



# After Diagnosis: A Guide for Patients and Families

Finding out you have cancer brings many changes for you and your loved ones. You probably have lots of questions:

- Can it be cured?
- What are the best treatment options?
- Will treatment hurt?
- How long will treatment take?
- Will I have to stay in a hospital?
- How much will it cost?

Having some answers can help you feel more in control and less worried about what lies ahead.

Here, we offer answers to many of your questions about cancer and cancer treatment. We also tell you what you can expect from the people and services that are there to help you cope with cancer. To help you feel more prepared for visits with your health care team, we offer examples of questions you may want to ask them. We hope this information will help you and your family as you work through your fears and concerns about cancer and cancer treatment.

Please keep in mind that this information is not meant to replace the advice of your doctor or nurse. Talking with them is the best way to understand what's going on with your body and how treatment will work.

## What is cancer?

Cancer is not just one disease. There are many types of cancer. Cancer can start in many different places in the body. It can start in the lungs, the breast, the colon, or even in the blood. Cancers are alike in some ways, but they are also different in the ways they grow and spread.

## How are cancers alike?

The cells in our bodies all have certain jobs to do. Normal cells divide in an orderly way. They die when they are worn out or damaged; then they are replaced with new cells. Cancer is a disease in

which cells start to grow out of control. The cancer cells keep on growing and making new cells. They crowd out normal cells. This causes problems in the part of the body where the cancer started.

Cancer cells can also spread to other parts of the body. For example, cancer cells in the lung can travel to the bones and grow there. When cancer cells spread, it's called *metastasis* (muh-**tas**-tuh-sis).

## How are cancers different?

Some cancers tend to grow and spread very quickly. Others grow more slowly. They also respond to treatment in different ways. Some types of cancer are best treated with surgery. Others do better with drugs called *chemotherapy* ([**key**-mo-**THER**-uh-pee] often called simply *chemo* [**key**-mo]). Often 2 or more treatments are used to get the best results.

When someone has cancer, the doctor will want to find out what kind of cancer it is. People with cancer need treatment that's aimed at their type of cancer.

## Who gets cancer?

More than 1.6 million people in the United States get cancer each year. Nearly half of all men and a little more than one-third of all women in the United States will have cancer during their lifetimes.

Cancer can happen at any age; but more than 3 out of every 4 cancers occur in people over the age of 55. People of all racial and ethnic groups can get cancer.

## Why me?

The first question that comes up for many people with cancer is, "What did I do wrong?" or "Why me?" Because doctors don't know for sure what causes cancer in each case, many people come up with their own ideas about why they have the disease.

Some people believe they are being punished for something they did or didn't do in the past. Most people wonder if they did something to cause the cancer. Some think that if they had done something differently, they could have prevented the disease.

If you are having these feelings, it's important to know that you're not alone. All of these thoughts and beliefs are common among people with cancer. But cancer is not a punishment for things you did or didn't do. Don't blame yourself or look for ways you might somehow have prevented cancer. Cancer is not your fault, and it's almost never possible to find out its exact cause. Focus instead on taking good care of yourself now – both your body and your mind.

## Did I cause my cancer?

No, you did not. We don't yet know what causes all cancers. We do know that there are certain things we call risk factors that affect your chance of getting a disease. Some risk factors can be changed and others can't. Risk factors that can't be changed include your age, sex, and family history. Things that can be changed are things you do, such as whether you use tobacco or drink

alcohol, what you eat, and how much sun exposure you get. Other risk factors are linked to things in the environment that cause cancer.

But risk factors don't tell us everything. Having a risk factor, or even many risk factors, does not mean that you will get the disease. And some people who get cancer may have few or no known risk factors. Even if a person with cancer has a risk factor, it's often very hard to know what part that risk factor may have had in causing the cancer.

## Can cancer be inherited?

Some cancers can run in families, but cancer isn't passed on from parent to child the same way that height and eye color are. While some cancers do have genetic risk factors, most people with cancer have not inherited it, nor do they pass it on to their children.

## Am I going to die?

It's normal to think about dying if you've just been told you have cancer. You may feel better knowing that the outlook for many people diagnosed with cancer is very good. Many people still believe that "cancer = death." But the fact is that most cancers can be treated. There are almost 14 million people living in the United States today who have or had cancer.

The survival rate among different cancers varies greatly, so it's important to look at how well treatment works for your type of cancer. Numbers can give you an overall picture, but keep in mind that every person is unique and statistics can't predict exactly what will happen in your case. Talk with your cancer care team if you have questions about your own chances of a cure, or how long you might survive your cancer. They know your situation best.

Sometimes people are found to have a fast-growing or widespread cancer and are told that their future is not bright or that they might not be expected to live very long. This is very hard and is a lot to take in at once. The American Cancer Society has other information that may be helpful in these cases, such as *Advanced Cancer* or *Bone Metastasis*. Call us to have free copies mailed to you, or you can read them at [www.cancer.org](http://www.cancer.org).

## How do I cope?

### Taking in the news

At first, most people need some time to adjust to the fact that they have cancer. They need time to think about what's most important in their lives and get support from loved ones. For many, this is an emotionally hard time. Feelings such as disbelief, shock, fear, and anger are all normal. These feelings use up a lot of mental energy, which can make it hard to take in and understand all of the medical information shared by the health care team. You will likely need some time to absorb and understand what your diagnosis and treatment options mean to you and your loved ones, both physically and emotionally.

