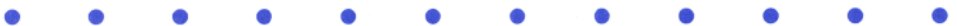




**For Smokers Who Are
Not Ready to Quit**



You say you don't want to quit...

... and that's OK. We understand that not everyone who smokes may be ready to quit smoking or even want to quit smoking. Every person needs to make his or her own choice. We know that no amount of pressure from a family doctor, oncologist, friend, or family member can make a person want to quit smoking.

What we would like to do is provide you with up-to-date information that will help you make good decisions about your own health. As you and your Partnership for Health peer counselor start to explore different areas of your health and well-being, the two of you will have the chance to set goals together. This experience may help you begin to think about quitting smoking. And if you decide you're ready, your peer counselor will be there to help you take the next steps.

Did you know?

Adults who have had a childhood cancer or similar illness have the same kinds of worries and concerns about their health and lead similar kinds of lifestyles as other adults do.

But adults who have had a childhood cancer or similar illness have a special situation when it comes to the risks of smoking. Smoking can increase the likelihood of a person developing a new cancer - even if the first cancer wasn't in the lungs or even related to smoking. In fact, most smoking-related new cancers are not as curable as many childhood cancers.

Radiation treatment-while life-saving at the time - can set the stage for a new cancer in someone who smokes later in life. And smoking can increase the late effects of some chemotherapy drugs. ("Late effects" are the kinds of health problems that occur long after treatment ends.) This can mean increased risk of problems with your heart and circulation.

Giving some thought to quitting smoking means taking a big step toward protecting your own



health now. It can help to avoid a new cancer in the future. It also means protecting the health of your family and those around you by not exposing them to secondhand smoke.

“I took up smoking about a year after I finished treatment. Everybody who I spent time with smoked, so I did too. I wish I hadn’t started, but I didn’t know about the risk.”

Gina S., 25,
leukemia survivor

Are you physically dependent on cigarettes?

Some smokers aren’t sure if they are physically dependent on nicotine. To help figure it out for yourself, answer this question:

Do you smoke within 30 minutes of waking up in the morning?

Yes

No

If you answered “yes,” you may be physically dependent on the nicotine in cigarettes.

If you’re physically dependent on cigarettes . . .

Many people who have had a childhood cancer (or similar illness) and smoke do so for the same reason as other adults who smoke: they are addicted to the nicotine in cigarettes. While it can be difficult to overcome this addiction, it’s not impossible - and it’s getting easier with new and very effective therapies. If you do decide to quit smoking, your peer counselor can provide you with information on nicotine patches. He or she can also talk to you about other possible ways to overcome an addiction to nicotine.

Why think about quitting?

People who smoke sometimes have a difficult time imagining the other day-today benefits of quitting. Even though you are not ready to quit right now, take a look at this list. It may give you something to think about. Consider your own benefits and write them down below, and you can discuss them with your peer counselor.



Quitting smoking can mean:

- You won't have a smoker's cough anymore.
- You'll be able to breathe easier.
- Food will taste and smell better.
- You'll have fewer colds and flus.
- You'll sleep better.
- You'll have better-smelling breath.
- You'll have more energy
- Your eyes and throat won't be so irritated.
- You'll save money spent on cigarettes and lighters.
- Your skin will look better.
- You (and your clothes and car) won't smell like cigarettes.
- You'll be able to go wherever you want without worrying about whether or not you can smoke.

It could also mean:

Some small steps

Many smokers who aren't quite ready to stop smoking decide to take some small steps, just to see what it would be like to quit someday. Read the following suggestions and try out a few **if you want to**. See how they feel - they might be easier than you thought.



- Buy each pack of cigarettes one at a time, instead of a whole carton.
- When you get the urge to smoke, wait 5 minutes before smoking.
- Don't smoke in your car.
- Smoke only in one room of your house or apartment.
- Before having a cigarette, take a 5-minute walk.

Are there any other small steps you think you could take? List them here, and you'll have the chance to discuss them with your peer counselor:

"I know I shouldn't smoke! I even smoked a little during my radiation treatment. I just don't know how I'll be able to quit. But I have to try - otherwise, I'll never know if I could do it."

William H., 31,
brain tumor survivor

Your own changes

We understand that health habits are a very personal decision - and that adults who have had a childhood cancer or similar illness may grapple with health decisions every day. Since you are not ready to quit smoking, we'd like to work with you on the areas you are interested in changing. These are the areas that are most important to you.

Think about what areas of your health you would like to change and make a list below. Some areas that people often think about changing include physical activity, eating right, and others. When you speak with your peer counselor, you'll have a chance to review the list, and he or she can help you get started.

You have it in you

Some adults who have had a childhood cancer or similar illness and don't want to make health changes feel that way because they doubt they can do it successfully. Others may have tried to quit smoking in the past and been disappointed when they slipped. Still others feel that they should "live for today," and worry about whatever may happen later, rather than face any health issues head-on now.

Whatever your situation, ***we can work with you!***

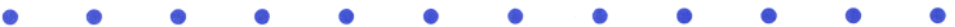
Here are some questions to ask yourself:

- What are some other things that I've done in the past that were very challenging?
- What choices have I made before that were good for me?
- If I had help and support from someone who could relate to me, would making health changes seem less difficult?

Partnership for Health is a joint project of the Dana-Farber Cancer Institute's Center for Community-Based Research and the University of Minnesota Long-Term Follow-Up Study. It is funded by the National Cancer Institute and Liberty Mutual.



**For Smokers Who Are
Thinking About Quitting**



You say you're thinking about quitting . . .

That's great! But we also understand that just because you're thinking about quitting doesn't necessarily mean that you're ready to quit. No one - including your family doctor, oncologist, friend, or family member - can tell you if and when is the right time to quit. You are the only one who can make that decision.

Partnership for Health would like to help you begin to think about your health goals and how smoking might affect them. As you and your peer counselor work together, you will learn more information that will help you make decisions about your smoking and your health. If you decide you are ready to quit, your peer counselor will be there to help you take the next steps.

Did you know?

Thinking about quitting smoking is especially important as a person who has experienced a childhood cancer or similar illness. Many people don't know that smoking can:

- Increase the likelihood of a person developing a new cancer (even if the first cancer wasn't in the lungs or even related to smoking). In fact, most smoking-related new cancers are **not** as curable as many childhood cancers.
- Worsen the late effects of radiation treatment. While life-saving at the time, radiation can set the stage for a new cancer in someone who smokes later in life.
- Worsen the late effects of some chemotherapy drugs. ("Late effects" are the kinds of health problems that occur long after treatment ends.) This can mean increased risk of problems with your heart and circulation.

By thinking about quitting smoking, you're taking a big step toward protecting your own health now and helping to avoid a new cancer in the future. And it also means protecting the health



of your family and those around you by not exposing them to second-hand smoke.

The air around you

Not only is smoking dangerous to your own health, it can harm others, too. Secondhand smoke (sometimes called ETS, or environmental tobacco smoke) contains the same cancer-causing chemicals that a smoker inhales. It can cause lung cancer and other disease in nonsmokers.

“When I started thinking about quitting smoking, I was scared - but not as scared as I had been about getting cancer again. It was a relief to finally think that I could have more control of my own health and future.”

Kate C., 33,
neuroblastoma survivor

Are you physically dependent on cigarettes?

Some smokers aren't sure if they are physically dependent on nicotine. To help figure it out for yourself, answer this question:

Do you smoke within 30 minutes of waking up in the morning?

Yes

No

If you answered “yes,” you may be physically dependent on the nicotine in cigarettes.

If you're physically dependent on cigarettes . . .

Many people who have had a childhood cancer (or similar illness) and smoke do so for the same reason as other adults who smoke: they are addicted to the nicotine in cigarettes. While it can be difficult to overcome this addiction, it's

not impossible - and it's becoming easier with new and very effective therapies. If you decide to quit smoking, your peer counselor can provide you with information on nicotine patches. He or she can also talk to you about other possible ways to overcome an addiction to nicotine.



