Cancer Care
A Guide for Patients, Families and Caregivers
Capital Health Cancer Care Program at the QEII Health Sciences Centre
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[www.cancercare.ns.ca](http://www.cancercare.ns.ca)
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Introduction

As people who work in the cancer care system, the staff of the Capital Health Cancer Program at the Queen Elizabeth (QEII) Health Sciences Centre are all too familiar with the challenges that cancer presents. However, rapid advances in cancer care are truly improving the outlook for people with cancer. Cancer health professionals with different strengths and backgrounds are working together every day to get better results. This team approach promises that you and your family will receive the best care and support from everyone on staff.

There’s an old saying that goes: A single finger cannot lift a pebble. This is a reminder that as individuals we all need help at one time or another, and that together we can accomplish much, much more.

The Cancer Care Program at the QEII has an exceptional team of dedicated professionals who want to work with you to meet the challenges of your cancer. They will help you understand your diagnosis and your treatment choices.

This booklet is a general guide to help you understand the Cancer Care Program and your cancer treatment. Remember that every cancer patient is different. Your doctors and the other members of your healthcare team will give you the details about your cancer and your treatments. This booklet is not meant to replace any information your healthcare team gives you.

This booklet was written with the help of people who have had cancer. Patients have told us they would have been better prepared to cope with their cancer and its treatment if they had had a better understanding of the disease and its treatments ahead of time.

We welcome your comments on how we can improve this booklet.

Drew Bethune, MD, MSc, FRCSC
Clinical Head, Capital Health Cancer Care Program

Vickie Sullivan, RN, BN, MHS, CON(C)
Director, Capital Health Cancer Care Program
Victoria General Hospital and Surrounding Area
**Your First Appointment**

**Where is my first appointment?**

The Cancer Care Program at the Queen Elizabeth II (QEII) Health Sciences Centre is in several locations at the Victoria General (VG) site. The address is 1276 South Park Street, Halifax, Nova Scotia, B3H 2Y9 (see the map on page 2).

Your first appointment with a cancer specialist may take place in an outpatient clinic. There are several different clinics located at the VG site: the Nova Scotia Cancer Centre, the Hematology Clinic, Medical Day Unit, Surgery Clinic, and ENT Clinic. Care is also provided on in-patient units at the VG and the Halifax Infirmary sites.

A clinic has also been set up in Lower Sackville at the Cobequid Community Health Centre. The address is 40 Freer Lane, Lower Sackville, Nova Scotia, B4C 0A2.

Satellite oncology clinics have been set up at other hospitals so patients can have some of their cancer care closer to home. These clinics are located at the Valley Regional Hospital in Kentville, the Yarmouth Regional Hospital in Yarmouth and the Aberdeen Hospital in New Glasgow. For further information about the services provided at these clinics, refer to the pages for each clinic located at the back of section one. (see pages 15-16)

In addition to the services offered at the QEII Health Sciences Centre in Halifax, and the satellite oncology clinics, chemotherapy is available at most hospitals. Every effort will be made to arrange for you to have your chemotherapy as close to your home as is safely possible.

When you are contacted about your appointment, you will be told if you will be seen at one of the satellite oncology clinics, at the QEII Health Sciences Centre in Halifax or the Cobequid Community Health Centre.

The following patients will need to go to the QEII Health Sciences Centre in Halifax for some, or all of their care:

- Patients who need radiation therapy.
- Patients who need combination therapies (both chemotherapy and radiation).
- Patients who have head, neck, brain or gynecological cancers.
- Patients who have hematologic cancers (blood related cancers).
- Patients participating in Clinical Trials, see page 19 for more information about Clinical Trials

**Where is the Cancer Care Program at Capital Health?**

The Cancer Care Program is located at the VG site of the QEII Health Sciences Centre in Halifax (buildings 4, 5 and 6 on the map on page 2).

It may help avoid confusion, if you remember that the QEII includes a number of former stand-alone hospitals and other buildings. All these facilities are located at two different sites (the VG and Halifax Infirmary sites) just a few blocks apart, in the centre of Halifax.

There are two main entrances to the Victoria General Hospital:

- **University Avenue** - this is the closest entrance to the Dickson Centre, where many of the outpatient cancer clinics are located. This is the first stop for many cancer patients.
- **South Park Street** - this is the entrance to the parking lot and the closest to the Centennial Building, which is part of the VG site.
Where can I park?

