

# Survivor Strong: Healthy Living During and After Cancer

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Presented by:



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## I. Introduction

June Mandeville-Kamins:

Good evening, everyone. I want to welcome all of you to Sharsheret's national webinar, Survivor Strong: Healthy living during and after cancer. We are delighted that you've joined us tonight and that so many states are represented. My name is June Mandeville-Kamins and I'm a licensed clinical social worker and the Senior Support Program Coordinator for Sharsheret. I'm thrilled to be here moderating tonight's webinar.

We would like to thank Amgen Oncology, the Sigmund and Edith Blumenthal Memorial Fund, and the Cooperative Agreement DP14-1408 from the Centers For Disease Control and Prevention for their ongoing support and for sponsoring tonight's program. We would also like to thank our partners in collaboration, BreastCancer.org, Beller Nutrition, the Dr. Susan Love Research Foundation, Living Beyond Breast Cancer, and the Young Survivor Coalition for their ongoing partnership.

Sharsheret supports young Jewish women and families facing breast and ovarian cancer at every stage. We help you connect to our community, whatever your personal background, stage of life, genetic risk, diagnosis, or treatment.

Healthy living is something we hear about all the time. The news and social media are flooded with information about the latest diets, the latest guidelines on exercise and its benefits, the need to maintain good bone health, the need to de-stress and become more mindful, and of course the dangers of smoking and alcohol on our health. It's really hard to know which way to turn when trying to live a healthy life, particularly in our community, which is hard hit by cancer, especially hereditary and familial cancer. When you add a cancer diagnosis, then healthy living and exercise become even more complicated. Earlier this month, there was some new research from the Australian Clinical Oncology Society, which came out with the idea that all cancer patients will benefit from an exercise prescription, and recommended exercising throughout chemo and other treatments, under the advice of a doctor, of course.

We hear questions from our callers like, "Will my treatments leave me so fatigued and nauseous I can barely move?" Or, "How do I have good nutrition when chemo leaves me without an appetite?" Or, "How can I keep to my nutrition plan when celebrating with family and friends at holiday meals?" This webinar is designed to answer some of those questions, and to help you move towards living a more healthy life during and after a cancer diagnosis.

With healthy living for survivors in mind, Sharsheret offers a customized Thriving Again Survivorship Kit, designed to help you navigate your journey as a breast and ovarian cancer survivor. Each kit includes a care

plan, information on health and nutrition, genetics, bone health, and psychosocial support, as well as a pedometer. You can further customize your kit by selecting a free healthy living cookbook, as well as printed resources. To order your customized kit, go to our website at [Sharsheret.org](http://Sharsheret.org), or you can call us at 866-474-2774, and ask to speak to a member of our Support Team.

One last thing before I introduce our speakers for the evening. You can ask questions throughout the webinar by typing in the question box on your dashboard on the right hand side of the screen. Please keep your questions broad in nature so that everyone on the call can benefit from the discussion. We will try to get to as many questions as we can after the presentation. Those of you who are not joining us via computer, please know that you can call Sharsheret at any time with your questions and we will be happy to discuss them with you.

It is now my pleasure to introduce our first speaker, Rachel Beller. Rachel is the CEO of Beller Nutritional Institute, and a spokesperson for the American Cancer Society. She's a two-time bestselling author, media expert, and a renowned authority for breast cancer nutrition. Rachel has conducted research on the role of nutrition in breast cancer prevention at Cedars-Sinai Medical Center, as well as the John Wayne Cancer Institute at Providence St. John's Health Center for over a decade. Recently, Rachel created two online programs, Power Perks RX, and Power Perks Thrive, that provide evidence-based nutritional support for women during and after breast cancer treatment. Rachel also launched Power Pantry, a spice line that offers specially formulated blends to support health and cancer prevention. I will now turn the floor over to you, Rachel.

## **II. Healthy Living: Nutrition**

Rachel Beller: Hi, and thank you so much for the wonderful introduction. It's such a pleasure to be here this evening with all of you, and today I'm going to talk about 10 nutrition commandments that you can control to help fight cancer. We all make choices about what we choose to eat, and what we choose to eat can help us. It's not a cure, but it can definitely support us during cancer and treatment.

Having said that, nutrition isn't the only answer, but it could be part of a big picture. It's also important to note that there's no single food or diet that prevents or cures cancer, but the right nutrition helps us power our immune system. Of course, it may help us feel better, and it could also help prevent cancer or its recurrence.

Something very exciting happened last week, in that the American Institute for Cancer Research just published their third global report, and it's very exciting, because this is going to be the new standard of excellence for public health recommendations for those who wish to reduce their cancer risk, or live well after a cancer diagnosis. They took

about 500 plus renowned cancer researchers to analyze nutrition, diet, and physical activity and its role for cancer prevention, or its recurrence.

I've created my 10 nutrition commandments for optimal health, and looking at these commandments, you may notice that they seem pretty typical and standard. Something that you've heard before. For example, staying fit. Fiber up, for example. If I were to ask a room full of women, 500 women let's say, "How many of you know that fiber is good for you, is good for your health?" I'd say nearly everyone would raise their hand. But the reality is that only 3% of Americans meet the recommended intake for fiber. This is something important, and I think it's important to know, to really dive into each one of these commandments, which were inspired by the American Institute for Cancer Research, to really see if we're meeting these, because these are what I call the foundation. These are the building blocks, as if you were building a strong house. In California, here, it would be encouraged to be earthquake-proof. With all its infrastructures, you really have to put your mindset into the details. It's important.

Even something as simple as "Veg Out." Let's think beyond hearing your mom's voice buzzing in your ear about eating more veggies for optimal health and cancer prevention, but take it a step further. We including some powerful antioxidants from things like broccoli sprouts, which yield a great benefit in that one tablespoon has the sulforaphane, the active cancer-fighting compound, as a pound of mature broccoli. Watercress is ranked by the CDC as the number one antioxidant for antioxidant value. Nori seaweed sheets; incredible for breast health. There's new research on that as well, and the beautiful thing is that these are all very simple. They're very inexpensive. They're very doable, and one by one, each of these commandments, as simple as they seem, have a lot of depth. What I find is many of my patients coming through the doors of Beller Nutrition are not really meeting this with its full intentions.

What I'm going to do tonight is focus on one of these commandments, which is number 10, "Spice It Up." Tenth commandment, "Thou shall spice it up. What inspired me to create this commandment is an article I found published by the American Institute for Cancer Research in 2013, and it really showed that spices can transform the nutrient profile of a meal with just a pinch. Laboratory studies mostly, but really exciting, and they hold a lot of promise. I thought to myself, "Wow. This is so simple." Anybody can do this, and there's evidence to support that this is a really good idea for all of us to pursue. There's been an explosion of research in just the past five years. More than 1900 studies on turmeric, which you've all been hearing about. 1600 on cayenne. 1400 on garlic, clove. 750 on cinnamon. And it just goes on and on, and it's a really, really exciting area of research.