## Coping skills

People cope with cancer just like they cope with many other problems in life – each person does it in their own way. With time and practice, most people find ways to go on with their work, hobbies, and social relationships. They find new or different ways to live their lives to the fullest.

As you look for a way of coping that works for you, you may want to try some of these ideas:

- **Learn as much as you can about your cancer and its treatment.** Some people find that learning about their diagnosis and treatment gives them a sense of control over what's happening. Along with your health care team, we can answer your questions about cancer and put you in touch with other resources. Call us at 1-800-227-2345 or visit us at [www.cancer.org](http://www.cancer.org).
- **Express your feelings.** Some people find that giving some kind of outlet to their feelings helps. Many people feel that expressing sadness, fear, or anger is a sign of weakness. In fact, the opposite is often true. It's much harder to express powerful emotions than it is to try to hide them. Hiding your feelings can also make it tougher to find a positive way to deal with them. There are many ways to express your feelings other than talking. Find one that fits you. You might try to talk with trusted friends or relatives, keep a private journal, or even express your feelings through music, painting, or drawing.
- **Take care of yourself.** Take time to do something you enjoy every day. Prepare your favorite meal, spend time with a caring friend or loved one, watch a movie, meditate, listen to your favorite music, or do whatever you find most enjoyable.
- **Exercise.** If you feel up to it, and your doctor agrees that it's OK, start a mild exercise program such as walking, yoga, swimming, or stretching. Exercise can help you feel better.
- **Reach out to others.** There may be times when finding strength is hard and things feel overwhelming. It's very hard for any one person to handle having cancer all alone. Try to widen your circle of resources by reaching out to friends, family, or support organizations. These people can help you not feel alone on this journey. They will be there to share your fears, hopes, and triumphs every step of the way.
- **Work to keep a positive attitude.** While a positive attitude doesn't guarantee that you will beat cancer, staying hopeful can improve the quality of your life as you deal with cancer. Cancer is a complex disease, and people's attitudes don't cause or cure it. Keep in mind that having an upbeat attitude does not mean that you and your loved ones should never feel sad, stressed, or unsure. You will feel down at times. When you feel blue, talking about your feelings can help you feel more in control rather than overpowered by your emotions.

## Cancer and depression

Many people go through a time of grief and sadness when they first learn that they have cancer. They grieve the loss of health and certainty in their lives. This sadness may seem like depression, but it's not the same. Grieving – feeling sadness, fear, anger, or going through crying spells – is a normal, healthy reaction to a serious health concern. It usually doesn't last a long time, and is a normal response to a profound change in a person's life. You can learn more in *Anxiety, Fear, and Depression*. Call us for a free copy or read it on [www.cancer.org](http://www.cancer.org).

About 1 in 4 people with cancer becomes truly depressed. This can make it hard for them to follow treatment plans because of very low energy, decreased drive to do things, trouble making decisions, and feeling useless or helpless. Talk to your doctor if you have concerns or questions about depression.

## Signs of depression

You may be depressed if your time of grieving:

- Lasts for weeks and does not seem to be getting any better
- Has you feeling worthless or hopeless
- Causes problems with your day-to-day activities (such as being too sad to leave the house or get out of bed)

## Getting help

Some people who may be depressed are embarrassed or afraid to admit it. It may help to know that depression can be caused by the chemical changes that take place in your body when you have cancer. It's not a sign of weakness, nor is it anyone's fault. Depression can be treated with medicines, counseling, or a combination of both. Treatment for depression can help you feel better and regain a sense of control and hope for the future.

## How do I talk to people about my diagnosis?

Here are some tips for talking with some of the key people in your life. You can find more in our other pieces: *Talking With Friends and Relatives About Your Cancer* and *Helping Children When a Family Member Has Cancer: Dealing With Diagnosis*. They can be read online, or call us to have free copies mailed to you.

## Your family

A cancer diagnosis often affects family roles and routines. For example, your family may need to help you with or even take over jobs you once handled alone. You and your loved ones should talk about what changes need to be made to your family routines. This way, you can make decisions as a team and work together to make everyone as comfortable as possible with the changes that are now part of your family life.

You may not be able to do all that you used to do. You may be afraid that you'll become a burden to your loved ones. But if there's no medical reason to do less than you did before, try to do as much as you can. You and your family should also continue doing things you used to do together – like playing games or exercising. Doing so is a healthy and fun way to keep working as a team.

## “Protecting” versus sharing

Cancer affects the whole family, not just the person who has it. People in your family may sometimes try to “protect” you or other family members from upsetting news or events. But you can't protect someone all the time, and it uses up energy that could be used in better ways. If your

family seems to be trying to protect you from becoming upset, you might gently tell them that a better use of their energy would be to support you and take good care of themselves.

When you let your family members know how you feel, both emotionally and physically, they will be able to better understand what you are going through, give you support, and help you make informed decisions.

## Dealing with unexpected feelings

You may find that you're taking out your anger and frustrations on the people you care about most. And even in the most loving families, members sometimes feel resentment or anger when one person is sick and can't do their part for a while. This is often true when the changes last for a long time.

