mb.ca
Manitoba Athletic Therapists' Association	204-925-5930	www.mata.mb.ca

Sleep Well



Many people who have or have had cancer find it difficult to sleep. Below are some tips for good sleep habits. Many of these seem like common sense, but it is surprising how many of these important points are ignored by many of us. Here are some tips you can try provided by the University of Maryland Medical Centre.

Your Personal Habits



Fix a bedtime and a wake-up time. Try not to let your bedtime and wake up time change too much. The body gets used to falling asleep at a certain time, but only if this is done regularly. Even if you are retired or not working, this is a key part of good sleeping habits.

Avoid napping during the day. The late afternoon for most people is a “sleepy time”. Many people will take a nap at that time. This is generally not a bad thing to do, provided you limit the nap to 30-45 minutes and can sleep well at night.

Avoid alcohol 4-6 hours before bedtime. Many people believe that alcohol helps them sleep. While alcohol has an immediate sleep-inducing effect, a few hours later as the alcohol levels in your blood start to fall, there is a stimulant and wake-up effect.

Avoid caffeine 4-6 hours before bedtime. This includes caffeinated beverages such as coffee, tea, and many sodas, as well as chocolate.

Avoid heavy, spicy, or sugary foods 4-6 hours before bedtime. These can affect your ability to stay asleep.

Exercise regularly, but not right before bed. Regular exercise, particularly in the afternoon, can help deepen sleep. Intense exercise within 2 hours before bedtime, however, can decrease your ability to fall asleep.

Your Sleeping Environment

Use comfortable bedding. Uncomfortable bedding can prevent good sleep. Check whether or not this is a source of your problem, and make changes if it is.

Find a comfortable temperature setting for sleeping and keep the room well ventilated. If your bedroom is too cold or too hot, it can keep you awake. A cool (not cold) bedroom is often the best for sleep.

Block out all distracting noise and eliminate as much light as possible.

Reserve the bed for sleep and sex. Don't use the bed as an office, workroom or recreation room. Let your body “know” that the bed is associated with sleeping.

Getting Ready for Bed

Try a light snack before bed. Warm milk and foods high in an amino acid called tryptophan, such as bananas, may help you sleep.

Practice relaxation techniques before bed. Relaxation techniques such as yoga, deep breathing, and others may relieve anxiety and reduce muscle tension.

Don't take your worries to bed. Leave your worries about your job, school, daily life, etc., behind when you go to bed. Some people find it useful to assign a “worry period” during the early evening or late afternoon to deal with these issues.

Establish a pre-sleep ritual. Pre-sleep rituals, such as a warm bath or a few minutes of reading, can help with sleep.

Get into your favourite sleeping position. If you don't fall asleep within 15-30 minutes, get up, go into another room, and read until sleepy.

Getting Up in the Middle of the Night

Most people wake up one or two times a night for various reasons. Many people find it helpful to have a journal or note pad at the bedside so that if a thought is preventing you from falling back to sleep, you can write it down on the paper and allow yourself to let go of the thought and go back to sleep.

If you find that you get up in the middle of the night and cannot get back to sleep within 15-20 minutes, then do not remain in the bed “trying hard” to sleep. Get out of bed, leave the bedroom, read, have a light snack, do some quiet activity, or take a bath. You will generally find that you can get to sleep 20 minutes or so later.

Do not perform challenging or engaging activities such as office work, housework, etc. Do not watch television.

Television and Other Electronic Devices

Many people fall asleep with the television on in their room. Watching the television before bedtime is often a bad idea. Television is a very engaging device that tends to keep people up. E-readers, cell phones and video games can also have the same effect.

It is recommended that the television is not in the bedroom and other electronic devices be avoided. At the appropriate bedtime, the TV should be turned off and you should go back to bed. Some people find that the radio helps them go to sleep. Since radio is less engaging than TV, it is less likely to affect your sleep.

Other Factors

Several physical factors are known to upset sleep. These include arthritis, acid reflux with heartburn, menstruation, headaches, and hot flashes. Talk to your primary care provider if you are having issues like the ones listed here. There are often things that they can suggest to help you.

