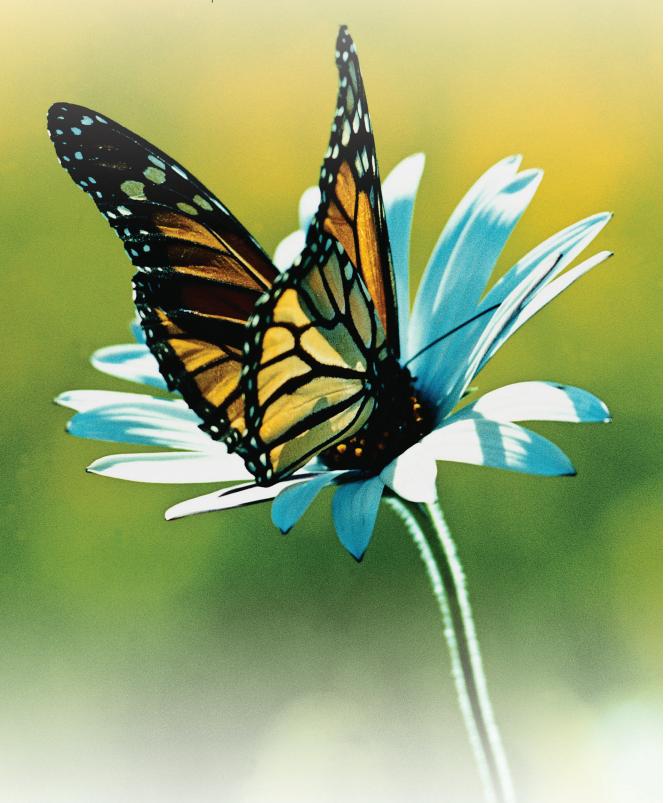
The Walker Family Cancer Centre

We work together, we care together, we grow together... together for your health.



niagarahealth

Extraordinary Caring. Every Person. Every Time.



To our patients and their families:

Our Regional Cancer Program oversees the quality and delivery of cancer care for the areas of Brant, Burlington, Haldimand, Hamilton, Niagara and Norfolk. Our cancer specialists work together with your family doctor to provide high quality, evidence-based treatment and compassionate care.

The Regional Cancer Program includes cancer services at:

Juravinski Hospital and Cancer Centre Walker Family Cancer Centre and Niagara Health Joseph Brant Hospital Brant Community Healthcare

Together we will provide you with information and support, so that you can make informed decisions and take active part in your care. Please feel free to talk with us about your health and any concerns that you may have. We welcome your questions at any time.

Your Health Care Team



Welcome to the Niagara Health Outpatient Oncology Program

Please be assured that you are in good hands; our team of professionals is here to care for and support you through your treatment plan. Our patient-centred approach will guide you through your initial assessment, testing and treatments, education, and ongoing follow-up care. We want to give you all of the information you need to help you through this journey.

Importance of Patient Education

Research has shown that effective patient education enhances patients' knowledge and understanding of their disease and its treatment while also improving treatment compliance and symptom management, the ability to cope, and overall satisfaction with care.



~ Cancer Care Ontario's Patient Education Program

The Patient and Family Education Binders have been developed as a resource to:

- Provide useful information and education materials.
- Help you to notice, expect, and deal with the signs and symptoms of your cancer and side effects of treatments.
- Inform you and your family about how to promote safety during your experience at the Walker Family Cancer Centre.
- ➤ Help you keep track of all the educational materials that you will get at your visits to the cancer centre.

Please write down any questions you have under the "Notes" area of Section 2. This will help you to remember to speak to your team about them at your next visit. It is important to bring your binder to each visit so that the information can be discussed with your Walker Family Cancer Centre team as needed.

INFORMATION ADAPTED FROM CANCER CARE ONTARIO (2019)

• Before leaving your appointment



Table of Contents	Section
Information for Patients and Family Members • Important Phone Numbers • Information for Patients and Family Members • Patient Privacy • Partnering with Patients (Patients' Rights and Responsibilities)	1
Patient Safety and Tips for Talking to your Doctor • Patient Safety Information • Medication Safety • Tips for Patients and Families • Advanced Care Planning • Commonly Asked Questions	2
Interprofessional Team • Meeting your Interprofessional Team • Oncology Community Partners	3
 Cancer What is cancer? Information Resources Glossary Cancer Treatments — Surgery, Systemic Therapy, Radiation Therapy, Central V About Clinical Trials 	4 enous Access Devices
Personal Treatment Information	5
 This section will get filled in as you receive information about your ind Schedules Medication Information Sheets Side Effects Fact Sheets Special Instructions and Notes/Questions 	ividual treatment plan
Wellness/Lifestyle Choices • Exercising and Nutrition • Sleep Hygiene • Emotional/ Psychological/ Spiritual Care • Arts in Medicine • Complementary and Alternative Therapies • I've Completed My Cancer Treatment — What's Next?	6
Information About Treatment Days • How to get ready for treatment days	7



Section 1



Section 1: Information for Patients and Family Members

NH Outpatient Oncology – Walker Family Cancer Centre (WFCC)

Call: 905-682-6451

Monday to Friday - 8:30 AM - 4:30 PM (may change during statutory holidays)

When should I call the clinic?

- When your concerns cannot wait until your next visit.
 (eg. if you are having symptoms related to your cancer or treatment)
 Note: Test results cannot be requested phone
- When you need to change an appointment time.
- When you want to make an appointment with a Supportive Care Team member (eg. Social Worker, Spiritual and Religious Support, Psychotherapist).



*Please note that email is **not** a safe or preferred form of communication with your medical team

After hours call:

CAREchart@home: 1-877-681-3057 or download the app (after 4:30 PM/Holidays/Weekends)

For help with symptoms when the clinic is closed

Please have your **Patient Information Sheet** and current medication list ready when you call this number.







More helpful phone numbers:

OUTPATIENT COMMUNITY PARTNERS

Canadian Cancer Society	1-888-939-3333
	(Monday to Friday 9am-7pm)
Wellspring Niagara	905-684-7619
Home and Community Care: Hamilton Niagara	1-800-810-0000
Haldimand Brant Local Health Integration	
Network (HNHB LHIN)	
Hospice Niagara	905-984-8766
211 To help people find the right community	Call 211
and social services. Free. Live. Confidential.	
Live answer 24/7	Or go to www.211ontario.ca
If you need a family doctor:	
Niagara Health	Listen to a list of doctors taking new
Call 905-378-4647, extension 44773.	patients.
Niagara Region	 View lists of doctors and Community
https://www.niagararegion.ca/health/find-a-	Health Centres taking new patients.
doctor.aspx	
·	
Health Care Connect	You need a valid Ontario health card to
Call 1-800-445-1822 or visit online	register.
https://ontario.ca/healthcareconnect	A Care Connector will help find you a
	doctor.
College of Physicians and Surgeons Website	 click on "Resources for Finding a New
https://doctors.cpso.on.ca	Doctor" (on the left side)
1 //	<u> </u>





Information for Patients & Family Members

We support patients and their families. It is important for patients to take part in planning their care and to include their families in the planning too. To help make this happen, we ask that patients choose one person as a contact. This person can provide information to the rest of their family and/or loved ones. Make sure your team has that person's name and contact information. It is natural for family members to be concerned. The team has more time to spend with the patient if the contact person can make sure information is shared with the people the patient chooses.

Walker Family Cancer Centre Information

• Appointment Changes

We try to keep all appointments when they are scheduled but changes can happen. We will give you as much notice as we can if any of your appointments need to be changed. If you need to change an appointment, please call the oncology clinic at **905-682-6451**.

Telephone messages

If you would like us to leave a message on your voicemail or answering machine, please let the clinic know. If we are returning your call and cannot leave you a message, we will wait for you to call us back again.

Tests and Lab Results

Test and Lab results are usually shared during clinic appointments. We understand that waiting for these results is difficult, but it is important to talk about them in person with your oncologist.

• Systemic Therapy Suite (Treatment Room) and Radiation Therapy appointments
We know that it is important to have a family member or friend with you for support. The visitor policy is in place to keep everyone safe and can change over time. This means there may be times that a visitor is not permitted to accompany you to your treatment visit. Ask your clinic team about the visitor policy.