Though this kind of anger can be confusing and upsetting for everyone, it's a common response to a major life change. The best thing you can do for each other is be honest about what you're feeling. Fears about the future and feelings of guilt, frustration, and confusion are often less upsetting when you share them with others in a calm, honest manner. Doing so can also help free all of you from the burden of unspoken fears and concerns.

Sometimes you and your loved ones will feel out of step with each other. For instance, you may feel quite hopeful while your spouse is feeling scared. This can be upsetting, but remember, people react differently to stressful situations. Some family members may become more absorbed in work. Some may become overly involved in your treatment or personal life, while others may remove themselves from the situation and become involved in activities outside the home. Though it may be hard to do, talking about differences in your coping styles will help you respect and understand each other and, in the end, work together.

## Talking with children about cancer

If there are young children in your family, you may be worried about how they will respond to cancer. How a child reacts to upsetting news often depends on how the adults are handling it. Many times adults have their own strong, private feelings about a cancer diagnosis, and they want to protect the children from their fears and worries. Family members should decide ahead of time how best to talk to their children about cancer.

Keep in mind that if children are not given honest answers, what they imagine may be worse and even more upsetting. Both adults and children can learn to cope with cancer and its treatments. When talking to children about cancer, you should give them truthful information that they can understand. It's best to share small amounts of information over time and keep the answers suitable to their age and level of understanding. Be sure to give children a chance to ask questions and have their questions answered.

If you would like expert help, you could have a social worker or school counselor talk with your child, too. They may know of support groups for children in your area. They can also give the child a source of support that's outside of the family.

## Romantic relationships

If you are single, you may be unsure how and when to share a new cancer diagnosis with a romantic partner. Trust yourself to be the judge of the best time to share this news. Remember that this decision is yours to make. But try to give this person a chance to deal with the news – don't assume they will back away from your relationship because of the cancer. Whatever the reaction, you are not at fault for sharing the news at a "bad time." You may find it helps to practice what you will say with a friend before talking with your new partner.

## Your friends and adult relatives

The decision to discuss your cancer diagnosis with friends and adult relatives is a private one. You may find that in the beginning you only want to tell your spouse or partner and 1 or 2 close friends or family members. Over time you may want to share with a circle of friends and loved ones. Overall, it's usually best to be honest. Keeping cancer a secret can lead to more stress at a time when you need the support of others. Remember, too, that your friends will most likely learn about your cancer at some point. If and when they do, they may feel hurt if you haven't told them. This can sometimes make it harder for them to be supportive in the future.

Before you talk to others about your illness, think through your own feelings, your reasons for telling them, and what you expect of them. People react differently to upsetting news, so try to be ready for this. Many times people don't know what to say, and this makes them feel awkward and uncomfortable. They also may feel sad or be afraid of upsetting you. They may withdraw or distance themselves but not explain that it's because they feel sad. Some may become overly polite and careful or ask too many personal questions.

Sometimes people don't mean to, but they react in hurtful ways because of their own fear or lack of information. For example, someone may say, "I know just how you feel," when they have never had cancer. This may upset you, because you know that it's not true. Or, someone may begin to tell you a sad and discouraging story of another person with cancer who died. This is the last thing you want or need to hear! Sometimes people are just talking because they feel the need to respond, even though they don't know what to say. You can help them by telling them what you're OK talking about and what makes you uncomfortable. You could also tell them that you only need them to listen to you and you don't need them to say anything other than that they care and are there for you.

Most likely your friends' hearts are in the right places. They probably want to help you any way they can, but they aren't sure how to be helpful. Be ready to tell them how they might help. You might ask them to do things like drive you to and from the clinic, do your grocery shopping, mow the grass, take your children to school or sports activities, or pet-sit for you.

Once people have had time to adjust to the news, try to help them understand what's happening with you. Explain what kind of cancer you have and the treatments you'll need. Give them a clear and honest picture of what your life is like right now. Find out what they think and how they feel. Try to answer their questions. Be direct with others and express your needs and feelings openly. It's usually more stressful to hide emotions than to express them. Sharing can help you and those close to you.

# Making treatment decisions

The number and kinds of treatment choices you have will depend on the type of cancer; the stage (extent) of the cancer; and your age, overall health, and personal needs. You are a key part of your cancer care team – you should talk about what treatment choices are best for you. Don't be afraid to ask questions – as many as you need. Make sure you understand your options. A cancer diagnosis almost always makes people feel like they have to start treatment as soon as possible. But you usually have plenty of time to think through all your options so you can make the best possible choice.

## How is cancer treated?

The major types of treatment for cancer are surgery, radiation, and chemotherapy (which are reviewed in the next section, “Common types of cancer treatment”). You might also have heard about hormone therapies, biologic therapies, targeted therapies, and stem cell transplants.

We have detailed information on all of these treatments that may help you as you make decisions. We also have more details on common treatment side effects and how to manage them. Call 1-800-227-2345 to learn more and have free information sent to you, or learn more at [www.cancer.org](http://www.cancer.org).

## What treatment will be best for me?

Your cancer treatment will be based on your situation. Certain types of cancer respond better to certain types of treatment, so knowing the exact type of cancer you have is an important step in deciding which treatments will work the best. The cancer's stage (how much cancer there is and where it is) will affect treatment options, too.

Your health, lifestyle, and personal preferences will also play a part in deciding which treatment plan is best for you. Some types of treatment might work better for you than others, so be sure you understand your options. Don't be afraid to ask questions. It's your right to know what treatments are most likely to help and what their side effects may be.