What kind of smoker are you?

People have many different reasons for smoking, and it can be hard to realize exactly what those reasons are. But understanding the reasons can be the key to the why, where, and when of your smoking - and can help put you on the path toward quitting.

For example, some smokers always have a cigarette whenever they finish a meal. Others may smoke when they're on the phone. One smoker might smoke when she is bored, and another might smoke when he's angry. Another smoker may always take a smoke break at work, or light up when she's in her car.

To help determine when and where you smoke, and what emotions encourage you to smoke, try a small experiment by keeping a smoking diary.

Whenever you smoke, write down the following:

What time of day? Where was I? How did I feel?

(For example:)

3:15 p.m.

Break room
at work

Bored

You will also find some cards included at the back of this manual. Please cut these on the dotted lines and carry them with you. These cards will allow you to do this experiment when you are away from home.

As you work with your peer counselor, you'll talk about some of the things that make you want to smoke. By getting to know these triggers, you'll learn how to be prepared and plan what to do instead of smoking - the first steps toward becoming smoke-free.

What's good about smoking? What's bad?

Many adults who have had a childhood cancer or a similar illness have conflicting thoughts about smoking: they know it's "bad" for them, but at the same time, they enjoy a lot of things about it. To help you weigh the positives against the negatives, fill the in the lists below.



Pros

(What I like
about smoking)

Cons

(What I don't like
about smoking)

Why think more seriously about quitting?

Even if you are thinking about quitting smoking, it can sometimes be hard to imagine the day-to-day benefits of quitting. Even though you may not be ready to quit right now, it will be helpful to read this list. It may help you think more about what can be gained by quitting. Consider your own benefits and write them in below.



(If this is your second manual, this may look familiar and you might have already done this exercise. It can be helpful to compare your answers to the ones in the last manual.)

Quitting smoking can mean:

- You won't have a smoker's cough anymore.
- Food will taste and smell better.
- You'll have fewer colds and flus.
- You'll sleep better.
- You'll have better-smelling breath.
- You'll have more energy.
- Your eyes and throat won't be so irritated
- You'll save money spent on cigarettes and lighters.
- Your skin will look better.
- You (and your clothes, hair, and car) won't smell like cigarettes.
- You'll be able to go wherever you want without worrying about whether or not you can smoke.

It also could mean:

What are your worries about quitting smoking?

Many people who are thinking about quitting smoking worry about what will lie ahead if they decide to quit. They may worry about having cravings and how to handle them. Or what will happen when they are around other smokers. Most people who quit smoking have a few minor problems, while a few have no problems at all.

List your worries or concerns about quitting smoking - any that you can think of - on the left-hand side. We've filled in the first one for you as an example. Your peer counselor can work with you on the right-hand side.

My worry

I'll be fidgety, irritable, and nervous without cigarettes.

What I can do

Find out about the patch and other things that make quitting easier.

In addition, discussing these things with your peer counselor will help you see that many of these problems are temporary. For example, nicotine withdrawal is a problem that doesn't last forever - and it is actually a good sign, because your body is getting used to functioning without nicotine!

Some small steps

Many smokers who are thinking about quitting smoking decide to take some small steps, just to see what it would be like to quit someday. Read the following suggestions and try out a few. See how they feel - they might be easier than you thought.

- Delay your first cigarette in the morning by 10 minutes.
- Buy only one pack of cigarettes at a time, instead of a whole carton.
- Limit your smoking to only one place.
- Smoke 3 fewer cigarettes a day.
- Quit smoking for only 24 hours - no more.



Even though you are still just thinking about quitting smoking, are there any other small steps you could take? List them here:

The next step

Now that you've addressed the whens and whys of your smoking, the benefits of quitting, and your concerns about quitting smoking, it's time to start asking questions. What would you need to know in order to take the next steps toward changing your smoking? Here are some questions for you to consider; you can begin to fill in the answers and work with your peer counselor on them when you talk.

What is the best way for me to quit smoking?

When should I quit?

Should I use the patch or another kind of nicotine-replacement therapy?

Who can help me? (your peer counselor, friends, family members, for example)

You have it in you

Some adults who have had a childhood cancer (or similar illness) doubt they can quit smoking successfully. Others may have tried to quit smoking in the past and been disappointed. Still others feel that they should “live for today,” and worry about whatever may happen later, rather than face their smoking head-on now.

Whatever your situation, if you ever make the decision to quit smoking, you can do **it!** Here are some questions to ask yourself:

- What are some other things that I’ve done in the past that were very challenging?
- What choices have I made before that were good for me?
- If I had help and support from someone who could relate to me, would quitting smoking seem less difficult?

“When I meet other-people who had cancer as kids, I hate to admit that I smoke. So thinking about myself as a non-smoker looks pretty good to me. Now I just need to figure out how to get there.”

Matt B., 28,
Hodgkin's survivor

Partnership for Health is a joint project of the Dana-Farber Cancer Institute's Center for Community-Based Research and the University of Minnesota Long-Term Follow-Up Study. It is funded by the National Cancer Institute and Liberty Mutual.



**For Smokers Who Are
Ready to Try Quitting**



You say you're ready to try quitting...



Congratulations! By deciding to quit, you've already overcome one of the major challenges that many smokers face. Now that you're ready to make a change, your peer counselor can help you take the next steps.

Most importantly, Partnership for Health wants to help you set your smoking goals at the pace that's right for you. You and your peer counselor will discuss plans for getting started on quitting, but you will always be the one who decides when and how to proceed. Together you can set a quit date, develop a quit plan, and then set that plan into action.

“Because of my cancer so many people have always pressured me to stop that I didn't know where to get advice without a lot of nagging. Once I knew that there was a place to get help and support, I felt ready to try.”

Peter S., 35,
Wilm's tumor survivor

Are you physically dependent on cigarettes?

Some smokers aren't sure if they are physically dependent on nicotine. To help figure it out for yourself, answer this question:

Do you smoke within 30 minutes of waking up in the morning?

Yes

No

If you answered “yes,” you may be physically dependent on the nicotine in cigarettes.

If you are physically dependent on cigarettes . . .

Many people who have had a childhood cancer (or similar illness) and smoke do so for the same reason as other adults who smoke: they are addicted to the nicotine in cigarettes. While it can be difficult to overcome this addiction, it's not impossible. Some methods to consider trying as you get ready:

- Nicotine fading
- Nicotine patches

Nicotine fading

When preparing to quit smoking, some smokers find that it's helpful to slowly reduce the amount of nicotine that their bodies receive. This process is called nicotine fading.

Different brands of cigarettes contain different levels of nicotine - some more, some less. Start by changing your brand of cigarette, moving from the one you normally smoke to one that has a lower nicotine content. Make the change gradually. If you smoke a high-nicotine brand, you'll need to switch more than once - first to a medium-nicotine brand and then to a low-nicotine brand. Whatever the process, there are some important dos and don'ts to follow when nicotine fading:

DO

- Make sure you buy the right type of brand - one that's lower in nicotine than the brand you normally smoke.
- If you don't like the first brand you choose, try another brand. Just be sure it's lower in nicotine than the brand you normally smoke!
- Be sure to set a quit date before you begin nicotine fading.



DON'T

- Smoke more cigarettes than you normally do.
- Inhale more often or more deeply.
- Go directly from a high-nicotine brand to a low one.

Done correctly, nicotine fading can help you lower the amount of nicotine in your body before you quit, which can lessen your withdrawal symptoms.

Taming your triggers

Below are some of the triggers that trouble most smokers and some strategies to handle them.

Nicotine withdrawal.

When smokers quit, they often worry about symptoms of withdrawal. Even though withdrawing from nicotine may be challenging, it's important to remember that withdrawal is actually a sign that the body is "recovering" from smoking!

