

VISION

COPING WITH CANCER

VISION, SEPTEMBER 2016

The increased risk of being overweight

A report in the New England Journal of Medicine adds eight more kinds of cancer to the list of those already known to be more likely among overweight people.

In 2002, the World Health Organisation's International Agency for Research on Cancer (IARC), based in France, explained that excess pounds could raise the risk of colon, oesophagus, kidney, breast and uterine cancer. Now, it has also added stomach, liver, gall bladder, pancreas, ovary and thyroid cancers, as well as a type of brain tumour known as meningioma and the blood cancer, multiple myeloma, to the list

More than 1,000 studies of excess weight and cancer risks were reviewed and researchers found that limiting weight gain over decades can help to reduce the risk of those cancers.

"The burden of cancer due to being overweight or obese is more extensive than what has been assumed," said IARC Working Group chair Graham Colditz of the Washington University School of Medicine in St. Louis.

"Many of the newly identified cancers linked to excess weight haven't been on people's radar screens as having a weight component."

Cancer often arises with no explanation. Its causes can include viruses, pollutants, genetic factors and radiation.

Around nine percent of cancers among women in North America, Europe and the Middle East are believed to be linked to obesity, the report said.

Extra fat can promote inflammation and lead to an overproduction of oestrogen, testosterone and insulin – all of which can drive cancer growth, the study added.

Certain lifestyle factors such as smoking and being overweight can also make a person more likely to get cancer.

Some 640 million adults and 110 million children around the world are obese.

"Lifestyle factors such as eating a healthy diet, maintaining a healthy weight and exercising, in addition to not smoking, can have a significant impact on reducing cancer risk," Colditz said.

"This is another wake-up call. It's time to take our health and our diets seriously."

CanSurvive
CANCER SUPPORT

6th Annual *Celebration* Breakfast *of Life*

Sunnyside Park Hotel
Prospect Room

Saturday 12 November
08:30 for 09:00

- Paul Tavares will provide the music
- Bev du Toit will be our MC
- Christl (Weinbeck) van Tonder and Christian Heath will be there to entertain you
- There will also be our usual wonderful raffle

Payment can be made to: CanSurvive
FNB Hyde Park branch (155805)
Cheque Account no. 62288991906
Reference: CoL and your surname.

Please note that if you are depositing cash,
bank charges of R35 must be included.

Tickets: R200.00 pp | For more details, contact Bernice at bernicelass@outlook.com



Wings on wheels

Wings members arrived in style at the fund raiser "Jazz in the Garden" organised by the Rotary Club in Parktown on 21 August.

Part of the action were Wings of Hope selling raffle tickets for the Club. Weather, food and mood were great and the event was very well attended.

The next public meeting of the Wings will be held on Saturday, 10 September at 9.30 for 10.00 am. The venue will be back at the Netcare Head office in Sandton and the main speaker will be Dr. Sumayya Ebrahim, a presentation not to be missed.

South Africa's first ever!

Cancer Survivors' Summit 2016

10 September 2016

No-one really understands how it feels to have cancer – to face the treatment, to return to life after cancer or to care for someone with cancer – unless you have experienced it yourself!

The 2016 Cancer Survivors' Summit is a new platform for cancer survivors to share ideas and encourage people living with cancer to live creative and meaningful lives.

Who should attend?

All people touched by cancer: survivors, those on cancer treatment, their family members and friends, as well as cancer caregivers.

If you long to hear how others cope in the early days, how to manage the long haul after treatment, and to share ideas and be encouraged, come and join the conversation and be part of the celebration!

Embrace Life & Thrive!

Kindly note: Ticket holders **ONLY** will be permitted entrance

10 September 2016 from 8h30 to 15h00
His People Church, N1 City, Goodwood

This is a free event, but please reserve your place:
www.quicket.co.za or call Joleen on 021 944 3609
Light lunch will be served

Book your **FREE** seat today!
Details on reverse...

cancercare
by Q21 Oncology



CAMPAIGNING FOR CANCER

Being diagnosed with cancer is very overwhelming for a patient, and their loved ones. Campaigning for Cancer's mission is to be that someone to help you find credible information about your cancer journey, direct you to support services and aid you in ensuring that you are getting the best possible treatment through advocacy services. Campaigning for Cancer's National Call Centre is a free, easily accessible service that helps the patient feel more empowered by navigating them through the steps of their cancer journey. The right answers are as important as the right treatment and at Campaigning for Cancer we help you get both.

In our commitment to making a difference we assist all South Africans regardless of age, sex, gender, insurance or health status, marital status, disability, ethnicity, religion, sexual orientation, conscience, belief, education, social or economic background. We view community-based support groups and NGOs as primary partners in being able to aid cancer patients and their caregivers in accessing denied treatment and care.

Campaigning for Cancer recently launched the Cancer@Work campaign to help guide employers and employees in navigating a cancer diagnosis.

Visit our website at www.campaign4cancer.co.za or follow us on Facebook, Twitter and Instagram - @campaign4cancer

Let's talk about cancer!

Join us at a **CanSurvive Cancer Support** group meetings for refreshments, a chat with other patients and survivors and listen to an interesting and informative talk.

Upcoming meetings:

HEAD and NECK Group, Rehab Matters, Rivonia
- 6 October 18:00

KRUGERSDORP Netcare Hospital Group
- 1 October 09:00

PARKTOWN GROUP, Hazeldene Hall, Parktown
- 8 October 09:00

Enquiries:

Mobile 062 275 6193 or email
cansurvive@icon.co.za

www.cansurvive.co.za :

www.facebook.com/cansurviveSA

The Groups are open to any survivor, patient or caregiver. No charge is made.
The Groups are hosted by Netcare.



You're in safe hands

Finding and evaluating online resources

The number of websites offering health-related resources - including information about complementary health approaches (often called complementary and alternative medicine) - grows every day. Social media sites have also become an important source of online health information for some people. Many online health resources are useful, but others may present information that is inaccurate or misleading, so it's important to find sources you can trust and to know how to evaluate their content. This guide provides help for finding reliable websites and outlines things to consider in evaluating health information from websites and social media sources.

Checking out a health web site: five quick questions

If you're visiting a health website for the first time, these five quick questions can help you decide whether the site is a helpful resource.