Psychological and mental health problems like depression, anxiety and stress are often associated with sleeping difficulty. In many cases, difficulty staying asleep may be the only presenting sign of depression. A physician should be contacted about these issues to help determine the problem and the best treatment.

Many medications can cause sleeplessness as a side effect. Ask your doctor or pharmacist if the medications you are taking can lead to sleeplessness.

To help overall improvement in sleep patterns, your primary care provider may prescribe sleep medications for short-term relief of a sleep problem. The decision to take sleeping aids is a medical one made while thinking about your overall health.

Always follow the advice of your primary care provider and other health care professionals. The goal is to rediscover how to sleep naturally.

Home Cancer Drug Program and Complementary Therapies

The Manitoba Home Cancer Drug Program covers some medications that support cancer treatment or recovery at no cost.



Once you transition to your primary care provider, you will be automatically renewed on the Manitoba Home Cancer Drug Program if you are taking any of the medications on the list. If you are not taking medications on the Manitoba Home Cancer Drug Program List, you do not need to worry about the Home Cancer Drug Program.



If you have questions about the Manitoba Home Cancer Drug Program, please call **204-787-4591**.

If you are First Nations, Metis, or Inuit, and have questions about medication coverage, please call the Education and Liaison Nurse at **204-787-4583** or toll-free at **1-855-881-4395**.

Current Medications

List below the current medications you are taking to help you keep track.

1. _____
2. _____
3. _____
4. _____
5. _____

What About Complementary or Alternative Medicines?

Many people who have or have had cancer have used or consider using complementary, alternative, or traditional health care practices or treatments such as herbal medications or special diets. When your cancer treatment ends you may find yourself thinking even more about these kinds of treatments.

If you are thinking about using any of these methods, please discuss them with your doctor or nurse first, or a dietitian or pharmacist at CancerCare Manitoba. While some complementary therapies, like meditation or yoga, may be beneficial during your cancer experience, other therapies may be harmful when used with medicines normally prescribed by a doctor. Talking to your health care team about complementary therapies will help you make a safe and informed decision.



Managing Skin Changes After Treatment

As a person who has had cancer, you may be experiencing skin changes due to current or past cancer treatments, including chemotherapy, radiation treatment, or oral medications.

With chemotherapy, you might notice changes to the mucous membrane (the tissues in your mouth and throat), such as dry mouth, taste changes, and difficulty swallowing. Changes in skin texture and colour are also common. You may also experience skin blistering and peeling on your feet and hands.

Radiation treatments can cause skin changes at the site of the treatment, including dryness, itching, redness, and thinning of the skin. Normally, with radiation, skin changes start after treatment begins and may intensify during and after treatment.

With some oral medications, you may notice a rash and acne-like changes. You may notice that these symptoms change and improve over time.

Practical Suggestions for Taking Care of Your Skin After Treatment:

- Use a moisturizer that does not include alcohol or extra perfumes.
- Drink plenty of water every day.
- When you shower and bathe, keep the water warm and not too hot.
- Use moisturizer after showering and before bedtime.
- Include healthy foods and oils in your diet to keep your skin healthy from the inside out.
- Ask your primary care provider about any skin changes that do not improve, have changed, or are bleeding.
- If you are experiencing extreme changes, talk with your primary care provider. Many times they can evaluate the need for steroid creams or antibiotics to treat the symptoms.
- If you have mouth symptoms, eat soft foods that are easy to swallow, drink liquids that are nutritious and soothing, and rinse your mouth frequently. Use a soothing lip balm to help keep lips moisturized.
- If you have experienced hair loss with your treatment, remember to protect your scalp from the sun by wearing a hat when you go outside. You also need to protect any skin that is in the radiation treatment area. Sunscreen should be an SPF 30 or greater.



Talk to your primary care provider (family doctor or nurse practitioner) if you are experiencing ongoing or persistent skin issues after treatment

Health Care Decisions and Considering the Future

Making decisions about your health care can feel overwhelming. However, when you have an illness such as cancer, it is important to start talking about what you value and how you want others to approach your care. These topics can be complex and involve issues that we are not used to thinking about.