Transportation

There are a number of different transportation services in the region. Ask your cancer care team for a transportation brochure with a list of services. When contacting these places it would be helpful to have a list of questions ready such as:

- How much does it cost?
- Will someone come to my door to assist me?
- Can you accommodate a mobility device (if you have one)?
- Can I bring an 'attendant' with me and if so is there any charge?
- How is drop off and pick up arranged?

Consider calling each company and choose the best fit for you.



Niagara Health (NH) General Information

Nourishment/Cafeteria

Patients requiring lunch and special dietary needs are encouraged to bring food with them to their appointments. A cafeteria and Tim Hortons are available and include snacks, breakfast, lunch, and dinner options.

The Walker Family Cancer Centre volunteers may be available to serve tea, coffee, juice, water, and cookies in the patient areas. This free service is made available to you by money raised by the Rankin Cancer Run. This is only one of the many services at our centre that this event helps to support.

Compliments/Concerns

We encourage you to discuss your questions and concerns directly with a member of your healthcare team (i.e., charge nurse, unit manager, or treating physician). If there are matters which you feel require further attention, we can direct you to a Patient Relations Specialist at 905-378-4647 ext. 44423.

Fire Alarm

In the event of a fire alarm, stay in the department. A staff member will tell you what to do. Follow their instructions carefully. Do not use elevators until you hear the "All Clear" announcement.

Gift Shop

Most NH hospitals have Gift Shops run by Hospital Auxiliary members as a main fundraising program. A wide selection of gift items is available. Proceeds are donated to NH hospitals to assist in the purchase of patient-care equipment.

Interpreter Services

Interpreter services are available in many languages including sign language for the hearing impaired. Please ask a member of your health care team if assistance is required.

Personal Information/Ontario Health Card

You will be asked to give the name and relationship of one person to be the primary contact. They can share information with the rest of your family as you choose. It is helpful to also provide a secondary contact in case we cannot reach your primary contact. It would be best if you choose someone who does not have the same phone number as you. Please give your health card to the registration clerk at each visit and notify them of any changes to your personal information such as your family doctor, address, phone number, etc.

Power of Attorney

If you have a power of attorney document, please bring it with you so a copy can be added to your oncology medical record.



Scent Free Policy

Staff, patients, and visitors are requested to avoid wearing perfume, aftershave, and other scented personal products when they come to the hospital.

Smoke-Free Hospital Properties

All hospital properties, including buildings, parking lots, and lawns/gardens are smoke-free zones as of May 31, 2007. No smoking is allowed on the property to reduce the effects of second-hand smoke and provide a safe and healthy environment.

Staff Identification

All hospital staff related to the operation of the hospital on a day-to-day basis can be identified by their photo identification badge worn while on duty.

Telephone

If you need to make local calls there are two phones located in the systemic waiting room and one in the Quiet Room on Level 2. Device charging stations are available to patients and family and are located in both waiting rooms on the second floor with several chargers available. Adapted from: https://www.niagarahealth.on.ca/site/patients-visitors-policies

Health Records

At Niagara Health the **Health Information Management (HIM)** departments manage the collection, storage, retention, disclosure, and access to your Personal Health Information (PHI) record in accordance with current legislation.

Frequently Asked Questions

- How can I obtain records for an incapable/incompetent patient?
 For patients who are incapable of signing a consent form, a proof of legal signing authority must be provided with the written/signed request for patient information.
 Proof of legal signing authority such as the Substitute Decision Maker, Public Trustee, may also include the patient's legal guardian, Power of Attorney for Personal Care, spouse or partner, parent, child, sibling or other relatives.
- What will it cost me to request medical record information?

 An administrative fee is charged for nonmedical requests. A pre-paid fee must accompany your written/signed request. Call your nearest (HIM) department for more information at 905-378-4647 ext. 44475.
- What are HIM Release of Information Office Hours? HIM Release of Information office is open Monday to Friday (excluding stat holidays) for patient access requests.

Note: Call NH regional switchboard at 905-378-4647 (to reach all hospital sites). Adapted from: https://www.niagarahealth.on.ca/site/health-records



Patient Privacy – Your Health Information & Your Privacy at NH

At Niagara Health, we treat your personal health information with respect and sensitivity and so in accordance with the Ontario Personal Health Information Protection Act (PHIPA, 2004) and all other applicable legislation.

The individuals at NH who provide and support your care are allowed to see your health information. This group includes doctors, nurses, technicians, therapists, and other health professions who provide care and treatment. For more information about why we collect your personal health information and how it is used and shared, please refer to "Your Health Information and Your Privacy in our Hospital" poster which is available in the waiting room. If you have questions or concerns about our privacy practices, please contact the Chief Privacy Officer at 905-378-4646 ext. 44475.

For additional information about Patient Privacy at NH visit: https://www.niagarahealth.on.ca/site/privacy-and-confidentiality

Patient and Family Bill of Rights

A Bill of Rights speaks the rights, roles and responsibilities of each party when interacting with each other or receiving/providing care.

As a partner in your healthcare, your participation is important.

We need you to:

- Be an active participant in your own care.
- Ask questions until you believe you have all the information you need to make informed healthcare decisions.
- Partner with us in developing a safe and timely discharge plan.
- Provide accurate personal health information to inform your healthcare team.
- Respect staff and physicians according to Niagara Health's Code of Conduct.
- Understand Niagara Health will not tolerate verbal or physical abuse of staff, physicians patients or visitors.
- Consider that the needs of other patients may sometimes be more urgent than your own and that we are doing our best to meet everyone's needs.
- Choose someone in advance to act or make decisions for you, should the need arise.

To see NH's complete Patient and Family Bill of Rights visit: https://www.niagarahealth.on.ca/files/NiagaraHealthBillofRights.pdf



Section 2



Section 2: Patient Safety Tips and Tips for Talking to Your Doctor

Take an ACTIVE role in your care

Patient safety takes top priority at Niagara Health. We all work to keep you safe while giving you the healthcare you need. You and your family can play an important role in safety. You can help prevent potential infections, falls, and medication errors.

Ask questions whenever you have a concern about patient safety.

Infection Prevention

Stopping the spread of infection can be as simple as thorough washing of your hands as this remains the single most effective way to control infections.

Hand Washing

Are you washing your hands the right way? Follow these simple steps to ensure your hands are clean:

- Use warm running water and soap.
- Rub hands together briskly for 15 seconds (about the time it takes to sing Happy Birthday).
- Rinse hands thoroughly and dry with a clean paper towel.
- Use a paper towel to turn off the tap.

Make sure you wash your hands:

- Before and after visiting a patient.
- After coughing or blowing your nose.
- After using the washroom.
- Before eating.

Waterless alcohol-based hand rub dispensers can be found throughout the hospital for your use.



<u>INFORMATION ADAPTED FROM HTTPS://www.niagarahealth.on.ca/site/patients-visitors-general-information</u>





Falls Prevention

Did you know that:

- Cancer patients and patients on treatment may be at an increased risk for falls.
- Falls are the primary cause of injury admissions to acute care hospitals.
- Falls are the cause of 84.4% of all injury admissions for people age 65 years and older.
- Fall injuries pose a significant burden in terms of reduced quality of life.
- Medications that cause sedation, disorientation, or low blood pressure increase a patient's risk of falling.
- Most falls occur from or near the patient's bed while trying to transfer from one location to another.

For more information on fall prevention at Niagara Health please visit: https://www.niagarahealth.on.ca/site/falls-prevention

Information obtained from RNAO Preventing Falls and Reducing Injury from Falls https://rnao.ca/bpg/guidelines/prevention-falls-and-fall-injuries

Medication Safety

Your health care is a team effort, and you are an important member of the team.

You and your family can help prevent medication errors.

Before Treatment

Your cancer care team needs information about your medications to make sure new prescriptions don't cause problems:

- Carry a list of all medications you take, including over-the-counter drugs, vitamins, and herbal supplements. Show the medication list to your cancer care team.
- o Tell your team about any allergies, or bad reactions to medications you have had.
- Learn what medications you will take during treatment. Ask what they do, how and when you should take them, and what to do if you miss a dose. Ask about possible side effects, and what you should do if you have them.
- Ask if you should keep taking your usual medications in addition to the new ones.
- o Inform your cancer care team if you have any changes to your medications.