- Who? Who runs the website? Can you trust them?
- What? What does the site say? Do its claims seem too good to be true?
- When? When was the information posted or reviewed? Is it up-to-date?
- Where? Where did the information come from? Is it based on scientific research?
- Why? Why does the site exist? Is it selling something?

Not all online health information is accurate. Be cautious when you evaluate health information on the Internet, especially if the site

- Is selling something
- Includes outdated information
- Makes excessive claims for what a product can do
- Is sponsored by an organisation whose goals differ from yours.

Are you reading real online news or just advertising? Some time back the US Federal Trade Commission warned the public about fake online news sites promoting an acai berry weight-loss product.

Cancerbuddies @Centurion

Join us at our monthly meeting for refreshments, a chat with other patients and survivors and enjoy an interesting and informative talk.

**Next meeting: 17 August at 18:00
at Unitas Hospital boardroom**

**There will be various speakers on
Hospice or Home care. End of life with
uncertainty of road ahead.**

**Please phone Marianne Ambrose or Matjatji
Machubeng at 012 677 8271 office hours,
if you have any questions**

The group is open to any survivor, patient or caregiver.

No charge is made.

The Group is hosted by Netcare.



Mushrooms and caps - they all help to provide care for breast cancer patients

Prof Amanda Krause was the speaker at the meeting in August and she gave fascinating insights into genetic aspects of breast cancer. The most important message is that an accurate risk assessment must be done before DNA testing is embarked on. Contact Janet Robbie at the Department of Human Genetics for clinical testing and support.

November is Breast Cancer month and there are exciting events planned. Inanda Club in Johannesburg is hosting Playing for Pink Polo event on the 2 October. The final SPAR Ladies Race takes place at Wanderers in Johannesburg on the 9 October and iThemba takes place at Marks Park is on the 22 October. Reach for Recovery caps will be on sale, so please join the celebration of breast cancer survivors on those days.

Also, do not forget to buy mushrooms in pink punnets from Pick and Pay – a generous donation goes to providing breast prostheses for indigent women.

Reach for Recovery will have a year-end function on Wednesday 16 November at Life Line offices. Everybody is welcome .



On a typical fake "news" site, a story described an investigation in which a reporter used the product for several weeks, with "dramatic" results. The site looked real, but it was actually an advertisement. Everything was fake: there was no reporter, no news organisation, and no investigation. The only real things were the links to a sales site that appeared in the story and elsewhere on the web page. Similar fake news sites have promoted other products, including work-at-home opportunities and debt reduction plans.

You should suspect that a news site may be fake if it:

- Endorses a product. Real news organisations generally don't do this.
- Only quotes people who say good things about the product.
- Presents research findings that seem too good to be true. (If something seems too good to be true, it usually is.)
- Contains links to a sales site.

Includes positive reader comments only, and you can't add a comment of your own.

Don't rely exclusively on online resources when making decisions about your health, discuss it with your health care provider first.

Thank you to Netcare !

CanSurvive Cancer Support Groups, Johannesburg, wish to thank Netcare for their assistance and encouragement.

We value the support and generosity of Netcare and their staff and their commitment to helping us to improve support for cancer patients and their families by providing a comfortable and accessible venue and refreshments for our meetings.

Home is where the heart is – CANSA Care Homes

The Cancer Association of South Africa (CANSA) provides care and support to those affected by cancer through its CANSA Care Homes. CANSA's Care Homes are where staff and volunteers offer care, help and support to cancer patients and their families.

CANSA provides home-from-home accommodation to patients undergoing cancer treatment at oncology clinics far from their homes. There are currently 11 Care Homes across the country where patients stay for an average of six weeks and receive meals and transport to and from treatment centres.

Cancer survivor, Magda stayed at Mkhuhla Care Home in Durban, Monday to Friday for the six weeks she was undergoing radiotherapy. She had a room overlooking the garden and made friends with two other ladies who were also staying over and receiving treatment. Every day they were taken for treatment in a minibus.

She shared, "It's wonderful here....and the meals are just right when you're not feeling so well. I don't feel self-conscious. We're all in the same boat."

Henk Hills, a recent guest shared his experience via Twitter, "As a cancer survivor, I would like to thank CANSA and especially the staff at the Tipuana Care Home (Pretoria) for all their support, I really owe you guys my deepest thanx".

Offering a place to stay is just one of many ways CANSA helps cancer patients cope with this awful disease. In 2015, CANSA with the help of donors and volunteers, brought comfort and care, served meals and provided transport to almost 3 847 individual patients who came to them for help. To find out more go to <http://www.cansa.org.za/cansas-care-support/cansa-care-homes/>

The CANSA Theunis Fichardt Hospitium based in Polokwane, provides very ill cancer patients with excellent nursing care. And the CANSA TLC Nicus Lodge at the Steve Biko Academic Hospital in Pretoria has shown a large demand for accommodation for parents or guardians whose children are undergoing treatment. We also support a CANSA TLC Paediatric Oncology Ward at the Pietersburg Provincial Hospital in Polokwane, offering in-house accommodation to mothers, guardians and caregivers. And we provide lodging for parents/ guardians whose children are undergoing cancer treatment in Durban as well plus offer CANSA TLC Support Rooms in Kimberley and Port Elizabeth," says Elize Joubert, CANSA CEO. Read more at <http://www.cansa.org.za/tlc-for-youth-and-families-affected-by-cancer/>



The lovely Keurboom Care Home in Johannesburg.

CANSA Relay for Life invitation to patients

Cancer survivors and caregivers, please join us at the CANSA Relay For Life Corporate experience on 1 October 2016. Survivor and caregiver registration is now open and we look forward to sharing this event with you. We encourage you and your caregiver to register early as this will give you the opportunity to collect your goodie bag, enjoy the refreshments and entertainment as well as mingle with fellow survivors and relayers.

The survivor lap is followed by a caregivers lap that honours family, friends and co-workers who have provided you with support. Please extend an invitation to them to join in and participate in the caregivers lap.

There is no entry fee for survivors and caregivers, we politely request that you inform us of your attendance so that we can prepare a special event for our VIP Survivors.

Join us from 2:30pm. At 4:00pm, walk the survivors lap followed by caregivers lap. Share in the Luminaria ceremony after sunset and light a candle in honour or in memory of those affected by cancer

Encourage everyone you know to register a team and join in the fight against cancer.