Discussing your wishes with your health care team and family is the first step. Putting your wishes in writing is the next thing to do. A plan that describes your wishes about health treatments is called a health care directive or a living will.

A health care directive:

- is a written legal document. This lets others know how you want to be treated if your health changes.
- is used when you cannot speak for yourself.
- helps you and your family talk about what is important to you.
- says who you want to be in charge of your health care decisions if you are unable to speak for yourself. This person is called a health care **proxy or substitute decision-maker**.



Ask for the “It’s About Conversations” booklet from your CancerCare team to help assist you and your loved ones to make a health care directive that is right for you.

To find out more information and access an advance directive form go to:

www.gov.mb.ca/health/livingwill.html

Your wishes about your health care decisions may change over time. These forms and documents can be changed as well. Your health care team will review your goals of care whenever your cancer or other health condition changes significantly. If you have any questions about advance care planning or health care directives, talk to your health care provider.

Online Resources

- **www.advancereplanningcancer.ca** - CancerCare Manitoba’s website for helping you document your wishes and establish an advance care plan.
- **www.wrha.mb.ca/acp/** - This website has videos and information for patients and families that have been developed by the Winnipeg Regional Health Authority.
- **www.virtualhospice.ca** - The Canadian Virtual Hospice website has articles on decision making and information about palliative care.
- **www.advancereplanning.ca** - The Canadian Hospice Palliative Care Association has developed a national website with information about advance care planning.

Additional Supports and Resources

CancerCare Manitoba offers additional supports and resources that are available to help you with difficulties you might be experiencing as you move forward after cancer, and to help you with a healthy lifestyle.



Counselling- Individual, Couple, Family: CancerCare Manitoba's Patient and Family Support Services has psychosocial clinicians/counsellors who specialize in working with people with cancer and their families/loved ones.

These specialists can help you:

- with feelings of anger, sadness, fear and anxiety
- sort through the meaning of this experience in your life
- adjust to change and loss
- with a referral to resources for practical and financial issues
- connect with other support programs
- with decision making about returning to work
- learn relaxation skills and/or mindfulness skills
- with relationship difficulties
- returning back to work

Individual Counselling: You or a family member meet a counsellor one on one for about an hour.

Couples Counselling: You and your partner meet together with the counsellor who can help you talk about problems and learn about each other's needs to improve communication and work together on relationship issues.

Family Counselling: Families meet together with a counsellor to talk through how cancer has impacted their whole family, talk about issues that have arisen or may be longstanding and work together to improve communication and relationships.

To book a session with a counsellor, call **CancerCare Manitoba's Patient and Family Support Services - Phone: 204-787-2109 or toll-free 1-866-561-1026** and ask for **Patient and Family Support Services**.

There are other support programs and groups available through CancerCare Manitoba's Patient & Family Support Services.

The Navigator Newsletter - See a copy of the Navigator Newsletter for a monthly calendar of cancer-related support groups, information sessions and other programs. This newsletter can be found online at www.cancercare.mb.ca, click on Patient and Family tab and go to Support Services



Sexuality Counselling: An expert nurse counsellor is available at CancerCare Manitoba to meet with you and/or your partner to talk about any concerns you have about sexuality. The nurse is available to meet with you in person, via telehealth, or by phone.

Sexuality Counselling Clinical Nurse Specialist - **Phone: 204-787-4495 or toll-free 1-866-561-1026**

CancerCare Manitoba's Patient and Family Support Services - **Phone: 204-787-2109 or toll-free 1-866-561-1026**

Spiritual Care:



• **Winnipeg Regional Health Authority Aboriginal Health Programs – Health Services Spiritual & Cultural Care Providers** are available to patients and region staff. All faiths are recognized, and Aboriginal Health Programs-Health Services can connect patients and clients with appropriate resources at each site. To access the Spiritual/Cultural Care Provider call, or ask your health-care provider to call the Central Intake office at **1-877-940-8880**.

• **Counsellors** at CancerCare Manitoba can also talk with patients about their spiritual concerns and discuss some of the common questions that patients have.



