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.

Moving Forward after Cancer Treatment

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CancerCare Manitoba
Community Oncology Program
Introduction

Moving Forward after Cancer Treatment

This booklet is Part 3 (of 3) of the Follow-Up Care Plan package. It contains information on general wellness and health promotion, reducing future risk, and resources and supports available in Manitoba after being treated for any type of cancer.

Part 1 - The Personalized Follow-Up Care Plan and Treatment Summary outlines your personal follow up schedule including necessary tests and appointments, what symptoms to watch for, and a summary of the treatments you received. If you misplace Part 1, please call your oncologist’s office. A new copy can be provided to you.

Part 2 provides specific information on the cancer you had regarding follow-up care, side effects you might be experiencing and what the best course of action might be, and post treatment programs you may be interested in.

Part 2 and 3 are available online at movingforwardaftercancer.ca. Please feel free to print off as many copies as you would like.

Please go to www.movingforwardaftercancer.ca for additional information that you may find helpful, such as 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 independant medical judgment of the treating professional.
Making sense of your experience

Now that you have completed your treatment you may find you have a confusing mix of feelings. On the one hand you may be feeling a sense of happiness and relief that some of the difficulties and disruptions of treatment are behind you. At the same time there are often feelings of fear, anxiety and sadness.

You may feel tired. You may still be struggling with some of the side-effects of treatments or continuing to adjust to changes in your health and changes to your body. You may find yourself grieving – for some obvious and other not so obvious losses.

Many people are surprised by how they feel. Once treatment is behind you, you may find you now have the emotional and physical energy to seek counseling to begin to make sense of all that has happened. It is at this time that many people find it helpful to seek support as they face the impact of their cancer on both themselves and their loved ones. Others find it very helpful to speak with others who have been through or are going through some of the same things as you. You likely also want to know what you can do to help yourself recover and be as healthy as possible.

The same support program or resource or wellness plan does not work for everyone. It is important to find what works for you and to develop your own personal plan for moving forward and living well.

Who do I talk to about questions or worries?

If you are experiencing any of the following, it is important to know that there is help available. Talk with your family doctor, nurse, or other health care provider, or check the ‘Resources and Support Available’ Section in this booklet for who can help you with:

• New symptoms: physical, emotional, social or spiritual
• Pain that troubles you
• Symptoms that affect the quality of your life (e.g. feeling tired, trouble sleeping, sexual problems, relationship issues)
• Feelings of anxiety or depression
• Eating or nutrition issues

CCMB Patient and Family Resource Centre

has helpful books and pamphlets and can help you connect with supports and services. Materials can also be mailed to you.

204-787-4357 or toll-free 1-888-561-1026 ext. 4357
675 McDermot Street in Winnipeg
Emotional Impact of Cancer & Treatment

Living with Hope and Uncertainty

Being told you have cancer can be traumatic. Patients may be affected in many ways including spiritually, emotionally, physically, and financially. Professional support is available to patients and families free of charge and without a referral, even after being discharged from the cancer clinic.

Many people worry about cancer returning - the good news is the worry usually lessens over time. To help deal with the worry:
• Practice a healthy lifestyle (physical, emotional, and spiritual)
• Maintain a good relationship with your health care providers
• Maintain a sense of hope, cheerfulness, and humour
• Seek support from family, friends, support programs, and professionals

Uncertainty

Many patients diagnosed with cancer deal with the uncertainty of their health situation and this may lead to challenges coping and adapting to life after cancer treatment.

Uncertainty is:
• Not knowing what will happen in the future
• Being in doubt
• Being undecided
• Not being able to rely, count, or depend on someone or something
• Feeling unsure about what to do, expect, know, and ask

Four issues that often contribute to fear of recurrence may include:
• Fear of death
• Fear of pain or suffering
• Feeling like you need others to help you, loss of control
• Questions about the purpose of life

Some patients find it helpful to create a list of all the things that make them feel like they are losing control. Cancer is only one of the many things that may make you feel like you are losing control. Shifting your focus and appreciating that these feelings are a fact of life for everyone may be helpful.