Another thing to love is that they're plant-based chemicals. They're naturally occurring from plants. Nothing made in a laboratory, but laboratory studies show that they may stimulate our immune system,

reduce inflammation, prevent DNA damage, repair our cells, and regulate hormones. Why this is so important and why we're talking about this is for its role in cancer prevention. Supporting our weight management, supporting our gut health, which we're learning more and more is so important for us. Helping prevent diabetes, anti-inflammatory properties. Adding daily power with spices really just starts with your pantry. It's something most of us probably already have in our pantries. Maybe we need to refresh, buy organic options, which are just a dollar or two more than the conventional, but well worth it. Maybe we need to renew them, but it's all very flexible, sustainable, and affordable.

One thing I saw was that there was an analysis of 3100 foods, and spices were really, ounce per ounce, provided about tenfold the antioxidants of nuts and seeds. Now, of course we all know it's easier to eat an ounce of nuts versus an ounce of nutmeg, but spices have been shown to be so potent and so powerful that even small amounts, little pinches, make a big difference, and it's all cumulative. It's really about using them consistently over time.

I'm going to give you a few examples, as you can see there. Let's say we take a cup of oatmeal, organic oatmeal. The antioxidant value is 26. Add a half teaspoon of ceylon, ceylon, true cinnamon to that, now you're jumping up to 208. Add a little few pinches of nutmeg, 256. Tenfold the antioxidant value than you started with that cup of oatmeal. Check out the sweet potato, which I commonly recommend for breakfast. Add half a teaspoon of cinnamon. Again, you're doubling. You're adding a little bit of clove, which is one of the most powerful spices out there, and you've increased the antioxidant value by 370% versus just eating that sweet potato on its own. You can see another example there with veggies. I like to roast my veggies with turmeric, a little bit of garlic, black pepper, parsley. All these spices together really enhances by 40%. My point is that these little things make a big, big difference. Next.

Spices also have been shown to help fight all types of cancer, including ovarian and breast cancer. These spices here, we found some research to support breast cancer. Ginger and rosemary, particularly for ovarian cancer. I'd like to highlight rosemary, also for breast and ovarian. Interesting one that I love is orange peel, because a lot of people tend to not use it, and it's so easy to find a bottle of granulated orange peel. It has something called limonene and histodine, which has been shown to support breast health and boost enzymes that break down carcinogens. It's really, really something that's so easy to integrate into smoothies, and a lot of breakfast foods in particular. Delicious.

Sumac, also another one many of you might be familiar with. Za'atar. Higher antioxidant activity than black pepper, red pepper, fennel, cardamom, turmeric, nutmeg. Very interesting. I absolutely am obsessed with adding this to my salads, sprinkling it on food. If you go to any Persian restaurants, they always have it on the table. That one is worth pursuing as something maybe new to add to your power pantry. Next,

also certain spices support your weight as well. Weight management. Again, these are cumulative. It's not one thing that's going to tip the scale in the favorable direction, whatever it may be, but it's fascinating to see that all of these seem to contribute.

Gut health. This is interesting. This was a study out of UCLA recently, in 2017. Black pepper, cayenne, cinnamon, ginger, oregano, rosemary extract, they basically inoculated petri dishes with these spices, and they looked at the bacterial growth. What they found is that it promoted healthy gut bacteria, which was fascinating. They also found that they inhibited bad gut bacteria. Again, interesting things that we're finding with spices and their role for our health.

Next, human studies. This was an interesting study, that took participants, gave them about half a teaspoon of herbs and spices. Rosemary, ginger, turmeric, and clove. Very powerful ones. They had another group, a control group, that were not administered any spices, and they drew blood from both of the participant groups, and measured their tumor necrosis factor. What they found is that, the study participants' blood had lower amounts of inflammation than the control participants. It's exciting. I mean, this was a seven-day study, and think about it. Think if you were doing this consistently over time. Very excited about that human trial. Blood sugar regulation, which we all have learned that is also very, very important when it comes to our health. Anti-inflammatory properties. A lot of spices are showing promise in reducing inflammation in the body.

Now I'd like to share something really, really exciting. This is what I call "spice synergy." What my team realized is that there's synergy between different spices. What we call the absorption effect, and absorption enhancers, these are combinations that boost each other's active compounds. I'll talk about that. Then there's a synergistic effect, where they have a combined effect. They're better together than they are, either one on their own. A double dose, again, spices that have similar benefits.

Here's something fun. I recommend this Spiced Cancer Kicking Quinoa to my patients, and what I'm showing you with this recipe, aside from the fact that it's so easy to make, is that notice how it has parsley, and parsley contains something called quercetin, which enhances the absorption of the active compound in turmeric, curcumin. Black pepper added to turmeric enhances the absorption of curcumin by 2000%. That's also in the recipe. Oil works in sync with turmeric. You're enhancing absorption, again, of the active compound, curcumin. Cinnamon has anti-inflammatory properties, supports breast and ovarian health, cumin and cinnamon have a combined antioxidant, anti-inflammatory effect, so this is all working together in sync, and I'm excited to share some of these very simple recipes with you.

Something else that I love making is a relaxing golden milk choco-latte. You simply take plant-based milk, and you're adding these spices, and

warming it up. All of these spices have anti-inflammatory effects. Ginger and cinnamon have a combined antioxidant, anti-inflammatory effect that also may help regulate blood sugar. Cacao and turmeric, again, cacao enhances the absorption of curcumin, so again, it's this synergy and how they work together for an enhanced effect. Next, another example of synergy. Again, combining turmeric with healthy fats enhances the bioavailability. The ability of your body to absorb these seven to eightfold. Fish and turmeric, 10 to 20 times enhanced absorption, from the essential fatty acids in the fish.

The best part is that my patients can have fun with this. You can make your own blends, and have these things together, ready for you. You could just pull it out of your pantry and shake it on your food. I'm going to share some of my favorites. A breakfast shaker. I call this the "Cinna-Peel Spicer." It has Ceylon cinnamon, granulated organic orange peel, and ginger. You can simply add these into a shaker and make this your AM shaker. The combined effect and the research-based health benefits are that Ceylon cinnamon is great as a digestive aid. It may help regulate blood sugar, supports breast health. Ginger, another anti-inflammatory. More anti-inflammatory properties. Orange peel, breast health support. Very soothing on your stomach, may help control blood sugar. It's this combined effect that we're going for.

Next is my "Vegitude Shaker." I like to just nickname this a breast health blend, in that it has garlic, all of these spices. I won't go into all the details because of time, but garlic, turmeric, black pepper, onion, parsley, all working in sync, and it's just a nice way to pair these, and it goes with anything. Anything you can think of. It's really, really user-friendly, and you can get so much out of this combination. Next, this one is also a very simple one. Paprika and cayenne, a double dose of capsaicin, the active compound in both of those spices. Cumin, cayenne, turmeric, garlic, black pepper. Again, you could put those, almost equal amounts into a shaker, and use that universally on your food.

I like to think of this as a daily thing. You can spice up your day. You can spice up your beverages, your breakfast, lunch, dinner. If you're actively undergoing treatment, I usually say, you don't have to go crazy by adding everything to every single meal, but start thinking about it. Maybe start gradually, and introduce a few soothing blends into your breakfast, maybe to some of your baked apple desserts. It's just something that's very easy to do.