The withdrawal symptoms that smokers feel after quitting often vary from person to person, but there is one thing they have in common: they don't last long. Withdrawal symptoms are often at their worst for a few days after quitting, and they often ease up entirely within two weeks.

Afterward, the physical urge to smoke lessens and goes away completely.

Using nicotine patches can help you over the tough spots of withdrawal. If you are using patches, you'll need to know how to use them correctly to get the most out of them. Be sure to discuss any questions you have with your peer counselor.

Whether or not you're using nicotine patches, check out the list below for how to handle different types of withdrawal symptoms. And don't forget to remind yourself that not only will these feelings go away, they are signs that you're getting better!

If You Have

Try This

Headache	Take a warm bath or try deep breathing or cold compresses
Dizziness	Move slowly and use extra caution, especially when sitting or getting up
Dry mouth or throat	Drink lots of water, suck on hard candy, or chew gum
Coughing	A good sign - your lungs are clearing out! Sip warm tea
Constipation or stomach pain	Drink 6 to 8 glasses of water a day and add more fruits, veggies, and fiber to your diet
Fatigue	Take a short walk or get some fresh air. Take a short nap
Hunger	Drink water and eat low-calorie snacks
Irritability or tension	Take a walk, relaxercise, take a warm bath or shower
Insomnia (trouble sleeping)	Avoid caffeine in the evening or eating late at night, relaxercise
Difficulty concentrating	Break up projects into smaller pieces, take frequent breaks, write down tasks



Call your doctor if any of these symptoms are worrisome.

Cutting out cravings

Many smokers who quit have to deal with cravings for a cigarette. Sometimes these cravings can be quite strong, especially in the beginning. But as with the rest of your journey to becoming smoke-free, the key lies in planning and being prepared. If you know how to handle your cravings **before** they hit, you will be much more successful in fighting the urge to smoke.

If you feel like you need a cigarette, remember the **4 Ds**:

Delay. Instead of reaching for a cigarette right away, wait 5 minutes. The urge to smoke will pass whether you smoke or not. Count to 200, relax, exercise, call a friend - anything to delay lighting that cigarette.

Drink water. When a craving hits, drink a large glass of water instead. Try to drink 6 to 8 glasses of water a day, which will keep you feeling full and hydrated. It also helps flush the nicotine from your system.

Deep breathe. Take deep breaths when you get the urge to smoke. Inhale through your nose, hold the breath while counting to 3, and then exhale slowly through your mouth. Repeat 4 or 5 times.

Do something else. Keep your mind off smoking by doing something you enjoy. See a movie, go for a walk, exercise, visit a friend, work on a hobby or project, or go for a drive.



Other ways I can tame my cravings:

Kicking old habits

Even smokers who are physically dependent on nicotine sometimes smoke out of habit. Many smokers find that they always smoke when they take part in a certain activity, and they associate one with the other. To help break the links between your smoking and your activities, think about when you smoke and what you could do instead. We've provided the first few as examples; fill in the rest and you'll have the chance to discuss them with your peer counselor.

I always have a cigarette with my coffee.

What you can do: Drink tea or juice instead, eat a low-calorie snack, or take a walk when you drink your coffee.

I always smoke when I go out with friends.

What you can do: Temporarily go out with friends who don't smoke, or ask friends to help by not offering you cigarettes.

I always _____

What you can do: _____

I always _____

What you can do: _____

I always _____

What you can do: _____

Saying no to stress

When some smokers feel stressed, angry, or upset, they reach for a cigarette to make them feel better. But in the long run, cigarettes do nothing to make a person feel better - they only contribute to problems now and in the future.

When faced with a stressful or upsetting situation, ask yourself if there might be another way to relax. Some things that have helped former smokers relax include:

- Stretching for a few minutes.
- Calling a friend.
- Taking a quick walk.
- Chewing gum.
- Exercising.



And don't forget **relaxercising**. This exercise can be done anywhere, and it can help you relax without having to turn to a cigarette:

- Sit in a comfortable place, close your eyes, and think of a place or thing that makes you feel good.
- Relax your shoulders and neck, and close your mouth.
- Inhale deeply through your nose and hold your breath while counting to four.
- Exhale through your mouth, letting all the air out from your lungs.
- Repeat steps 1-4 several times.

Try relaxercising once a day, even before you actually quit smoking. This way, you'll be familiar with the exercise when you need to use it. You will also have the chance to discuss and get tips for other types of stress management techniques with your peer counselor.

Other helpful hints

Just as you wouldn't take a trip without packing and preparing first, it's helpful to make some other preparations when getting ready to quit smoking. Think of the following as things you'll use on your journey toward quitting:

Social support.

Former smokers all agree: it's very important to get help from friends and family when quitting. Ask selected people to offer support by calling to see how you're doing. Ask friends and family to avoid smoking in front of you. Encourage friends to be understanding if you don't feel like yourself or are on edge when you quit smoking.

Think about who will be the most helpful and supportive of your efforts to quit smoking and list them here. Don't forget that your support system can come from anywhere: family, friends, work, your church or synagogue, or other places in your community. Naturally, your peer counselor will provide support, too!

Who will support me

How he/she will offer support

Exercise.

Exercise is wise for everyone, and especially for someone who is quitting smoking. Exercising not only helps manage stress, it can help you relax and get your mind off smoking. It can help someone who is quitting smoking feel better mentally and can help control weight.

Because people's physical activity abilities may vary, your peer counselor will work with you to develop your own physical activity plan. In the meantime, you can think about what types of physical activity interest you and add them to the list here. Remember, physical activity doesn't always mean something difficult or complicated at first. It can be as simple as:

- taking the stairs instead of the elevator
- parking further away from the store or the entrance to your workplace
- getting off the bus or subway one stop earlier than usual
- gardening
- taking the dog on longer walks

Note: Always speak with your doctor before beginning any exercise program.



Keeping trim

Some smokers who are getting ready to quit express concern about gaining weight. While some smokers do gain weight after quitting, it is usually no more than 5 to 10 pounds. Other smokers gain no weight at all. Because each person is different, there is no set rule for everyone. The most important thing to remember is that a few extra pounds are not nearly as dangerous to your health as smoking can be.

Below are some tips for keeping off extra pounds when quitting smoking. Add yours to the list, and you can discuss other options with your peer counselor.

- Drink a large glass of water or low-calorie beverage several times a day.
- Eat slowly.
- Exercise.
- Chew sugar-free gum.
- Suck on sugar-free hard candy.
- Stock up on tasty veggies and sweet fruits.
- Eat crunchy pretzels.



Setting a quit day!

Now that you know how to handle your triggers and what you'll need to do to quit smoking, it's time to set a Quit Day.

My Quit Day:		
Month	Day	Year

Your Quit Day can be any day you like, but whatever day you choose, you must be prepared.

Before your Quit Day, be sure to:

- know how to use your nicotine patches correctly, if you are using them
- get rid of all cigarettes, ashtrays, and lighters - including those in coat pockets or your car
- tell the people in your support system the date you've chosen
- reread the parts of this manual that detail your reasons for quitting and how to handle your triggers
- arrange your next call with your peer counselor for this day!

"When my Quit Day came around, I wasn't sure if I was ready. But the fiends I had told were so supportive. They sent me email all day to cheer me on, and a few even called that night. It was a huge help."

Carla H., 30,
leukemia survivor

Something just for you

Deciding to quit smoking and setting a Quit Day are big jobs - ones that demand a reward! Your Quit Day will be a very important day, and one when you should treat yourself well. Think about how you will reward yourself on the day that you stop smoking. The reward doesn't have to be big or expensive, just something that will make you happy.