For more details, contact Cell 073 307 8932 // cathye.batch@gmail.com, cell 072 120 4285 // odetteemmer-son@gmail.com



Left: The dining room at Durban's Mkhuhla Care Home.

Below: A good night's rest at one of the CANSA Care Homes



Patients get together after treatment for rest and relaxation in this comfortable lounge.

Clean and spacious bedrooms are a feature of the care homes and allow patients to recover after their treatment.



A fork in the waters

Sometimes, I think that that guiding principal of the medical profession, "first, do no harm," is hopelessly out-of-date. Clearly, a physician should understand her limits, and never should she give care, which hurts, more than helps. Nonetheless, this axiom implies that the doctor is in control, and decides the treatment. Some of the time, a modern motto, which recognises the true position and limits of the modern doc, might be, "you can lead a horse to water, but you cannot make him drink."

I saw two patients this week, whose disparate responses to serious medical events, illustrates the limits of what even a careful and clear physician to do. Both were lead to the side of the river, told how to get safely cross. One climbed onto the ferry. The other looked left, looked right and plunged into the maelstrom, rapidly beginning to drown.

Steve is a 61-year-old gentleman. On a blood test last winter, I found that his hemoglobin A1C (HgA1C) was slightly elevated. Normal is 5.6 or less and his was 5.7. This test measures the average blood sugar over time and the very slight increase did not mean he has diabetes, but rather was at increased risk for that illness. I informed him of this, six months ago.

Since that time, he has done everything possible to reduce that risk. He began to exercise for an hour, five or six times a week. He lost 15 pounds. He stopped eating all candy, desert and soda. He got more rest. The result is that his HgA1c dropped to 5.2. Steve took aggressive control of his health and life.

The second patient, Ron, is a 52-year-old gentleman. I saw him a year ago, for an elevation of his red blood count, so called Reactive Polycythemia. To what was it reacting? Smoking and sleep apnea from obesity. In addition, he was developing a chronic cough from early lung disease and, a couple months ago, required the placement of his second cardiac stent.

I told Ron, last year, that he was dying. He was dying of smoking. He was dying of overeating. He was dying from a sedentary lifestyle. His chance of surviving to 60 was not great without significant changes in how he was living. I offered him nicotine patches and gum, anti-smoking medication, a nutritional referral, a prescription to a medical exercise program, referral to a hypnotist and the number of a formal smoke ending program at the local university. I counseled him on methods of decreasing his intake of food and cigarettes. I was emphatic, crystal clear, that his was puffing his last years away.

How much did he decrease his smoking? Nada. His is still burning through more than one pack a day. His nails are yellow and he smells of tobacco. He is proceeding to kill himself.

His weight? Up seven pounds. Exercise of any sort? Not at all. Ron did nothing improve his health or lifestyle.

What makes these patients so different? Sure, tobacco is addictive and therefore naturally harder to quit. However, massive life-style changes, which Steve put in place, also require tremendous focus and discipline. I have seen the reverse just as often, overweight diabetics completely failing to address rapidly rising sugars, while smokers quit, simply because I say things are bad, or maybe even more important, will be bad for their children.

There are many factors that result in such a contrast is health consciousness. Some people feel helpless or fatalistic, unable to take control of their own lives. Others are overwhelmed by personal events and do not have the time or focus for themselves.

James C. Salwitz, MD

Dr. Salwitz is a Clinical Professor at Robert Wood Johnson Medical School.

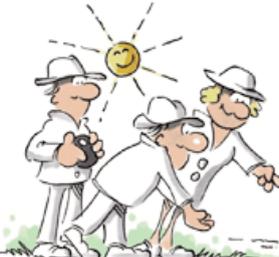
He lectures frequently in the community on topics related to Hospice and Palliative Care and has received numerous honours and awards, including the Physicians Leadership Award in Palliative Care.

His blog, Sunrise Rounds, can be found at <http://sunriserounds.com>



Many were not raised in health conscious homes or never had the supports to focus on their own bodies. Some do not believe what they are being told, while others, because of depression or anxiety, simply cannot care. Others never are never told about their choices in a definite and clear manner, which they can understand.

For doctors this can be very frustrating, even resulting in burnout. They try to teach, support and give honest guidance, when they wish all along they could take the patient out back to the woodshed and spank some sense into them. The best a doctor can offer is an honest appraisal of realities and in choices for each malady. Then it is up to each patient, each of us, to choose our path. We decide whether to drink the water or not.



'CANCER CHALLENGE'

Join us for the
INAUGURAL
'CANCER CHALLENGE'
A fun afternoon of bowls in support of
'Cancer Buddies'

DATE	Friday 28 th October 2016
TIME	12h00 onwards
VENUE	Randburg Bowls Club Tinktinkie Road, Randburg
FORMAT	24 teams of 4 players per team each 'team' to include at least one cancer fighter / survivor
ENTRY FEE	R 360 per 'team' (afternoon tea & 'after bowls' snacks included)
RSVP	Wendy Lobley wendylobz@gmail.com / 082 469 3874
SPONSORSHIPS	- R 2,000 per team
PRIZES	Variety of prizes to be won

Cash Bar available




How healthy is your braai?

By Megan Lee, FutureLife

Every year we as South Africans celebrate National Heritage Day bringing light to South Africa's rich culture and history. September 24 is also known as National Braai Day when, despite the various cultures within South Africa, we all share this one common heritage of uniting around a fire and sharing a superb feast. Yes, South African's do love a good old braai and find several occasions to celebrate over "n stukkie vleis", whether it's watching a rugby or soccer match, a birthday party or just celebrating the weekend and warm weather.

One might wonder though how good charred meat is for you and with cancer incidence on the rise and the recent scares around red and processed meat causing cancer, we may need to have a closer look at how healthy this is and if we need to say bye to the braai.

What does science say?

Research does in fact show that cooking meat at high temperatures does create chemicals that may increase cancer risk. Heterocyclic Amines (HCAs) and Polycyclic Aromatic Hydrocarbons (PAHs) are two of them and are formed during cooking of muscle meats such as beef, pork, fowl and fish due to a reaction between amino acids and creatine at high temperatures. High temperature cooking includes pan frying or grilling over an open flame, braai'ing and smoking meats. Research has shown that high consumption of well-done, fried or braai'ed meat increases risk of colorectal, prostate and pancreatic cancer.

