

# HOPE & HEALING

NORTHSIDE **CANCER INSTITUTE** 

**BUILT TO BEAT CANCER** 

A guide to helping survivors navigate through their journey

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Winter 2022 Issue

Northside Hospital Cancer Institute Call Center: 404.531.4444



## Oncofertility Emerges as a New **Specialty in Survivor Care**

By: Emily M. Beard, RN, OCN®, CBCN®

A growing area of survivorship cancer care focuses on helping people who currently have or had cancer understand and prepare for some of the possible late effects and long-term complications of their treatment, including loss of fertility.

For example, chemotherapy agents target cells throughout the body that are rapidly dividing, hence all cells in this phase of the cell cycle can be affected. For females, this can include damage to or a reduction in the overall number of oocytes (eggs) and for males, it can impact their sperm.

Because of the potential impact on fertility, it is important for survivors to understand their options for family planning. In 2006, the American Society of Clinical Oncology issued fertility preservation recommendations: "as part of education and informed consent before cancer therapy, oncologists should address the possibility of infertility with patients treated during their reproductive years and

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be prepared to discuss possible fertility preservation options or refer patients to reproductive specialists." Due to this need, "oncofertility" emerged as a specialty within cancer care, a collaborative medical approach between oncologists and fertility specialists.



After diagnosis, when a patient receives their recommended treatment plan, the impact of the plan on the patient's fertility is assessed and discussed with the patient. If the patient is interested in options for fertility preservation, they are referred to a fertility specialist right away. The process of fertility preservation depends on various factors and procedures. For females, the process of egg retrieval involves a minor outpatient procedure, but can take anywhere from 10 days to several weeks due to the timing of the menstrual cycle, and depends on whether the patient wishes to preserve their eggs alone or freeze embryos (eggs

fertilized with a male partner's sperm). For males, the process of sperm collection and freezing is much more straightforward and can be accomplished quickly, usually in a few days.

Often and for many reasons, fertility discussions are not prioritized during treatment planning. Given the urgency of treating cancer, oncologists may rush to get chemotherapy started and in doing so, may not recognize the importance of addressing the patient's fertility needs and desires.

Aside from timing, cost is another barrier for many patients and families. The process of fertility preservation is costly, and while there are some financial assistance and grant programs available, it is often not enough. There are other family planning options for patients who do not have the opportunity to complete fertility preservation prior to the start of treatment, including IVF with donor embryos, adoption and the use of a gestational carrier. Oncology nurses and patient navigators are good resources for patients who want more information on fertility preservation and family planning options before and after treatment.

Resources: American Cancer Society; Livestrong; Team Maggie's Dream





## **ASK AN EXPERT**



# What is the Impact of Smoking Cessation on Treatment and Survivorship?

By: Abubakr Chaudhry MD

Is there a benefit to quitting smoking if I have already had a cancer diagnosis or is it too late?

It is never too late to quit. In fact, there are significant benefits to quitting smoking:

- Blood pressure lowers just one hour from quitting.
- Smell and taste sensations improve after a day.
- Lung function begins to improve within a month.
- Blood circulation to the lungs normalizes after three months.
- Cilia, which are a key factor in preventing respiratory infections, heal within nine months.

Prevention of infection is critically important for those with a cancer diagnosis. After one year, the risk of heart disease is cut in half. The longer a survivor is smoke-free, the lower their chances are of suffering from recurrent cancer and cancers of other systems, such as the mouth and bladder. Some smokers with lung cancer suffer from comorbid conditions, such as heart disease and chronic obstructive pulmonary disease (COPD). We know that anywhere from 15-40% of people who have smoked will develop COPD.<sup>1</sup>

In a study of patients with mild to moderate COPD, tobacco cessation reduced disease progression and risk of hospitalization as well as mortality.<sup>2,3</sup> Another study demonstrated a significantly lower risk of acute myocardial infarction or "heart attack" in those who stopped smoking.<sup>4</sup> Moreover, patients who suffer heart attacks and then choose to stop smoking have reduced risk of hospitalization and death from congestive heart failure.<sup>5</sup>

Even for patients who have already been diagnosed with lung cancer, there is reduced risk of death in those who stopped smoking after dignosis compared to those who continued to use tobacco.<sup>6</sup>

The life-saving benefits of quitting smoking continue even after receiving a cancer diagnosis. Smokers who quit have a better quality of life and improved chances of long-term survival.