Again, we're showing you different ideas, adding cinnamon, ginger, nutmeg, clove to your oatmeal. You can add things to your eggs, to your smoothies, sweet potatoes. Next, your dinner. Fish, different combinations that you can do. If you don't cook, you can spice anytime. For example, you can take a marinara sauce and add rosemary, thyme, chili flakes, parsley. Just stir it into something that's already ready made. Hummus, for example, that sumac I was telling you about that's so tangy and delicious, you can add that in there. Za'atar, the Vegitude Shaker that



you made, all of these can have a nutritional upgrade by just simply adding some of these spices into them. Nut butters. I love stirring cinnamon and cacao into even the golden milk choco-latte blend, you can mix that into your nut butter. Your kids might love that, too. There's a lot of things that you could do with that.

Next, this beverage here is a very soothing beverage that I recommend to all of my patients. It's not necessarily dry spice, but you basically take a pot of water, filtered water, you add some fresh ginger slices, some fresh turmeric slice, a handful of mint or parsley, and you let it simmer for 15 or 20 minutes, and then you can drink it warm, and then I like to store the rest in jars, and drink it throughout the day. Chilled, warm. It will last a good three days, and it's just a wonderful way to get some anti-inflammatory properties and something soothing infused into your water.

I'm going to be closing, a little bit of tips and tricks when it comes to spicing and spices. The goal is to be consistent. It's really, again, like I said, this is the 10th commandment. I like to think of spicing as , after you've built a house, as a statement chandelier piece in the house. It's wonderful. It adds a lot. It makes a statement. But without the house, it's really not going to stand on its own. Spices aren't the cure-all, the be-all, but it's one piece of a big nutritional puzzle. Consistency is key. Diversification. Just like any part of your diet, you want to diversify. You don't want to have too much of one thing.

Buying organic is key when it comes to spices, because conventional, they fumigate it and there are chemicals that the World Health Organization has determined not to be safe. They irradiate it with gamma rays, which affects the nutrient value. You want to replace them annually, so anything old, you may want to buy something fresh. Look at the labels. Make sure there are no additives, artificial colors, flavors, preservatives, salt, sugar. It's amazing what you can find in spices, and again, like I said, start slowly, depending on where you are, during treatment or post-treatment.

That pretty much closes one of my 10 commandments. I could talk about each one of these probably for a good hour. Sorry for rushing through it, and if any of you have questions about anything, feel free to reach out through social media channels, email, call, and thank you so much for having me on tonight's webinar.

June Mandeville-Kamins:

Oh, thank you so much, Rachel. That was so interesting, and as someone who personally loves spices and loves cooking with spices, it was so fascinating to hear about the marvelous potential health benefits, so I really appreciate that. I'm sure a lot of our participants tonight are in agreement that we know a lot more about spices now and their benefits, so thank you so much. I really appreciate that.

Rachel Beller: My pleasure.

June Mandeville: Thank you. It is now my pleasure to introduce our second speaker of the evening, Dr. Jessica Clague DeHart. Dr. Clague DeHart is an assistant professor in the division of Biomarkers of Disease and Prevention, the City of Hope. Jessica graduated from the University of Southern California with a Bachelor's in Health Promotion and Disease Prevention. She completed a Master's of Public Health in Chronic Disease Epidemiology from Yale University, and a PhD in molecular cancer epidemiology from UT Houston and MD Anderson Cancer Center. Jessica did a post-doctoral fellowship at the City of Hope in clinical cancer genetics. She oversees a research group that uses data from large observational studies to design wellness intervention trials designed to bring feasible wellness to everyone. This past year, Jessica's mom was diagnosed with breast cancer, making this a very personal journey for them both, and has intensified Jessica's passion for designing wellness interventions to combat the collateral damage of treatment.

Dr. DeHart is joined this evening by Dr. Susan Love, who has dedicated her professional life to the eradication of breast cancer. As chief visionary officer of the Dr. Susan Love Research Foundation, she oversees an innovative research program centered on breast cancer cause and prevention. She's also a clinical professor of surgery at UCLA's David Geffen School of Medicine. As one of the founders of the National Breast Cancer Coalition, Dr. Love is well-known as a trusted guide to women worldwide through the foundation's inpatient science education program. Her books, including Dr. Susan Love's Breast Book, is now in its sixth edition.

The foundation's recent groundbreaking initiatives include the Army of Women, developed to partner women and scientists to accelerate translational research, and the Health of Women (HOW) study, an online cohort study aimed at identifying the cause of breast cancer. Now it is my pleasure to turn it over to you, Dr. Clague DeHart.

### **III. Healthy Living: Exercise, Bone Health, and Tobacco/Alcohol Cessation**

Dr. Clague DeHart: I am so, so excited to be on the phone with everybody and to do this webinar, and I am so happy to be joined by Dr. Susan Love as well. Today, we're going to be talking about exercise, bone health, smoking, and alcohol, all within the next 20 minutes. I'm hoping that you will learn a lot in the next 20 minutes, and I hope that you will all want to go out and run a marathon. I'm just kidding. I hope you will see that being active is what we want, and that's why we say movement, not just exercise but movement, moderation, and being mindful of your body and how it feels. We'll go over exercise before treatment, during treatment, and after treatment, and what the similarities are between those, and what the differences might be, and what special circumstances there might be, really going over the what, when, and how of exercise. We'll be talking

about smoking and cancer. Is it still bad? Yes. Then alcohol and cancer. How much is too much, and how much actually could be beneficial?

First, we're going to talk about exercise. We all know exercise is great. We all know we should do it. We all know that there's benefits. But we don't know the details of that. I always like to start off with talking about the benefits, and talking about how much exercise is actually beneficial, and moving from exercise to movement, and then talking about, "How do we actually do this? If we know it's good, how come we're not doing it?" I have some tricks in my back pocket to helping all of us get a little more active.

What are the benefits of exercise? Health benefits are, it lowers our risk of heart disease and diabetes. It helps us to maintain a healthy body weight. No, you can not walk a burger off in 10 minutes, but you can exercise over a period of time with a healthy diet, as we just went over, right, in the last 20 minutes, and it will help you to maintain a healthy body weight. It can help lower depression and anxiety. It can help lower pain and fatigue. We talked about antioxidants and inflammation with spices and food. Exercise can do that as well. A continuous exercise plan can actually decrease inflammation in your body, and can also decrease excess estrogen from fat tissue. This is incredibly important in post-menopausal women, when you shouldn't have a lot of estrogen, and fat tissue can actually produce extra estrogen. If you can burn the fat off, you will be burning off that excess estrogen, therefore, next, decreasing risk of several cancers, most notably breast cancer.

All of that together will increase your quality of life. There is a strong association between physical activity and the decreased risk of post-menopausal breast cancer, colorectal cancer, and endometrial cancer, and there's a strong association between sedentary behavior, so not moving, not being active, and an increased risk of colorectal and endometrial cancer. Now, this is a super strong association, hundreds of studies showing it. However, more and more and more research is showing that exercise actually decreases risk of multiple cancers.