Some rewards include:

- A new tape or CD
- A favorite magazine
- Lunch or dinner out
- Seeing a movie
- Eating a favorite food



My reward for my first day of being smoke-free:

Partnership for Health is a joint project of the Dana-Farber Cancer Institute's Center for Community-Eased Research and the University of Minnesota Long-Term Follow-Up Study. It is funded by the National Cancer Institute and Liberty Mutual.



**For Smokers Who
Have Quit**

4



You've quit smoking.. .

Way to go! Quitting smoking is the single most important thing that you can do for your health, and you should be very proud of yourself for reaching this point. Now it's time to enjoy the rewards of being smoke-free - rewards that you'll be able to feel right away and in the future.



Although a lot of the hard work is behind you, you still have to be on your toes to stay quit. In this manual, you'll find strategies for dealing with some of the challenges that former smokers sometimes face.

"It's such a different feeling, not always having to worry about where and when I can smoke. Not to mention all the money I've saved - Hawaii, here I come!"

Rebecca T., 26,
Hodgkin's survivor

Taming cravings

Now that you've quit, you may still find that you occasionally have cravings for a cigarette. If you know how to handle your cravings **before** they hit, you will be much more successful in fighting the urge to smoke.

If you feel like you need a cigarette, remember the **4 Ds**:

Delay. Instead of reaching for a cigarette right away, wait 5 minutes. The urge to smoke will pass whether you smoke or not. Count to 200, relax - call a friend - anything to delay lighting that cigarette.

Drink water. When a craving hits, drink a large glass of water instead. Try to drink 6 to 8 glasses of water a day, which will keep you feeling full and hydrated. It also helps flush the nicotine from your system.

Deep breathe. Take deep breaths when you get the urge to smoke. Inhale through your nose, hold the breath while counting to 3, and then exhale slowly through your mouth. Repeat 4 or 5 times.



Do something else. Keep your mind off smoking by doing something you enjoy. See a movie, go for a walk, exercise, visit a friend, work on a hobby or project, or go for a drive.

Other ways I can tame my cravings:

Weight gain worries

Many smokers who have quit sometimes worry about weight. While some smokers do gain weight after quitting, it is usually no more than 5 to 10 pounds. Others gain no weight at all. Because each person is different, there is no set rule for everyone. The most important thing to remember is that a few extra pounds are not nearly as dangerous to your health as smoking was.

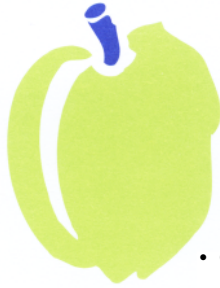
Below are some tips for keeping off extra pounds after quitting smoking. Add yours to the list, and you can discuss other options with your peer counselor.

- Drink a large glass of water or low-calorie beverage.
- Eat slowly.
- Exercise.
- Chew gum.
- Suck on sugar-free hard candy.

When hunger hits, you also have many options for healthy snacking. Read the lists below for some ideas, and add your own healthy favorites.

Sweet treats

- Berries
- Plums
- Peaches
- Cantaloupe
- Pineapple
- A frozen fruit bar
- Low-fat frozen yogurt



Crunchy and munchy

- Apples
- Carrots
- Celery
- Broccoli
- Popcorn (air popped)
- Graham or wheat crackers
- Pretzel sticks

Chewy and chunky

- 1/2 plain bagel
- slice of raisin bread
- cereal without milk
- small low-fat bran muffin
- 1/2 English muffin
- banana



My own ideas:

Exercise

Exercising not only helps manage stress, it can help you relax and get your mind off smoking if a craving hits. It can also help you feel better mentally and control your weight.

Because people's physical activity abilities may vary, your peer counselor will work with you to develop your own physical activity plan.

Remember, exercise doesn't always mean something difficult or complicated at first. It can be as simple as:

- taking the stairs instead of the elevator
- parking further away from the store or the entrance to your workplace
- getting off the bus or subway one stop earlier than usual
- gardening
- taking the dog on longer walks

List a few of your own ideas below and you'll have the chance to discuss developing a physical activity plan with your peer counselor.

Note: Always speak with your doctor before beginning any exercise program.

Getting back on track

If you slip and smoke a cigarette or two, don't beat yourself up. **Don't** tell yourself that you've failed. Quitting smoking can be difficult, and millions of smokers who quit successfully often have to deal with slips. It may take some practice to finally quit, but you can do it.

To get back on track, you'll need to take a look at your situation and take action right away by doing the following:

- Treat your situation like an emergency and get out of it. Stop smoking **immediately** and throw away all cigarettes.
- Think about what caused the slip. Reflect back on your triggers. Where were you? What was going on around you? Had something upsetting happened? Who were you with?
- When you figure out what caused the slip, plan what you will do in a similar situation in the future. Your peer counselor can also help you identify what caused a slip and assist you in developing a game plan for the future.

If you get back on track and feel another slip coming, it **doesn't** mean you should give up. It does mean that you will have to tap into your coping strategies. Most importantly, remember to give yourself a pat on the back every time you **don't** slip. Every victory puts you on the road to conquering your smoking habit.

“Sure, sometimes I miss cigarettes. But I don't miss the way they made me cough or the guilty feelings I always had every time I lit up.”

Justin W., 32,
osteosarcoma survivor

Celebrate the new you

Congratulations! You're a nonsmoker! It's the beginning of a more healthy life for you and those around you. Now is the time for you develop a new frame of mind and a new way of looking at yourself. One way to do this is by thinking

about all the good things about your new life as a nonsmoker. Check off the items on the list that apply to you and add your own:

- I'm now at a decreased risk of developing a new cancer.
- I've decreased my risk of complications related to my cancer treatment, like heart and circulation problems.
- I feel healthier.
- I'm more in control of my life.
- I don't smell like cigarettes - and neither do my car, house, or clothes.
- I can breathe easier.
- _____
- _____
- _____

Another way to celebrate the new you is to reward yourself regularly. Set anniversary dates - after one month of being smoke-free, for example. Take the money you would have spent on cigarettes and treat yourself. You can go out to dinner with a friend, buy new clothes, see a show, whatever you like! You can also check out the savings tip sheet to give you some ideas.

My reward for being smoke-free for one month:

My reward for being smoke-free for two months:

My reward for being smoke-free for six months:



My reward for being smoke-free for one year:

Getting help

If you find yourself needing more support in the future, you're not alone! Some former smokers find that they want to smoke from time to time. When this happens, it's important to reach out to people who can help you keep your commitment to remaining smoke-free.

Below are some resources to get you started if you need them. You can also speak with your peer counselor about additional places to get help.

The American Lung Association

1-800-LUNG-USA (1-800-586-4872)
<http://www.lungusa.org>

The American Cancer Society

1-800-ACS-2345 (1-800-227-2345)
<http://www.cancer.org>

Local stop-smoking support groups
(check your local hospital)

Local stop-smoking hotline numbers
(check your phone book)



Partnership for Health is a joint project of the Dana-Farber Cancer Institute's Center for Community-Based Research and the University of Minnesota Long-Term Follow-Up Study. It is funded by the National Cancer Institute and Liberty Mutual.



Memory

Adults who have had a childhood cancer or similar illness may have problems with memory. Memory problems can happen as a result of the illness itself or from certain kinds of treatment. Other factors in a person's everyday life can also affect memory.

Read the sections below to learn more about what can affect memory, and how to improve it.

Things that can affect memory, organizational skills, and efficiency

A metabolic or endocrine (hormonal) problem - liver disease or problems with thyroid, for example

Nutritional imbalance - not enough vitamin B12, for example

Fatigue

Some medications (can cause problems with memory directly, or can cause fatigue, which then interferes with memory)

Emotional issues - depression or anxiety, for example

General life problems or distractions - physical pain, stress, or a very busy workplace or household, for example

Damage to areas of the brain that can cause memory problems

- Temporal lobes
- Thalamus
- Basal forebrain

How to improve your memory

The basics:

First, get a complete medical check-up with your primary-care physician. He or she should order blood tests. If you have a history of thyroid disease, be sure the tests include thyroid function.