### How will quitting smoking impact my treatment?

Smoking cessation is essential once there is a diagnosis of lung cancer. The toxins from cigarettes

continue to affect the cells in the lung leading to abnormal growth and could be a direct hindrance to achieving remission.



# Will quitting smoking lower my chances of lung cancer recurrence?

Yes! Not only does smoking cessation reduce recurrence, but it also reduces the risk of developing additional smoking-related cancers. The benefits of smoking cessation also translate into reduction of cancer progression in those diagnosed with early-stage cancer.<sup>7</sup>

# What is the recommended first step for someone who wants to guit smoking but is having trouble?

Just the thought of quitting smoking is an important first step. Once the decision is made, the next step is to find support. Quitting smoking is hard and there is a better chance of success if a loved one or sponsor helps keep accountability. The Built to Quit smoking and tobacco cessation program at Northside Hospital is available to provide support every step of the way. For my patients, I also recommend a book called *The Power of Habit* by Charles Duhigg.

# What resources are available at Northside Hospital Cancer Institute for someone wanting to quit smoking?

Northside Hospital has a fantastic team of individuals focused on helping patients and community members quit smoking, vaping and using other forms of tobacco. For more information, please call 404.780.7653, <a href="mailto:emailt

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### **BOOST YOUR HEALTH & WELLNESS**



### Are Plant-Based Meat Alternatives a Healthy Alternative to Meat?

By: Katie Dart, RDN, CSO, LD

The American Institute for Cancer Research (AICR) recommends limiting

intake of red meat to no more than 12-18 ounces per week and avoiding processed meats, including bacon and sausage, to reduce the risk of cancer, particularly colon cancer. The World Health Organization classifies processed meat as a carcinogen and red meat as a probable carcinogen. Along with reducing the risk of cancer, replacing animal protein with plant protein may also reduce the risk of other chronic diseases, such as heart disease and diabetes.

Because of this, many people are looking to plantbased meat alternatives as an option to reduce their intake of animal protein. There has been a huge increase in the number of plant-based alternatives for beef, pork, chicken and fish available at grocery stores and restaurants. A growing number of meat eaters are trying these products, often for health and environmental reasons.

Historically, plant-based meat alternatives were targeted to vegetarians and vegans and were whole foods, such as tofu, tempeh, legumes, portabella mushrooms and jackfruit. Newer plant-based products are processed and created to look and taste like meat, and these products are marketed to meat lovers. The newer plant-based products may use isolated plant proteins such as soy, pea and wheat. Other added components may include oils, beets or other juice extracts, methylcellulose and soy leghemoglobin (heme iron from soybean root) to add meat-like texture, flavor and color.

Compared to meat, most plant-based meat alternatives are similar in calories, protein and saturated fat (from added coconut or palm oil). They are higher in fiber, lower in



cholesterol and trans-fat than animal protein, but are often higher in sodium, and many do not contain vitamin B12, an essential nutrient. Plant-based products have a different amino acid profile than animal protein, which may be beneficial for health.

It is important to be aware of potential allergens in plant-based meat alternatives. Some products contain wheat, eggs, peas and legumes (potential for allergy if allergic to peanuts). A product called Quorn™ is made with mycoprotein (mold, member of the fungi family, per package label), which could also cause an allergic reaction.

Additionally, carefully consider the items being substituted with the plant-based product. For example, if replacing ground beef with a plant-based ground meat substitute in chili, the plant-based product may be a better option. But if replacing kidney beans with plant-based ground meat substitute in chili, opt for the beans instead.

Including plant-based meat alternatives can fit into a healthful diet, in moderation. Choose whole foods over processed foods as often as possible and aim for a diverse plant-based diet. The AICR recommends eating a plant-based diet including vegetables, fruits, whole grains, legumes, nuts and seeds to reduce risk of cancer and recurrence.