## What is the goal of my treatment?

Before starting treatment, ask about the goal of treatment. Is the purpose of the treatment to cure the cancer, control it, or treat problems it's causing? This is a key part of the decision-making process. Sometimes the goal of treatment can change over time.

## What is remission?

Remission (re-**mish**-un) is a period of time when the cancer is responding to treatment or is under control. Some people think that remission means the cancer has been cured, but that is not always the case.

In a complete remission, all the signs and symptoms of the disease go away and cancer cells can't be found with any of the tests used for that cancer. It's also possible to have a partial remission. This is when the cancer shrinks but does not go away completely.



Remissions can last anywhere from many weeks to many years. Complete remissions may go on for years and over time be considered cures. If the cancer returns, more treatment might lead to another remission. A cancer that has recurred (come back) may respond to a different type of treatment, such as a different group of drugs or radiation versus surgery.

## What is staging?

Staging is the process of finding out how much cancer there is and how far it has spread. Staging the cancer is a key step in learning your treatment choices. It will also give your health care team a better idea of your overall outlook for recovery. But the tests and exams needed to stage a cancer can take time, and people are often eager to begin treatment right away. Try not to worry that the staging process is taking up treatment time. Keep in mind that by staging the cancer, you and your health care team will know which treatments are likely to work best before starting treatment.

A staging system is a way for your health care team to sum up the extent of the cancer. The TNM system is the one used most often. It gives 3 key pieces of information:

- **T** usually describes the size of the main **tumor** and whether it has spread to nearby tissues and organs.
- **N** describes how far the cancer has spread to nearby lymph **nodes**.
- **M** shows whether the cancer has spread (**metastasized**) to other parts of the body.

Letters or numbers after the T, N, and M give more details about each of these factors. For instance, a tumor staged as T1, N0, M0 is a tumor that is very small, has not spread to the lymph nodes, and has not spread to distant parts of the body.

Once the TNM descriptions have been found, they are grouped together into a simpler set of stages, in most cancers stage 0 through stage IV (0-4). As a rule, the lower the number, the less the cancer has spread. A stage IV (4) means a more serious, widespread cancer.

After looking at your test results, your doctor will tell you the stage of your cancer. Be sure to ask your doctor any questions you have about what the stage of your cancer means and how it affects your treatment options.

## Common types of cancer treatment

### Surgery

Many people with cancer have surgery, especially if the cancer appears to be contained in one area (localized). Surgery may be used to remove it along with any nearby tissue that might contain cancer cells.

Sometimes it's hard to tell how much surgery will be needed until the surgeon sees the extent of the cancer during the operation. Surgery is most successful when the tumor has not spread to other areas. Surgery offers the greatest chance of a cure for many types of cancer. It may also be used to treat problems caused by cancer, such as taking out a tumor that's blocking the intestine.

Other treatments, such as radiation therapy and chemotherapy, may be used along with surgery. They may be given before or after the surgery.

## Radiation therapy

Like surgery, radiation (**ray-dee-A-shun**) therapy is used mostly to treat localized cancers – those contained in one area. It's used to relieve problems caused by cancer, too. For example, it can be used to shrink a tumor that's pressing on a nerve and causing pain. Radiation destroys cancer cells or damages them so they can't grow. It can be used alone or along with surgery or chemotherapy. More than half of all people with cancer get radiation at some point.

Radiation is given 2 ways: either through external high-energy rays or through implants put in the body near the tumor.

### External radiation

Getting external radiation is painless, much like having an x-ray taken. It's usually done in an outpatient setting, and the treatments take very little time. Treatment is most often given 5 days a week for 5 to 8 weeks, depending on the size, place, and type of cancer being treated.

### Radiation implants

In some cases, radiation may be given through implants placed inside the body. Another name for radiation given as an implant is brachytherapy (**brake-ee-THER-uh-pee**).

This type of radiation uses small containers of radiation that are placed in or near the tumor while a person is in a deep sleep (under general anesthesia [**an-es-THEE-zhuh**]) or after the area is numbed (local anesthesia). They allow a person to get a higher total dose of radiation to a smaller area and in a shorter amount of time than with external radiation. Some implants can be put in at an outpatient center, while others may require that the person stay in the hospital for a few days. The placement can be permanent or temporary.

### Side effects of radiation therapy

Side effects vary from patient to patient and depend on the part of the body being treated and the amount of radiation used. The most common side effects are feeling tired, skin changes in the area of treatment, and some loss of appetite. Other side effects usually are related to the treatment of specific areas, such as hair loss after radiation treatment to the head. Most side effects go away in time, but some might last or might not show up until years later. Be sure to talk to your health care team about any problems you have – there are often ways to help.

## Chemotherapy

While surgery and radiation therapy are used mainly to treat localized cancers, chemotherapy ([**key-mo-THER-uh-pee**] often called just “chemo” [**key-mo**]) is used to treat cancer cells that have spread to other parts of the body. Depending on the type of cancer and its stage, chemo can be used to cure cancer, to keep it from spreading, to kill cancer cells that may have already spread, to slow the cancer's growth, or to relieve symptoms caused by cancer.

Chemo is sometimes given before surgery to shrink a tumor before it's removed. Chemo is also sometimes used after surgery, to lower the risk of cancer returning.