Things that can help you cope with uncertainty:
• Acknowledge your fears
• Know that you are not alone
• Seek help, talk with your family, friends, and health professionals
• Join a support group
• Learn what you can do to stay and live well
• Take control of your lifestyle by eating healthy, getting regular quality sleep, managing stress, quitting smoking, and limiting alcohol intake.

Patient and Family Support Services: CCMB Patient and Family Support Services has psychosocial oncology clinicians/counselors who specialize in working with people with cancer or who have had cancer and their families/loved ones.
• They can see you individually, as a couple, as a family or any member of your family on their own.
• There are counselors available at both CCMB MacCharles and St. Boniface sites and many rural sites, and access through Manitoba Telehealth.

CCMB’s Patient and Family Support Services - Phone: 204-787-2109 or toll-free 1-866-561-1026 extension 2109.
Primary Care, Medical Tests and Screening

After cancer treatment, many patients will have all or part of the management of follow-up testing returned to their family physician or nurse practitioner - also known as a primary care provider. The Part 1 Follow-up Care Plan: Personalized Information sheets will outline which clinician is responsible for the different aspects of your follow-up testing. How often you are schedule for routine tests and clinic visits may go down, for example, to every three or six months and seem very different to the visits to your oncologist or hematologist. Your primary care provider will have received regular communication from your CCMB doctors throughout your treatment, in addition to receiving the same follow-up guidelines and personalized information you received with your Follow-up Care Plan Package.

It is important to make an appointment with your primary care provider soon after your transition into follow-up care. Take your Follow-up Care Plan Package with you to discuss and book the recommended follow-up tests and visits. It is not unusual to be focused on cancer-related issues while on treatment, but your primary care provider is well-equipped to manage not only your cancer follow-up care, but to manage your general health and other non-cancer medical care. They can assess new problems in a timely way and support you and your family as you move forward into post-treatment life.

If you don’t have a family physician or nurse practitioner, let your CCMB team know. They can either send a referral to the CCMB UPCON (primary care) program or recommend you contact the Family Doctor Finder program with Manitoba Health.

Family Doctor Finder
Phone: 204-786-7111 / Toll-free: 1-866-690-8260
Register Online: www.manitoba.ca/familydoctorfinder

It is important that you continue to participate in age/gender appropriate cancer screening practices even after you have a cancer diagnosis. You may be at greater risk of developing a second cancer because you have had a cancer and have received treatment. 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 once a year.

Breast Cancer Screening: Have a mammogram every 2 years starting at age 50. Call the Breast Check Program at 204-788-8000 or 1-800-903-9290 for an appointment. If you are under age of 50, or if there is a family history of breast cancer, discuss earlier or more frequent screening with your family doctor or nurse practitioner.

Cervical Cancer Screening: Have a Pap test every 3 years until age 69. Screening can be stopped if a woman is 70 years or older and has had three or more negative Pap tests in the previous 10 years with no change in partner. Women with total hysterectomies for disease other than cervical cancer or endometrial cancer do not need Pap tests. Check your Pap test history by calling the Cervix Check Program at 204-788-8626 or 1-866-616-8805.

Colon Cancer Screening: Fecal Occult Blood Test (FOBT) every 2 years starting at age 50. You should receive the test in the mail. On an individual basis, other tests may be appropriate, such as a colonoscopy every 10 years or flexible sigmoidoscopy every 5 years, with or without FOBT.
**Prostate Cancer Screening:** Discuss whether you should get a PSA blood test every year or two (plus a prostate exam when possible) with your health care provider. Men who have received pelvic radiation may be at a higher risk. Recent studies suggest that for most men, screening for prostate cancer with PSA testing causes more harm than good; routine PSA screening leads to an increase in biopsies (and the potential complications thereof) without a consistently demonstrable benefit in terms of lives saved. However, prostate cancer risk increases with a family history of prostate cancer and for men who have had pelvic radiation. You should discuss the pros and cons of screening with your primary health care provider.

**Diabetes Screening:** Have a Fasting Plasma Glucose (FPG) 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 if you are 65 and older or have diabetes, heart, or lung problems. You should also AVOID the shingles vaccine if you have persistent immune suppression or if you are on any medications which may alter your immune system.

**Blood Pressure Checks:** Get your blood pressure checked every two 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.