Reduce fatigue by getting enough sleep. Your peer counselor can provide you with a *Sleep Tip Sheet*.

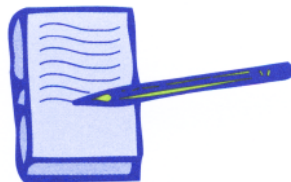
Try to take steps to reduce the amount of stress in your life. Relaxation techniques can be very helpful; your peer counselor can provide you with a *Relaxation Techniques Tip Sheet*.

Routine, structure, and organization:

Identify the things you tend to forget most, and create **routines** to follow while doing them. For example, if you always forget to grab your lunch before leaving the house, devise a routine where you always put on your coat first, get your lunch second, get your keys third, etc.

Create **cues** for yourself that will help keep you organized. They can be visual: putting an empty dog food bag by the door will remind you to buy more dog food, for example. The cues can also involve hearing and sounds: leaving yourself a reminder message on your answering machine or setting a timer to ring when dinner's done cooking, for example.

Use a **day planner** or **schedule book**. Write down important things immediately, and then remember to refer to the book. You can help yourself remem-



ber by working the book into a routine. For example, look at the book after a meal or at the same set times every day.

Use **mnemonics**, which are tricks that can help you remember information. For example, people often remember the piano notes E, G, B, D, and F by saying the phrase, “Every good boy deserves fudge.” Learning to use mnemonics can take practice, but some people find that it’s a very useful memory tool.

Medications and nutritional supplements:

There are some new medications that can help the types of memory problems that come along with Alzheimer’s disease and stroke. Your doctor can determine if any of these medications are right for you.

There are many new kinds of nutritional supplements that may help improve memory. These supplements haven’t been medically proven to be effective, but some people do report that they work. Speak to your doctor before taking any nutritional supplement.



Depression

It is normal for people to feel “down” sometimes, and many people experience depression at some point in their lives. In fact, depression is one of the most common illnesses seen by doctors today. Some things that can contribute to a depressed mood are stressful life events, certain illnesses, some medications, or substance abuse. If you find yourself feeling “down” more than usual or are finding it hard to enjoy life, it is important to talk with your doctor. Treating depression sooner rather than later will help with the problem more quickly and make it less likely to happen again.

Smokers often find that feeling “down” contributes to their smoking - they feel as though a cigarette can lift their spirits. Changes in your mood can also affect how you feel about yourself when you are making lifestyle changes (like quitting smoking). To learn more about the symptoms of depression and how it can be treated, read the sections below. You can also speak to your peer counselor about the way you are feeling.

Symptoms of depression

Depression can be experienced in many ways, depending on the person. Some of the common signs of depression include:

- Sadness
- Loss of interest or enjoyment of normal activities
- Sleeping more or less than usual
- Eating more or less than usual
- Decreased sexual desire
- Feeling restless and agitated or feeling slowed down
- Fatigue or loss of energy
- Feeling guilty or worthless, having self-critical thoughts
- Trouble concentrating and making decisions
- Feeling hopeless about the future
- Having thoughts about death or suicide

Treating depression

There are many ways to treat depression, and the treatment often depends on the person and his or her needs. Some treatment options include:

Anti-depressant medication.

These are medications that are prescribed and are often a very useful part of treating depression. A doctor works with the patient to find the one that is best. Antidepressant medications can also be used along with counseling.

Counseling. Counseling involves speaking with a counselor or therapist, and it is often a very successful way of treating depression. It is important to find a counselor or therapist who makes you feel comfortable. You can ask your doctor for a referral or call your community mental health clinic.

Counselors use different techniques to help treat a person with depression. They may use one of the techniques below when working with a patient:

Positive thinking. Sometimes being depressed makes a person more likely to notice and remember negative or bad experiences more easily than good or positive ones. Changing your thoughts involves testing or challenging negative thoughts by reviewing all the events in a person's life - both good and bad. Thinking in this new way can help some people feel less depressed.



Good relationships. It's been found that positive relationships with people can help someone recover from depression.

Activity scheduling. When people take part in activities that are enjoyable or lead to feelings of accomplishment, they usually feel better. It's been found that scheduling these types of activities into the day of someone who's depressed may help his or her mood.

Stress reduction through relaxation. Since stress can often contribute to depression, some relaxation techniques can often help.

Your peer counselor can provide you with a ***Relaxation Techniques Tip Sheet*** that includes information about:

- Deep breathing
- Visual imagery
- Progressive muscle relaxation
- Meditation
- Yoga
- Massage

Most importantly, remember that depression is an illness - not just a bad mood that you should be able to shake without anyone's help. Getting treatment for depression makes it easier to enjoy life and focus on the things that are important and enjoyable.

Note: Some people experience depression that they just can't put aside. If you have constant depression, it's important to discuss this with your doctor.



Talking With Your Doctor

As someone who has had a childhood cancer or similar illness, it is important for you to have access to information about your current health as well as your health history.

Because cancer can be a complex disease, you may have questions that your Primary Care Physician might not be able to answer fully. Some adults who have had a childhood cancer or similar illness prefer to include an oncologist as part of their medical resource team. This gives them the opportunity to ask health questions as they come up and get clear answers.

If you do have two (or more) doctors who take care of different medical needs, it is important to communicate clearly with each one. You may even find yourself needing to tell one doctor the suggestions or comments of another, which can be difficult at times. Below are some strategies for communicating well with your doctor or doctors:

Make sure that your doctor is aware of your medical history and your smoking history.

Before your visit, jot down your questions in a notebook. This

will help you to remember them, and you'll be able to write down directions or information the doctor gives you.

Bring a friend or family member with you. He or she can help you remember what the doctor says and may make you feel more comfortable.

When talking with your doctor, be frank. He or she cannot know what you're thinking and feeling unless you speak your mind. Describe your symptoms as best you can.

Respect your doctor's limitations and try to come up with solutions. For example, if your doctor doesn't have time to answer all of your questions during an appointment, ask when it might be possible to talk.

If you don't understand a medical term, ask for a clearer definition. Sometimes it can be helpful to see a diagram or drawing.

If you are thinking about making health-related changes (like quitting smoking, for example), your doctor may have some suggestions. He or she may also be able to provide information about how smoking affects the health of an adult who has had a childhood cancer or similar illness.

Be sure that you understand your treatment plan or the doctor's suggestions before you leave. Know how to contact him or her if you have any further questions.

If you feel hurried or aren't happy with the way your questions are answered, discuss this with your doctor. It's important to be able to communicate with your doctor in a way that's comfortable.





Sleep

Adults who have had a childhood cancer or similar illness may have difficulty sleeping. Problems with sleep can happen for many reasons. Luckily, most sleep problems can be treated.

Read these straightforward strategies - they really do work and can improve sleep. Your peer counselor can review these tips with you and provide you with more information and resources.

During the day

Stop all caffeine (found in coffee, tea, and many soft drinks), or aim to drink less. Don't drink anything containing caffeine after lunch.

Exercise during the day.

Try to avoid exercising within 6 hours of bedtime.

Use your bed only for nighttime sleeping or romance - not for television watching, using the phone, or eating.

Decide on a bedtime for weeknights, and try to keep to the same time each night.

Before bedtime

Never have a cigarette right before going to bed.

Avoid alcohol before bedtime; it can break up your sleep during the night.

Take a hot bath 2 hours before bedtime. This works best when the water is so hot that it makes you sweat.

Drink a glass of milk before bedtime. A warm glass of milk is even better, and it's best if you drink it about 45 minutes before bedtime.

If you feel hungry before bedtime, have a piece of fruit or bowl of cereal (but not a sugary snack).

Make sure your bedroom isn't too warm, since a room temperature that's too high can disturb your sleep. An open window or fan can help.