Patient Representative: The role of the Patient Representative is to act as a liaison between patients, their families, and CancerCare Manitoba staff. This confidential service strives to address concerns, answer inquiries and act on suggestions in a respectful, compassionate and timely manner. To speak with a patient representative, call **204-787-2065 or 1-866-561-1026** and ask for the **Patient Representative's office**.

Additional Supports and Resources



Cancer Resource Centres for Patients and Families

The cancer resource centres provide patient and family education on various aspects of cancer, helping you and your family and friends find helpful resources. There are many books and pamphlets available that you may find helpful.

- **CancerCare Manitoba Patient and Family Resource Centre:** Resources can be mailed and a catalogue of available resources is available online at www.cancercare.mb.ca.
Phone: 204-787-4357 or toll-free 1-866-561-1026 and ask for the Patient and Family Resource Centre
- **Breast and Gyne Cancer Centre of Hope:**
Talk with a nurse who can provide information, education and support about a breast or gynecological cancer diagnosis, treatment and recovery.
Phone: 204-787-2970 or toll-free at 1-866-561-1026 or email hope@cancercare.mb.ca
- **Central Plains Cancer Care Services in Portage La Prairie:** A non-profit grassroots organization that is dedicated to improving the quality of life for cancer patients, survivors, and their family members. It is also committed to providing educational programs directed at the early detection and prevention of cancer.
Call **204-857-6100** or email executivedirector@cpcancerservices.ca
- **South Central Cancer Resource:** South Central Cancer Resource is a non-profit organization created in 2003 by a group of concerned citizens who saw a need to help those in our rural communities who were facing cancer. They offer cancer support in local communities – by their communities, in the form of individual support, transportation help, wigs, head coverings, prostheses and bras, resources and educational programs.
Call **204-822-9541** or **1-866-287-4730** or email sccr@mymts.net.
- **Western Manitoba Cancer Centre Resource Centre in Brandon:** Resources such as head coverings, books, and computers for looking up information related to cancer are available here. Additional cancer resources are also available through the Brandon Regional Health Centre’s Patient Resource Room.
Call **204-578-4080** or email library@pmh-mb.ca.



Community Cancer Programs Network: The Community Cancer Programs Network (CCPN) enables cancer patients in rural Manitoba (outside of Winnipeg) to receive treatment closer to home. Other cancer support services may be available in your community (e.g. patient navigation, cancer support groups, psychosocial support, spiritual support, nutritional counseling, volunteer drivers and palliative care, etc.)

CCPN office in Winnipeg - **Phone: 204-784-0224**



Cancer Navigation Services: Cancer Navigation Services are available throughout rural Manitoba and include facilitating timely access to services; providing informational, educational, psychosocial, and practical support; guidance surrounding symptom management, and linking patients and families to appropriate resources offered through CancerCare Manitoba and within local communities. Cancer Navigation teams include Nurse Navigators and Psychosocial Oncology Clinicians. Cancer Navigation Services are available to cancer patients and their families and are provided at no cost.

A **Nurse Navigator** is an experienced cancer nurse who is a link between patients and the cancer care system.

Psychosocial Oncology clinicians are concerned with understanding and treating the social, psychological, emotional, spiritual, quality-of-life and functional aspects of cancer.

Health Authority - Cancer Navigation Services	Toll-Free Phone Number
Winnipeg Cancer Navigation	1-855-837-5400
Southern Health - Santé Sud	1-855-623-1533
Interlake - Eastern Regional Health Authority	1-855-557-2273
Northern Regional Health Authority	1-855-740-9322
Prairie Mountain Health	1-855-346-3710

First Nations, Metis and Inuit Cancer Control and Underserved Populations: Many Manitobans experience barriers to care. The goal of this team is to make sure everyone who needs our services receives culturally responsive, quality care.

If you have difficulties getting the right services, resources and support, the Education and Liaison Nurse can help. For example, the Education and Liaison Nurse can assist you by working with Non-Insured Health Benefits, assisting with travel arrangements, ensuring interpreters are with you at medical appointments, or connecting with you about your follow-up care plan.