We know it can decrease risk of breast cancer. All types of breast cancer, anywhere from 20% to 40%, depending on age and different other risk factors that are incorporated. It can decrease risk of colon cancer by at least 20%. It can decrease risk of endometrial cancer roughly 20% to 30%, with the studies coming out more recently, and lastly, next, risk of other cancers, including ovarian cancer.

Exercise during treatment. The number one thing I like to say, people always ask, "Is it safe?" If you had asked people 20 years ago, you would be told by your clinical team, "I don't know if it's safe to exercise." You ask your clinical team now, and they should be telling you, "Yes, it is safe to go ahead and exercise during chemo and radiation, with some caveats." If you do exercise and you are active, I should say, during chemo and

radiation, this can help decrease a lot of those treatment-related symptoms, including fatigue and nausea. I know the fatigue always seems counterproductive, that exercising is going to make you more tired, but if you are continually active, you will actually find that you have more energy. It may not be the same amount of energy that you had prior to treatment, but it will be a higher level of energy versus you not being active at all.

Movement and being physically active will also help you maintain and improve your physical ability. It will keep your bones healthier and stronger. It will keep your heart healthier. It will help you to maintain a healthy body weight. Again, it can help with feelings of anxiety or depression. I know when I get super anxious, if I go for a walk, it just clears my head. It helps me decrease anxiety and kind of get back on track with my mindset. I know with my mom, we go on walks. "Okay, you're anxious. You're walking in the hospital, getting ready for chemo. Let's go take a walk first. Let's be active. Let's try to put our mind on something else." It does help. It also increases quality of life, to really try to keep that positive outlook all through treatment.

Dr. Susan Love: This is Dr. Love. I just wanted to point out one thing for people. That is a holdover from the old days. There used to be this theory that you couldn't do weight training or do exercise, because it would increase lymphedema. That's been shown to be absolutely not true, so that's old holdover.

Dr. Clague DeHart: Thank you so much.

Dr. Susan Love: We should get rid of that one.

Dr. Clague DeHart: Absolutely. Absolutely. I know that there are still clinical teams that will say that, but if you listen to Dr. Susan Love, and if you go to any physical therapy specialist, they should be up on that research and know that it's okay to use any type of exercise there.

Do always let your clinical team know that you're exercising, especially if you're starting something new. It's important for them to know. Stay as active as possible, and this is going to ebb and flow based on how you feel with side effects and timing. With chemo treatments, maybe you feel great right before you're about to get chemo, but not right after, so just ebb and flow the type of exercise, whether it's walking, or maybe you're a runner and you like to run. It's okay to run. Keep as active and as normal as possible.

Take your time. If you haven't exercised, take your time, small steps, little by little, and just focus on that movement and being active, and set attainable goals. You don't need to run a marathon in a week. It might take five years, if that's something you want to do. You don't need to run a marathon to get the benefits of movement and physical activity. Make

sure there's precautions there to prevent falls and infections. If you're going through chemo at the moment, maybe you don't want to go to a super busy gym where there's a possibility of a lot of germs. Maybe you want to look at videos, or do some online type of things at home, or going for a walk in a non-crowded area.

Preventing falls. If you have neuropathy from any of your treatments, just be aware and make sure that you have something to hold onto while you're walking. Some women that I've talked to, we ask them, "Why don't you go up and down your hallway?" That way, if you feel dizzy, or you feel like you're a little off balance, you've got the walls to hold onto. With lymphedema, Dr. Susan Love just talked about that. Do be careful post-surgery, obviously, with lymphedema, and make sure that you do have a specialist help you. You do want to mix aerobic and strength training, and try for at least 30 minutes each day if possible, spread throughout the week.

Exercise after treatment is very similar to exercise pre-treatment. After treatment, it's safe. Again, it's safe to exercise, despite the old-school thinking of needing to be extra careful with your body. You need to be kind to your body, but it is okay to participate in exercise programs. Exercise after treatment can decrease risk of recurrence of cancer. It increases survival rate. It decreases the treatment side effects immediately after, as well as decreases collateral damage, which is the more long-term effects that don't go away right after treatment. It helps to maintain or improve your physical ability post-treatment, keeps your bones and heart healthier, and it helps you to maintain or maybe get back that healthy body weight, and decreasing depression and anxiety, and then hopefully increasing your quality of life, and increasing your self-esteem post-treatment.

Recommendations for physical activity after treatment. Again, always let your clinical team know that you're exercising, and stay as active as possible. You can go ahead and increase your activity post-treatment, little by little, the farther out that you get. Have those precautions to prevent falls, especially if you have some neuropathy in your feet, precautions to prevent lymphedema. There are specific exercises that are great for reducing lymphedema, and then if you were to ask me, "What is that dose?" We don't quite know yet. That's a lot of the research that we're working on now, but the best that we have are the American Cancer Society guidelines, and a lot of the guidelines that are out there follow this. It's aerobic, which is aerobic exercise with 150 minutes of moderate activity a week, and when I say 150, it kind of scares me, and I study exercise, so I like to break it down into two and a half hours of moderate activity a week. That's not that bad, or 75 minutes, which is one hour, 15 minutes of vigorous activity per week, or you can do a combination of the two.

Now, you do want to add in that strength training, one, for your muscles. Having more muscle than fat obviously is a great thing, but there are

some cancer fighting benefits to having muscle. Doing the strength training can also help with bone health as well. You want to shoot for at least 10 minutes at a time. You don't need to do two and a half hours at once. Even if you're shooting for the 30 minutes a day, you don't need to do the 30 minutes all at once. If you're starting off, doing 10 minutes at a time, doing that three times a day is enough. That is becoming physically active, and you can build from there, and that will have a biological benefit. Then spread it out throughout the week. You don't want to do all the activity in one day, and if you do hit that two and a half hours in one day, that's great, but you do want to do extra activity throughout the week.

Dr. Susan Love: I'm going to butt in. The best thing about doing exercise - at least I think the biggest side effect is that you feel morally superior for the rest of the day.

Dr. Clague DeHart: Absolutely. Then you can always ask for a physical therapy consultation, and most hospitals and cancer centers should have something to help you.

What is moderate versus vigorous? Here's a list of moderate intensity activities, and vigorous intensity activities. Next. I really want to highlight this. Walking briskly is considered moderately intense activity. Three miles per hour or faster, but not race walking. I really want to, again, go towards that idea of movement. Walking briskly 30 minutes a day, even if it's in 10-minute increments, has a biological benefit.

Another way, if you don't have this list in front of you when you're trying to decide what to do, is the talk test. Moderate activity, you can talk but you can't sing during the activity. As much as you want to sing, you can't during moderate. If you're singing, you're not doing enough for it to be moderate. In vigorous activity, you won't be able to say more than a few words without pausing for a breath. That's just a quick and easy way to see what kind of activity you are doing or you're participating in. Then look at your watch, and just kind of time how long you're doing it.

Current research, this is the research that I'm doing right now, and there's several people out there doing it. I think in the introduction, they were saying, you know, I'm really working to identify and to develop wellness interventions, specifically here exercise interventions, that not only elicit a biological benefit to help prevent cancer and to prevent cancer recurrence, but also that are feasible for the average person to implement and maintain. The approach that we've taken is really looking at different community-based exercise programs, and looking at their biological effects on all of these things that we know that are related to cancer.