During Treatment

You can help make sure you get the right medication at the right time:

- Speak up if something doesn't seem right like if a medication looks different, or the routine changes.
- Don't let anyone give you medication without checking your identity including your full name and date of birth or hospital identification bracelet.
- When a nurse gives you medicine (IV or oral), ask what it is.
- Don't take any medicine unless your doctor or nurse practitioner has prescribed or approved it.
- If you have side effects from the medicine, contact your cancer care team right away.
- o Consider asking a relative or friend to come with you to appointments.

> After Treatment

Your prescriptions will probably change after treatment ends:

- Ask your doctor to review with you the list of medications to take afteryour treatment is done.
- o Ask if you should resume taking the medications you took before treatment.
- Ask what to expect. Let your cancer care team know if you have any unexpected symptoms.
- Do not stop taking a drug or change the dosage without talking with yourcancer care team.
- Talk to your cancer care team before combining over-the-counter drugs with your prescription medicine.



INFORMATION ADAPTED FROM DANA-FARBER HTTPS://www.dana-farber.org/for-patients-and-families/becoming-a-patient/patient-safety-and-advocacy/safety-information-for-patients/



Tips for Patients and Families: Ask. Listen. Talk

People who are more informed and involved in their health care can stay safer and have better health results. To make sure that you or your family member get the best care possible, remember to **ask** – **listen- talk** with your cancer care team.

Ask

To help make you feel as comfortable as possible with your plan of care, ask questions until you feel comfortable with any treatment options, instructions, or health advice:

- Write questions down as you think of them to bring to your appointment.
- Take notes when meeting with your cancer care team.
- Ask your cancer care team to explain things in simple words until you understand your problem or diagnosis.
- Ask what you can do to reduce symptoms or side effects
- Ask your doctor, nurse, or pharmacist questions about your medications: Why am I taking this medication? What are the side effects? How will the medication help me?
 How and when should I take this medication?
- If you need a test or treatment ask: Why do I need this test/treatment? What will it involve? What if I do not have this test/treatment? Are there any alternatives?



Listen

When talking to your cancer care team, listen to what he or she is saying. If you do not understand, tell them and ask more questions until they explain it in a way you do understand.

- Keep a journal about your treatment and care. Add information like medications prescribed, tests you have, and other details given by your cancer centre team.
- Bring someone to listen with you. If possible, ask that they write important information down for you in your journal. Often our family members or other care providers may ask important questions that can help with decisions about your care.





Talk

You are the expert on you. Your cancer care team needs to know what you know to give you a better diagnosis or avoid any unplanned results or interactions:

- Tell your doctor or health care provider about previous treatments or surgeries, current prescriptions, or any other health concerns.
- Keep a list or journal of your symptoms, your questions, and write down answers.
- Bring an up-to-date list of all your medications, including herbal supplements and vitamins, or bring the medications in their original containers.
- Let your doctor know if you are under the care or treatment of any other doctors or healthcare professionals, such as a naturopath or herbalist.
- Tell your cancer care team about any chronic conditions you have, such as high blood pressure, diabetes or allergies.
- Talk to your pharmacist to make sure the medication you get is the one prescribed for your condition.

For more information on patient safety and what's happening in your community visit www.patientsafetyinstitute.ca

Information obtained from the Canadian Patient Safety Institute CPSI at https://www.patientsafetyinstitute.ca/en/toolsResources/patientsAndTheirFamilies/Documents/As https://www.patientsafetyinstitute.ca/en/toolsResources/patientsAndTheirFamilies/Documents/As https://www.patientsafetyinstitute.ca/en/toolsResources/patientsAndTheirFamilies/Documents/As https://www.patientsafetyinstitute.ca/en/toolsResources/patientsAndTheirFamilies/Documents/As https://www.patientsafetyinstitute.ca/en/toolsResources/patientsafetyinstitute.ca/en/toolsReso





Advance Care Planning

It's about conversations. It's about wishes. It's how we care for each other.

Advance Care Planning is a process of reflection and communication. It is a time for you to reflect on your values and wishes, and to let people know what kind of health and personal care you would want in the future if you were unable to speak for yourself.

It means having discussions with family and friends, especially your substitute decision makerthe person who will speak for you if you cannot speak for yourself. It may also include writing down your wishes, and talking with your healthcare providers and financial or legal professionals.



For more information on Advance Care Planning or to watch the five step video please visit: http://www.advancecareplanning.ca/what-is-advance-care-planning/

Additional resources on topics including Health Care Consent, Goals of Care Discussions, and Substitute Decision Makers can be found on Speak Up Ontario's website:

www.speakupontario.ca



When you're told you have cancer

Being told you have cancer can be scary and stressful. You probably have a lot of questions and concerns. Learning about the disease, how it's treated, and what this information means to you is a lot to do on your own. You might need some help. There are many places to get general information about cancer and its treatment, but your doctor is the best source of information about your situation.

It's important for you to be able to talk frankly and openly with your cancer care team. They want to answer all of your questions, no matter how minor they might seem to you. But it helps if you know what to ask. Here are some questions you can use to help you better understand your cancer and your options. Don't be afraid to take notes and tell the doctors or nurses when you don't understand what they're saying.



The questions on the next pages are in groups that aim to help you start a conversation with your doctor at different points in cancer treatment. Not all of these questions will apply to you, but they can help get you started.

INFORMATION OBTAINED FROM MATERIALS FROM THE CANADIAN CANCER SOCIETY (2019).

7. What is the goal of my treatment?



Questions to ask my doctor about my cancer

1. Exactly what kind of cancer do I have?
2. Where is the cancer located?
3. What does the word 'staging' mean?
4. How does this affect my treatment options and long-term outcome (prognosis)?
5. Will I need other tests before we can decide on treatment?
6. What are my treatment choices?



Notes:

Please use the space below to write down any other questions you have.			





Section 3





SECTION 3: INTERPROFESSIONAL TEAM

help you through your cancer journey. Use this list to help remember the names of some people you meet along the way.			
Medical Oncologist			
Radiation Oncologist			
Primary care RNs (clinic and radiation)			
Systemic Therapy RNs			
RPNs (Clinic, Systemic Suite, Radiation)			
Radiation Therapists			
Oncology Pharmacist			
Dietitian			
Social Worker			
Spiritual and Religious Support			
Aboriginal Patient Navigator			
Additional Team Members Eg. Palliative and Supportive Care team, Clinical Trials RN, Psychotherapist, Arts in Medicine Coordinator etc.			





Oncology Team-

Who	What they do	How to contact them
Medical Oncologist	 Your primary cancer doctor Works with you to decide which cancer treatments are best for you Will meet with you throughout your cancer treatments and follow-up care 	Call the clinic Monday – Friday 8:30AM – 4:30PM
Radiation Oncologist	 Provides consultation to decide with you if radiation will be part of your treatment plan Orders and arranges radiation therapy if needed and arranges follow -up appointments to assess effectiveness 	Call the clinic Monday – Friday 8:30AM – 4:30PM
Primary Care Registered Nurses	 Nursing assessment Provides ongoing health teaching about treatment, managing symptoms and telephone support 	Call the clinic Monday – Friday 8:30AM – 4:30PM
Systemic Therapy Suite Registered Nurses	 Nursing assessment Administer systemic therapies (eg. chemotherapy, immunotherapy) Health teaching and symptom management 	These nurses support you in the systemic therapy suite during your treatment.
Palliative Clinical Specialist Radiation Therapist	 Triage Palliative Radiation Therapy referrals Palliative Patient Assessments & Treatment Planning Coordinates many programs within the radiation therapy department 	Call the clinic Monday – Friday 8:30AM – 4:30PM
Radiation Therapists	 Use CT scan to plan your radiation therapy Set up and administer radiation treatment, and monitor side effects of treatment 	You will see a Radiation Therapist each time you receive radiation therapy
Oncology Pharmacist	 Verifies orders for treatments Provides teaching on how to take anticancer medications and safe handling 	Works in clinic with Oncology Team. Will contact you if needed.