**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 or an anthracycline-based chemotherapy (R-CHOP or AVBD) 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.

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**Are you having trouble accessing these tests?**

You can contact the breast, cervix and colon screening programs directly at 1-855-95-CHECK for more information or to arrange an appointment.

If you live in a remote community and need assistance, please contact the CancerCare Manitoba Patient Access Coordinator at 1-855-881-4395.
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 life style.

**NO SMOKING / CHEWING TOBACCO**

Quitting smoking can be hard to do, but there are options for Quit Smoking programs available in Manitoba. A personalized program is the best way to help you quit smoking. It may include individual counseling, on-going support and access to smoking cessation aids (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**

The 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.

- 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 smoking cessation 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.

- Toll-free 1-877-513-5333

**KEEP TOBACCO SACRED**
Limit Alcohol, Be Sun Smart and Maintain a Healthy Body Weight

Limit How Much Alcohol You Drink
Research shows that drinking alcohol increases your chances of getting certain types of cancers. If consumed at all, alcohol should be limited 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 via the sun or tanning beds, and check your skin regularly for any changes. Not only can UV exposure cause premature wrinkles and age spots, it can increase the risk for developing malignant melanoma, the most serious form of 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
- 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 (SPF 30) about 30 minutes before you leave the house and be sure to reapply it hourly
  4. Avoid tanning beds and sunlamps
  5. 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 appears to increase the risk of many diseases including cancer, heart disease, diabetes, stroke, hypertension, arthritis, and dementia. You can use Body Mass Index (BMI) and Waist Circumference (WC) to determine if your body weight is in a healthy range. There are limitations to the use of these tools for assessing healthy weight in adults over age 65 and individuals less than 18 years of age. Talk to your physician and/or a Registered Dietitian in your community about your body weight if you have concerns or want to make changes.

Waist Circumference (WC) 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: Maintain a Healthy Body Weight and Eat Well

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

**EAT WELL**

Canada’s Food Guide is a useful and important resource that describes what amount of food people need and what type of food is part of a healthy eating pattern. The tips in this section will help you use Canada’s Food Guide to meet your nutrient needs, 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. In this case it is strongly recommend that you meet with a Registered Dietitian who can individualize these recommendations for your situation. Refer to Part 2 of your Follow-Up Care Plan for some specific dietary recommendations for your cancer and tips to help you manage difficulties you may be experiencing as a result of your treatment.

**Eat a Variety of Colorful 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 achieve and maintain a healthy weight.

**Tips:**
- Add fruit and vegetables to everyday meals: top cereal with fruit, start dinner with salad or vegetable soup, or add a layer of grilled 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
- Have vegetables and fruit more often than juice

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**Body Mass Index Chart**

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<th>Weight (pounds)</th>
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<tbody>
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</tbody>
</table>

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

Whole grains 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 and wild rice
- Enjoy whole grain breads, 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 Meats and Alternatives

Meat and alternatives provide essential protein, vitamins and minerals for your body’s growth and repair. For cancer prevention, limit red meats (such as beef, pork, lamb and wild meat) by reducing your portions to 3 oz servings of lean meat (roughly equal to the size of a deck of cards), no more than 3 times 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 (packed in water), 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

Pick Low-Fat Milk and Alternatives

Low-fat 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 disease).

**Tips:**
- Have 500 ml (2 cups) of milk (skim, 1% or 2%) or a fortified soy 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

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 drinks, candy, 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 consumption of salt and foods processed with salt (sodium)

We tend to eat more salt than we need, which is linked to an increased risk of chronic diseases and stomach cancer.

**Tips:**
- Limit the use of processed foods such as canned and packaged soups, crackers, sauces and gravies, condiments, ready-made meals and snack foods (where it can be listed on the food label as sodium)
- Work towards eliminating the use of salt in cooking and at the table
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. In addition, there is growing evidence that vitamin D may reduce the risk of some types of cancer. Talk to your physician or dietitian about whether vitamin D 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.