## **What is chemo?**

Chemo is treatment with strong drugs that are most often given by mouth or by injection. Most often, a combination of chemo drugs is used. Unlike radiation therapy or surgery, chemo drugs can treat cancers that have spread throughout the body because they travel through the bloodstream.

## **How is chemo given?**

Chemo is given in cycles, each followed by a rest period. A cycle may be one dose followed by several days or weeks without treatment. This gives the normal cells in the body time to recover from the drug's side effects. Doses may also be given several days in a row, or every other day for several days, followed by a period of rest. Some drugs work best when given non-stop over several days.

Different drugs work best on different schedules. If more than 1 drug is used, the treatment plan will show how often and exactly when each drug should be given. The number of cycles you get may be planned before treatment starts (based on the type and stage of cancer) or may be flexible, in order to see how the treatment affects the cancer and your overall health.

## **Side effects of chemo**

Side effects of chemo depend on the type of drugs, the amounts taken, and the length of the treatment. The most common side effects are nausea and vomiting, short-term hair loss, increased chance of infections, and fatigue (tiredness). Some chemo drugs can have other side effects. Be sure to ask your doctor or nurse what to watch for based on the drugs you're getting.

Most side effects can be controlled with medicines, supportive care, or by changing the treatment schedule. If you have side effects, ask your doctor or nurse about ways to help ease them. It's important to tell your health care team about any side effects you have because some, like fever and infection, may need to be treated right away.

People getting chemo sometimes become discouraged about the length of time the treatment is taking or the side effects they're having. If that happens to you, talk to your doctor. There are often ways to reduce the side effects or make them easier to manage. Keep in mind that the expected benefits of the treatment should outweigh any problems you have because of it.

## **Other drugs used to treat cancer**

Some new cancer treatments use drugs that are different from what most people think of as chemo. Examples of these drugs are biologic therapies and targeted therapies.

**Biologic (by-o-LA-jick) therapies** are sometimes called immunotherapy (**im-yuh-no-THER-uh-pee**). These treatments use the body's immune system to fight cancer or lessen the side effects of some cancer treatments. Biologic therapies can act in several ways. They can stop or slow down cancer cell growth, help healthy immune cells control cancer, or help repair normal cells damaged by other forms of cancer treatment.

**Targeted therapies** are drugs that target the specific gene changes that help cancer cells grow. They attack the cancer cells' inner workings – the parts that make them different from normal, healthy cells.

These drugs tend to have side effects different (and often less severe) from standard chemo drugs. They are often given along with standard chemo and/or other cancer treatments.

When you have cancer, you are likely to hear about ways to treat the disease or relieve symptoms that are different from mainstream (standard) medical treatments. These methods can include vitamins, herbs, special diets, or methods such as acupuncture or massage – among many others.

Not everyone describes complementary and alternative therapies the same way, so it can be confusing. The American Cancer Society uses *complementary* to refer to medicines or treatments that are used *along with* your regular medical care. *Alternative* treatments are those used *instead of* standard medical treatment.

**Complementary methods** most often are used to help you feel better. Some examples are meditation to reduce stress, acupuncture to relieve pain, or peppermint tea to ease nausea. There are many others. Some of these methods are known to help, and others have not been tested. Some have been proven not to be helpful, and a few have even been found harmful.

**Alternative treatments** are those that are used instead of standard medical care. These treatments have not been proven safe, and clinical trials have not been done to prove that they work. Some of these methods may even be harmful. The biggest danger in most cases is that you may lose the chance to benefit from standard treatment. Delays or interruptions in your medical treatments may give the cancer more time to grow and make it less likely that treatment will help.

Sometimes people suggest that their method can cure cancer without having serious side effects, and it's normal to want to believe them. But the truth is that most of these treatments have not been tested or proven to work in treating cancer.

Contact us at 1-800-227-2345 to learn more about complementary and alternative methods in general and to find out about the specific methods you are looking at. You can also check them out on the Complementary and Alternative Medicine page of [www.cancer.org](http://www.cancer.org).

## Clinical trials

You may have had to make a lot of decisions since you've been told you have cancer. One of the most important decisions you will make is choosing which treatment is best for you. You may have heard about clinical trials being done for your type of cancer. Or maybe someone on your health care team has mentioned a clinical trial to you.

Clinical trials are carefully controlled research studies that are done with patients. These studies test whether a new treatment is safe and how well it works. Clinical trials may also test new ways to find or prevent a disease. These studies have led to many new ways to prevent, diagnose, and treat cancer.

A clinical trial is only done when there is good reason to believe that the treatment, test, or procedure being studied may be better than the one used now. Treatments used in clinical trials are often found to have real benefits. If that happens, they may go on to become tomorrow's standard treatment.

To find out more about clinical trials for your type of cancer, ask your cancer care team if your clinic or hospital offers clinical trials. The American Cancer Society also offers a clinical trials matching service, which can help you find a clinical trial that's right for you. You can reach this service at 1-800-303-5691 or at [www.cancer.org/clinicaltrials](http://www.cancer.org/clinicaltrials).

Taking part in a clinical trial does not keep you from getting any other medical care you need. You are free to leave the study at any time, for any reason. You can get a lot more information on clinical trials in our document called *Clinical Trials: What You Need to Know*. You can read it on [www.cancer.org](http://www.cancer.org) or call us to have it sent to you.