Supportive Care Team

Who	What they do	How to Contact them
Dietitian	- Available to answer questions about nutrition	Ask your cancer care team about a referral
	 Suggests ways to keep a good nutritional status with your cancer treatment 	
Social Work	Counselling for emotional and social concernsFinancial assistance, work-	Ask your Oncology Team for a referral or call for an appointment
	related issues - Crisis intervention	Monday-Friday 8:30AM-4:30PM
Psychotherapist	 Psychotherapy/counselling (patients and caregivers) Emotional and coping support Meaning making Crisis intervention 	Ask your cancer care team for a referral or call for an appointment Monday-Friday 8:30AM-4:30PM
Spiritual and Religious Support	 Spiritual and religious supportive counselling (patients and caregivers) Crisis intervention Support caregivers and families with compassionate care decisions 	Ask your cancer care team for a referral or call for an appointment Monday-Friday 8:30AM-4:30PM
Arts in Medicine (AiM)	 Free, social engagement opportunities for patients, family members, and caregivers Support patients, family members, and caregivers while waiting or receiving treatment 	Ask your team for a referral or call the clinic for registration, requests or questions. AiM Monthly Calendar is available through the centre and on the NH website





Additional Cancer Care Teams

Who?	What Do They Do?	How can you contact them?
Urgent Response Team: Nurse Practitioner and Physician Palliative and	 Help to manage pain and other symptoms related to cancer and treatments Provide support to you and your 	Referred by your Cancer Care Team Referred by your Cancer Care
Supportive Care Team: Physician, Nurse Practitioners and Registered Nurses	family during the journey of advanced cancer disease - Pain and symptom management - Advanced care planning	Team
Clinical Trials Team: Registered Nurses and Clinical Research Coordinator	 Nursing Assessment Provides ongoing health teaching on study medications and management of side effects 	Located in Walker Family Cancer Centre. Your Cancer Care team will connect you with them if needed.
Indigenous Patient Navigator	 To help people who self-identify as Indigenous or have Indigenous ancestry and have cancer Assist in communicating your needs to the Oncology Team Explain your Health Benefits Arrange language and cultural translation services 	Deena Klodt 905-387-9711 ext. 63312 or ask your Cancer Care Team for a referral
Personal Support Worker	 Escort you from the waiting room to your appointment Collects information and prepares you for your appointment 	Available to help you in the clinics or Systemic Therapy Suite
Receptionists & Booking Clerks	 Checks you in when you arrive for your appointment Arranges for clinic appointments and booking of tests 	Monday – Friday 8:30AM – 4:30PM
Volunteers	 Greets/visits with patients and families, offers refreshments Assist you in finding your way to clinics, appointments and services 	Can be found throughout the Walker Family Cancer Centre



Community Partners



Who?	What do they do?	How can you contact them?
Hospice Niagara	Hospice Niagara focuses on improving the quality of life for people living with life-limiting illnesses, dying, death, loss and	Contact office at: tel: 905-984-8766
	grief. They believe that no one should make this journey alone. Through a variety of	Fax: 905-984-8242
	programs and services, Hospice Niagara is	Referrals through home and
	able to provide compassionate comfort and support for families. Their programs and	community care HNHB LHIN
	services are offered at no cost to clients.	www.hospiceniagara.ca Email:
	Some of these programs include:	info@hospiceniagara.ca
	Visiting Volunteer Program	403 Ontario Street #2,
	 Offers practical assistance, emotional and spiritual support, and respite for caregivers. 	St. Catharines, ON L2N 1L5
	Day Hospice Program	
	 Invites men and women who are living with a life limiting illness to enjoy a time of relaxation and caring companionship in a safe, comfortable setting. 	
	- Take part in complimentary comfort care therapies, aesthetic services, and other programs.	
	Bereavement Support Program	
	 Peer support programs (facilitated by staff and trained volunteers) are available for children, adolescents, and adults who have lost a loved family member or friend. 	





Community Partners

Who?	What they do?	How can you contact them?
Canadian Cancer Society	Programs - Funds research on all types of cancer - Offers comprehensive and credible information on cancer, risk reduction, and treatment - Provides support for people living with cancer, family members, and friends - Scarves, hats, and wigs available Cancer Information Service The Cancer Information Service is for all people with cancer, their families, the public and healthcare workers. Service is offered in French and English across Canada.	Niagara Unit, St. Catharines 905-684-6455 Monday – Friday 9:00am-5:00pm www.cancer.ca All of these services and more are possible because of generous donors and volunteers toll free: 1-888-939-3333 cis@ontario.cancer.ca Community Service Locator csl.cancer.ca
	Other Programs: - Peer Match Program	Connect by phone with a volunteer that has had a similar experience with cancer – for both patients and caregivers. https://match.cancer.ca to register online
	- Online Community	cancerconnection.ca connects people to share experiences and create relationships



Community Partners



Who?	What do they do?	How can you contact them?	
Wellspring Niagara	Programs - A regional cancer support centre for individuals and their families with cancer - Programs include peer support, relaxation programs; including reiki, yoga, and therapeutic touch, and "Look Good, Feel Better", a class designed for feeling your best during and after treatment These services are possible because of generous donors and volunteers	Monday-Friday 9:00 - 5:00 50 Wellspring Way, Fonthill, LOS 1E6 tel: 905-684-7619 info@wellspringniagara.ca www.wellspringniagara.ca	
Home and Community Care: Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN)	 Services Physical and psychosocial assessment Treatments Medication, IV Therapy, and dressing changes Communication Discussion with other team members Palliative Care Team Services Nursing, Homemaking, Social Work, Dietitian, Case Management, Physiotherapy, Occupational Therapy, Speech Therapy 	Referral made by: - A member of the cancer care team - Self - Family - Friends Toll free: 1-800-810-0000 http://healthcareathome.ca/hnhb	



Section 4



SECTION 4: CANCER

What is Cancer?

Cancer is a disease that starts in our cells. Our bodies are made up of millions of cells, grouped together to form tissues and organs such as muscles and bones, the lungs and the liver. Genes inside each cell order it to grow, work, reproduce and die. Normally, our cells follow these orders and we remain healthy. Sometimes the instructions get mixed up, causing the cells to form lumps or tumours, or spread through the bloodstream and lymphatic system to other parts of the body.



- Cancer starts from cells within our body.
- You cannot catch cancer from another person or pass it on to anyone else.

Tumours can be either benign or malignant. Benign tumour cells stay in one place in the body and are not usually life-threatening.

Malignant tumour cells are able to invade nearby tissues and spread to other parts of the body. Cancer cells that spread to other parts of the body are called metastases.

Cancers are named after the part of the body where they start. For example, cancer that starts in the bladder but spreads to the lung is called bladder cancer with lung metastases.

Information adapted from http://www.cancer.ca/en/?region=on

It is still not possible to tell exactly what causes an individual's cancer.

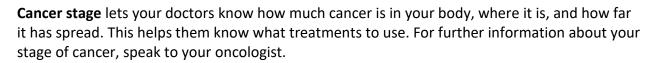




Staging

The stage of a cancer is determined by:

- the size of the tumor
- whether the cancer is invasive or non-invasive
- whether lymph nodes are involved
- whether the cancer has spread beyond its original site



Common tests ordered for staging, screening, and follow up purposes may include:

Blood Tests

Blood tests help us to see what the tumour or treatments are doing to the rest of your body. The blood tests that are done will be picked to look at the kind of cancer you have.

Ultrasound

An imaging test that uses sound waves to make a picture of the organs in your body, like your liver or bowels.

Computed Axial Tomography (Cat or CT Scan)

A CT scan is a test that uses special x-ray equipment and special computers to make many pictures of the inside of the body. It is able to detect cancer cells.

Bone Scan

A special test used to examine the bones of the body to find areas where cancer cells may have spread.

Magnetic Resonance Imaging (MRI)

A test that is used to creates pictures of the body using powerful magnets and radio waves. It gives a complete picture of the body to find cancer cells.