Reference: aicr.org/cancer-prevention

### Recipe Corner: Black Bean Burgers (4 servings)\*

Ingredients:

1 (15 ounces) can of black beans, drained and rinsed ½ small red onion, chopped

2 large eggs

1 small jalapeño, deseeded and chopped

¼ cup frozen corn, thawed

¼ cup breadcrumbs

3 tablespoons chopped cilantro

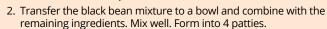
½ teaspoon ground cumin

1/4 teaspoon cayenne, or to taste

2 tablespoons olive oil

Directions:

 Combine the black beans, red onion and eggs in a food processor. Blend until you have a chunky hummus texture, leaving some large or whole black bean pieces.



- 3. Heat 2 tablespoons of olive oil in a skillet over medium-high heat. Drop the patties into the pan, do this in batches if needed, so as not to crowd the pan. Cook for 5 minutes, then carefully flip and cook for another 5-7 minutes, or until golden and cooked through.
- 4. Serve immediately on a bun with smashed avocado, tomato and lettuce.



Nutrition Facts: Calories: 232; Fat: 10 grams; Saturated Fat: 2 grams; Polyunsaturated Fat: 2 grams; Monounsaturated Fat: 6 grams; Carbohydrates: 26 grams; Sugar: 2 grams; Fiber: 8 grams; Protein: 11 grams; Sodium: 233 milligrams

\*Recipe from: Cook for Your Life





### The Importance of Skin Care in the Survivor Population

By: Patty Balmes PT, CLT

The largest organ in the body is the skin, and it can be greatly affected by various

cancer treatments. Whether treatment consists of chemotherapy, radiation therapy, targeted therapy or immunotherapy, each can result in changes to the skin, which can be cumulative in nature.

Cancer treatments have made many advancements over time; however, there are still side effects associated with nearly all treatments. Some of the more common side effects include:

- Rash
- Rough, dry skin
- Skin that feels itchy, burning or tight
- Cracked skin
- Hair loss
- Reddening or other discolored patches of skin
- Painful skin
- Blistered skin
- Skin sensitivity to sunlight
- Inflammation around the nails



This list can seem daunting because many of the side effects can impact an individual's quality of life; however, with education, there are ways to

significantly improve the management of symptoms. Always report any adverse reactions to treatment as soon as possible. Many of the side effects above can be remedied with prescription creams or other oral medications. Additionally, some side effects can be managed by over-the-counter creams, lotions, make-up or other ointments.

Skin care (including cleansing, hydrating, and protecting) is very important during and after treatment. Below are some skin care tips:

### **CLEANSE**

- Use mild, unscented soaps that are pH-neutral and safe for daily use.
- Take short showers or baths in lukewarm or cool water rather than long, hot showers.
- Use a clean, soft towel to gently pat skin dry.

#### **HYDRATE**

- Use a fragrance-free, hypoallergenic, non-comedogenic moisturizing cream within 5 minutes of showering or bathing (examples include Aveeno®, CeraVe®, Cetaphil® and Eucerin®).
- Avoid use of any anti-acne skin products as they can dry out skin.
- Drink 2-3 quarts of water, or other fluids, each day unless directed by a physician or nurse to limit fluid intake.

#### PROTECT

- Use sunscreen and lip balm with an SPF of at least 15.
- · Wear a broad-brimmed hat and sun-protective clothing when outdoors.
- Limit direct sunlight between 10 a.m. and 4 p.m.



The skin is the body's best defense against infection. The side effects of treatment can directly affect the skin barrier function and cause immunosuppression, putting survivors at a higher risk of infection. Therefore, it is very important to understand the signs and symptoms of infection and report any concerns to a physician or nurse right away.

### Signs and symptoms of infection include:

- Fever
- Redness (particularly if it spreads or forms a red streak)
- Swelling

- Warmth
- Pain
- Drainage
- Foul odor

If a cut or abrasion is sustained during treatment, make sure to clean the area well and cover it with a clean bandage. Monitor the area for any signs of infection. In the event that a wound develops and requires help in healing, outpatient physical therapy is available to assist with wound care. Northside Hospital wound care physical therapists can evaluate the wound and develop a treatment plan. Treatment can consist of wound cleansing, debridement of non-healing tissue and application of appropriate dressings to promote wound healing.