Do a boring task right before bedtime. Try to make it a ritual, so your mind will connect the task with getting ready for sleep.

Once you're in bed

After setting your alarm, cover the clock or turn it away from you.

Count backwards from 300. If you still can't help thinking about things, count backwards from 902 by 7 (902, 895, 888, 881, etc.).

If you can't fall asleep, don't stay in bed for longer than 15 minutes. Get out of bed and do something very restful, like reading something boring or watching something boring and quiet on TV.

If you wake up during the night, try to get back to sleep within 7 minutes. Do the counting exercises above if you have difficulty falling back asleep.

Get up at the same time every day, and rely on your alarm to tell you when it's time to wake up.



For more information and sleep wellness booklets, contact:

The American Sleep Disorders Association (ASDA)

6301 Bandel Road

Suite 101

Rochester, MN 55901

<http://www.asda.org>



Social Support

When preparing to quit smoking, setting up a support network for yourself is very important. Support from your friends, family, coworkers, and other members of your community can be a very valuable part of helping you reach your goal.

You'll find that many of the people in your life will want to help you quit - but they may need to learn and you need to let them know the best ways they can help. Read the tips below to see how to get the most support.

Some helpful hints

You don't need to tell everyone you're quitting -just a few people you can trust.

Think carefully about who your allies are. These are the people you can always call for support - the people who will take the time to lift your spirits and distract you from your urge to smoke.

Talk to former smokers. They will know what you're going through and may have helpful ideas and be able to offer moral support.

Discuss your needs with your whole family, and be clear about

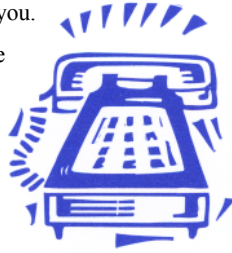
what is helpful and what is not helpful. Encourage all the members in your family to take a role in helping you quit.

Encourage your partner to help you quit. If your partner still smokes, ask that he or she avoid smoking around you. The best place for him or her to smoke is outdoors; the next best place is in the garage or in a room with the door closed. Agree ahead of time on what parts of the house will be “smoke-free zones.”

Ask other smokers not to smoke around you.

People may sometimes forget that you are quitting or have quit. You may need to remind them.

Tell the people who are helping how much you appreciate their support. Let them know how they can continue to help, even when the hardest days are behind you. Celebrate your milestones with them.



Some things to say

Here are a few things to say to those who help you:

“In the beginning, I may be on edge - so please bear with me if I seem cranky or crabby for the first few days after I stop smoking. I promise it will go away soon.”

“Praise me or even give me rewards. The rewards don’t have to cost much - it’s the thought that’s important.”

“Check in with me from time to time to ask how things are going.”

“If I slip up, don’t let me beat myself up - and don’t let me give up.”

[to a current smoker] “Please don’t tempt me - it’s hard enough without seeing or smelling cigarettes. It will be really hard if you offer me a cigarette or smoke in front of me.”

“Thank you so much for helping me to stop smoking. It means a lot to me.”



Physical Activity

Exercise is a great way to improve your body and mind. It can also be a very useful part of quitting smoking - not only is exercise a proven mood lifter, it can also distract you from urges to smoke.

Being physically fit can promote good health and endurance, strengthen your heart and lungs, reduce stress, and increase your resistance to illness. Being active can also give you a sense of pride and more self-esteem: you'll look and feel good! Check the list below for more benefits and how to get more physical activity.

Physical benefits

Lowers health risks that can cause heart disease, including blood lipid (fat) levels, hypertension (high blood pressure), obesity, and Type II diabetes

Lowers risk of developing certain cancers, including colon, rectal, and breast cancer

Increases strength and muscle mass

Increases energy level

Increases cardiovascular endurance (heart can function more efficiently)

Better metabolic rate (how quickly the body burns calories)

Tip Sheet

Better flexibility and range of motion

Better sleep

Protection against osteoporosis (weakened bones)

Mental benefits

- Lowers stress
- Reduces anxiety
- Reduces depression
- Increases confidence
- Betters mood
- Gives feeling of strength

How to get more physical activity

There are many ways to increase the amount of physical activity in your life. Prepare yourself for success by doing the following:

Pace yourself and set reasonable goals

Increase your activity level in a way that works for you

Speak to your doctor before beginning any exercise program

For some ideas on how to start:

Look for ways to stay active during the day: take the stairs instead of the elevator, walk to the corner store instead of using the car, take the dog on a longer walk, work in the garden, or park your car far away from entrances to work or the mall.

Try golf, bowling, or yardwork to add activity to your day.

Try recreational activities like hiking, tennis, and dancing.

For a heart-healthy aerobic workout, try soccer, basketball, swimming, cycling, cross-country skiing, racquetball, or aerobic dancing.

Walking, jogging, and running are all types of aerobic exercise that don't use special equipment and can be done almost anywhere. Team up with a friend to make it more fun.

For flexibility and strength training, try yoga, push-ups, weight lifting, and martial arts.

Try an exercise class in your community. If you like to exercise at home, try renting an exercise video.



Remember:

It's important to stop exercising before you feel fatigued.

Warm up before exercising, and cool down and stretch out afterwards. This will reduce your risk of injury.



Relaxation Techniques

When it comes to reducing stress and depression, there are several relaxation techniques that you can use. Choose 1 or 2 exercises from the list below and try them. It may take some practice and time before you feel comfortable with the exercises, but in time, you will feel the rewards. After you become comfortable with those exercises, you can try out some of the others.

Deep breathing

Deep breathing from the abdomen (the area below your rib cage) can go a long way in helping you feel relaxed. Slow, deep breathing increases the amount of oxygen in the body and lowers the heart rate.

Put one hand on your belly and practice breathing so your belly expands as you breathe in.

Imagine that the incoming breath is filling a balloon in your belly.

When you can't inhale any more, exhale and imagine the balloon emptying.

Visual imagery

Picturing a pleasant scene in your mind can control stress, because a positive mental image can often drive away worry and other negative emotions.

Close your eyes and image a pleasant place you have been or a

fantasy about someplace you would like to be.

This mental image can include sights around you, as well as sounds and even smells.

Focus on your image while breathing slowly and deeply. Say things to yourself like, “You are feeling warm and relaxed,” or “You feel peaceful, without a care in the world.”

Progressive muscle relaxation

This technique involves tensing and then relaxing different muscle groups. It helps to control muscle contractions and leads to a feeling of deep relaxation.

Lie down or sit in a comfortable chair.

Close your eyes.

Starting with your feet, tense a small group of muscles and then relax them. Move up throughout your body, tensing and relaxing muscles as you breathe deeply. When you breathe out and relax your muscles, imagine all the tension leaving your body.

Meditation

Meditation can be used to relax the body and quiet the mind. There are several types of meditation, but most have two things in common:

Focusing one’s mind on a word, breath, or phrase that is said over and over; and

Not paying attention to the thoughts that go through one’s head while meditating.

Yoga

Yoga is a series of stretching and breathing exercises that may help the body and can reduce stress. Like meditation, there are different types of yoga.



Massage

Treating yourself to a massage can be a great way to relax muscles and reduce stress.



Men's Fertility and Cancer Treatment

While radiation, chemotherapy, and surgery are often life-saving for a male with a childhood cancer or similar illness, these treatments may sometimes affect his fertility later in life. This is usually due to the treatments' effects on the testes.

The testes are responsible for producing sperm. They also produce and maintain proper levels of male hormones. If the testes are harmed during radiation or chemotherapy, a man may have certain late effects.

Late effects

Azoospermia (absence of sperm). This occurs when there is loss of sperm production in the testes.

Oligospermia (low sperm count). This occurs as the result of reduced sperm production in the testes.

Irregular hormone levels. There may be low levels of testosterone, the hormone necessary for the production of sperm.