Mammogram

An easy x-ray of the breast to help find cancer cells in the breast

Multi Gated Acquisition Scan (MUGA Scan)

This test makes a moving picture of the heart to measure how well your heart is working. It lets the doctor look at the heart's major pumping chamber (the left ventricle).

Colonoscopy

An exam of the large colon and part of the small bowel with a camera. A test that is done by passing a flexible tube with a camera through the anus letting the doctor look at your large colon and part of your small bowel to check for any growths and take samples of them (biopsy).

It is very important to have the right tests done to be sure you have all the information you need to make decisions about your treatment plan.



Information obtained from the Canadian Cancer Society (2019). For more information on tests and procedures please visit the Canadian Cancer Society Tests and procedures page



Cancer Information on the Web

Websites

Canadian Cancer Society

http://www.cancer.ca/

The CCS website has information about specific cancers, prevention, screening, statistics, cancer research, nutrition, and more. Their brochures can be downloaded from the site, and many are available in multiple languages. The Cancer Information Service (1-888-939-3333) is also a good place to start your research. Information specialists will answer your questions and requested information can be sent directly to you.

National Cancer Institute

http://www.cancer.gov/

Produced by The National Cancer Institute in the US, this site is one of the most detailed sites on the web dealing with cancer information. Find out about many types of cancer in their informational booklets, as well as information about drugs and treatments, complementary and alternative therapies, coping, supportive care, and much more.

Medline Plus – Cancer

http://www.nlm.nih.gov/medlineplus/cancergeneral.html

Published by the National Library of Medicine in the US, Medline Plus is designed to direct users to authoritative and reliable cancer information. Their award-winning interactive tutorials help explain treatments, tests, screening methods, and much more at a level everyone can understand.

Oncolink http://www.oncolink.org

Oncolink was established by the University of Pennsylvania cancer specialists to help patients, their families, and the public locate accurate information about cancer. Oncolink provides detailed information about different types of cancer and supportive cancer care topics such as nutrition, coping, and survivorship. A library of recommended resources is also included.

Adapted from materials recommended by the Juravinski Cancer Centre





More recommended resources:

1. Cancer Care Ontario_

www.cancercare.on.ca

Cancer Care Ontario is the Ontario government's principal cancer advisor. They equip health professionals, organizations, and policy-makers with the most up-to-date cancer knowledge and tools to prevent cancer and deliver high-quality patient care.

2. Chemoready_

www.chemoready.ca

This website contains a variety of information with a large glossary to search cancerrelated terms. Additionally, it contains information about side effects, costs, and questions to ask your care team.

3. Cancer.Net_

https://www.cancer.net/

Cancer.net is a patient information site from the American Society of Clinical Oncology (ASCO). This website provides oncologist-approved information to patients and families including information on types of cancer, navigating care, coping, research, and survivorship.

4. Health Canada_

www.hc-sc.gc.ca

This Health Canada website contains clinical, research and statistical information for a number of different types of cancer as well as information about Canada's health care system.



Glossary of common cancer words:

Adjuvant Extra treatment (either chemotherapy or radiation) given after surgery to

improve the cure rate.

Biopsy Surgical removal of a small portion of tissue for diagnosis

Cells The basic unit or building block of tissues and organs

Cycle A treatment period which is followed by a recovery period before

another treatment period begins.

Concurrent Different types of treatment given at the same time.

Gene Part of a cell able to transmit a characteristic from parent to offspring

Hormone Therapy Drugs that affect hormones in your body to help prevent cancer cells

from growing.

Lymph nodes Store lymphocytes which are part of the immune system that attack

bacteria and viruses.

Lymphatic System The group of tissues and organs that produce and store cells that fight

infection. Includes a system of lymph nodes, the spleen, the tonsils, the

bone marrow, and the vessels that connect them

Malignant Having the ability to invade surrounding tissue and to break off and

spread elsewhere (metastasis)

Oncology The medical speciality that deals with the diagnosis, treatment and the

study of cancer.

Palliative Treatment that aims to improve well-being, relieve symptoms, control

cancer growth – not expected to provide a cure

Standard Treatment The best treatment currently known for a cancer, based on results of

research studies

Tumour Lump, mass or swelling – may be benign (tumours that do not invade

other tissues or spread throughout the body) or malignant

For a more inclusive glossary please visit:

THE CANADIAN CANCER SOCIETY GLOSSARY, CHEMOREADY GLOSSARY, OR THE NATIONAL CANCER INSTITUTE DICTIONARY OF CANCER TERMS.



Cancer Treatment

Just as each person is different, each individual's cancer experience and treatment is different. The type of treatment offered to you will depend on:

- > the type of cancer
- > the size of the tumour
- > If cancer has spread to other parts of your body.

You and your doctor will decide on what treatments will work best for you. Some common treatments for cancer are:

- Surgery
- > Systemic Therapy
- > Radiation Therapy



You may receive two or more of the treatment types listed above, at the same time, or one after the other. This is called **multimodal therapy**. Research has shown that often the combination of treatments can fight cancer better together than if they were used alone.

Surgery

There are different types of surgery for different types of cancer. Each type of cancer has its own way of growing or spreading. This information is used to help decide which surgery is best.

To effectively remove cancer, a surgeon must remove not only the original tumour but also any cancer cells which may have travelled outside the primary tumour area. This may include nearby lymph nodes.

Cancer cells are very small, about 100 million of them can sit on the head of a pin. Even the most accurate test may not detect these cells.

When a surgeon tells a patient "I got it all," they generally mean they have removed all cancer that they could see. Sometimes, cancer cells are left. This is because they are so small they cannot be seen. There is always a chance or risk that these cells may grow again.

The level of risk depends on: the type of cancer, the stage of cancer, the amount of tissue removed at surgery



Systemic Therapy

Types of Systemic Therapy:

- Chemotherapy
- > Targeted therapy
- Biologic therapy/immunotherapy
- Hormonal Therapy



Chemotherapy

Chemotherapy is treatment with **anticancer drugs**. Anticancer drugs are powerful agents that work by destroying cancer cells or by preventing them from multiplying, growing or spreading to other parts of your body.

When you are given a single dose of chemotherapy, the agent will only kill some of the cancer cells. That is why most people are given a number of **chemotherapy cycles**.

Chemotherapy **agents** may affect the whole body, so healthy cells can also be damaged. This damage to healthy cells causes side effects. These side effects are temporary because the healthy cells will repair themselves.

Goals of Chemotherapy

The choice of treatment to be used will depend on the kind of cancer you have, its stage, and what the goal of the treatment is. Chemotherapy can be given in addition to other cancer treatments, such as surgery, radiation, or other systemic therapies. Your cancer care team will explain why chemotherapy is a treatment option for you. The goals of your treatment may be to:

✓ Cure the cancer

Chemotherapy, by itself or with another treatment, is given to destroy cancer cells in the body. Many types of cancer can be treated with a combination of chemotherapy agents.

✓ Shrink a tumour before other treatments (neoadjuvant chemotherapy)

Sometimes chemotherapy is given to shrink a tumour before surgery or radiation.



✓ Destroy cancer cells after other treatments (adjuvant chemotherapy)

Chemotherapy is often given in addition to surgery or radiation treatments to destroy cancer cells that may have been missed by surgery or radiation.

✓ Prepare for a bone marrow or stem cell transplant (ablative chemotherapy)

Chemotherapy is used to destroy the bone marrow before it is replaced by the stem cells or bone marrow from a donor.

✓ Relieve symptoms caused by cancer (palliative chemotherapy)

Chemotherapy may be given to reduce pain and other symptoms of cancer.

Targeted Therapy

All cancer cells grow on their own paths. Targeted therapy is a treatment that blocks these paths so that the cancercells cannot use them to grow. Targeted therapies are made to work only on the cancer cells; they do not cause the same types of side effects as chemotherapy. Some of the drugs used for targeted therapy are taken by mouth (a tablet or a capsule), and some are given in the treatment suite through your vein.

Biologic Therapy/Immunotherapy

Your immune system is your body's defence against disease. Biologic Therapies are drugs that work with your immune system to help fight your cancer. These drugs are made from natural sources, but they do have side effects, including allergic-type reactions and flu-like symptoms. These medicines may be given through your vein or with a needle.