Together with the Northside care team, survivors can manage many of the skin-related side effects of cancer treatment. Skin care regimen adjustments and learning different makeup applications are two of the many ways survivors can feel more comfortable with their appearance during treatment.

Northside Rehabilitation Services is here to provide support to survivors. Click <a href="https://example.com/here">here</a> to learn more about oncology rehabilitation services (including virtual visits) offered at Northside. A physician referral is required for therapy services. If you have a question or want to schedule an in-person or virtual appointment, please contact our scheduling team at 404.236.8030.





## **STORIES OF HOPE & HEALING\***

### **Survivor Story: Meet Sharon**



# What are the events that led to your cancer diagnosis?

In June of 2020, I had a blood work appointment with Dr. Gena Volas-Redd at Georgia Cancer Specialists (GCS). I had breast cancer in 2016 (and ovarian

cancer in 1992), so every six months I was going in to complete blood work. My tumor marker was out of the normal range, so Dr. Volas-Redd suggested a chest X-ray. Findings showed an abnormality that could be due to scar tissue from pneumonia (or possibly from COVID-19), stress or cancer. I had never had pneumonia, and my rapid COVID-19 test results came back negative. Dr. Volas-Redd recommended additional scans, which led to my diagnosis of another type of breast cancer in a different area (not a reccurrence, but a different type of breast cancer in the same breast). There were also two tumors in the back of my lungs, and fortunately both were early stage.

### What treatment did you receive?

I had the upper lobe of my right lung removed by Dr. Andrew Helms at Northside Cherokee Thoracic Surgery. We decided on October 5th as the date of my surgery because I had good luck with that date in 1992 when I was rushed to the hospital for what turned out to be a hemorrhaging ovarian tumor. Surgery was performed and the diagnosis was germ cell ovarian cancer.

When visiting Dr. Volas-Redd to discuss my next surgery, a double mastectomy, I asked her to look at my left breast, which had two red bumps. She recommended a biopsy with rushed results. The results showed inflammatory breast disease (IBD), and it was aggressive. This meant that my breast cancer was also attacking my dermis. I was advised to begin chemotherapy immediately. I wanted to avoid chemotherapy based on my 1992 experience receiving BEP protocol (bleomycin, etoposide & platinum), but I was assured that things were different. I was devastated because I was planning on a double mastectomy, but my daughter convinced me to receive chemotherapy based on what she read about IBD.

During November and December of 2020, I received four rounds of chemotherapy and in January of 2021, I completed 12 rounds of taxol and carboplatin. I lost my hair, eyebrows and eyelashes. In May of 2021,

Dr. Paulomi Shroff removed my left breast rather than a double mastectomy. This option gave me more time to figure out what I wanted to do as far as reconstructive surgery. Dr. Volas-Redd recommended targeted



therapy to avoid the recurrence of my lung cancer, and Dr. Shroff recommended radiation to avoid recurrence of my breast cancer. Dr. Volas-Redd discussed my case at a tumor board, and I also consulted with another oncologist. I decided to move forward with the targeted therapy and radiation therapy. A positive emission tomography (PET) scan in May of this year revealed no evidence of disease!

# How and where did you receive support during your treatment and recovery?

I received amazing support from Cancer Support Community (CSC) Atlanta, who were recommended by Michael Rodriguez, my social worker at GCS. I had been fine during my treatments, but then I hit a wall with chemotherapy, and I just began to cry. Michael talked to me about CSC and provided information. In March of 2021, I joined, and I am so glad that I did! I participated in lung and breast cancer support groups that helped so much. Some of the women had been through what I was going through and had some great pointers. I have participated in several of the exercise classes offered, as well as the art therapy classes and cooking demonstrations. It was so nice to have so many options available (through Zoom) especially during COVID.

I also received amazing support from my husband, daughter and three sisters. Even though my sisters and I live in different states, we had virtual get-togethers every two weeks, which was very important to me and offered great support.