What we're actually finding is it doesn't matter the type of exercise you do. We are finding biological effects with even minimal doses, so that's very exciting. It's not prime time yet, but we're really excited that we're finding these results, and just get out there and move.

How do you do that? You really need to develop habits, and the best thing I've heard for habits is to find something that's easy to do that you cannot fail at, and do it every day. If that is walking around your house for 30 seconds every time you come home, do that until it's a habit, and then you can up it to that 10 minutes. Find something you love, whether it's playing at the playground with your kids, walking, gardening, taking your dog for a walk, anything. Find a person to do it with. Really start small, but at least you have to start.

Here are just some resources. I really want to highlight 2Unstoppable. This is like Match.com but for exercising and for cancer survivors. You can go on this website and you can find somebody else to exercise with in your area, or even exercise with virtually. Then the Army of Women. There's a lot of studies you can sign up for, and this is one way, if you sign up here, you can see if there's exercise studies going on, and there's lots of programs out there.

Quickly, bone health. Talk to your clinical team. Some treatments, some cancer treatments can have an effect on bone density. Have bone health as a part of your survivorship care plan. Do weight bearing exercise. Diet, calcium, and vitamin D. Limit your alcohol. Don't smoke, and then there's medications that, if this isn't working and you still need some help with bone health, there are these medications, and I defer to Dr. Susan Love as the MD on this webinar. If there's any questions with bone health, she'll be able to answer those, and there's always special circumstances with bone mets, or specific types of chemotherapy or treatments that people have gone through.

Smoking. Don't do it, because smoking not only causes lung cancer, but it causes 16 types of cancer, increases your risk of cancer recurrence, decreases life expectancy, it increases risk of other illnesses, and can actually decrease the effectiveness of cancer treatments. The best thing to do is, don't start smoking, and if you are smoking, quit smoking. There are so many resources out there to help. If you look at the bottom of this slide, there's even cancer-specific resources, such as the Stop Smoking Support Thread on BreastCancer.org Discussion Board. If you are smoking, quit. If you don't smoke, do not start. Go for a walk instead.

The last thing here is just to talk about alcohol. I think the most important thing here, I think the message is out there that no more than one drink a day for women, no more than two drinks a day for men, but I think what we need to know is, "What is a drink?" A drink is wine, beer, hard liquor, anything with alcohol in it, and one drink is 12 ounces of run of the mill beer. That's that 5% alcohol beer. Five ounces of wine, which is a 12% alcohol, or 1.5 ounces of 80 proof liquor, that 40% alcohol. Be aware, especially with wine, of over-pouring.

Here's just kind of a visual of what a standard drink is. On the right-hand side, this kind of blew my mind. I even really rethought what my lifestyle

looks like based on the pictures on the right. I took a couple of drinks that are really popular right now, so the IPA beer, there are a lot of these beers that aren't the run of the mill beers, and a normal IPA actually has 9% alcohol, so a 12-ounce pour of that is actually 1.8 drinks. If you do a double IPA, which is 14% alcohol, 12 ounces is 2.8 drinks. The beers, "I'm only having one beer a day. I'm not over-drinking." If you're having that double IPA, you're actually having almost three drinks a day, so beware. Then the typical margarita is about 1.8 drinks, and if you go for that Cadillac, which can be very delicious, that's actually 2.7 drinks. Having a Cadillac margarita a day is almost three drinks a day. Next. Here's a really nifty website where you can put in these different types of drinks, and you can actually see what you're drinking. It blew my mind. Rethink what you're actually drinking per day.

Again, I think just the take-home message is, and we talked about these with the 10 commandments earlier, is adopt a physically active lifestyle. Get up and move. Eat a healthy diet and balanced diet, don't smoke. If you do drink, limit your alcohol intake, and be mindful and breathe. Make sure you get a good sleep, and next, the nutritionists probably won't like this, M&Ms, but it's a really good visual, I always say, because think M&Ms. Movement, moderation, mindfulness. Just move. Be more active.

Dr. Susan Love: I think chocolate is a vegetable, so I count it as my five fruits and vegetables a day.

Dr. Clague DeHart: Well, there you go. See, if Dr. Susan Love says it's a vegetable, I think just be mindful of your body.

June Mandeville-Kamins:

Right. Well, thank you, really, so much, Dr. Clague DeHart and Dr. Love. It was really interesting. It's very helpful to hear, to have a picture of how beneficial and safe exercise and movement can be, and how really vital it is to maintaining a healthy lifestyle, so thank you so much.

In the interest of time, I'm going on to our next and final speaker for the evening, Sharon. It is my pleasure to introduce, Sharon is a Sharsheret peer supporter, a California Team Sharsheret co-chair who hosts monthly community run-walks- yay, Sharon- in LA. Sharon will now share her personal survivorship journey, and how she integrated healthy living after a cancer diagnosis, so over to you, Sharon.

#### **IV: Personal Story**

Sharon: Thank you for having me. I'll go right into it, just for the interest of time. I'm going to first talk about my history, and then I'm going to talk about what was helpful during my treatment, and then afterwards as well, which goes more into wellness and how I incorporate all that into my life.



My history a little bit is, two days before my 37th birthday, I felt a lump under my left arm, and I actually noticed the lump before, but I remember someone, or a doctor telling me that it was a swollen lymph node, so I sort of ignored it for a while. Then all of a sudden, one evening we were going out for my daughter's fifth birthday, and it just hit me that, "Oh my god. Something's wrong." It was a Friday evening, and I had to ignore it, because there was nothing I could do on a Friday evening, and nothing until Monday. It was obviously not a fun weekend.

On Monday, I went to my OB, who took a biopsy, and the two days of waiting, of course, was horrible. It was the longest two days of my life, but I remember when I got the call, I was a kindergarten teacher at the time, and the kids were out at recess, and my OB said there were atypical cells. Well, of course we know what that means, and I panicked, left work, called my husband, just cried, and the next few weeks were appointments, and lots of appointments. The suggestion, of course, was very aggressive, to have a bilateral mastectomy, and get genetic testing, because I was adopted also, so my family history was unknown. Everything was really overwhelming and frightening. A lot of information to come to grips with.

My genetic testing came back, and I was positive for BRCA1 mutation, and I had a triple negative for estrogen, progesterone and HER-2 protein I was also told, and because of all this I was told everything we needed to treat it aggressively. My tumor was about three centimeters, and when it was removed, I was told it was stage 3B. I had 36 lymph nodes removed on my left side, and 18 were positive. On my right side, I had two lymph nodes removed and they were negative. I had a bilateral mastectomy, and seven months of two different cocktails of chemotherapy, followed by radiation.

During my treatment, there was quite a few things that were really, really helpful for me, and I wanted to convey them to everybody, so hopefully they can help you as well. One was that after my mastectomy, physical therapy was so helpful. Gaining range of motion and doing exercises, it really, really was helpful. I also had a friend of mine at work introduce me to her friend who had just went through cancer treatment right before me, so she went to some appointments with me, showed me her surgery scars, we spoke about our children, and it was really an amazing support for me, and that was actually when we were first introduced to Sharsheret. We went together, and we started being involved with the matches.