Immunotherapy is a type of cancer treatment that boosts the body's natural defenses against cancer. There are different types of immunotherapy treatments that work in different ways. Some boost the body's immune system. Others train the immune system to find and attack cancer cells specifically.

Hormonal Therapy

Hormones are natural substances or chemicals in your body. Some types of cancer use these hormones to help them grow. Hormonal Therapies are drugs that stop certain hormones from being made, or from being active in the body. Stopping the hormones can stop the cancer cells from growing. These drugs may be taken by mouth or in a needle.



How do I take Systemic Therapy?

The most common ways to take these drugs are by mouth, in a vein or by injection. Your oncologist will help you decide on the method that is best for you.



By mouth (orally)

Some systemic therapy drugs can be taken in a pill or capsule form. If you are taking systemic therapy drugs by mouth it is very important to take them as directed. If you change the amount you are taking or the time between pills your treatment may not work as well or it may cause side effects.

- Always take the prescribed dose at the right time. Follow the instructions about taking the drug before or after meals, or with liquids.
- Always wash your hands after taking your dose, especially after you touch the medication.
- If you forget to take a dose, follow the instructions from your cancer care team.



Intravenous (IV- in your vein)

Some systemic therapy drugs need to be put directly into your bloodstream and are given in a vein in your lower arm or through a central venous access device. These drugs can be given on certain days in the systemic therapy suite at the cancer centre or using an infusor pump that can be taken home. When an infusor pump is ordered, it is started in the systemic therapy suite, and then you take it home where it continues to give you your drug for the number of days you need it.



By injection (often referred to as "shot")

Some systemic therapy drugs are given through a needle under the skin into the tissue or muscle.

Systemic Therapy Side Effects

Everyone responds differently to each systemic therapy drug. Your team cannot say for sure how your systemic therapy will affect you but they will provide you with a list of potential side effects. Many of the side effects can be managed or lessened. It's important to tell your team how you are feeling so they can help you to manage the side effects and allow you to carry on your normal activities as much as possible. Most side effects will gradually disappear when treatment is over, depending on the types of drugs you were taking and your general health. You will be able to take a systemic therapy education class about the clinic and systemic therapy treatment.

Information adapted from Canadian Cancer Society's website and "Chemotherapy" — A Guide For People With Cancer



Radiation Therapy

What is Radiation Therapy?

Radiation therapy is the use of certain types of energy (radiation) to destroy cancer cells. Radiation therapy can also be called radiotherapy, x-ray therapy, or irradiation.

Radiation in high doses destroys cells only in the area being treated. It does this by damaging the cell so that it cannot grow and divide. All cells in the treatment area are affected by radiation, but most healthy (not cancer) cells can repair themselves afterward.



The different types of radiation therapy are:

- External beam radiation therapy or external radiation therapy
- Brachytherapy or internal radiation therapy also called implant therapy
- Systemic radiation therapy or unsealed internal radiation therapy

Goals of Radiation Therapy

Radiation therapy can be done for many different reasons and it can be used with other cancer treatments. The goal of your treatment may be to:

- ✓ **Cure the cancer** Radiation therapy by itself or with another treatment is given to destroy cancer cells in the body.
- ✓ **Shrink a tumour before other treatments** Sometimes radiation therapy is given to shrink a tumour before surgery or chemotherapy.
- ✓ **Destroy cancer cells after other treatments** Radiation therapy is sometimes given after surgery or chemotherapy to destroy any cancer cells that may remain.
- ✓ Relieve symptoms caused by cancer Radiation therapy may be given to reduce pain and other symptoms of cancer.



Side Effects of Radiation Therapy

Many treatments for cancer can have side effects but it's hard to know if and when they might happen to you. Side effects from radiation vary from person to person, depending on:

- the amount of radiation
- the part of your body being treated
- your treatment schedule
- your general physical health
- other medications you are taking

Some people think that having side effects mean that the radiation is working and not having them indicates that the treatment is not working. Side effects are caused by damage to healthy cells during treatment. They are different from person to person and are **not** a way to know if your treatment is working or not.

Your radiation therapy team is there to help you manage any side effects you have. They will explain which side effects to report right away and which ones can wait until your next appointment. Ask them about ways to reduce your side effects or make them easier to deal with. If you notice any unexpected side effects or symptoms please talk to your radiation team.

Information obtained from the Canadian Cancer Society's website and "Radiation Therapy"- A guide for People with Cancer



Central Venous Access Devices

A central venous access device (CVAD) is a tube used to give you fluids, chemotherapy, medicines, or blood products through your vein. The tip of the tube sits in the large vein right above the heart called the superior vena cava (SVC). You and your cancer centre team will discuss if a central line is right for you.

Peripherally Inserted Central Catheter (PICC Lines)

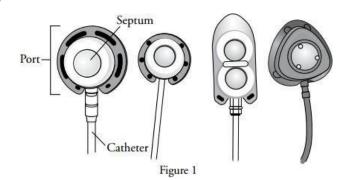
The Peripherally Inserted Central Catheter is a tube put in by a specially trained registered nurse in the systemic therapy suite or by a radiologist in special procedures. Local freezing is used to put the tube in no matter where it is done. The PICC is put in a large vein in your upper arm. The tip of the tube sits in the large vein right above the heart (SVC). The part of the tube that is outside of your body is held in place with a dressing. The dressing is changed once a week. PICC lines are taken out simply by your treatment room RN or a LHIN home and community care nurse when treatment is done.

<u>INFORMATION OBTAINED FROM BARD PERIPHERAL VASCULAR – GENERATED ON MAY 2, 2016</u> <u>HTTP://www.bardpv.com/?portfolio=powerline</u>



Implanted Vascular Access Device (PORT)

The implanted vascular access device is put in by a surgeon or radiologist using local freezing. It is used when you will need intravenous (IV) access in place for a long time. It is a chamber placed under the skin in your chest. It has a tube that is placed in the large vein right above your heart (SVC). It will be located under the skin and has no parts outside of your body. When the PORT is used it is entered each time with a special needle through the skin. When not being used, the



PORT needs to be flushed every 4 weeks. A dressing is only needed when the PORT is being used.

INFORMATION OBTAINED FROM: ©2016 MEMORIAL SLOAN KETTERIN G CANCER CENTER - GENERATED ON APRIL 26, 2016, https://www.mskcc.org/cancer-care/patient-education/your-implanted-port



About Clinical Trials

The Niagara Health Oncology Program participates in phase II, III, and IV clinical trials. We are members of the Canadian Cancer Trials Group (CCTG) and Ontario Clinical Oncology Group (OCOG) and work closely with a number of industry partners. There are several studies actively recruiting patients at any time and many more that continue to collect information on patients previously enrolled in studies.

Clinical trials have led to many new advances in health care research.

Considering a Clinical Trial

If you or someone you care about has been diagnosed with a disease, understanding your treatment options is an important first step. Many patients and their families don't know that a clinical trial may be a treatment option for them. Clinical trials offer early access to promising new treatments that are not yet widely available to the public.

Is a Clinical Trial an option for me?

By participating in a clinical trial, you could be among the first to benefit from the newest treatments available. Clinical trials can be a chance to be more involved in your health care, helping you feel more control and in charge of your situation.

Another important reason that patients get involved in clinical trials is to help new research. Through clinical trials, doctors and scientists have developed better approaches to surgery, better treatment options, and new drugs with fewer side effects. As a result, many patients are living longer and enjoying a better quality of life.

What do I need to know about Clinical Trials?

A clinical trial is a scientific study to look for new ways to prevent, diagnose, or treat diseases. Clinical trials are federally regulated and closely monitored to ensure the safety of participants. If you decide to enroll in a clinical trial, you may not receive the newer treatment being tested but you will receive the best available standard treatment.

Clinical trials are not just for people who have not responded to other therapies. There are clinical trials that test new treatments, focus on ways to control the side effects of treatments, and some look at ways to prevent illness. A clinical trial isn't suitable for everyone. There may not be a clinical trial for your type of disease or your situation may not fit the study.



Clinical trials usually take place where you are receiving care; a team of doctors, nurses, and other health professionals follows each patient closely. Patients are free to leave the study at any time.

What Are the Risks?