Education & Liaison Nurse - **Phone: 204-787-4583 or toll-free at 1-855-881-4395**
E-mail: changingthepath@cancercare.mb.ca



Primary Care Providers (Family Doctor or Nurse Practitioner): After cancer treatment, the management of your follow-up testing is often returned to your primary care provider, who is responsible for your general medical care. If you do not have a primary care provider, you can contact the Manitoba Health Family Doctor Finder. The Family Doctor Finder is designed to connect you and your family with a regular primary care provider who can provide you with a home base for your health care needs. There are two ways to register with the program:

By phone: 204-786-7111 (in Winnipeg) or toll-free 1-866-690-8260

Online - www.gov.mb.ca/health/familydoctorfinder/register.html



Language Access: Do you need an interpreter? When you are arranging an appointment, please tell us if you need to use the free interpretation services. Over 300 languages are available including sign language, First Nations languages and Inuktitut. Please contact your oncologist's office to arrange this service.



Home Care: Home care services provide health care at home. Home care is set up to help monitor what is happening and also to manage symptoms. If you or your loved one qualify for home care services, they may include:

- Home visits by a nurse
- Medical equipment (such as a hospital bed or commode)
- Support by a health care aid
- Physical and other therapies

Private insurance companies will sometimes cover home care services, but some rules apply. Talk to your health care team to find out more about home care.

In Winnipeg, call 204-788-8330. In rural Manitoba, call the hospital closest to your home, and ask to speak to the Home Care Coordinator.



Canadian Cancer Society - Manitoba Division: Offers support and information for people with cancer and their family, friends and caregivers.

- The **Cancer Information Service** provides answers to questions about all types of cancer, diagnostic tests, treatments, side effects, clinical trials and many other cancer-related topics.
- The **Peer Support Service** connects people living with cancer and caregivers with trained volunteers who offer encouragement and share ideas for coping – all from their unique perspective as someone who's been there.
- The online community – **CancerConnection.ca** – helps people who have cancer, cancer survivors and caregivers share their experiences and build supportive relationships.
- They can also help you find more cancer-related services in your area through our **Community Services Locator** – a searchable database of over 4000 cancer-related services and resources nationwide – or at one of their community offices across the country.

Call 1-888-939-3333 or email connect@cancer.ca

Additional Supports and Resources

WRHA Aboriginal Health Programs and Services: Aboriginal Health Programs - Health Services provide vital services for Aboriginal people receiving health care in the Winnipeg Health Region. For information about Aboriginal Health Programs - Health Services such as interpreter services, discharge planning, spiritual/cultural care, advocacy, or patient resources, call or ask your health care provider to call our **Central Intake Line at 1-877-940-8880**.



Genetic Counselling: Some cancers can have a hereditary component. Genetic counselling for cancer is generally reserved for those who were diagnosed at an early age or have other close relatives with the same diagnosis. Genetic Services are available by health care provider referral only. If you would like to be seen by a genetic counsellor, have your primary care provider call genetic services at **204-787-2494**.



Websites – Cancer Information: The internet is a great source of information, but it is also full of misinformation. These websites are ones you can rely on to provide you with accurate information:

CancerCare Manitoba	www.cancercare.mb.ca
Canadian Partnership Against Cancer	www.partnershipagainstcancer.ca
Health Canada	www.hc-sc.gc.ca/index-eng.php
Canadian Cancer Society	www.cancer.ca
American Cancer Society	www.cancer.org
Canadian Caregiver Coalition	www.ccc-ccan.ca
National Cancer Institute (USA)	www.cancer.gov
American Society of Clinical Oncology “ASCO” Patient Site (USA)	www.cancer.net
Oncolink	www.oncolink.org
Medline Plus - Cancer	www.nlm.nih.gov/medlineplus
Mayo Clinic	www.mayoclinic.com
American Institute of Cancer Research	www.aicr.org
Government of Manitoba – Health and Seniors Care	www.gov.mb.ca/health
Manitoba in Motion	www.manitobainmotion.ca
Active Aging in Manitoba	www.activeagingmb.ca
National Coalition for Cancer Survivorship	www.canceradvocacy.org
Office of Cancer Survivorship, National Cancer Institute	www.cancercontrol.cancer.gov.ocs
National Cancer Survivorship Initiative	www.ncsi.org.uk
Lance Armstrong Foundation	www.livestrong.org
Cancer and Work	www.cancerandwork.ca
Canadian Cancer Survivor Network	www.survivornet.ca

Glossary

Acid Reflux: when stomach acid backs up into the esophagus.