It also isn't new information that red and processed meat in itself may increase cancer risk as it has been part of the nutrition recommendations for cancer prevention as "Limit intake of red meat and avoid processed meat", published in the Food, Nutrition and the Prevention of Cancer: a Global Perspective. In 2015, the International agency for research of cancer (IARC) announced that processed meat has been classified as a 'definite' cause of cancer and red meat is a 'probable' cause.

This doesn't however mean that we should never eat red or processed meats again, besides there are other factors which have a far greater association to cancer, such as smoking or being obese. The emphasis rather is to not eat excessive amounts, particularly over a long period of time. Besides, meat can be a valuable source of nutrients such as protein, iron, zinc and vitamin B12 so simply put, the key is moderation .

Healthy braai tips

Knowledge is power and now that you know the risks that are involved, here's some happier news with some surprisingly exciting and practical tips on how to make your braai healthier.

- Marinate meat in beer. Doing this for about 4-6 hours has been found to significantly lower the cancer causing agents that develop. Darker beer was also found to be the most effective.
- Marinate meat in a mixture of vinegar, oil and spices. If you'd like to avoid marinating in alcohol then try this as an alternative. Some examples of ingredients that have been shown to be effective include olive oil, lemon juice, cider vinegar, teriyaki marinade, cherries, plums, apples, mustard, garlic, onions, black pepper, oregano and rosemary.
- Avoid thick, sugary marinades that may cause charring.
- Remove excess fat and choose leaner meats. It reduces the amount of PAHs produced as less fat means less smoke.
- Flip your meat and burgers often to prevent charring, it substantially reduces HCA formation.
- Avoid braai'ing processed meats such as cheese grillers, hot dogs or bacon.
- If you do choose processed meat, opt for those that are sourced from a local farmer that are uncured, 100% beef/chicken, and does not contain MSG, preservatives, artificial flavours and colouring.
- Rare to medium is best. Cook the meat as little as possible as the longer the cooking time and the higher the heat the more HCAs are produced.
- Keep the grill clean and scrape off all charred residue.
- Remove charred portions of meat before eating, including chicken skin.
- Choose smaller meat portions which will cook quicker, reducing the time spent exposed to high temperature.
- Braai vegetables. They do not cause harmful chemicals even when cooked at high temperatures. Try braai'ing zucchini, mushrooms, onion or asparagus, seasoned and brushed with olive oil.
- Pair your meat with an antioxidant-rich salad. Combat the harmful chemicals produced in the meat with powerful antioxidants by enjoying your meat with a fresh salad or steamed veggies. Remember the more variety and colour, the more antioxidants present.

FUTURELIFE® Apple and Raisin Pie

Ingredients

400g puff pastry
500g raisins and sultanas
250ml water
80g brown sugar
20g butter
Half teaspoon cinnamon
400g pie apples



150g Original FUTURELIFE® Smart food™

Method

Place raisins, sultanas and water in a pan and simmer until raisins and sultanas are plump. Add sugar, butter and cinnamon. Boil for four minutes. Add the pie apples and FUTURELIFE® Smart food™ and mix together. Place in a 20cm round pie dish. Cut puff pastry into half centimetre strips and brush with egg. Bake at 200°C for 30 minutes.

FUTURELIFE® Orange, honey crush

Take six fresh oranges, washed and peeled, 50ml honey, 5g fresh rosemary, 50g Original FUTURELIFE® Smart food™ and 500g ice cubes and put them all in a blender and blend for 30 seconds.

Delicious!

Krugersdorp's Old Oak Hospice looking for help

It's a fresh start for Hospice in Krugersdorp as the organisation is set to open its doors to the community once again.

A newly formed organisation, Old Oak Hospice, will be built from the ground up and will cover areas from Florida, Roodepoort, Krugersdorp and Carltonville.

"There will be no sign of the old Hospice, everything will be brand new by means of management, approach and service," Ina Meiring, founder of Old Oak Hospice said.

After winning the fight against cancer, twice, Ina decided to follow her heart and help others who are going through the same ordeal.

"I had my first encounter with Hospice when I was diagnosed with cancer," Ina explained. She was quite upset to learn that Hospice West Gauteng closed their doors in February last year.

For the new Hospice, Ina has an in-patient practice in mind where

patients can comfortably fight the battle with the right equipment, treatment and support at their disposal.

Ina's first order of business will be the taking over of the previous premises in Burger Street where she plans to create a space where patients and their family can come for coffee and receive emotional, spiritual and physical counseling.

Other services will include an in-patient unit, home based care, day-care and support, bereavement counselling, a training centre, personal development and holistic treatments.

"I am officially inviting the community, businesses and residents to roll up their sleeves and become involved in getting this organisation off the ground. I am also looking for members to sit on the Board and help me to help the community."

For more information contact Ina on 078 969 7400 or email oldoakhospicewstrand@gmail.com.



Answering the questions

Cancer physicians know when "The Questions" are coming. A casual conversation at a party or in the grocery store eventually turns to careers. The pleasant exchange is replaced with talk of life-changing illnesses and impossibly difficult decisions. The other person's brow furrows, the head shakes, the face darkens. "How can you deal with that day after day?" they ask. "Isn't it depressing? Why didn't you pick something happier for a career?"

These are legitimate questions. As a medical student many years ago, I enjoyed every rotation and wondered how I would ever be able to narrow down my choices and pick a specialty. Eventually, I decided that I was most content when I was in an operating room. Even though I knew that I was going to be a surgeon, there were still dozens of directions where my career might head.

One day in 1980, I was in a small conference room in Chicago packed with medical students, residents, and surgeons who had gathered to hear a presentation by a visiting out-of-town surgeon. He ran through his slide show, describing a procedure he had devised to restore voice for patients who had undergone removal of their voice boxes. It was a complex operation that involved the creation of tubes of lining tissues that shunted air from the trachea to the back of the throat allowing the person to speak.

It was interesting, but at my level of training, I was confused by the details and diagrams. I was years away from doing any type of sur-

gery on my own. At some point during his talk, I probably checked my watch, wondering when the conference would be over.