There are many benefits to being part of a clinical trial but there are risks too. Not all study treatments will turn out to be better or even as good as the best available standard of care. There may also be unknown side effects with the new treatment. Being in a clinical trial may also be time-consuming, requiring more trips to the study site, more tests, and extra medications.

Make an Informed Decision

Knowing all of your options is an important part of making the best decision for you. You should talk to your doctor about whether a clinical trial might be right for you. You need a referral from your doctor to be in any clinical trial. To find out more about clinical trials and what is available to you, speak to your doctor and research your options on the internet.

Investigate All your options

Ask About Clinical Trials

INFORMATION OBTAINED FROM THE CANADIAN CANCER SOCIETY AND NATIONAL CANCER INSTITUTE (2019)



Section 5: Personal Treatment Information

Fill this section with information you receive about your individual treatment plan.



Section 6



SECTION 6: WELLNESS/LIFESTYLE CHOICES

Exercising Through Cancer

Even when living with cancer, exercise and physical activity can help improve your overall wellness and life.

Benefits of Exercise

- Encouraged by physicians
- Increases muscle strength
- Improves mood and increases energy
- Increases quality of life
- Stimulates appetite
- Contributes to better sleep
- Helps with weight control leading to a faster recovery
- Improves balance
- Reduces stress and anxiety
- Can help reduce side effects like nausea, fatigue, and constipation
- Decreases dependence on others

Types of Physical Exercise

Exercises

- Walking
- Riding a bike
- Sports
- Dancing
- Stairs



Household/Everyday Activities

- Mowing the lawn
- Raking leaves
- Cleaning
- Washing the car
- Gardening

Other useful tips to increase exercise

- Park further away from your destination to add distance to your route
- Get off the bus before your stop to include a bit of a walk
- Get a pedometer to track how many steps you take in a day
- Play games with your children or grandchildren to stay active





Getting Started

Keep it fun

- Make exercising fun!
- Find activities you enjoy
- Try new things!
- Have a buddy friend, family, coworkers
- Make short-term goals
- Record your progress
- Reward your achievement

Location

 Find something convenient: home, work, community

Be Prepared

- Dress appropriately
- Get good/comfortable footwear
- Warm-up/stretch before exercises
- Cool down/stretch after exercise



Helpful Guidelines

- Don not over-do it! Start slow and rest as needed.
- Try to exercise a little each day, even in small amounts
- Get plenty of fresh air
- Eat a balanced diet
- Drink 8-10 glasses of water daily

- Remain active in a daily routine
- Include exercises using large muscle groups
- Balance activity and rest
- Ask for help
- Make exercise enjoyable, try new things

Precautions

- Do not exercise if you have anemia or abnormal blood mineral levels
- Avoid exercising in public places due to a weakened immune system
- Avoid uneven surfaces or weight bearing that could increase the risk of falls
- Do not use heavy weights or exercise if pre-existing conditions threaten bone integrity
- Avoid swimming pools if receiving radiation

Stop exercising if you:

- Are very tired
- Are short of breath

Call Doctor or go to Emergency if:

- You have chest pain
- You have shortness of breath that lasts longer than 5 minutes

- Are having pain
- Have nausea & vomiting
- You have pain for a long time
- You have sudden tingling or numbness

INFORMATION OBTAINED FROM THE CANADIAN CANCER SOCIETY (2019).



Nutrition & Cancer

Good nutrition can help maintain your strength and energy allowing you to carry on with the important things in life.

Benefits of good nutrition:

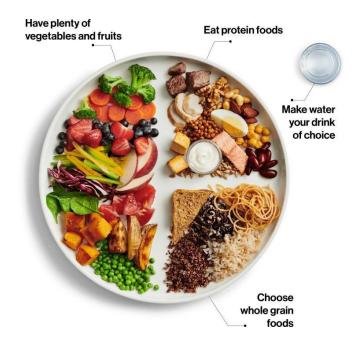
- Feel better
- Keep up your strength and energy
- Stronger muscles and bones
- Maintain your weight and your body's store of nutrients
- Help manage treatment-related side effects
- Lower your risk of infection
- Heal and recover more quickly

How to Eat Healthy Using the Eat Well Plate at Breakfast, Lunch, Supper and Snacks

Fruits and Vegetables	High Protein Foods	Grain Products
 Fruits and Vegetables Choose a variety of colours Enjoy raw, cooked, steamed, roasted 	High Protein Foods Include high protein food(s) at each meal. High protein foods include: • Legumes (ex. Lentils, chick peas, kidney or other types of beans)	Grain Products Include whole grain products as part of a healthy diet. Whole grain products include: Barley, brown rice, oats, quinoa, and wild rice
	 Nuts/seeds, nut/seed butters Poultry (chicken/turkey), fish, red meat (ex. Beef, pork, lamb) Milk, cheese, yogurt Cream soups Tofu or other soy products (ex. Soy milk) 	 Bread, bagels, pita bread, tortillas, and cereals made from whole grains Whole wheat pasta



Eat Well Plate



For more information on how to use the eat well plate to enjoy healthy, balanced meals, check out Health Canada: https://food-guide.canada.ca/en/

Nutritional Counselling

You may need to follow a special diet depending on your type of cancer, your cancer treatment, side effects, and any other medical conditions you might have. The booklet *Eating Well When You Have Cancer: A guide to good nutrition* from the Canadian Cancer Society may provide some answers.

You may be referred to a dietitian based on your answers to the pre-screening questions in the self-reporting history. You may decline or defer the referral if you wish.

If you have other nutrition-related questions, please speak with your cancer care team for further information or resources.



Sleep Hygiene for Cancer Patients



Personal Habits

Fix a bedtime and an awakening time

Be careful not to allow bedtime and awakening time to drift. The body "gets used" to falling asleep at a certain time if it is around the same time each night. Even if you are retired or not working, creating a sleep habit is essential.

Avoid napping during the day

If you nap throughout the day, you may not be able to sleep at night. The late afternoon for most people is a "sleepy time" and many people will take a nap at that time. Try to limit the nap to 30-45 minutes so you can still sleep well at night.

Avoid caffeine 4-6 hours before bedtime

This includes 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. Strenuous exercise within the 2 hours before bedtime, however, can decrease your ability to fall asleep.



Your Sleeping Environment

Use comfortable bedding

Uncomfortable bedding can prevent good sleep. Evaluate whether or not this is a source of your problem, and make appropriate changes.

Set a comfortable temperature and ventilation

If your bedroom is too cold or too hot, it can keep you awake. A cool (not cold) bedroom is often the most conducive to sleep.

Block out all distractions

Eliminate as much noise and light as possible.

Reserve the bed for sleep and sex

Do not 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 to sleep.

Practice relaxation techniques before bed

Relaxation techniques such as yoga and deep breathing may help relieve anxiety and reduce muscle tension. Wellspring Niagara offers a class teaching Relaxation tools for Better Sleep. The Arts in Medicine program at the Walker Family Cancer Centre offers classes in meditation and mild yoga.

Don't take your worries to bed

Leave your worries about 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 of reading, can help you sleep. *Get into your favourite sleeping position.*



Getting Up in the Middle of the Night

Most people wake up one or two times a night for various reasons. 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 and leave the bedroom. Read, have a light snack, do some quiet activity, or take a bath. You will generally find that you can get back to sleep 20 minutes or so later. Do not perform challenging or engaging activity such as office work, housework, etc. Do not watch television.

Television

Many people fall asleep with the television on in their room. Watching television tends to keep people awake. At the appropriate bedtime, the TV should be turned off and you should go to bed. Some people find that the radio, which is less engaging than a TV, helps them go to 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 doctor should be consulted 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 medication 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 to be made in context of your overall health picture.

Always follow the advice of your doctor and other healthcare professionals

The goal is to rediscover how to sleep naturally.

INFORMATION OBTAINED FROM CANCER CARE MANITOBA NURSING DEPARTMENT (2008)



Emotional/Psychological/Spiritual Care

A cancer diagnosis and its treatments can affect your physical body as well as your thoughts, mood, feelings, and spiritual well-being. It is important for us to consider all of these different elements when providing care for your overall health.