Surgery involving the testes can result in impotence or problems with ejaculation.

Since each situation is unique, the effects that radiation, chemotherapy, and surgery have on the reproductive system can be different from man to man. However, we do know some general information about men's fertility and cancer treatment.

General information

The effects of radiation depend on the dose (the more radiation, the more fertility may be reduced) and location.

In some men, the effect of radiation can be reversible and fertility problems improve with time.

The effects of chemotherapy depend on the dose (the more drugs, the more fertility may be reduced) and type.

Surgery to parts of the brain can cause problems with the function of the testes. For example, certain parts of the brain are necessary for the production of sex hormones in the testes.

Smoking and fertility

Smoking can potentially lower a man's sperm count and affect the quality of the sperm.

Men who are prone to these types of late effects and who smoke may be affecting their fertility.

It is important to discuss the details of your treatment with your doctor to determine if your medical history may contribute to infertility.

You will also be able to address smoking and its impact on fertility with your Partnership for Health peer counselor.





Advances in Treatment of Childhood Cancers

Many people who have had a childhood cancer or similar illness are interested in the history of treatment and the advances that have been made in recent years.

The first effective chemotherapy treatment for childhood cancer was discovered in the 1940s by Dr. Sidney Farber. Since then, tremendous improvements have been made in the treatment of childhood cancers. Today, 72% of childhood cancer survivors are expected to surpass the five-year survival mark.

Some major improvements have come with the use of chemotherapy. Chemotherapy is carried by the bloodstream to almost every part of the body, which means that cancer cells can be destroyed even if they have left the original site of the cancer. In the treatment of solid tumors, improvements have come with the use of combination therapies, such as chemotherapy along with surgery or radiation therapy.

Over the last several years, there have also been breakthroughs in our understanding of the basic biology of cancer. Cancers arise as the result of the slow gathering of changes in one of the trillions of cells in the body - in the instructions that guide the behavior of the cell. Scientists now know a tremendous amount about how genes can stimulate and suppress growth of cells. This understanding of the nature of cancer cells will guide future research in the effort to improve prevention, detection, and treatment of cancer.

Understanding the genes that are linked to cancer has also provided an effective approach to preventing, detecting, and treating can-

cer. As our knowledge of genes progresses, our ability to diagnose and treat cancer will continue to grow.

Researchers and doctors are especially concerned about preserving the quality of life for a child who has cancer. Limb-sparing surgery for many sarcomas has had a major impact, as has the development of drugs to protect key organs from damage caused by cancer drugs. Some additional improvements are discussed below.

Improvements in Chemotherapy

Many cancers and similar illnesses that affect children are systemic, meaning they affect the entire body. Chemotherapy is an important part of treatment, and newer formulations are being developed that have fewer side effects. In addition, new strategies for delivering chemotherapy can help lessen side effects. One example of this is the use of continuous infusions of a lower dose on a weekly schedule, instead of a higher dose every 3 weeks.

Some cancer cells resist the effects of chemotherapy and radiation. Researchers are developing chemical compounds that make these cells more sensitive to conventional radiation and drug treatments. Researchers are also studying the action of cell protectors - compounds that protect normal tissue, which can minimize damage to healthy areas.

Another way of killing cancer cells or helping to make them more susceptible to radiation and chemotherapy is to heat them to temperatures above 109 degrees F for one hour. This procedure is called hyperthermia and is currently being studied in clinical trials.

New biological therapies including interferons, interleukins, and vaccines are being developed to help stimulate the body's immune system to fight cancer and to help it recover more quickly from the effects of anti-cancer drugs. Researchers are hopeful that these new therapies will improve our ability to treat cancer.

Advances in Radiation Therapy

Advances are being made in the area of radiation treatment by limiting the amount of radiation and changing the way it is delivered. Decreasing radiation may mean fewer problems with the function of radiated organs later on.

Brachytherapy, also called Seed Radiation, is a new method of delivering radiation from within the body. It shortens treatment time and reduces the amount of tissue exposed to radiation. With this method, doctors insert several catheters, or needles, directly into the area of the tumor to be radiated. This limits the area of body exposed to radiation.

Bone marrow transplantation can be used to treat leukemia, lym-

phoma, Hodgkin's disease and other types of cancer that have not responded to traditional therapies. The bone marrow contains stem cells, which play a crucial role in the body. Stem cells are the beginnings of all of the cells in our bodies. By replacing these cells in the bone marrow, the body can rebuild itself after receiving very high amounts of radiation.

Here's how bone marrow transplantation works:

- Before radiation, a matched donor is found or some of the patient's own marrow is removed and cleansed.
- Total body irradiation or chemotherapy is given, which kills cancer cells.
- This intensive radiation, given along with high-dose chemotherapy, also destroys the patient's bone marrow.
- The marrow is replaced with marrow from a matched donor or the patient's own marrow and the body begins the process of rebuilding itself with healthy cells.

Stereotactic Radiosurgery is a method designed to deliver radiation doses to small treatment areas, minimizing damage to nearby normal tissue. It is particularly useful in treating sensitive areas (such as the brain).

Scientists are also trying to develop ways to detect damage to organs before symptoms appear. With this ability, physicians will be able to treat patients with the highest tolerable dose without damaging organs unnecessarily.

Improvements in Surgical Procedures

It used to be common for surgeons to amputate limbs or remove extra tissue around a tumor in order to be sure that cancer wouldn't come back. Today, more conservative operations are performed, with surgeons removing as little tissue as possible and combining surgery with radiation therapy and sometimes chemotherapy to prevent recurrence of cancer. This has improved the quality of life for survivors of many types of cancer.



Some specific treatment advances in use today:

Side effects of treatment to the brain and nervous system are being reduced by refinements in radiation techniques. This means elimination of radiation altogether in lower-risk patients, and in some cases, the use of chemotherapy alone.

To protect the thyroid gland in patients being treated for Hodgkin's disease, some treatment centers recommend shielding

the thyroid during radiation. Also, radiation is not used along with iodide-containing contrast materials.

Progress is being made in ensuring children's proper growth by refining radiation techniques and limiting radiation doses. In some cases this is done by intensifying chemotherapeutic agents.

There is also special attention paid to the heart and lungs of children who are undergoing treatment for cancer or similar illnesses. Different scheduling of treatments and new combinations of drugs can protect the heart and the membranes around it from treatment-related damage. The lungs and other organs are monitored throughout treatment, and radiation is limited.

The heart and lung systems are important in maintaining good health - and they are also very susceptible to the effects of smoking. Adults who had treatments that affected their heart and lungs as children may be especially prone to the damaging effects of smoking.

A glimpse at future advances...

Anti-angiogenesis drugs

Cancers need to make more blood vessels in order to grow. This process of the body making more blood vessels is called angiogenesis. Drugs that block angiogenesis have been identified and are being tested in laboratory animals and humans.

Monoclonal antibodies

Antibodies allow our bodies to get rid of cancer cells. They act by attaching like a puzzle piece to certain types of proteins (antigens) which lie on the outer surface of cancer cells, thereby killing the cell.

Scientists are experimenting with attaching anti-cancer drugs to antibodies which will then seek out the antigens on cancer cells. When the antibodies and anti-cancer drugs attach to the cancer cells, the cancer cells will be killed. The anti-cancer drugs only go to the cancerous cells and side effects are avoided.



Women's Fertility and Cancer Treatment

While radiation and chemotherapy are often life-saving for a female with a childhood cancer or similar illness, these treatments may sometimes affect her fertility later in life. This is usually due to the treatments' effects on the ovaries.

The ovaries contain ovum (eggs), which are released during ovulation. The ovaries are also responsible for producing hormones, some of which are necessary for ovulation, menstruation, and pregnancy. If the ovaries are harmed during radiation or chemotherapy, a woman may have certain kinds of late effects.