Then, the visiting surgeon flipped the controls and adjusted the volume on a 16-mm movie projector. The light flickered as the film moved past the bulb.

There, on the screen, was a man who had undergone a total removal of his voice box. The surgeon asked him a question and the patient responded by holding a vibrating device against his neck to create an artificial, machine-like sound that he shaped into words. He was understandable but his voice sounded synthetic.

The next scene was filmed after the same patient had undergone the voice restoring procedure. This time when he responded to the surgeon's question, he brought his hand up to his neck and covered his stoma to redirect air from his lungs through the shunt and into his throat. He was able to talk! The sound was natural and fluent. I was enthralled by the patient's outcome and can still remember his big smile at the end of the movie. The experienced physicians in the conference room asked questions about whether the procedure was practical or might cause more problems than it solved. I, on the other hand, thought that the procedure was amazing.

I left the conference thinking, "I want to do something like that!" Although the procedure described by the visiting surgeon never caught on (there are much simpler techniques widely used today), that meeting steered me toward a career devoted to patients with head and neck cancer. I can trace my interest to that particular day.

I love my work even on the days I when I find my practice overwhelming. When someone outside of medicine scratches their head when I tell them what I do for a living, I explain how I felt when I heard that lecture many years ago. I describe the movie and the man's huge grin. Over the years, I have seen more than a few of those grins on my own patients. It has, indeed, all been worthwhile.

Dr Bruce Campbell is an otolaryngologist at the Medical College of Wisconsin. Read his blog at <http://www.froedtert.com/HealthResources/ReadingRoom/HealthBlogs/Reflections.htm>

CONTRIBUTIONS FOR PUBLICATION

Comments, articles, and letters submitted for publication in VISION are welcomed and can be sent to: cansurvive@icon.co.za.

If you are holding any cancer related events, please let us know so that we can include it on our Calendar.

International Childhood Cancer Awareness Month

September is the gold ribbon month - marked as Childhood Cancer Awareness Month; this is a time where globally, countries honour and remember children and families affected by this rare disease, and help rally awareness on the early warning signs of childhood Cancer. CHOC Childhood Cancer foundation SA is encouraging all South Africans to "Go for Gold" by purchasing the gold ribbon from the online CHOC Store or nearest CHOC offices. The ribbon is to be worn throughout the month of September. This will go a long way in highlighting the disease and showing support to those battling cancer around the world.

Many childhood cancers have much higher survival rates when diagnosed early. Unfortunately, childhood cancers are sometimes overlooked or misdiagnosed because early symptoms are mistakenly attributed to more common injuries or illnesses such as constant headaches, mumps, new squint and more as stipulated in the early warning signs of childhood cancer. It is recommended that children have regular medical check-ups, and that parents pay close attention to the development of any unusual symptoms and signs and learn the early warning of childhood cancer developed by the South African Children's Cancer Study Group (SACCSG) and adopted by the International Society of Paediatric Oncology known as the St Siluan signs.

Support Childhood Cancer Month – 'Go gold' for the future of our precious children is not to be compromised.

For more information about CHOC, join the CHOC Facebook page - <https://www.facebook.com/pages/CHOC-Childhood-Cancer-Foundation-SA/1519454698270658>

PSA and male cancer support group

20 September 17:45 – 19:00

The venue is the Boardroom at

MediClinic, Constantiaberg, Plumstead

Guest speaker is nutritionist and dietitian, Catherine Day, talking about healthy lifestyles.

Forthcoming events:

18 October'16: Jill Kramer : Learning to talk about living with prostate cancer

15 November'16: Year End Function: A Celebration of Life

For more information contact:

Ismail-Ian Fife: 079 315 8627 Support Line

Linda: 082 551 3310 |

Email: info@can-sir.org.za. Web: www.can-sir.org.za

Our grateful thanks to Medi-Clinic for providing a home for our activities and refreshments for our members. It is much appreciated by us all.

Cape Town Caregiver Support Group

Providing support for family members who are caring for patients with life threatening illnesses, primarily for caregivers of St Luke's Hospital patients.

This is an opportunity for family members and caregivers to learn from and support each other and to meet other people in a similar situation and to build an extra support system for themselves. It is also an opportunity to gain information and education around oncology and caring for those with life threatening illnesses.

To be held at St Luke's Community Hospice Athlone, 29 Wilkshire Road, Belgravia on the first Monday of each month from 10:00 to 12:00.

Managing fatigue with exercise

It's understandable if you feel too tired to move about or work out, but you may want to reconsider. Although exercise seems tiring, it can actually help combat your fatigue. By putting a little energy in, you can get a lot more out in return. It can be as simple as a period of brisk walking each day, working out in a gym (ideally with the guidance of a trained professional), swimming, or any other activity that is safe for your condition.

In a recent analysis, University of Connecticut researchers pooled the results of 44 separate randomised controlled trials covering more than 3,000 fatigued patients with various types of cancer. Those who exercised experienced higher energy levels and reported significant reductions in their cancer-related fatigue compared to control subjects who did not exercise. This was particularly true for older patients who engaged in moderate-intensity resistance training (strength-building exercises such as lifting weights). Older patients in fact experienced greater reductions in fatigue than younger ones. Furthermore, the more intense the exercise program, the greater the improvements in energy levels.

Similarly, a 2008 review article produced by the well-regarded Cochrane Collaboration examined 28 trials and concluded that cancer-related fatigue was improved significantly more in patients who exercised than in those who did not. This was true for patients both during and after active cancer treatment. Although most of the trials included breast cancer patients, there is no reason to believe that the finding wouldn't apply to those with other cancer diagnoses as well.

Generally, studies suggest that exercise can be safe and effectively reduce fatigue even during chemotherapy and radiation, and for many different cancer types. It appears that even low-intensity exercise— aerobic and/or resistance—can be helpful. Because cancer treatment can lead to muscle wasting, exercise may help to diminish fatigue by building muscle and restoring its function. There are other theories as well, as the exact cause of cancer-related fatigue is not well understood.