Adjuvant Therapy: therapy given in addition to the main treatment for cancer. In the case of colorectal cancer, surgery is usually the primary treatment. An example of adjuvant therapy would be chemotherapy after surgery.

Anemia: a reduced number of red blood cells.

Antibiotic: a medication used to treat a bacterial infection.

Anti-inflammatory: a substance that reduces inflammation (swelling).

Anxiety: a state of being uneasy, apprehensive, or worried about what may happen; concern about a possible future event.

Appetite: a desire for food.

Arthritis: a joint disorder that causes inflammation in the joints.

Athletic Therapist: a person who specializes in treating injuries of the muscles, bones, and joints.

Blood Transfusion: receiving blood products by intravenous.

Body Mass Index: a measurement used to estimate body fat and classify persons as being underweight, overweight, obese or normal.

Bone Density: the amount of mineral matter per square centimetre of bone.

Calorie: the quantity of food capable of producing an amount of energy.

Calcium: a mineral that makes up bone and helps with different body functions.

Chemotherapy: medications with cancer-fighting abilities to treat cancer. Chemotherapy medications are sometimes referred to as anticancer agents.

CT Imaging / Scan: formerly known as a CAT Scan, a CT scan takes 3-D images of structures in your body. This scan is very effective at confirming if there is cancer in the liver, lungs, brain, bones or other parts of the body.

Chemotherapy Cycles: the time it takes to give the chemotherapy treatment plus the rest time until the next treatment. Each round of chemotherapy medication is called a cycle.

Cholesterol Test: a test that detects the level of a type of fat called cholesterol in your blood.

Chronic Disease: long-lasting illness.

Colonoscopy: a procedure done to look at part of your bowel.

De-conditioning: the loss of physical fitness.

Dementia: a progressive disease of memory loss.

Depression: a common condition that affects your mood, resulting in feelings of sadness, hopelessness, inadequacy, worry, and dejection. Depression can affect your appetite, your motivation to perform daily activities, and your relationships.

Diagnosis: identification of a disease using a medical examination, signs, symptoms, laboratory tests, biopsy (sample of tissue) and radiological findings.

Glossary

Dietitian: licensed professional with specialized training in human nutrition who advises individuals on healthy eating.

Digestive tract: organs where food passes and nutrients are absorbed.

Evidence: something used to prove or disprove something.

Fasting Plasma Glucose: a test to detect diabetes (high blood sugar).

Fatigue: physical or mental exhaustion; tiredness.

Fibre: is the part of plants that our bodies cannot digest. There are two types of fibre: soluble and insoluble. Foods such as vegetables, fruits, legumes and whole grains contain fibre.

Fractions: individual treatment sessions of radiation therapy.

Genetic Counseling: specialists who help people learn about and cope with genetic conditions.

Germ: a microorganism that causes disease.

Heartburn: a burning sensation in the chest, indigestion.

Heart Rate: number of heartbeats per minute (bpm).

Heart Rate Zone: calculation based on heart rate used to obtain target heart rate for the desired intensity of exercise.

Hereditary: something that is passed on through genes from parent to child.

Home Screening Test: test done to detect blood in the stool. Also known as the Fecal Occult Blood test (FOBT).

Hypertension: high blood pressure.

Hysterectomy: a surgery done to remove the uterus (womb).

Immune system: a network of cells, tissues, and organs that work together to defend the body against attacks by “foreign” invaders such as bacteria and viruses.

Immunization: a process whereby a person is made immune or resistant to an infectious disease, typically by giving a vaccine.

Legume: the fruit or seed from the pea family. Examples include peas, chickpeas, lentils or beans.