Late effects

Primary amenorrhea. This occurs when a woman does not begin to menstruate or does not go through puberty completely.

Secondary amenorrhea. This occurs when a woman enters menopause before the age of 40.

Irregular hormone levels. There may be lower levels of the female hormones that are necessary for a normal menstrual cycle, fertility, and sex drive.

Harmed ovum. If the eggs themselves are damaged, infertility may occur.

Since each situation is unique, the effects that radiation and chemotherapy have on the reproductive system can be different from woman to woman. However, we do know some general infor-

mation about women's fertility and cancer treatment.

General information

The effects of radiation depend on the dose (the more radiation, the more fertility may be reduced). It also depends on the location (how close the radiation is to the ovaries).

The effects of chemotherapy depend on the dose (the more drugs, the more fertility may be reduced) and type.

Girls treated with chemotherapy drugs before puberty may be affected less than those treated during or after puberty.

Some women who have had treatments for childhood cancer or a similar illness may be fertile in their early childbearing years, but have difficulty conceiving as they get older.

In some women, the ovaries may recover their function in the months or years after treatment.

Smoking and fertility

Smoking has been proven to decrease fertility; women who smoke can have more difficulty conceiving than women who don't smoke.

Women who are prone to these types of late effects and who smoke may be affecting their fertility.

In addition, women who have had certain treatments for illnesses such as Hodgkin's disease or Wilm's tumor are at greater risk for miscarriage, premature, or low-birthweight babies. This risk is increased when a woman smokes.

It is important to discuss the details of your treatment with your doctor to determine if your medical history may contribute to infertility.

You will also be able to address smoking and its impact on fertility with your Partnership for Health peer counselor.





Managing Stress and Anxiety

Stress is something that affects almost every adult in today's world. Learning to cope with it is important - not only because coping makes us feel more relaxed, but because learning to manage stress can help us deal better with life's challenges.

It's common for people who smoke to use cigarettes as a way to control their anxiety. By learning to reduce stress and anxiety in other ways, you may be less likely to reach for a cigarette in times of stress. The first step in reducing stress is recognizing its symptoms. You'll need to think about the times and situations that make you feel stressed, and then you can try some proven strategies for stress reduction and feeling more relaxed. We've included some ideas below, and you'll be able to learn more from your peer counselor.

Symptoms of stress

There are many common reactions to stress. These include:

Emotional signs

Apathy. No longer enjoying the things you used to, feeling sad, or like you've got "the blahs."

Anxiety. Feeling restless, insecure, upset, or worthless.

Fatigue. Having difficulty concentrating, feeling preoccupied.

Irritability. Feeling overly sensitive or defensive, having a bad temper.

Thoughts

Forgetfulness, boredom, self-criticism, negative attitude

Behavioral signs

- Withdrawing from family and friends
- Avoiding work responsibilities or coworkers
- Increase in drug or alcohol use
- Spending sprees, excessive gambling
- Nail biting
- Overeating
- Smoking



Physical signs

- Sleep problems
- Headaches
- Skin problems
- Changes in appetite
- Digestion problems (diarrhea, constipation)
- Racing heart
- Muscle tension
- Sexual difficulties
- Frequent illness

Stress management techniques

Fortunately, there are many techniques that can be used to control stress and protect you from its negative effects:

Manage your lifestyle.

- Get enough sleep, recreation, and fun
- Eat a balanced diet
- Take part in regular physical activity

- Avoid overindulging (excess food, excess alcohol, or drugs)
- Avoid smoking
- Avoid caffeine
- Learn how to manage your time and say “no,” if necessary
- Use a support system (friends, family, coworkers, social/spiritual organizations) and ask for help

Take care of yourself.

- Get wellness checkups
- Stay on top of chronic health problems
- Maintain open lines of communication with your doctors

Use relaxation techniques.

Your peer counselor can provide you with a ***Relaxation Techniques Tip Sheet*** that includes information about:

- Deep breathing
- Visual imagery
- Progressive muscle relaxation
- Meditation
- Yoga
- Massage

Taking an active role in managing your stress will help you feel more in control and optimistic. Speak with your peer counselor about putting some of these techniques into practice.

Note: Some people experience anxiety or worry that they just can't put aside. If you have constant anxiety or worries, it's important to discuss this with your doctor.



Weight Gain

Even though most smokers say they worry about weight gain when quitting smoking, the truth is that not all smokers gain weight. Of those who do gain weight, most will only gain between 5 and 10 pounds.

If you do gain some weight, it's crucial to remind yourself that it can be a normal part of quitting. You can also have some control of the situation, since whether or not you gain is going to depend on what you eat, how much you eat, and if you exercise. Most importantly, remember that temporary weight gain is much less harmful than the risks of smoking - you would have to gain between 80 and 100 pounds to offset the health benefits of quitting!

Instead of snacking . . .

. . . look for ways to keep busy that don't involve food:

- Take a walk
- Call a friend
- Write a letter or send an email
- Do a crossword puzzle
- Take a bath
- Garden
- Do creative crafts
- Play with your kids or pet

Solutions for cigarette substitutions

Some people who have quit smoking often want something in their mouths to take the place of a cigarette, and this can lead to frequent nibbling. Try the following when the urge to snack strikes:

- Drink a large glass of water
- Suck on hard candy or mints
- Chew gum
- Choose foods that require lots of chewing and are low in calories and fat - like carrot sticks or celery, for example

Smart snacking

Snacking isn't always off-limits - as long as the snacks are healthy and don't contribute to weight gain. Be sure your kitchen is stocked with healthy snacking choices like these:

- Fresh veggies (carrots, celery, broccoli, cherry tomatoes, green pepper)
- Fresh fruit (apples, oranges, bananas, peaches, plums, berries, melon)
- Popcorn (air popped without butter)
- Crackers
- Bread sticks
- Low-fat rice cakes
- Low-fat tortilla chips
- Pretzels
- Tomato juice
- Fruit juice without added sugar
- Flavored seltzer water



Don't forget to pack some items for work or school - you'll be less likely to snack on whatever is around if you're prepared.

Try exercise

Not only has a combination of physical activity and exercise been proven to help people quit smoking, it can also help maintain a normal body weight. Ask your peer counselor for a Physical Activity tip sheet for a complete list of suggestions, and check the list below for a few ideas on how to increase your daily level of activity:

- Take the stairs instead of the elevator.
- Walk to the corner store instead of using the car.
- Work in the garden.
- Park your car far away from entrances to work or the mall.
- Do something physical for recreation



Cost Benefits of Quitting Smoking

(See what all that cigarette money can really buy!)

If you cut down by	You will save	You can
1 cigarette a day	\$4.50 a month	See a matinee
2 cigarettes a day	\$9.00 a month	Order a pizza
3 cigarettes a day	\$13.50 a month	Buy a new CD
4 cigarettes a day	\$18.00 a month (\$4.20 a week)	Call a friend long-distance each week
5 cigarettes a day	\$22.50 a month (\$5.25 a week)	Pay for a month of Internet service
10 cigarettes a day	\$45.00 a month (\$10.50 a week)	Get baseball tickets for you and a friend
15 cigarettes a day	\$67.50 a month (\$15.50 a week)	Treat yourself to a massage
20 cigarettes a day	\$90.00 a month (\$21.00 a week)	Join a health club
25 cigarettes a day	\$112.50 a month (\$26.25 a week)	Buy hiking boots
30 cigarettes a day	\$135.00 a month (\$31.50 a week)	Take pictures of the new you with a 35mm camera

Tip Sheet

Date: _____

Time	Where was I?	How did I feel?



Date: _____

Time	Where was I?	How did I feel?



Date: _____

Time	Where was I?	How did I feel?




Date: _____

Time	Where was I?	How did I feel?



Date: _____

Time	Where was I?	How did I feel?



Date: _____

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