## How is treatment planned?

Planning cancer treatment takes time. Most people want to start treatment right away. They worry that extra time needed to do tests or other things takes up precious time that could be spent treating the cancer.

## How long is too long to wait before treatment?

Different types of cancer grow at different rates. Certain types of leukemias and lymphomas tend to grow faster than solid tumors, so treatment for these cancers might need to be started within a couple of days. But most cancers do not grow very quickly, so there's usually plenty of time to get information about your cancer, see specialists, and make decisions about which treatment is best for you. Keep in mind that the information gathered during this time is key to planning the best treatment for you. If you're worried because treatment isn't starting right away, discuss your concerns with your cancer care team and be sure that any delays will not cause problems.

## How does my doctor know how to treat my cancer?

The type of treatment you get will depend on a lot of things. The type of cancer (including where it is and the cell type), the stage or extent of the cancer, and your overall health are the most important issues. Other things to think about are your personal situation (including how well you can travel and take part in treatment), how well each treatment will likely work in your case, and the possible side effects and risks of each type of treatment.

Your doctor will first gather information about your cancer. A biopsy and other lab tests, physical exams, imaging tests, and any problems the cancer is causing, are all used to decide which treatment options might be best for you. Your doctor may also talk with other experts to get their opinions. Your doctor will then discuss the goal of treatment and the pros and cons of each treatment option with you.

## Getting a second opinion

One way to find out if a suggested treatment is the best one for you is to get the opinion of at least one other doctor before starting treatment. Your doctor should not mind if you get a second

opinion and can help refer you to another doctor. Some insurance companies even require a second opinion, but find out if your insurance company covers it before you get one.

Once you have decided who you will see for your second opinion, ask that your medical records, original scans, and all test results be shared with the new doctor. That way you won't have to repeat them. You may need to sign a release of information form to have the records sent. Or you may want to take copies of your medical records to the new doctor yourself.

## What should I ask my doctor?

Your relationship with your doctor is a key part of your care. You will likely have one doctor who coordinates all of your care. This doctor should be someone you feel comfortable with and someone who listens to your concerns and answers all of your questions. Your doctor will explain your diagnosis, your health condition, your treatment options and goals, and your progress throughout treatment.

There will also be nurses and other health professionals with special training and skills who will be working with your doctor. These nurses are there to help you with your treatment or any side effects you may have. In many cases, the nurses can answer your questions, too. Nurses can also help you get the answers you need from other members of your health care team.

Like all good relationships, your relationship with your doctor is a 2-way street. It's your job to ask questions, learn about your treatment, and become an active part of your cancer care team. Doctors may differ in how much information they give people with cancer and their families. And people who are newly diagnosed also differ in the amount of information they need or want. If your doctor is giving you too much or too little information, let them know. Feel free to ask your doctor questions and let them know what you need.

These are examples of questions you may want to ask:

- What kind of cancer do I have? Where is it?
- Do I need any other tests before we decide on treatment?
- How often do you treat this type of cancer?
- What treatment do you suggest and why?
- What's the goal of treatment – to cure or to control my symptoms?
- What are the possible risks or side effects of treatment?
- Will I be able to have children after treatment?
- What are the pros and cons of the treatment you recommend?
- Are there other treatments I should consider?
- How often will I need to come in for treatment or tests?
- How long will treatment last?
- What if I miss a treatment?

- What kind of changes will I need to make in my work, family life, sex life, and leisure time?
- What are the names of the drugs I will take? What are they for?
- What other drugs or treatments will I need?
- How will we know if the treatment is working?
- Why do I need blood tests, and how often will I need them?
- If other specialists take part in my care, who will be in charge of my treatment plan?
- What symptoms or problems should I report right away?
- If I don't feel sick, does that mean the treatment isn't working?
- What's my outlook for the future (prognosis), as you see it?
- What are the chances that the cancer may come back (recur) with the treatment plans we've discussed? What would we do if that happens?
- What can I do to be ready for treatment?
- Are there any special foods I should or should not eat?
- Can I drink alcoholic beverages?
- How much will treatment cost? Will my insurance pay for it?
- What's the best time to call you if I have a question?
- How do I reach you after hours or on weekends and holidays?
- Should I think about taking part in a clinical trial?

Make sure that all your concerns and questions, no matter how small, have been answered. It may take more than 1 visit to discuss all of your concerns, and new questions may come to mind. It can be hard to remember all your doctor talks about. Some people find it helps to take notes, bring a family member or friend, record the conversations, and/or bring a list of questions and write down the doctor's answers.

## **Will I be able to work during treatment?**

The answer to this question depends on the type of treatment you get, the kind of cancer, your overall health, and the kind of work you do. How much work you can do and whether you need to limit how much you do both depend on how you feel during treatment. Some people with cancer are able to go to work and go on with much of their normal everyday activities while getting treatment. Others find that they need more rest than usual and can't do as much. Your doctor may suggest that you limit some of your activities.

You may be able to schedule your treatments late in the day or right before the weekend so that they affect your work as little as possible. If your treatment makes you very tired, you might have to change your work schedule for a while. You may be able to agree on a part-time schedule, or maybe you can do some of your work at home. Under federal and state laws, some employers may

be required to allow you to work a flexible schedule to meet your treatment needs. Call us for more on this or see the section on [www.cancer.org](http://www.cancer.org) called “Working During and After Treatment.”