<http://news.cancerconnect.com/cancer-survivorship-fatigue/>

CALENDAR

September 2016

- 10 CanSurvive Cancer Support Parktown Group, Hazeldene Hall, Parktown 9:00
- 10 Wings of Hope, Netcare Head Office Auditorium, Sandton, 9:30 for 10:00. Speaker: Sumayya Ebrahim
- 10 CancerCare's "Inspiration & Celebration Cancer Survivor Summit". Contact the project leader, Linda Greeff on 021944-3609 or 0825513310 for more details
- 15 Cape Gate Oncology Centre support group 10:00 - 12:00. Cancer and pain management
- 20 Prostate and MaleCare Support Group, Constantiaberg, Medi-Clinic 17:45. Speaker: Catherine Day Nutritionist/Dietitian
- 21 Cancer Buddies@Centurion, 4th floor Lecture Room at Netcare's Unitas Hospital in Centurion at 18h00
- 26 GVI Oncology Unit support group, 4th Floor Rondebosch Medical centre from 6:00 to 7:30. Topic: Hospice.

October 2016

- 1 CanSurvive Cancer Support West Rand Group, Netcare Krugersdorp Hospital, 09:00
- 6 CanSurvive Head and Neck Support Group, at Rehab Matters, 1 De la Rey Rd. Rivonia at 18h00
- 8 CanSurvive Cancer Support Parktown Group, Hazeldene Hall, Parktown 9:00
- 10 CANSA Relay for Life, Corporate, Denel Sportsground, Centurion.
- 18 Prostate and MaleCare Support Group, Constantiaberg, Medi-Clinic 17:45.
- 19 Cancer Buddies@Centurion, 4th floor Lecture Room at Netcare's Unitas Hospital in Centurion at 18h00
- 20 Cape Gate Oncology Centre support group 10:00 - 12:00. Hormonal Therapy in Breast Cancer
- 22 Wings of Hope, Netcare Head Office Auditorium, Sandton, 9:30 for 10:00.
- 23 Avon Justine iThemba Walkathon at Marks Park, Emmarenia, Johannesburg
- 28 Randburg Bowls Club, Boskruin. Fun competition in aid of CanSurvive. Starting 12h00

November 2016

- 3 CanSurvive Head and Neck Support Group, at Rehab Matters, 1 De la Rey Rd. Rivonia at 18h00
- 5 CanSurvive Cancer Support West Rand Group, Netcare Krugersdorp Hospital, 09:00
- 12 CanSurvive Cancer Support, CELEBRATION OF LIFE - all support groups welcome
- 15 Prostate and MaleCare Support Group, Constantiaberg, Year End Function: A Celebration of Life.
- 16 Reach for Recovery Group meeting 13:45 Lifeline offices, 2 The Avenue, Cnr Henrietta Street, Norwood
- 16 Cancer Buddies@Centurion, 4th floor Lecture Room at Netcare's Unitas Hospital in Centurion at 18h00

CONTACT DETAILS

CanSurvive Cancer Support Groups - Parktown and West Rand :
CanSurvive Head and Neck Support Group, Rivonia,
Johannesburg Contact: 062 275 6193

GVI Oncology /Cancer Buddies, Rondebosch Medical Centre
Support Group. Contact: Linda Greeff 0825513310 linda.greeff@cancercare.co.za

GVI Cape Gate Support group: 10h00-12h00 in the
Boardroom, Cape Gate Oncology Centre.
Contact: Caron Caron Majewski, 021 9443800

GVI Oncology Somerset West Group for advanced and
metastatic cancers. Contact person: Nicolene Andrews
0218512255

Can-Sir, 021 761 6070, Ismail-Ian Fife, ismailianf@can-
sir.org.za
Support Group: 076 775 6099.

Cancerbuddies@centurion: Marianne Ambrose 012 677
8271(office)
or Henriette Brown 0728065728 Pastoral Counsellor

More Balls than Most: febe@pinkdrive.co.za,
www.pinkdrive.co.za,
011 998 8022

Prostate & Male Cancer Support Action Group, MediClinic
Constantiaberg. Contact Can-Sir: 079 315 8627 or Linda Greeff
0825513310 linda.greeff@cancerbuddies.org.za

Wings of Hope Breast Cancer Support Group 011 432 8891,
info@wingsofhope.co.za

PinkDrive: www.pinkdrive.co.za, Johannesburg:
febe@pinkdrive.co.za, 011 998 8022; Cape Town: Adeliah
Jacobs 021 697 5650;
Durban: Liz Book 074 837 7836, Janice Benecke 082 557 3079

Bosom Buddies: 011 482 9492 or 0860 283 343,
Netcare Rehab Hospital, Milpark. www.bosombuddies.org.za.

CHOC: Childhood Cancer Foundation SA; Head Office:
086 111 3500; headoffice@choc.org.za; www.choc.org.za

CANSA National Office: Toll-free 0800 226622

CANSA/Netcare Support Group 10:00 Clinton Oncology
Centre, 62 Clinton Rd. New Redruth. Alberton. Second Friday
each month.

CANSA Pretoria: Contact Miemie du Plessis 012 361 4132 or
082 468 1521; Sr Ros Lorentz 012 329 3036 or 082 578 0578

Reach for Recovery (R4R) : Johannesburg Group, 011 869
1499 or 072 849 2901. Meetings: Lifeline offices, 2 The Avenue,
Cnr Henrietta Street, Norwood

Reach for Recovery (R4R) : West Rand Group. Contact Sandra
on
011 953 3188 or 078 848 7343.

Reach for Recovery (R4R) Pretoria Group: 082 212 9933

Reach for recovery, Cape Peninsula, 021 689 5347 or
0833061941 CANSA offices at 37A Main Road, MOWBRAY
starting at 10:00

Reach for Recovery: Durban, Marika Wade, 072 248 0008,
swade@telkomsa.net

Reach for Recovery: Harare, Zimbabwe contact 707659.

Breast Best Friend Zimbabwe, e-mail bbzfzim@gmail.com

Cancer Centre - Harare: 60 Livingstone Avenue, Harare
Tel: 707673 / 705522 / 707444 Fax: 732676 E-mail:
cancer@mweb.co.zw www.cancerhrc.co.zw

News in brief

MammaPrint finds breast cancer patients who can skip chemo

In breast cancer patients who were judged to be at high risk by clinical assessment, and who were thus destined for chemotherapy, use of the 70-gene signature test (MammaPrint, Agendia) found that half (49%) of these women could skip chemotherapy.