# What advice do you have for someone navigating their treatment and recovery journey?

- Do your due diligence, ask questions and do research.
- Come to your doctor's appointments with questions prepared.
- Review your information and chart online after your appointments to ensure accuracy (especially with medications, etc.).

(continued on page 6)



### **Survivor Story: Meet Sharon** (continued from page 5)

- Ask about resources offered, such as a nurse navigator or peer buddy/mentor. When I received my initial diagnosis back in 1992, the adjunct support services were not available, and I can tell you firsthand that they 100% make a difference.
- Feel empowered to ask questions and trust your gut instincts. It is important to establish a partnership with your medical team and feel comfortable asking the crucial questions.

# How far out are you from treatment or is treatment ongoing?

My chemotherapy, radiation and mastectomy are all finished. I will have a PET scan soon to ensure that

everything looks good. To avoid recurrence of lung cancer, I will start a new targeted therapy medication in 2022.

### **Closing Thoughts**

Whole body wellness involves MEBS (mind/emotions/body/spirit) working in tandem. To get through it is to grow through it. I want to offer hope and

resilience for people. I hope that my openness and transparency has helped people better understand the cancer journey. We are all in this together. We are all on this planet so that we can help each other go along this journey together.

<sup>\*</sup>Patients' stories are based on individual experiences. The process from diagnosis through treatment may vary as well as symptoms, side effects and provider recommendations.



### **COMMUNITY SUPPORT & RESOURCES**



## Finding Support in the New Year

By: Christy Andrews

The start of a new year brings reflection and hope for the best in the months

ahead. It can also be a time to set new goals and resolutions. Cancer Support Community (CSC) Atlanta can be a valuable resource for survivors and their families yearning to make self-care a priority in 2022. In order to increase the chance for success with resolutions, the licensed professionals at CSC Atlanta encourage starting slow and setting reasonable goals.

According to licensed yoga and exercise instructor Bev Stegman, goals can be as simple as sitting less and moving more:

"Move all joints through your pain free range of motion daily. Circle your ankles and wrists; spread your fingers, spread your toes, circle your arms and hips and bend your knees," she adds. "And take a walk, no matter how far!"

Along with an increase in movement, pivoting to a healthier approach with food and nutrition can also make a difference. Kristin Cuculovski, outpatient oncology coordinator for clinical nutrition at Northside Hospital Cancer Institute, encourages basic approaches as well.

"To help lower cancer risk or to reduce risk of recurrence, focus on things that are within



a healthy body weight, eating nutritious food and being active. Choose mostly whole foods such as fruits, vegetables and whole grains and eat a variety of brightly colored or strong-flavored vegetables and fruits. A plant-based diet may help reduce the risk of cancer, heart disease and other chronic illnesses," says Cuculovksi.

CSC Atlanta programs offer the opportunity to interact with licensed instructors like Bev and Kristin every day. The organization provides a variety of programs and classes to help support survivors and their loved ones throughout their journeys (including after treatment). There is truly something for everyone at CSC Atlanta. All of the programs and classes are free of charge and offered at convenient times throughout the day.

Currently, all classes are offered virtually so that they are available to everyone, regardless of location. In addition to live offerings, the CSC Atlanta website is home to a vast library of recorded programs including educational programs led by respected members of the Northside team, as well as cooking demonstrations, nutrition seminars, stress reduction and gentle exercise classes. To learn more and sign up for weekly newsletters, click <a href="https://exercises.norm.newsletters">here</a>.





### **GET INVOLVED**

### Spotlight on Network of Hope Volunteer Shelli

Why did you decide to get involved with Network of Hope (NoH)?

In June of 2020, I was diagnosed with stage III colon cancer. I was 49 years old with no family history of cancer and no health concerns. It was pretty frightening to say the least, and on top of all that, we were in the midst of a global pandemic. I was not allowed to have any support during my surgery or treatment. In fact, the only time my husband was allowed to come with me was when I was told I had cancer. When I received the binder from Northside Hospital and saw the information about NoH, I realized I needed support (I did not have any family members or friends who had any experience with colon cancer), and I called the number.