## Will I be able to exercise during treatment?

Your activity level during cancer treatment will depend on your overall fitness and health before the cancer was found and on how treatment is affecting you. Your doctor can tell you if you can exercise and what kind of exercise is OK. Exercise, with periods of rest built into your day, can be very helpful. It can boost your energy level, relieve stress, decrease anxiety and depression, and make you hungry.

If you enjoyed regular exercise before cancer, keeping up your exercise routine during treatment may help you feel like some areas of your life are still “normal.” If you have surgery as part of your treatment, your doctor may recommend changes to help prevent problems and keep full use of your joints and muscles. Your doctor or a physical therapist can help you come up with a schedule and activities that are right for you.

## How will cancer affect my sex life?

Sexual feelings and attitudes vary greatly among people under any circumstances. This is also true during illness. Some people have little or no change in their sexual desire and energy level because of cancer. Others find that their interest declines because of the physical and emotional stresses of cancer and treatment.

If your sexual desire and energy levels change during treatment, keep in mind that this is normal and can happen for many reasons. Some common reasons are stress, feeling tired, and other treatment side effects. Body image issues may also play a part.

If you were comfortable with and enjoyed a healthy sex life before starting treatment, chances are you will still find pleasure in physical intimacy during your treatment. You may find that intimacy takes on a new meaning and you relate differently. Hugging, touching, holding, and cuddling may become more important, while sex may become less important.

A healthy sex life can be hard to maintain when there are so many physical and emotional factors involved. Get as much information from your doctor and other resources as you can so that you understand what you can and can't do before, during, and after treatment. For more information, order the free booklets *Sexuality for the Man With Cancer* and *Sexuality for the Woman With Cancer* by calling us at 1-800-227-2345, or read them at [www.cancer.org](http://www.cancer.org).

## Fertility

Even though pregnancy may be possible during cancer treatment, it's not wise – some treatments could cause birth defects. Many doctors tell men and women to use birth control throughout their treatment.

Women may find that their periods become irregular or stop while getting treatment. This does not mean that they can't get pregnant, so birth control is still needed during treatment. In men, the treatments may reduce or damage sperm cells. But in many cases, men are again fertile after treatment is done.



Whether or not you plan to have children, it's normal to worry about how treatment will affect your fertility. Talk to your doctor before treatment starts about any questions or concerns you have about fertility and cancer treatment. This will help you make the treatment decisions that are best for you.

You can also learn more about how different cancer treatments can affect fertility and what your options are if you want to have children later. Call us for a free copy of *Fertility and Men With Cancer* or *Fertility and Women With Cancer*, or read this information online at [www.cancer.org](http://www.cancer.org).

## How will I pay for all this?

### How much will it cost?

The cost of treatment depends on the type of treatment, how long it lasts, how often it's given, and whether you are treated at home, in a clinic, in the doctor's office, or in the hospital. Most health plans, including Medicare, cover at least part of the cost of many treatments. In many states, Medicaid may help pay for certain treatments. Before you start treatment, find out whether your insurance will pay for your care. Also, find out what part of the cost, if any, you will have to pay.

### Health insurance

If you are in a low-income bracket or are not working, check to see if you can get state or local benefits, such as Medicaid. If you are employed and are thinking about leaving your job, find out about COBRA options through your current insurance plan. COBRA may allow you to switch from your employer's insurance plan to an individual plan with similar coverage. Many group plans allow this, but the cost may be much higher. You usually must apply for individual plans like this within 30 to 60 days of leaving your job. Call us or read *What Is COBRA?* at <http://www.cancer.org> for more on this.

Learning about your health insurance will help you be ready for the cost of treatment and can prepare you to talk with all the people who will work with your health insurance plan to get payment for your care. Patients who understand their insurance and know how to communicate with the insurance company are more likely to get the coverage they need. And knowing what your health insurance will cover ahead of time can give you some peace of mind as you make treatment decisions.

There are actions people who have a dispute with their health plan can take. Always keep records of your care and all interactions with health insurance staff and your health care team. Your doctor can usually help you. In cases of denied coverage, your doctor may have to give more information about your case to the health plan.

If you don't have health insurance, there are several options to look into when trying to get coverage. Talk to a social worker or call us at 1-800-227-2345 to find out more about your options.

Our information called *Health Insurance and Financial Assistance for the Cancer Patient* can help you learn more about this. Read it on [www.cancer.org](http://www.cancer.org), or call us for a free copy.

# What other resources do I have?

Your health care team will be your first source of information and support, but there are many places where you can get more help when you need it. Hospital- or clinic-based support services are an important part of your care. These might include nurse or social work services, financial aid, nutritional advice, rehab, or spiritual help.

Some people worry that asking for support is a sign of weakness. They may feel that they need to “be strong” and handle things on their own. You don’t have to be alone to be strong. Emotional support is needed at every stage of the cancer journey, and it can come from many places. Along with your family and friends, consider other sources of support, such as your health care team, support groups, and your place of worship. Asking for support is one way you can stay in control of your situation. Talking about what’s going on and how you feel can bring comfort and reassurance.

It can be awkward to talk about cancer, and sometimes people worry that they will upset you by bringing up the topic or talking about your illness. You may need to take the first step.