Recommended Resources
Create a personalized healthy eating guide by using “My Food Guide” at www.healthcanada.gc.ca/foodguide
For a deeper look at your nutrition and physical activity, use the Dietitian’s of Canada Eatracker tool at www.eatracker.ca

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 at least 7 servings of fruits and vegetables each day.
   □ Yes   □ No
2. I choose to eat whole grain breads, cereals and pasta most often.
   □ Yes   □ No
3. When consuming dairy products, I choose lower-fat varieties such as skim or 1% milk, low-fat yogurt, and lower-fat cheese.
   □ Yes   □ No
4. When I eat meat, I choose lean cuts such as lean ground turkey, skinless poultry, fish, round steak or extra-lean ground beef.
   □ Yes   □ No
5. I use soy products, nuts, lentils, beans or as meat alternatives.
   □ Yes   □ No
If you answered no to any of the questions, don’t 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. Refer to Part 2 of your Follow-Up Care Plan for some specific dietary recommendations for your cancer 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. You can access a dietitian through CancerCare Manitoba, through Dial-a-Dietitian at 204-788-8248 or 1-877-830-2892.
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 combat 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 to be aware of:

- If you have severe anemia, 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, such as walking, is 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 “over do 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 battle fatigue, relieve some stress, have time to be alone for thought and meditation, 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 off slowly:
Listen to your body! Walking is a cheap and easy activity to do first, especially if you are unsure of what you are capable of. If you haven’t been active, stick close to home for your first walk and keep track (either by time or number of steps) of how long until you feel the need to stop. 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 valuable information about your recovery and make you listen to your body more closely.

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 power. 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 really 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, or set a virtual goal such as ‘walking across Manitoba.’ 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:
- Specific: think of “Who, What, Where, When and How”
- Measurable: number of steps, reps, or length of time
- Attainable: keep it simple, a single thing, a goal you can accomplish in 1 week or 1 month
- Relevant: something that you are both willing and able to achieve AND it matters to you
- Time-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! Back off on 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 an 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 doctor, 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 physician before starting any exercise program.

Amount: 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.

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

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

- **Moderate Exercise** - With moderate exercise you should be able to talk, but not sing. 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 five-eight for moderate to vigorous exercise. Use the chart below to measure your intensity.

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

  Heart rate is the number of heart beats 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 x 0.60 = 93 bpm  
75%: 155 x 0.75 = 116 bpm  
90%: 155 x 0.90 = 140 bpm  
Moderate Zone = 93 - 116 bpm  
Vigorous Zone = 116 - 140 bpm

<table>
<thead>
<tr>
<th>Age: _____</th>
<th>Max Heart Rate: 220 - _____ = _____ bpm</th>
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<tbody>
<tr>
<td>60%: “Max Heart Rate” x 0.60 = _____ bpm</td>
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<tr>
<td>75%: “Max Heart Rate” x 0.75 = _____ bpm</td>
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<tr>
<td>90%: “Max Heart Rate” x 0.90 = _____ bpm</td>
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<tr>
<td>Moderate Zone (60-75%) = _____ - _____ bpm</td>
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</tr>
<tr>
<td>Vigorous Zone (75-90%) = _____ - _____ bpm</td>
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**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 four 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.
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” options 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, however, 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 is 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 two 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 CCMB 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
• Pilates and Cancer - a free eight week program for men and women who have completed treatment for any type of cancer within the last 12 months. For information, call 204-787-2109 or 1-866-561-1026 extension 2109.
• Yoga and Cancer - a free program for patients on treatment or finished treatment within the past 12 months. For information, call 204-787-2109 or 1-866-561-1026 extension 2109.
• Cancer Management Exercise Program - Rady Jewish Community Centre - call 204-477-7510
**After Treatment Programs**

**The Moving Forward After Cancer Treatment Wellness Program** is a free CancerCare Manitoba 8-week program offered in collaboration with the Reh-Fit Centre on Taylor Avenue in Winnipeg. It is designed to help cancer survivors who have completed treatment within the last two years transition from active treatment to life after treatment. Weekly sessions include nutrition, emotional health and wellbeing, and what to expect in follow-up care. Participants meet twice weekly for exercise at their own pace with an exercise specialist. For more information and to register, call CancerCare Manitoba’s Patient and Family Support Services at 204-787-2109 or 1-866-561-1026 extension 2109.

**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.

**Expressive Arts Group** is a free program for people who have been treated with any type of cancer in the past two years. Use creativity and art making in supportive group therapy to explore your cancer experience. For information or to register call 204-787-2109 or 1-866-561-1026 extension 2109.