When I called NoH, I was told that there was not a mentor in Atlanta or in the Northside system with colon cancer, but I spoke to Kymberly Duncan, the survivorship coordinator at the Northside Hospital Cancer Institute, and told her about my situation. She ended up connecting me with an amazing woman in Texas named Laurie Kay. Laurie is a mom and working full-time, just like me. The support she gave me and the partnership we built was invaluable. Also, the fact that Kymberly went outside of the network for me, to meet my needs was so amazing! I still talk to Laurie all the time. She really helped me through my journey. She was instrumental in simple, everyday advice and emotional support.

# How long have you been involved, and what is your role?

The minute I finished chemotherapy (Christmas Day 2020), I called NoH to volunteer my services. I was

asked to wait six months, which I did, and now I am a mentor. I have participated in several of the Zoom calls and completed my first day of in-person volunteering at the annual golf tournament. It was amazing to meet people and be able to interact with them face-to-face.

# Please share how NoH has had an impact on your life.

I never realized how important connection was until last year. We as humans need that support from each other, and we need to be aware of it and acknowledge it. Because of the pandemic, I could not have family and friends come to treatments with me, so I connected with my nurse, Ellie. I requested her for everything, and I am so glad that I did.

Also, do not be afraid to ask for help. I never thought that I needed help because I had always managed things on my own before my diagnosis. I soon realized that I could not manage this on my own, and I am so glad that I asked for support.

# What would you say to someone who is thinking of getting involved with NoH?

I highly recommend it! It is such an amazing thing to give back the support you received.

### Is there anything else you would like to share?

When women support each other, incredible things happen. I think that as moms and busy women in general – we are afraid to reach out for help. Just don't be afraid to ask.

Click <u>here</u> to learn more about how to get involved with Network of Hope.

Do you have a question you would like answered by an expert or a story to share in a future issue of Hope & Healing? If so, please send your questions or stories to <a href="mailto:survivornewsletter@northside.com">survivornewsletter@northside.com</a>.

### **Upcoming Cancer Awareness Months**

January: Cervical Cancer

**February:** Gallbladder/Bile Duct Cancer and National Cancer Prevention Month

March: Colorectal Cancer, Kidney Cancer and Multiple Myeloma





## **EVENTS & CANCER CELEBRATIONS**

### **CANCER SCREENING & PREVENTION**

### **Prostate Cancer Screenings**

January 20, 2022 @ Northside Hospital Cancer Institute Radiation Oncology – Midtown from 5:30-8 p.m. February 17, 2022 @ Northside Hospital Cancer Institute Radiation Oncology - Forsyth from 5:30-8 p.m.

### **Skin Cancer Screening**

March 17, 2022 @ Northside Hospital Cancer Institute Radiation Oncology – Midtown from 6-8 p.m.

### **Built to Quit - Smoking and Tobacco Cessation Course**

Next 6-week session start date: March 1, 2022

Weekly classes include the American Lung Association Freedom from Smoking curriculum and are currently web-based. They are conducted primarily in a group setting, which encourages participants to learn from each other.



### **Georgia's 5th Annual Cervical Cancer Awareness Day - Virtual**

January 20, 2022 @ noon

Speakers will included this year's Georgia HPV Champions, cervical cancer survivors and advocates. Please remember to wear teal! Click here to register for the event.



### **EDUCATIONAL EVENTS -**

### **Nutrition Seminar: Nutrition and Bone Health** January 18, 2022, from noon-1 p.m.

**Frankly Speaking About Metastatic Breast Cancer** 

# January 28, 2022, from noon-1 p.m.

### **Cancer Transitions: Moving Beyond Treatment**

Session start date: February 3, 2022, from 9-10:30 a.m.

Free, 90-minute, four-week program designed to help cancer survivors make the transition from active treatment to post-treatment care.

Click **here** to register in advance with Emily Brown at Cancer Support Community for this virtual program.

### Atlanta Multiple Myeloma Symposium (AMMS)

March 5, 2022, from 1:30-4:15 p.m. @ the InterContinental The program is geared toward patients and includes a presentation from survivor, Keith Guernsey.







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