You have two choices for parking:

- Pay parking lots at and near the VG site – hourly and per day rates (see map on page 2 for locations).
- Meters on the streets surrounding the VG site.

Both inpatients and outpatients of the NS Cancer Centre and Hematology programs can get parking vouchers. To be eligible for a voucher, you must have treatments at the hospital for at least 14 days in a row (exclusive of weekends). Parking vouchers provide 50% off the daily parking rate. You can get a parking voucher application form from your unit or clinic reception desk. If you do not have treatments at the hospital for at least 14 days in a row and are having trouble with the cost of parking, ask for a referral to the social worker.

What will happen at my first appointment?

If you are not being admitted to hospital, your first visit is a consultation or discussion visit only. It is unlikely that you will receive any treatment on your first visit. Additional blood tests, X-rays, or procedures may be needed to decide the best treatment for your cancer.

Plan to be here for several hours; even if you are not being admitted to stay overnight. Although everyone does their best to keep people from waiting too long, sometimes you may have to wait for the nurse or doctor to see you.

If you have waited more than half an hour past your appointment time, please check with the receptionist.

It can be very stressful and confusing to take in a lot of new information about your cancer treatment. You may find it helpful to have a family member or friend come with you when you are discussing your treatments with your healthcare team. They can take notes for you or just listen to the discussions with the team. They can help you remember things you have been told or may hear something you might have missed.

Try not to cancel your first visit; it is a very important appointment. It can be difficult to schedule another time.

If you must cancel an appointment, please call the clinic where your appointment was scheduled to take place.

Given the great number of patients we see, it is very difficult for us to schedule patients’ appointments at a preferred time; we appreciate your understanding.

Who will I see during my first appointment?

When you arrive for your appointment, a receptionist will greet you. The receptionist will ask you basic questions, such as your date of birth, address, and a person to contact in the event of an emergency. They will also ask for your health card. This is to make sure the information about you on file is correct. On later visits, the receptionist will check with you to make sure that all this information is current.

The next person you see usually will be a cancer (oncology) nurse. The nurse will meet with you in an examining room before you see the doctor. The nurse will ask you important questions about you and your family. He/she will help you understand the information you are given. The nurse will also help you if you have concerns or questions.

Next, the doctor will meet with you. When you are diagnosed with cancer, you are referred to a cancer doctor, called an oncologist. There are actually a number of different types of oncologists. All oncologists work closely together, and you may see more than one kind of cancer specialist. He/she will spend time with you, explaining your cancer and deciding what treatment would be best for you. The doctor will usually examine you.

The QEII is a teaching hospital with a long tradition of providing excellent training for a variety of health professionals. During your visit you may meet medical residents and other students. Residents are doctors who have received their medical degree and are now training to become specialists. Residents and students are under the direct supervision of a cancer team member. If you are not comfortable having students involved in your care, please speak with your doctor or nurse.
What should I bring to my first appointment?

• Bring your medications in their original container (prescription medications, over the counter medications, vitamins, and supplements) to show your cancer doctor.

• Bring enough medication to last your stay in Halifax.

• Bring a list of things you are allergic to, including medications and foods.

• If you are being admitted to hospital, your medication will be supplied, including any medications you take that are not for cancer.

• Bring your health card. If you have private health insurance, please bring that card too.

• Bring things to help you pass the time, such as books, crosswords, magazines, music or knitting.

• Do not bring anything that is expensive or means a lot to you, unfortunately, things can be lost or stolen.

• The QEII is a smoke free and scent free environment.
  ° You cannot smoke on the QEII property.
  ° Scented and perfumed products can cause allergic reactions for some people and can add to some patients’ feeling of nausea.
  ° Please do not wear scented products like perfume, aftershave, hair spray and lotions.

What questions should I ask?

We encourage you to be an active member of your healthcare team, ask any questions you have about cancer and your treatment. Write down a list of questions you have and bring the list with you. This will help you remember what you want to ask. Do not be nervous about asking questions. Bring a pen and some paper to jot down the answers.

Here are some questions that cancer patients often ask:

• What type of cancer do I have?

• What is the stage of my cancer?

• Has the cancer spread to other parts of my body?

• What tests will I need?

• When will I get the test results?

• What are my treatment options?

• What would happen if I don’t have treatment?

• Where can I have my cancer treatment?

• Will I need to stay in the hospital overnight to have my treatment?