Individual or group counseling or support groups can help you cope with the stress of your illness. Many people with cancer find it easier to talk with people who are going through experiences like theirs. Support groups can also give you useful information about your cancer and its treatment. If you’re not able to get to a group near you, there are online support groups like the American Cancer Society Cancer Survivors Network<sup>®</sup>. This is a free, online support network for cancer survivors all across the country. You can access it at <http://csn.cancer.org>. Community agencies can sometimes help with the many demands cancer places on families and friends. And all of these resources may also be helpful for people who are supporting loved ones with cancer.

A person with cancer is never alone. There are people who care and who are ready to help. For more information about cancer or any of the other topics addressed here, contact us at 1-800-227-2345 or find us at [www.cancer.org](http://www.cancer.org).

## To learn more

### American Cancer Society programs

The American Cancer Society programs listed below may be offered in your area. Check your local phone book for your nearest Society office or call 1-800-227-2345.

### Finding hope and inspiration

The American Cancer Society Cancer Survivors Network is a free online community created by and for people with cancer and their families. This online community is a welcoming, safe place for people to find hope and inspiration from others who have “been there.” Services include discussion boards, chat rooms, and personal web space to tell your story, blog, post images, exchange private messages with members, and much more. Check it out at <http://csn.cancer.org>.

## **Lodging during treatment**

The American Cancer Society Hope Lodge<sup>®</sup> program offers people with cancer and their families a free, temporary place to stay when their best hope for quality care is away from home. By not having to worry about where to stay or how to pay for lodging, Hope Lodge guests can focus on getting well. And Hope Lodge facilities offer much more than just free lodging. They provide a nurturing, home-like environment where patients and caregivers can retreat to private rooms or connect with others who are going through similar experiences. The Society can tell you if there are other resources offering free or low-cost housing in cities where a Hope Lodge facility is not available.

## **Cancer education classes**

I Can Cope<sup>®</sup> classes are available free online for people facing cancer and their families and friends. The educational program's self-paced classes can be taken anytime, day or night. Take as few or as many classes as you like. Many topics are offered such as information about cancer, managing treatments and side effects, healthy eating during and after treatment, communicating with family and friends, finding resources, and more. These free classes are available anytime at [www.cancer.org/icancope](http://www.cancer.org/icancope).

## **Help with appearance-related side effects of treatment**

Some cancer treatments can change the way you look. At a Look Good Feel Better<sup>®</sup> session, women can learn ways to help with side effects like hair loss and skin changes. There are also programs for men and teens. This free program is offered jointly by the American Cancer Society, the Personal Care Products Council, and the Professional Beauty Association. For more information, call 1-800-395-LOOK (1-800-395-5665) or visit [www.lookgoodfeelbetter.org](http://www.lookgoodfeelbetter.org).

## **Breast cancer support**

If you have breast cancer, you may want to talk to someone who knows what you're feeling – someone who has “been there.” The American Cancer Society can help through our free Reach To Recovery<sup>®</sup> program. We can match you with a volunteer who will talk with you about coping with your breast cancer diagnosis and treatment. Every volunteer is trained and is a breast cancer survivor. They know what it's like to hear the words “You have breast cancer.”

## **Transportation to treatment**

Every day, thousands of cancer patients need a ride to treatment, but some may not have a way to get there. If finding a ride is a problem for you, we may be able to help. The American Cancer Society Road To Recovery<sup>®</sup> program provides rides to and from treatment for people with cancer who don't have a ride or are unable to drive themselves. Volunteer drivers donate their time and the use of their cars so that people can get the lifesaving treatments they need.

## **Mastectomy and hair-loss products**

The “*tlc*”<sup>™</sup> magalog is the American Cancer Society's catalog and magazine for women. It offers helpful articles and a line of products made for women fighting cancer. Products include wigs, hairpieces, breast forms, bras, hats, turbans, swimwear, and accessories. You can order by phone at

1-800-850-9445 or at [www.tlcdirect.org](http://www.tlcdirect.org). All proceeds from product sales go back into the American Cancer Society's programs and services for patients and survivors.

## More information from your American Cancer Society

The following information may also be helpful to you. These materials may be ordered from our toll-free number, 1-800-227-2345, or read at [www.cancer.org](http://www.cancer.org).

### Dealing with the medical system

Choosing a Doctor and a Hospital (also in Spanish)

Talking With Your Doctor (also in Spanish)

Health Professionals Associated With Cancer Care

### More on treatment

Understanding Cancer Surgery: A Guide for Patients and Families (also in Spanish)

A Guide to Chemotherapy (also in Spanish)

Understanding Radiation Therapy: A Guide for Patients and Families (also in Spanish)

### Coping with cancer

Coping With Cancer in Everyday Life (also in Spanish)

Helping Children When a Family Member Has Cancer: Understanding Psychosocial Support Services

Caring for the Patient With Cancer at Home: A Guide for Patients and Families (also in Spanish)

Nutrition for the Person With Cancer: A Guide for Patients and Families (also in Spanish)

We have many other sources of information, including books. If you do not see what you are looking for here, please call us. We are available anytime, day or night, to help you with cancer information and support at 1-800-227-2345 or [www.cancer.org](http://www.cancer.org).

**Last Medical Review: 3/6/2014**

**Last Revised: 4/7/2014**

**2014 Copyright American Cancer Society**

For additional assistance please contact your American Cancer Society  
1-800-227-2345 or [www.cancer.org](http://www.cancer.org)