The other thing that was really important, which made me, when someone was speaking, it made think about this, so I just wrote it down, which was that I had gotten a dog when I first was diagnosed, after my mastectomy. It got me out of bed every day to go for a walk, because I otherwise just didn't feel well, and I would have stayed in bed a lot more, so it got me out of bed, and it was just a wonderful idea to help me with exercise.

My children were five and eight at the time, and I read them stories about cancer that were for children, obviously, and I tried to be as positive as possible. My husband was really helpful, actually, and he put together this morning routine with the kids that was much more organized than I was doing, so it was a little bit annoying, because of course he was praising himself for how wonderfully organized he was. Of course, once I felt better, that organizational program that he put in, of course, went out the window. But that's a whole long story.

My son was more affected than my daughter, since he was a little older. He was eight. He was really embarrassed if I walked around in public with just a hat or bandana, and he was really appreciative if I was wearing a wig, but I just hated them, because they were just so uncomfortable. But they are now 21 and 24, so they're very well-adjusted and it's really a distant memory for them. My friends and family were also really amazing, and they brought food for seven months, and we never ate so well during that time.

After treatment, I was told that because of my diagnosis, there was really no follow up medication for me, really except for [inaudible 00:56:01] and doctor visits. I was really scared because I was thinking I was happy that radiation and chemo were over, but what do I do now? I didn't want to get cancer again, obviously, so there were some things that I know that we don't have control over, and there are some things that we do. I decided to figure out what I do have control over, and what I can do to help with that.

I saw a nutritionist at my doctor's office, and I also did some reading, so I began buying organic products, organic milk, organic eggs. I have no idea if that makes a difference or not, but I did. I got rid of soda, and I was just trying to do lots of different berries and fruits, and different things that ... Of course, now I'm going to add a lot more spices to my diet. That was amazing information. I also really don't buy any food with ingredients that I really can't pronounce, and I try not to have any chemicals. I also realized that I don't have control over situations outside of my house, which is work. I'm an elementary school counselor now, and there's stressful situations that happen, and I've been working on how to manage these since I do have control over ... I don't have control over the stress, but I have control over how I manage the stress.

One of the things that I really try to work on is being balanced. If I'm stressed, I balance it with something more relaxing, like breathing, or walking, or talking with a family friend, family or friend, and it's really, really helpful. One of the things that is a reminder of my cancer really every day is my lymphedema. It's not really noticeable to others, so it's not really major, but I feel it, and I notice it. One of my shirt sleeves is a little tighter than the other one, and I just notice it looks a little bit bigger than my other arm. Most people don't notice it unless they really look, and I also had to ... It wasn't always like that. I had cellulitis at one point

because I had cut myself, so it had happened quite a few years afterwards, so I need to be careful when I cut myself on my left arm.

I do many things to try to help with this. That's one reason why I try to manage my weight, and also I do certain exercise that I know help with lymphedema. I've gone through PT several times to kind of get a rejuvenation on my exercise at times, so I know that swimming is really good for lymphedema, so I try to do that as much as possible. I incorporate weights and stretches that my PT had showed me, and when I don't do them for a few days, because that happens as well. Sometimes I don't do them, and I really feel it when I start to do them again. I really feel like, "Oh my god. I've missed this." It feels so good to start to do it again.

I also like to have a goal of different things that I do. One of the things is that I did the half marathon last year and raised money for Sharsheret, and I'm going to try to do it this year as well, and I am also training right now for a triathlon that's in September. This is totally new. I had never done this before. I'm going to do the half-mile swim in the ocean. It's kind of on my bucket list, so I'm going to start training for that. I have not started training for that yet. I do, as June had said, I became involved with the Sharsheret Advisory Committee, and this year I started co-leading the monthly walk-runs at Pan Pacific Park, so come join us if you're in LA.

There are things that I enjoy that I'm not able to do anymore because of my lymphedema, so if anyone, if I'm incorrect in this, please tell me, since we have such wonderful information, people with lots of information here. I tried Taekwondo, but the sparring was not good for my arm, and some of the exercises they did was really difficult for me, and especially my implants, it was just too hard. It was very intense. I had to stop that, but I also did it, and I also did a Spartan Race, if anybody knows what those are. It's with lots of obstacle courses. It was the first time. I did it with five of my close friends. We're all over 50, and we did it in the past year, but since I had to be careful not to injure my left arm, I just decided to put that to rest, but I am glad to be able to try these other things with running and doing the swimming.

I try to be mindful of what I eat, and I do exercise a few times a week. I don't know if it's 150 minutes, but I have to look at that more. I do have cheating moments where I might have some M&Ms. Good thing that's not so bad. When I go to the movies, I do have to have popcorn and a soda. That's the only time I really have it. But I generally am very active, and I walk a lot, and I do love biking, and jogging, and hiking, and yoga. I actually hate the gym, because it's indoors. I find it kind of boring and monotonous, so I actually like to do stuff outside. I still have my dog, so I do go on walks with her still, as long as she's able to. Her life is coming to an end soon, which is kind of sad. I do lift the weights at home to help with my range of motion and my strength, and that's about it for me, so thank you for having me.

June Mandeville-Kamins:

Oh, thank you, Sharon. First of all, I'm in awe that you're doing all these amazing races. It's fantastic, so good for you. It's so wonderful to hear a first-person account of your diagnosis and treatment, and then what you're doing now to maintain a healthy lifestyle. Thank you so much. I really appreciate you sharing.

## **V: Question & Answer**

First of all, I have to apologize. We're running a little bit late. We do want to get to questions, and I do want you to know that we won't get to all the questions tonight, but we will have a follow-up blog with the rest of the questions afterwards. We also have heard from a lot of people that they would love copies of the recipes that Rachel had shared before, and those will be available on our website also. Without further ado, I would like to get to a couple of questions.

Rachel, I'm going to combine a couple for you, if that's okay. To begin, we had a question, "Are dried spices as effective as fresh spices?" And kind of related, the impact of sugars and eating desserts. Could you address that one?

Rachel Beller:

Sure. Dried spices, there is research showing that freeze dried spices actually contain more antioxidants than some of the fresh. I get this question a lot when it comes to turmeric particularly. Turmeric supplements, turmeric roots versus turmeric spice, the dried spice. One of the things I tell my patients is to keep in mind, number one, that there's a lot of adulteration when it comes to particular supplements. You really don't know what's in them, so you really have to dig into reputable sources. Consumer Labs does a great job reviewing some of those. But another thing is to think about the wholesomeness of food. When it comes to spices, it's the same thing.