This finding comes from the large European study called MINDACT (Microarray in Node-Negative and 1 to 3 Positive Lymph Node Disease May Avoid Chemotherapy).

In a critical group of patients at high clinical risk but at low genomic risk, as identified with MammaPrint, the use of adjuvant chemotherapy was associated with a 5-year survival rate without distant metastasis that was 1.5% higher in comparison with patients who did not receive adjuvant chemotherapy — 95.9% vs 94.4%. Corresponding rates of 5-year disease-free survival and overall survival were also higher — 2.8% and 1.4%, respectively. The study was not powered to determine significance between the groups, but the magnitude of chemotherapy benefit appeared modest in consideration of its inconvenience, risks, and costs, the researchers note.

"The study confirms that it is possible to identify patients who are not going to benefit from adjuvant chemotherapy in a significant way," said co-principal investigator of MINDACT Martine Piccart, cofounder and chair of the Breast International Group. She explained that this is important because oncologists are anxious

when they have to decide which of their patients with early-stage disease may benefit from adjuvant chemotherapy and for whom surgery and endocrine therapy is sufficient.

<http://tinyurl.com/z96ew3p>

Early indicator of oesophageal cancer risk found in Barrett's cells

Testing the genetic diversity of cells in the food pipe of people with Barrett's oesophagus could be an accurate and early way to discover their risk of developing oesophageal cancer.

Barrett's esophagus is a condition where normal cells in the food pipe (oesophagus) are replaced by an unusual type of cell typical of the condition. However, while having Barrett's oesophagus raises people's risk for oesophageal cancer, most with the condition will not get the cancer in their lifetime.

Regular monitoring with endoscopy is currently the best option to differentiate the high-risk from the low-risk Barrett's patients.

Identifying risk for oesophageal cancer early would not only mean that affected patients would get the best care earlier, but it would also reduce the need for repeated endoscopies in Barrett's patients at lower risk.

The new study takes a step in this direction because it reveals that Barrett's patients whose food pipe contains lesions with a genetically diverse cell population have a higher risk of developing oesophageal cancer.

One of the researchers, Dr. Trevor Graham from Barts Cancer Institute at QMUL, says once their results are validated in other patients over a longer period, they will be able to say with confidence which patients have the high cancer risk and which do not,



Pink Phoenix Cancer Foundation

GOLF DAY

STAND A CHANCE TO
WIN A HONDA JAZZ
VALUED AT R230 000

provided by Honda Umhlanga
and underwritten by Econorisk





DATE

Thursday, 3 November 2016

VENUE

Mount Edgecombe Country Club Course 1

FORMAT

4 ball alliance - 2 scores to count
(9 balls can be arranged for individuals/smaller groups)

ENTRANCE FEE

R2200 per 4 ball or R550 pp
(Entrance fee includes green fees and a light supper)

FOR PLAYERS OWN ACCOUNT

Halfway House - Grab & Go

Golf carts available at R200 per cart (book at pro shop 031-5621010)

The cost to participate in the hole-in-one competition to win the car is R100 and is payable at registration and applies only for the 9th hole (on Tee Shot). T's & C's apply

CONTACT: Michelle on 082 457 5737 or michelle@pinkphoenix.co.za



and can therefore be spared unnecessary endoscopy and worry. He adds:

"This will dramatically improve the quality of life for people with Barrett's, and provide substantial cost saving to healthcare providers."

For their study, Dr. Graham and colleagues followed over 300 patients with Barrett's for 3 years, over which time they analyzed over 50,000 cells in their food pipe lesions.

<http://www.medicalnewstoday.com/articles/312482.php>

Cancer clinic opened in Harare

A \$10 million cancer treatment clinic has been opened in Harare as the country seeks to find solutions to the silent killer which has affected thousands of Zimbabweans.

Oncocare Cancer Treatment Centre has equipment that can detect cancer, do chemotherapy, radiation treatment and a specialised cancer retail pharmacy to cater for the increasing number of patients who are diagnosed with the condition.

"The new facility has the ability to offer unique, state-of-the-art, multidisciplinary oncology treatment in a more comfortable and convenient setting so as to deliver personalised cancer therapies.

"It provides renewed hope to the more than 7 000 patients in Zimbabwe diagnosed with cancer annually," Oncocare chief executive officer Ben Deda said.

Due to high costs related to cancer treatment, many Zimbabweans often fly out of the country for treatment to countries such as India and South Africa but, Deda said, this should be a thing of the past as the newly-established clinic would offer the services at affordable prices.

<http://tinyurl.com/zqvx76j>

Immunotherapy approved for head and neck cancer

The US Food and Drug Administration recently added an indication for the immunotherapy drug, Keytruda, for patients with recurrent or metastatic head and neck squamous cell carcinoma (HNSCC) with disease progression on or after platinum-containing chemotherapy. Keytruda is also indicated to treat certain types of metastatic non-small cell lung cancer and unresectable or metastatic melanoma.

A protein could become the next big sweetener

High-fructose corn syrup and sugar are on the outs with calorie-wary consumers. As a result, low- and no-calorie alternatives have become popular, and soon, there could be another option that tastes more sugar-like than other substitutes. Scientists report in ACS' Journal of Agricultural and Food Chemistry a step toward commercial production of a fruit protein called brazzein that is far sweeter than sugar - and has fewer calories.

Brazzein first attracted attention as a potential sugar substitute years ago. Making it in large amounts, however, has been challenging. Purifying it from the West African fruit that produces it naturally would be difficult on a commercial scale, and efforts to engineer microorganisms to make the protein have so far yielded a not-so-sweet version in low quantities. Kwang-Hoon Kong and colleagues are working on a new approach using yeast to churn out brazzein.

CanSurvive

CANCER SUPPORT

Head and Neck Support Group

The CanSurvive Head and Neck Support Group is for anyone who has had trauma to the head or neck – not only cancer related – although that applies to the vast majority. The Group is for patients who are just starting this journey, as well as those who are many years down the treatment and recovery road.

The objective is to provide information, share experiences, and help with coping mechanisms. It is run FOR the patients BY the patients. There is always a medical member of the Morningside Head and Neck Oncology Team present. Partners are encouraged to attend the meetings as well.