You and your family or caregiver(s) may feel a wide range of emotions such as shock, loneliness, denial, sadness, fear, depression, anger, anxiety and guilt. There are members of your cancer care team that can help you to cope with these emotions.

Psychological Support

Counselling is offered by the WFCC **Supportive Care Team**, which includes a psychotherapist or social worker for personal and family support. Self-referrals are welcome. You may also seek psychological support through community resources such as your family doctor, a psychiatrist, psychologist, psychotherapists and social workers.

It may also be helpful to join **support groups**, connect to **online social networks** (e.g. Facebook), or engage with **peer support** in a one-on-one setting.

Staying positive and relieving stress can improve coping. Stress relief can take many forms like:

- mind-body practices/activities (e.g. meditation, mindfulness, yoga, exercise)
- creative outlets (e.g. writing, music, art)
- hobbies and interests
- spending time with family and friends
- spirituality (e.g. prayer, meditation, rituals)



Spiritual Support

A cancer diagnosis can be a time of discovery or re-discovery of one's spirituality, faith, sense of sacredness, and value in life. Strength, comfort, clarity, and healing can come from speaking with someone to address questions and concerns. The hospital has chaplains (psychotherapists specialized in spiritual care) to support people of all faiths and traditions. Patients may also choose to contact someone from their own faith community for support, spiritual guidance, or access to additional faith-based resources.

For more information on coping strategies consult the Coping When You Have Cancer (Canadian Cancer Society 2017) booklet available in our Resource Landing on Level 2 or contact our Supportive Care Team at 905-682-6451.



Resource Landing

Visit our Resource Landing on Level 2 of WFCC near the back elevators. You will find a number of printed materials for you to take home. You can find information about:

- different types of cancer
- diet & nutrition
- support groups
- community services
- upcoming events

The Resource Landing also has hats and head coverings that have been sponsored by our generous community partners "Hat of Hope". Please help yourself to an item if you choose.

Arts in Medicine

A WFCC program that provides engaging, accessible, social, and creative experiences for patients, family members, and caregivers. These include a variety of free workshops, an Art on Loan program, special events, as well as offerings for passing time while you are waiting for or receiving treatment. The Arts in Medicine program is designed to enhance patient experience. For more information visit

https://www.niagarahealth.on.ca/ArtsInMedicine or check out the monthly AiM calendar.



Complementary and Alternative Therapies

Canadians are interested in complementary and alternative therapies and often consider including them in their cancer treatment. The decision to use a complementary or alternative therapy is a personal one, but if you are thinking about trying a complementary or alternative therapy, be sure to make an informed choice.

Making an Informed Choice Means:

- Understanding the difference between conventional, complementary, and alternative therapies
- Finding out as much as you can about the complementary or alternative therapy and how it may interact with the medication you are receiving.



Conventional therapies are the treatments that are currently accepted and widely used in the Canadian healthcare system for a certain type of disease. Physicians prescribe these treatments because the best available scientific research has shown them to be safe and effective.

These methods have been scientifically tested, and are constantly being improved, in well-designed clinical trials that explore whether the medicine or treatment is safe and whether it works for a particular disease or medical condition.

Complementary and Alternative Therapies

There has been very little scientific research done on complementary and alternative therapies, so we often don't know whether they are safe and we don't know whether or how they help people with cancer.

Whether a therapy is considered to be complementary or alternative depends on its purpose or how it is used.

INFORMATION OBTAINED FROM WWW.CANCER.CA



I've Completed My Cancer Treatment What's Next?

Challenges and Recovery

Patients who have finished cancer treatments often have psychological and medical challenges that vary from person to person. Some effects from the treatment may persist over time and others may not appear for months or years after the end of therapy such as early menopause, infertility, osteoporosis, joint pains, memory loss or cardiac dysfunction. Some survivors who finish their treatment struggle emotionally from the trauma of having experienced a lifethreatening illness. Others deal with the thought that they will never be cured, or that the cancer could return at any time. Many patients are anxious that any minor aches or pains may suggest that the cancer has returned. Once treatment is finished and the frequency of contact from the healthcare team decreases, some patients feel insecure as life returns to a "new" normal. Frustration is often experienced as those around you think you "look good" and, "look back to normal" but you don't feel like yourself. Psychological and social recovery can take much longer than your physical recovery.

Relationships

Special relationships may undergo a change. Old friends may not feel as close and new friendships may emerge. Relations with family members may be strained or strengthened.

Healthy Living

As you transition from active treatment to follow up care, you may find you have different needs and interests than when you were first diagnosed with cancer. You may feel motivated to make healthy living a priority. In an effort to regain a sense of general well-being, many patients feel eager to take control of their lives again and use physical activity as a way to fight fatigue, depression, and improve their body image. Maintaining a healthy body weight and following a healthy diet are ways you can make a difference in how you feel.





Transitioning

Treatment completion is often a time of transition, renewal and goal setting about this next stage of your life. Find a way to celebrate your endurance.

You may want to consider:

- Becoming a cancer volunteer i.e. at WFCC, Wellspring Niagara, Hospice Niagara, Canadian Cancer Society peer support
- Joining in a cancer fundraising activity i.e. The Rankin Run or The Big Move Cancer Ride
- Supporting a newly diagnosed acquaintance
- Creating a journal or writing about your experience
- Joining a cancer survivor group

Your medical oncologist will provide your cancer care, and your family physician will continue to monitor your general health until you are discharged from the oncology clinic. After discharge from the oncology clinic, your family physician will coordinate all your health care needs and may refer you back to the oncology clinic if required.

"Cancer did not bring me to my knees, it brought me to my feet"

- Michael Douglas: Actor and Cancer Survivor



Section 7



SECTION 7: INFORMATION ABOUT TREATMENT DAYS

How do I get ready for my treatment days?

Bring your binder with all of your questions written down for the team



For Systemic Therapy:

- The treatment suite is a Quiet Zone. Please turn off your cell phone ringer before entering. Try not to use speaker phone when taking voice calls. Texting is welcomed.
- Bring earphones (for the TV, iPod, iPad), books, crosswords
- Dress in layers, the temperature in the room can change during treatment
- Patients are welcome to bring snacks or food. Please do not bring mangoes or cashews due to a serious food allergy in our clinic.

Family and Friends

- We know that family and friends are important to have with you for support.
- Visitor policies are in place to keep everyone safe and can change over time.
- Ask your clinic team about the visitor policy.

When does bloodwork need to be done?

For Systemic Therapy:

- Blood work needs to be done on a day before your treatment at any community lab (eg. Life Labs)
- Your cancer care team will give you more specific instructions about blood work
- Holidays: check with your nurse when you should do your blood work



For Radiation Therapy:

Your doctor will discuss this with you







Symptom screening tool

- Within 24 hours of your doctor's visit or telephone/virtual appointment you can complete the Your Symptoms Matter (YSM) symptom screening tool
- This helps us focus on what is most important to you during your appointment
- It only takes a few minutes to fill out
- You can complete it online from a desktop computer, laptop, tablet or mobile phone
- Visit <u>isaac.cancercare.on.ca</u> and have your Ontario Health Card Number ready to log into the website or use the camera on your mobile device to scan the QR code
- If you need help there are staff or volunteers who can assist you to fill it out in clinic

Why do we do blood work and YSM?

 Your doctor assesses your bloodwork and how you are feeling to make sure it is the best time for you to get treatment

What if treatment is delayed?

- The most common reason for delays are low blood counts
- Remember: It is **not** your fault

What do I do if treatment is delayed?

- You and your team will talk about what is best for you
- Your bloodwork may be repeated to see if levels have increased
- Your treatment may be delayed, then blood work repeated at a later date





Before you leave your appointment....

- Make sure you know when your next appointment is
- Make sure you have any slips (requisitions) for any tests you need (eg. bloodwork, X-ray)
- Make sure you have any prescriptions, new or refills







Important information about medications

- Carry an up-to-date medication list
- Tell your team about any changes
- Between clinic visits, call your pharmacy for refills theywill fax us to arrange for your medication refill
- Plan ahead to avoid running short on medication



More questions?

Please ask! This binder was given to you to help answer the questions we commonly hear- but we know you may still have questions. We are here to help!