For example, turmeric, the main active anti-inflammatory compound is curcumin, but there are other elements within turmeric that are beneficial that you could be losing out on. The best thing is to ... You can alternate between the two, if you want to take a turmeric supplement, but definitely I wouldn't rely on that as the source. I think food always comes first, and there are so many simple ways to integrate something as valuable as turmeric into your daily diet. It does require just a little bit of thinking and planning. You know, making those blends if you want to, or buying. You can look for blends that have turmeric and black pepper already combined. You can add turmeric into your salad dressing. You can add fresh turmeric root into your smoothies. Once you get into a routine, you saw that a little bit can go a long way, but really you want to optimize by sticking to whole, natural foods because of food synergy, and there's certain compounds within turmeric that you could be missing out on if you only take an isolated compound like curcumin. Sorry that was a long-

winded answer, but it does come up a lot. That's a great question, and it does come my way often.

Rachel Beller: What was the second question? Something about sugar?

June Mandeville-Kamins:

Yeah. The impact of sugar, of eating sugars and desserts.

Rachel Beller: On cancer, or general health? I'm not sure if I'm answering the exact question I was asked, but sugar does come up a lot as far as sugar feeding cancer cells, or sugar not being ideal. Really, it has to do about food combining. Every cell in your body needs sugar in order to survive and thrive. There's no bypassing that. If you don't eat sugar from, let's say, an apple, a wholesome apple, I'm not referring to apple juice, which is basically liquid candy, but wholesome, whole fruits. I really discourage my patients from not eating them because of the sugar fear factor, because again, if you don't have sugar in your diet, and there is no bypassing it, the cells are just going to knock on other doors to get some. You know, "Protein, fat, give me some sugar." Really it's about food synergy.

For example, if you eat berries with, or mango along with raw almonds, you're combining healthy fats, fiber, protein, and sugar, naturally occurring sugar, and you're ingesting that, and your blood sugars are going to be controlled. It's not going to cause a surge in insulin. It's really not about eliminating all sugars. It's how you introduce sugar into your body, and having a lot of sugar from added sugars is not a good idea when it comes to raising your blood sugars, or insulin growth factor-I, increasing inflammation.

You want to look at your ingredients. For example, one common ingredient that a lot of my patients don't realize is lurking in many protein bars and many items in the health food store is organic brown rice syrup. Things like that, you want to look out for and avoid.

June Mandeville-Kamins:

Okay. Great. Thank you, Rachel.

Jessica, this one is for you. How do you know personal trainers and exercise instructors have the appropriate credentials? Specifically to work with those with lymphedema?

Dr. Clague DeHart: That's a great question. There are programs and certifications, so you can just ask them outright if they have that certification. Let's see. On the slides ... I'm trying to see. There's a slide with the resources that had the information of the certification, but ask them outright if they have a certification. If not, you might want to find a different trainer, or there may

be a program that all of the trainers are certified in the cancer specialty, but they'll be able to tell you and they will know.

Then with lymphedema, there are lymphedema specialists. You'll usually find this with physical therapy or within a rehabilitation center, either a standalone center or one within a hospital or a cancer center. Maybe ... How did you ... Our last speaker, how did you find your lymphedema specialist for rehab? Was it through rehabilitation, or physical therapy? Because usually that's where you would find them. I don't know if she's still on.

Sharon: Yeah. I asked my doctor. I asked my doctor for a referral for a lymphedema specialist, and it was hard for me ... When I initially, closer to when I had my surgery, I loved my lymphedema specialist, and she had moved, and it was very hard to find another one that I liked, because there are so many different treatments, whether they do the wrapping, and that kind of thing at night, and I had a hard time with that. I just do the exercises, and there's a sleeve that I wear sometimes. I'm not good about it. I will do it on an airplane and that's about it.

Sharon: Yeah. I asked my doctor for it. Yes.

Clague DeHart: Yeah. I would do that, and then always know that even if somebody's not a specialist, listen to your body. If you're a little sore, that's okay, but if it hurts, just don't do it, and really be mindful of how your body feels.

June Mandeville-Kamins:

Right. Okay. We've got a question here. How much does a prophylactic mastectomy affect survivorship for someone who's BRCA positive and is an ovarian cancer survivor?

Dr. Clague DeHart: That is a Dr. Susan Love question.

June Mandeville-Kamins:

Yes, that is. Dr. Love?

Dr. Susan Love: It wouldn't probably affect it much at all, because once you've had breast cancer, the risk of having it recur is much higher than the risk of getting it in the other breast in general, and the newer studies are really interesting. You know, so much of the research goes on in rats and mice, who actually don't naturally get breast cancer. In rats and mice, the breast cancer goes through the lymph nodes to the rest of the body, but in people, it actually goes to the rest of the body before it goes to the lymph nodes. All of those days when I started, when we were doing radical mastectomies and trying to get every last lymph node was because we thought that was the way out, and now it's looking like that's probably not the way out. Local treatments, like surgery and radiation, are becoming

less important, and systemic treatments, like chemo and hormones, are becoming more important.

Giving the chemo first, shrinking the tumor, and then there's a new study that just was launched looking at whether we even need to do ... Do you need to do surgery if the tumor disappears with the chemo, or not? Does it make a difference? And you're going to see a lot more research going on about what to do to the breast. A lot of what we've done in the past was based on our best understanding at the time, and luckily we keep researching, and searching again, and finding out better ways that will hopefully even work better.

June Mandeville-Kamins:

Great. In the interest of time, we're just going to have one more question. "I know that the American Institute for Cancer Research guidelines just came out. Is there anything that specifically stands out? As a breast cancer survivor, is there something specific I should be focused on?"

Rachel Beller:

It's really about not something specific. It's really about the building blocks and thinking of your ... What you choose to put in your body, when it comes to diet, as a big package. What are the top principles, evidence-based, that support optimal breast and ovarian health? That's really ... The American Institute for Cancer Research, the report, the third global report that's just coming out is going to incorporate so many principles similar to the 10 commandments that I have. It's really going to incorporate multiple principles, so it's going to emphasize maintaining a healthy weight, and again, it's about how you go about maintaining a healthy weight and achieving that goal. It's taking it a step further and digging into each one of those, and it's really, as knowledgeable as my patients are, when they come in the door, it seems like something so obvious. Like, "I know that. I know I should be including fiber into my diet, and I eat two salads a day." But really, opening it up and saying, "Well, what does that equate to?"

Really, for optimal breast health, research indicates 30 to 35 grams. Two salads puts you at about maybe six to eight grams, out of 35. I really recommend going into that big picture plan and seeing where you stand with all those key principles that are evidence-based. Then getting into more specifics. "How do I upgrade that particular diet that is so wholesome? What else can I add?" When you're ready. Is it about spices? Is it about a unique food? Maybe I'll go out and find broccoli sprouts to really enhance that meal, and taking it further. Watercress, being rich in Indole-3-Carbinol, which is so great for optimal breast and ovarian health. Those type of upgrades.

One big take-home message is, it's amazing how powerful food can be, and how simple it is. It's really about finding that method to go about reaching those goals and building that strong house with a strong

foundation. Just on the note, on the heels of the M&Ms, it's not what you do sometimes that makes a difference. It's what you do most of the time. If you need a little break, or you need something, have it, but really it's what you do most of the time. There's a lot. A lot of tools when it comes to nutrition that's evidence-based. We know so much more than we ever knew before. Even a year or two years ago, we know so much more. I hope you're all feeling a little bit more empowered to take those steps in the simplest way possible.