The informal and supportive meetings are usually held on the first Thursday of each month at Rehab Matters, 1 De la Rey Rd. Rivonia from 18h00 to 20h00. The next meeting will be on Thursday 8 September. There is also a Facebook group: South African Head and Neck Support Group

For more information, contact Kim Lucas, on 082 880 1218 or e-mail: lct@global.co.za.

Working with *Kluyveromyces lactis*, the researchers coaxed the yeast to overproduce two proteins that are essential for assembling brazzein. By doing so, the team made 2.6 times more brazzein than they had before with the same organism. A panel of tasters found that the protein produced by this approach was more than 2,000 times sweeter than sugar.

<http://www.medicalnewstoday.com/releases/312409.php>

New surgical option for breast cancer comes to the US

Breast cancer patients in the US will have a new surgical option that eliminates exposure to radioactive materials and offers a less invasive, more flexible alternative for cancer detection. Receiving FDA approval in April and a distribution deal this month, the new device will be used to locate early stage tumours that cannot yet be felt.

Co-invented by University of Houston physicist Audrius Brazdeikis and his collaborators at the University College of London, the Sentimag technology platform is a magnetic surgical guidance probe used with nanoparticle tracers and other magnetic devices to more safely and easily determine the spread of cancer. Its first introduction commercially in the US will be its use with an implantable magnetic lesion marker, called Magseed, that easily guides surgeons to cancerous lesions. The Sentimag+Magseed combination serves as a replacement for procedures involving surgical wire needles and radioactive seeds, which are the two standards of care currently in practice for finding a breast tumour in advance of a lumpectomy.

As breast cancer screening programs have advanced, tumours are now detected much earlier, so they are smaller, less defined and harder to feel. In fact, 50 percent of all breast tumours cannot be felt at diagnosis. Since these small tumours are often impalpable, they are difficult for surgeons to locate during a lumpectomy.

"Magseed is designed to guide surgeons using Sentimag to locate impalpable tumours for biopsy and has many advantages over wire

and radioactive seed localization," Brazdeikis said. "Radiologists can place the Magseed magnetic markers up to 30 days in advance of surgery using X-ray or ultrasound guidance. This offers scheduling flexibility for surgeons and radiologists, as well as for patients, compared to wire-guided localization."

Prior to its approval for use in the U.S., Sentimag received its European conformity (CE) mark in 2010 for use in Europe and has been used in more than 14,000 breast cancer procedures across Europe with another Endomag product, the Sienna magnetic nanoparticle tracer.

<http://tinyurl.com/zgclxjl>

How melanoma spreads to other organs in the body

In a landmark discovery, researchers at Tel Aviv University have unraveled the metastatic mechanism of melanoma, the most aggressive of all skin cancers.

According to a paper published recently in the journal *Nature Cell Biology*, the scientists discovered that before spreading to other organs, a melanoma tumour sends out tiny vesicles containing molecules of microRNA. These induce morphological changes in the dermis in preparation for receiving and transporting the cancer cells. The researchers also found chemical substances that can stop the process and are therefore promising drug candidates.

"The threat of melanoma is not in the initial tumour that appears on the skin, but rather in its metastasis — in the tumour cells sent off to colonise in vital organs like the brain, lungs, liver and bones," said research leader Dr. Carmit Levy of the Department of Human Molecular Genetics and Biochemistry at TAU's Sackler School of Medicine. "We have discovered how the cancer spreads to distant organs and found ways to stop the process before the metastatic stage."

The researchers began by examining pathology samples taken from melanoma patients before the invasive stage.

"To our surprise we found changes in the morphology of the dermis — the inner layer of the skin — that had never before been reported," said Levy. "Our next task was to find out what these changes were, and how they related to melanoma." The group was able to discover and block a central mechanism in the metastasis of melanoma.

<http://www.israel21c.org/breakthrough-israeli-study-may-lead-to-melanoma-cure/>

Can taking ginger for nausea reduce or eliminate nausea caused by chemotherapy?

There is evidence that when taken with standard anti-nausea medications, ginger may be helpful in further reducing or eliminating

Courage does not always roar. Sometimes it is a quiet voice at the end of the day saying "I will try again tomorrow".

- Mary Anne Radmacher

nausea and vomiting during and after chemotherapy treatments.

Results from two studies of adults who took ginger for nausea showed that various doses of ginger before starting chemotherapy treatments helped to reduce the severity of nausea. In these studies, participants began taking ginger orally three days prior to starting chemotherapy. The ginger was taken in addition to a standard medication prescribed to reduce nausea and vomiting. A small number of participants reported side effects including heartburn, bruising, flushing and rash.

In another study, taking ginger root powder was found to be effective in reducing the severity of chemotherapy-induced nausea in children and young adults ages 8 to 21. Ginger in this study was also given along with standard anti-nausea medications.

<http://tinyurl.com/ks85cch>

Prostate cancer treatment breakthrough

Deakin University medical scientists claim to have made a breakthrough in prostate cancer treatment, by piggy backing a chemotherapy drug onto a well-known milk protein to create a combination that is lethal for cancer cells without the toxic side-effects.

They found that, when coupled with the milk protein lactoferrin, the chemotherapy drug Doxorubicin (Dox) can be delivered directly into the nucleus of prostate cancer cells and will kill them cells as well as drug resistant cancer stem cells, without any side-effects.

Dr Rupinder Kanwar, a senior research fellow with the Deakin Medical School's Centre for Molecular and Medical Research, explained that doctors had stopped using Dox to treat prostate cancer because of the side-effects.

However the results of this new research suggest that it may soon be possible to reintroduce Dox coupled lactoferrin to the treatment regime – and make it even more effective than before.

"Dox is used widely for treating several types of cancers and known for causing toxicity to heart, brain, kidneys and leading to cardiac arrest/heart failure," Dr Kanwar said.

"Prostate cancer is one of the few cancers where chemotherapy is not the primary treatment. This is because these particular cancer cells are able to flush out the drug and become resistant to it, while the administered Dox continues to kill off the body's normal cells resulting in a range of side effects, the most damaging of which is heart failure.

"With this latest study we have shown that by coupling Dox with lactoferrin the cancer cells take in the drug rather than pump it straight out."

Lactoferrin is an iron-binding protein found in cow milk and human milk. It is known for its immune boosting and antimicrobial properties making it an important part of the body's protection against infection. It is also added as a key ingredient in baby formula.

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