Lymph nodes: the lymphatic system is part of the body’s immune system. There are hundreds of lymph nodes throughout the body. It collects fluid, waste material, and other things (like viruses and bacteria) that are in the body tissues, outside the bloodstream. Lymph vessels are a lot like the veins that collect and carry blood through the body. But instead of carrying blood, these vessels carry the clear watery fluid called lymph. Lymph nodes are small structures that work as filters for harmful substances. Cancer can appear in the lymph nodes in 2 ways: it can either start there or it can spread there from somewhere else.

Mammogram: an x-ray picture of the breast.

Maximum Heart Rate: the upper limit for a person’s heart rate while exercising.

Medical Oncologist: doctor who specializes in the diagnosis and treatment of cancer with drugs.

Mineral: an element required as an essential nutrient by humans to perform functions necessary for life.

Moderate Activity: activity intensity at a level where breathing and heart rate are increased; Heart Rate Zone of 60 to 75% of maximum heart rate.

Neo-Adjuvant: describes the therapy or treatment given before primary therapy. For example, radiation therapy or chemotherapy given to reduce the size of a tumour before surgery to remove the tumour.

Neuropathy: pain and muscle weakness caused by nerve damage.

Nutrient: a substance that supplies nourishment to the body.

Obese/Obesity: having too much body fat. Body Mass Index over 30.

Occupational Therapist: a specialist in physical or mental illness that works to improve a person's ability to perform daily functions.

Oncologist: a physician who specializes in diagnosing and treating cancer.

Overweight: weight above that which is considered normal, proper, healthy, etc. Body Mass Index of 25–29.9.

Pap test: a procedure that removes a small sample of cells from the cervix to detect abnormalities.

Pedometer: an instrument worn to record the number of steps taken.

Pneumonia: a lung infection.

Physiotherapist: a person qualified to treat disease or injury by physical methods such as massage, heat treatment, and exercise.

Psychosocial Clinician: a person with specialized training to talk with you and help you to regain social, emotional, and spiritual health. They specialize in assisting you with the quality of life aspects of cancer.

Protein: a plant or animal tissue that is considered a food source and can supply the body with organic compounds needed to build tissues.

PSA Test: blood test done to check the PSA (Prostate-Specific Antigen) level in the blood.

Radiation (therapy): use of gamma rays or high-energy x-rays to damage or destroy cancer cells.

Radiation Oncologist: a physician who specializes in diagnosis and treatment of cancer and other diseases through the use of radiation therapy.

Recurrence: the return of cancer after a period of time when the person was considered cancer-free (remission).

Remission: a period of time during a serious illness when there are few or no signs or symptoms of the illness.

Saturated fat: a fat derived from animal or vegetable sources that tends to increase cholesterol levels in the blood (can be found in butter, meat, egg yolks, and coconut or palm oil).

Serving: single portion of food or drink, as defined by Health Canada.

Sexual dysfunction: sex-related problems.

Side Effects: non-intended symptoms caused by medicine or treatment, such as nausea, rash, anxiety, or constipation.

Sigmoidoscopy: a procedure done to look at the sigmoid colon (part of the bowel).

Stage: a way of describing the size of cancer and how far it has grown. Staging helps to determine treatment methods and to predict the course of the disease.

Steroid: a type of drug used to treat injury or illness by reducing swelling and other effects of the immune system.

Stimulant: a substance that temporarily increases mental and physical functions. Ex. caffeine

Surgeon: doctor who performs surgery / treats disease through operations.

Symptom: a sign or indication of a particular disease or disorder.

Trans Fat: a type of fat that is unsaturated, commonly solid at room temperature. Research has shown that it raises blood cholesterol levels. Margarine contains trans-fats.

Underweight: weight under that considered normal, proper, healthy, etc. Body Mass Index of less than 18.5.

Unsaturated Fat: a fat derived from plant and some animal sources, especially fish, that is liquid at room temperature. Intake of foods containing more unsaturated fats than saturated fats may contribute to reduced cholesterol levels.

Vigorous Activity: activity intensity at a level where breathing and heart rate are increased to a high level; Heart Rate Zone of 75 to 90% of maximum heart rate.

Vitamins: any of a group of substances that are found naturally in many foods; vitamins are necessary in small quantities for good health and normal development and functioning.

Waist Circumference: a measurement used to indicate the amount of abdominal fat.



www.movingforwardaftercancer.ca