## **VI: Conclusion**

June Mandeville-Kamins:

Thank you so much for that. I just want to remind everybody that there will be a follow-up blog and all the rest of the questions that we couldn't get to tonight will be there. I also want to let you know that all the slides from this presentation will be available on our website after the webinar. Sorry we ran over. We really had so many questions we wanted to get to, but you will have an opportunity to get them answered. Your feedback is valuable to us, because we're committed to staying relevant by enhancing our programs. We want to reflect the growing and changing needs of the women, the families of our Sharsheret community, and with that in mind, you will be receiving an evaluation in your email box in the next couple of days, so please take a few minutes to complete the survey that will be sent to you. As I mentioned before, you'll be able to access the transcription of the video, of the webinar at our website, [www.Sharsheret.org](http://www.Sharsheret.org), and you'll find it under Resource, Teleconferences, and Webinars.

I would once again like to give a huge thank you to ... Well, first of all to our presenters, Dr. Rachel Beller, CEO of Beller Nutritional Institute, Dr. Jessica Clague DeHart, assistant professor at the City of Hope, Dr. Susan Love, chief visionary officer of the Dr. Susan Love Research Foundation, and last but certainly not least, our caller Sharon, for taking the time to share their expertise, research, wisdom, and insight for us, and giving us some ideas about the importance of integrating healthy living before, during, and after a cancer diagnosis.

I'd also like to thank, again, Amgen Oncology, The Sigmund and Edith Blumenthal Memorial Fund, and the Cooperative Agreement DP14-1408 from the Centers for Disease Control and Prevention, for their ongoing support and for sponsoring tonight's program, and of course to our partners in collaboration.

The conversation doesn't have to stop here. You can visit Sharsheret's website at [www.Sharsheret.org](http://www.Sharsheret.org), or call us at 866-474-2774, to discuss tonight's topic or any other concerns you are facing. Thank you so much for joining us, and have a great rest of your night. Goodbye, everyone.



## VII: Speakers' Biographies

**Rachel Beller RDN**, is the CEO of the Beller Nutritional Institute, and a spokesperson for the American Cancer Society, two-time bestselling author, media expert, and a renowned authority for breast cancer nutrition.

Rachel has conducted research on the role of nutrition and breast cancer prevention at Cedars-Sinai Medical Center, as well as the John Wayne Cancer Institute at Providence St. John's Health Center, for over a decade.

Recently, Rachel created two online programs - PowerPerks Rx and PowerPerks Thrive - that provide evidence-based nutritional support for women during and after breast cancer treatment. Rachel also launched Power Pantry, a spice line that offers specially formulated blends to support health and cancer prevention.

**Dr. Jessica Clague DeHart**, is an Assistant Professor in the Division of Biomarker of Disease and Prevention at the City of Hope. Jessica graduated from the University of Southern California with a bachelors in health promotion and disease prevention. She completed a Masters of Public Health in Chronic Disease Epidemiology from Yale university and a PhD in Molecular Cancer epidemiology from UT houston and MD Anderson cancer center. Jessica did a postdoctoral fellowship at the City of Hope in clinical cancer genetics. Now as an Assistant Professor, Jessica oversees a research group that uses data from large observational studies to design wellness intervention trials. All her trials utilize community-based exercise and nutrition programs to bring feasible wellness to everyone. This past year her research became more personal. Jessica's mom is currently being treated for breast cancer at City of Hope. Walking side by side with her mom, Jessica's passion for designing wellness interventions to combat the collateral damage of successful treatment has intensified.

**Susan M. Love, MD, MBA**, has dedicated her professional life to the eradication of breast cancer. As chief visionary officer of Dr. Susan Love Research Foundation, she oversees an innovative research program centered on breast cancer cause and prevention. She is also a clinical professor of surgery at UCLA's David Geffen School of Medicine. One of the founders of the National Breast Cancer Coalition, Dr. Love is well known as a trusted guide to women worldwide through the Foundation's ImPatient Science® education program and her books, including Dr. Susan Love's Breast Book, now in its sixth edition. The Foundation's recent groundbreaking initiatives include the Army of Women®, developed to partner women and scientists to accelerate translational research, and the Health of Women (HOW) Study®, an online cohort study aimed at identifying the cause of breast cancer. Among the Foundation's collaborative research projects are the development of an NIH-funded self-reading ultrasound technology for triage of palpable breast lumps, an analysis of the anatomy of the breast ductal system, and an investigation into the microbiome of the breast ducts. Dr. Love received her medical degree from SUNY Downstate Medical Center in New York. She trained at Boston's Beth Israel Hospital, was an early member of the Multidisciplinary Breast Center at Dana Farber Cancer Center, and founded the Faulkner Breast Center and the Revlon UCLA Breast Center. She received her business degree from the Executive MBA program at UCLA's Anderson School of Management.

## VIII: About Sharsheret

Sharsheret, Hebrew for “chain”, is a national not-for-profit organization supporting young women and their families, of all Jewish backgrounds, facing breast cancer. Our mission is to offer a community of support to women diagnosed with breast cancer or at increased genetic risk, by fostering culturally-relevant individualized connections with networks of peers, health professionals, and related resources.

Since Sharsheret’s founding in 2001, we have responded to more than 120,000 breast cancer inquiries, involved more than 10,000 peer supporters, and presented over 250 educational programs nationwide annually. Sharsheret supports young Jewish women and families facing breast cancer at every stage--before, during, and after diagnosis. We help women and families connect to our community in the way that feels most comfortable, taking into consideration their stage of life, diagnosis, or treatment, as well as their connection to Judaism. We also provide educational resources, offer specialized support to those facing ovarian cancer or at high risk of developing cancer, and create programs for women and families to improve their quality of life. All Sharsheret’s programs are open to all women and men.

Sharsheret offers the following national programs:

### The Link Program

- Peer Support Network, connecting women newly diagnosed or at high risk of developing breast cancer one-on-one with others who share similar diagnoses and experiences
- Embrace™, supporting women living with advanced breast cancer
- Genetics for Life®, addressing hereditary breast and ovarian cancer
- Thriving Again®, providing individualized support, education, and survivorship plans for young breast cancer survivors
- Busy Box®, for young parents facing breast cancer
- Best Face Forward®, addressing the cosmetic side effects of treatment
- Family Focus®, providing resources and support for caregivers and family members
- Ovarian Cancer Program, tailored resources and support for young Jewish women and families facing ovarian cancer
- Sharsheret Supports™, developing local support groups and programs

### Education and Outreach Programs

- Health Care Symposia, on issues unique to younger women facing breast cancer
- Sharsheret on Campus, outreach and education to students on campus
- Sharsheret Educational Resource Booklet Series, culturally-relevant publications for Jewish women and their families and healthcare professionals

## **IX: Disclaimer**

The information contained in this document is presented in summary form only and is intended to provide broad understanding and knowledge of the topics. The information should not be considered complete and should not be used in place of a visit, call, consultation, or advice of your physician or other health care professional. The document does not recommend the self-management of health problems. Should you have any health care related questions, please call or see your physician or other health care provider promptly. You should never disregard medical advice or delay in seeking it because of something you have read here.

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