**Mindfulness Practice** is a free eight week program for people living with cancer and their families interested in mindfulness. For information and to register call 204-787-4122.

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**Information on Post Treatment Programs**

Call Patient and Family Support Services: 204-787-2109 or toll-free: 1-888-561-1206 ext.2109 or check online

**Current Program Listings**

http://www.cancercare.mb.ca/home/patients_and_family/patient_and_family_support_services/current_programs/

**The Navigator Newsletter**

http://www.cancercare.mb.ca/resource/File/PFSS/Navigator_current.pdf#zoom=75,0,0

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**Rehabilitation Therapy Services**

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

- **Manitoba Physiotherapy Association** 204-925-6701
  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
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 an awakening time.** Try not to let bedtime and awakening time to drift. The body “gets used” to falling asleep at a certain time, but only if this is relatively fixed. 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 you blood start to fall, there is a stimulant and wake-up effect.

**Avoid caffeine 4-6 hours before bedtime.** This includes caffinated 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 the amino acid 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 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 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.

A Word About 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 not be in the bedroom and that 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 a 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.

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 medications you are taking can lead to sleeplessness.

To help overall improvement in sleep patterns, your doctor 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 physician and other health care professionals. The goal is to rediscover how to sleep naturally.
Home Cancer Drug Program and Complementary Therapies

The 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 Home Cancer Drug Program if you are taking any of the medications on the list. If you are not taking medications on the Home Cancer Drug Program List, you do not need to worry about the Home Cancer Drug Program.

If you have questions about the 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 Patient Access Coordinator 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 treatments and therapies?

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. Some complementary therapies may be harmful when used with medicines normally prescribed by a doctor.
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 oral medications, you may notice a rash and acne-like changes. You may notice that these symptoms change and improve over time.

Some practical suggestions for taking care of your skin after treatment include:

• 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 doctor 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.
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 to approach your care. These topics can be complex and involve issues that we aren’t 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 document. It outlines health care decisions about the treatments that patients want followed if they become unable to communicate their wishes. This plan can be as specific or broad as you would like it to be. It is a tool you can use to ensure you are treated how you want to be treated. By having this plan in place, you and your family can feel less anxious knowing that your wishes will be respected. Within this plan a health care proxy should be identified. A **proxy** is a person who is given permission to make health care decisions for you if you become unable to communicate your wishes. It is important to have a conversation with your proxy so that they are aware of what your values are about your health care. Once you have completed a health care directive, it would be good to share this information with your health care provider.

To find out more information and access an advance directive form go to: [http://www.gov.mb.ca/health/livingwill.html](http://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**

- [http://www.wrha.mb.ca/acp/](http://www.wrha.mb.ca/acp/) - This website has videos and information for patients and families that has been developed by the Winnipeg Regional Health Authority.


- [www.advancecareplanning.ca](http://www.advancecareplanning.ca) - The Canadian Hospice Palliative Care Association has developed a national website with information about advance care planning.
Cancercare Manitoba (CCMB) can help you access additional supports and resources. The following resources are available to help you with difficulties you might be experiencing as you move forward after cancer, and to help you with a healthy life style. If a resource is not listed, or you need help accessing a resource, please feel free to call CCMB’s Patient and Family Support Services at 204-787-2109 or toll free at 1-866-561-1206 extension 2109.

Counseling- Individual, Couple, Family: CCMB’s Patient and Family Support Services has psychosocial clinicians/counselors 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

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 long standing and work together to improve communication and relationships.

To book a session with a counsellor, call CCMB’s Patient and Family Support Services - Phone: 204-787-2109 or toll-free 1-866-561-1026 extension 2109.

There are many other support programs and groups available through CCMB Patient & Family Support Services.

Information is available in the Navigator newsletter, Cancercare Manitoba’s website www.cancercare.mb.ca or by calling CCMB’s Patient and Family Support Services - Phone: 204-787-2109 or toll-free 1-866-561-1026.

