

Interview Transcript: Sarah F.

Sarah has her own consulting practice, specializing in healthcare supply chain solutions. She is a cat lover and an avid gardener.

Type of Cancer: Breast Cancer (stage 1) Age at Diagnosis: 50 Year of Diagnosis: 2004 Treatment: Lumpectomy and Radiation Date of Interview: August 2009

My name is Sarah Friesen and I am 55 years old, and I was diagnosed with Stage 1 breast cancer five years ago this summer. I had a lumpectomy followed by radiation and then a treatment of tamoxifen for five years. I was told early on that the treatment for this type of cancer should be the kind that resulted in a cure as opposed to remission and so I think I felt fairly optimistic about the outcome right from the beginning.

Spreading the word

When I was first diagnosed, because of the fact that I knew that this tumour would not have been found without a mammogram, one of the things that I decided early on was that I was going to be very open about what had happened to me, and so instead of trying to hide the fact that I had breast cancer and protect my privacy, I spoke to people at work, and my friends, family, whoever would listen, to let them know how important it was to have their mammograms.

The worst part

So for me the radiation was absolutely the worst part of the whole event. I had decided when I went into radiation that I was going to keep working full time all the way through the radiation, and about halfway through I really realized that I wasn't going to be able to do that. So, I became very weak and tired from it and really underestimated the impact it would have on my system. So now I understand better—you know, your system is trying to heal itself every day and then you go back and you whack it again with the radiation, and so it was a very exhausting process.

Have an advocate

I found that in the beginning, because I'm a fairly selfsufficient person, I did try to do a lot of it myself. And one of the things that was a big surprise for me was the extent to which I needed to depend on people, especially towards the end of the radiation. So my friends were very good, they brought me food, they drove me places if I needed it.

For certain I would not have made it through if it hadn't been for my niece Alexi. She was my

advocate and she was the person who was here for me and made sure that things happened when they should have happened. And when I ran into difficulties with the radiation and had some complications, it was Alexi who cleared the path at the hospital and got me the treatment that I needed. So one of the things that I would definitely say to somebody embarking on this is to make sure you have an advocate who is a constant through the process and who can do that for you. Because complications do occur.

It's OK to ask

I think it's really important to allow yourself to be open to asking for help. When I was first diagnosed, or when I first had my surgery and began the radiation, it was easy to say yes when people wanted to bring food over and that was great, but for me it was much more difficult to ask people to drive me to radiation appointments or to provide help in other ways when I just couldn't sort of fend for myself. And so I waited longer than I should have to ask for help and again, I found that people were more than willing to help; they were just waiting for me to give the nod.

A point person

People get very daunted by the healthcare system and they are daunted by having to deal with— somebody said to me the other day, the "whitecoat syndrome." So I think that what is very important is, as they're beginning to go through their treatments, is to find one person within the healthcare institution who is their point person, because you can fall between the cracks. And so if—like me, I no longer was dealing with a medical oncologist, only with a radiation oncologist. When I had a side effect that was related to the other side of the house, the radiation oncologist was reluctant to provide any direction or support because it wasn't his business.

So one person who has a holistic view over all that you're going through as a patient. It's a change that needs to occur in the healthcare system and does happen in some hospital organizations, I know that. It's also to insist on a goto person when you are beginning this because I think complications are not unusual and the complications that I had were more as a result of the radiation etc., were really worse than the surgery or some of the other aspects of the treatment itself.

A life change

So I would never have asked to have this happen to me, but even though it was a bit of a delayed reaction, I think one of the most positive things that came out of this was I really believe that it was a strong incentive for me to quit a very demanding job last fall and start up my own business, because I realized that this kind of thing can happen to you at any time, coming out of the blue and completely unexpected. I am 55 now and I want to work for a few more years but I want to enjoy what I'm doing as opposed to doing something that is very demanding and stressful and was actually robbing me of quality of life, and so I believe this really played into my decision to do that and to set up my own business.

Five years

I had felt for a while that it was behind me because I sort of felt like the bad part of this was the surgery and the radiation, and the tamoxifen has just become like taking a vitamin pill every night. But there is a psychological effect that I know as I approach my fiveyear mark, I'm getting anxious to make sure that I do get the allclear, but I know when I do get the all clear

that I will put it behind me and it will... This does not define who I am and it will not. I don't think I'll carry it with me except for the positive reasons in terms of it making me take my life more seriously from the point of view of enjoying it more.