Sexuality Counseling: An expert nurse counselor 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 Counseling 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 ext. 2109

Spiritual Care:
• To speak with CCMB’s Spiritual Health Specialist call 204-787-4124. Spiritual care is available to people from all backgrounds whether or not they are from a spiritual/religious tradition.
• WRHA Aboriginal Health Programs – Health Services Spiritual & Cultural Care Providers are available to patients who request them and to all region staff. All faiths are recognized and Aboriginal Health Programs-Health Services can connect patients and clients with the 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.
Cancer Resource Centres for Patients and Families: The cancer resource centres provide patient and family education on various aspects of cancer and act as resource brokers, 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 ext.4357.

- **Central Plains Cancer Care Services in Portage La Prairie:** is 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 cpccs@centralplainscancercare.com.

- **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: 204-787-5159

**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 serves as 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.

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<thead>
<tr>
<th>Health Authority - Cancer Navigation Services</th>
<th>Toll-Free Phone Number</th>
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<tr>
<td>Winnipeg Regional Health Authority</td>
<td>1-855-837-5400</td>
</tr>
<tr>
<td>Southern Health - Santé Sud</td>
<td>1-855-623-1533</td>
</tr>
<tr>
<td>Interlake - Eastern Regional Health Authority</td>
<td>1-855-557-2273</td>
</tr>
<tr>
<td>Northern Regional Health Authority</td>
<td>1-855-740-9322</td>
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<tr>
<td>Prairie Mountain Health</td>
<td>1-855-346-3710</td>
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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, equitable care.
If you have difficulties getting the right services, resources and support, the patient access coordinator can help. For example, the patient access coordinator can assist you with troubleshooting Non-Insured Health Benefits, travel assistance, ensure interpreters are with you at medical appointments, or connect patient escorts with caregiver support.

Patient Access Coordinator - Phone: 204-787-4986 or toll-free at 1-855-881-4395; E-mail: changingthepath@cancercare.mb.ca

**Primary Care Providers:** 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** - [https://www.gov.mb.ca/health/familydoctorfinder/register.html](https://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 available including sign language, First Nations languages and Inuktitut. Please contact your oncologist’s office to access 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
- Support by a health care aid
- Medical equipment (such as a hospital bed or commode)
- 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 204-787-2842. In rural Manitoba, call and ask to speak to the Home Care Coordinator at the hospital closest to your home.

**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 info@cis.cancer.ca.

**WRHA Aboriginal Health Programs and Services:** Aboriginal Health Programs - Health Services provides 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 Counseling: Some cancers can have a hereditary component. Genetic counseling 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 counselor, have your primary care provider phone 204-787-2494.

Patient Representative: The mandate 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 extension 2065.

Websites – Cancer Information: The Web 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:

<table>
<thead>
<tr>
<th>Website</th>
<th>URL</th>
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<tbody>
<tr>
<td>CancerCare Manitoba</td>
<td><a href="http://www.cancercare.mb.ca">www.cancercare.mb.ca</a></td>
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<tr>
<td>Canadian Partnership Against Cancer</td>
<td><a href="http://www.partnershipagainstcancer.ca">www.partnershipagainstcancer.ca</a></td>
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<tr>
<td>Cancerview Canada</td>
<td><a href="http://www.cancerview.ca">www.cancerview.ca</a></td>
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<tr>
<td>Canadian Cancer Society</td>
<td><a href="http://www.cancer.ca">www.cancer.ca</a></td>
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<tr>
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<td>Canadian Caregiver Coalition</td>
<td>wwwccc-ccc.ca</td>
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<tr>
<td>National Cancer Institute (USA)</td>
<td><a href="http://www.cancer.gov">www.cancer.gov</a></td>
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<tr>
<td>American Society of Clinical Oncology “ASCO” Patient Site (USA)</td>
<td><a href="http://www.cancer.net">www.cancer.net</a></td>
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<td>Oncolink</td>
<td><a href="http://www.oncolink.org">www.oncolink.org</a></td>
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<td>Medline Plus - Cancer</td>
<td><a href="http://www.nlm.nih.gov/medlineplus">www.nlm.nih.gov/medlineplus</a></td>
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<td>Mayo Clinic</td>
<td><a href="http://www.mayoclinic.com">www.mayoclinic.com</a></td>
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<td>American Institute of Cancer Research</td>
<td><a href="http://www.aicr.org">www.aicr.org</a></td>
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<td>Manitoba Healthy Living</td>
<td><a href="http://www.gov.mb.ca/healthyliving">www.gov.mb.ca/healthyliving</a></td>
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<td>Manitoba in Motion</td>
<td><a href="http://www.manitobainmotion.ca">www.manitobainmotion.ca</a></td>
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<td>Active Living Coalition for Older Adults (ALCOA)</td>
<td><a href="http://www.alcoa.ca/e/cancer_project/index.htm">www.alcoa.ca/e/cancer_project/index.htm</a></td>
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<tr>
<td>National Coalition for Cancer Survivorship</td>
<td><a href="http://www.canceradvocacy.org">www.canceradvocacy.org</a></td>
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<td>Caring Voices</td>
<td><a href="http://www.caringvoices.ca">www.caringvoices.ca</a></td>
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<td>American Cancer Society Cancer Survivors Network</td>
<td><a href="http://www.acssn.org">www.acssn.org</a></td>
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<tr>
<td>Office of Cancer Survivorship, National Cancer Institute</td>
<td><a href="http://www.cancercontrol.cancer.gov.ocs">www.cancercontrol.cancer.gov.ocs</a></td>
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<tr>
<td>National Cancer Survivorship Initiative</td>
<td><a href="http://www.ncsi.org.uk">www.ncsi.org.uk</a></td>
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<tr>
<td>Lance Armstrong Foundation</td>
<td><a href="http://www.livestrong.org">www.livestrong.org</a></td>
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<tr>
<td>Centre for Disease Control and Prevention (Cancer Survivorship)</td>
<td><a href="http://www.cdc.gov/cancer/survivorship/index.htm">www.cdc.gov/cancer/survivorship/index.htm</a></td>
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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.

Amino acids: organic compounds that combine to form proteins.

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 centimeter of bone

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

Calcium: a component of bone

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 done that detects the level of cholesterol in your blood

Chronic Disease: long lasting illness

Colonoscopy: a procedure done to look at the colon

Condiment: something used to add flavour

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 by means of a medical examination, signs, symptoms, laboratory tests and radiological findings.
Glossary

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

**Digestive tract**: the series of organs in the digestive system where food passes and nutrients are absorbed.

**Evidence**: something used to prove or disprove something.

**Fasting Plasma Glucose**: a test done to detect diabetes.

**Fatigue**: physical or mental exhaustion; weariness.

**Fecal Occult Blood Test**: a test done to detect blood in the stool.

**Fiber**: the part of plants and plant products that consists of carbohydrates, that are wholly or partially digestible (ex) pectin.

**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.

**Heart Rate**: number of heart beats per minute (bpm).

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

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

**Hypertension**: high blood pressure.

**Hysterectomy**: a surgery done to remove the uterus.

**Immune system**: the organs and processes of the body that provide resistance to infection.

**Immunization**: treatment (by vaccination) for the purpose of making a person resistant to a particular germ or infection.

**Legume**: the fruit or seed from the legume family, such as peas or beans.

**Lymph nodes**: The lymphatic system is part of the body’s immune system. 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. There are hundreds of lymph nodes throughout the body.

**Mammogram**: a radiology test that takes an x-ray picture of 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**: any class of substances occurring in nature (ex) iron, calcium.

**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 excessive body fat. Body Mass Index over 30.
**Occupational Therapist**: a specialist in the treatment of physical or mental illness that works to improve a person’s ability to perform daily functions.

**Oncologist**: physician who specializes in diagnosing and treating cancer

**Overweight**: weight in excess of that considered normal, proper, healthy, etc. Body Mass Index of 25–29.9.

**Pap test**: a test used to detect cervical cancer.

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

**Pneumonia**: a lung infection.

**Physiotherapist**: A specialist in the treatment of disease using modalities such as exercises to help improve joint movement, to reduce swelling and to reduce pain associated with surgery.

**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 amino acids.

**PSA test**: blood test done to check the 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**: 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 difficulty.

**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.

**Stage**: the classification of cancer according to the extent of its spread. Staging helps 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.

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

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

**Trans fat**: trans-fatty acids are believed to raise blood cholesterol levels.

**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