• When will my treatments start?

• When and how will I know if the treatments work?

• What side effects am I most likely to have?

• What can I do to manage the side effects?

• What support is there for me?

• Will I be able to take care of myself or will I need help?

• Should my family have genetic testing to see they are at risk for my kind of cancer?

• Is there any kind of support available for my family and friends?
What happens after my first visit?

- Your cancer doctor and nurse will give you information to take home with you. You can read it and share it with others.
- You will also be given a phone number that you can call if you have any more questions after you go home.
- You may be given an appointment to come back for more discussion or for treatment. It might be possible for you to have your treatment at your local hospital. If so, your cancer doctor and nurse will work with your local hospital team to arrange your treatment.
- Your cancer doctor will send a letter to your family doctor. Within two weeks of your first visit or your release from hospital, please make an appointment with your family doctor to discuss your understanding of your cancer treatment.
- You may find it helpful to keep a journal, notebook or use page 31 of this booklet to write down your questions and the answers to your questions.
- You may also want to start a calendar to keep track of all your tests, procedures and treatments.

Your Cancer Care Team

Depending on your diagnosis and treatment plan, a number of health professionals may provide your care. Some will meet at the beginning of your cancer journey and others you will meet later. If you would like to see a particular member of the cancer care team, tell your doctor or nurse so they can arrange this for you.

Cancer Doctors
Cancer doctors (called Oncologists) are specialized in treating cancer. You may see a Medical Oncologist or Hematologist (a blood disorder specialist) who decides what medications are needed to treat your cancer, or a Radiation Oncologist who is specialized in using radiation to treat cancer or a Surgical Oncologist who specializes in cancer operations. Some patients see more than one oncologist.

Cancer Nurses
Cancer Nurses support and care for you and your family. They help you understand your cancer and its treatment. They may also explain treatment options, often give you the treatment and help you deal with any side effects.

Cancer Patient Navigators
Your Cancer Patient Navigator is your guide through the healthcare system. They can answer many of your questions or tell you where to get answers you are looking for. They can give you information that helps explain the different aspects of cancer and its treatment. They can also connect you with resources in your community.

Navigators also work with members of your healthcare team to coordinate your visits for cancer treatment. It is very difficult for the Cancer Centre to schedule patients’ appointments at a preferred time; we appreciate your understanding.

After your treatment is completed, your Navigator can help you with your follow-up care.

There are Cancer Patient Navigators available in parts of Cape Breton, South West, Pictou County, Guysborough Antigonish Strait Richmond, Annapolis Valley, Colchester, Cumberland, and South Shore. You can contact your Cancer Patient Navigator by calling toll free 1-866-524-1234.

“I spoke to the Patient Navigator and she told me what to expect from the time I went into the operating room, to the time of chemotherapy. That was a positive experience, because there weren’t any surprises. That’s what got us through it.”

Cancer Survivor
Clinical Dietitian
Clinical Dietitians are trained and skilled in the nutritional care of people with cancer. The Dietitian can help you deal with eating problems, weight changes, special diets and nutritional supplements. Before, during, and after cancer treatment the Dietitian can also give you nutrition information and answer your questions and concerns about a variety of topics like healthy eating, vitamin and mineral supplements, vegetarianism and alternative therapies.

Dentist
Cancer drugs and radiation therapy can cause changes in the mouth, such as soreness or dryness. Your Dentist can help you manage mouth problems and your dental care.

Enterostomal Therapy Nurse
An Enterostomal Therapy Nurse is a registered nurse with advanced and specialized knowledge and clinical skills in wound, ostomy and continence care.

An ostomy is an operation that creates an opening from an area inside the body to the outside. For example:

- A colostomy and an ileostomy create an opening to the outside of the abdomen to allow stool to pass through.
- A urostomy creates an opening to the abdomen to allow for a new way to pass urine.

Some colorectal and bladder cancer patients need ostomies.

Enterostomal Therapy Nurses support cancer patients by providing: pre-surgical education, stoma siting, ostomy care education including return to normal activities of daily living, sexual health and psychosocial counseling, discharge planning and out-patient follow-up.

Family Doctor/ Nurse Practitioner
Your Family Doctor or Nurse Practitioner works with the cancer team before, during and after your cancer treatments. During your treatment, it is very important to stay in close touch with your Family Doctor. Your doctor will receive updates on your progress after every visit to the cancer centre. Your Family Doctor knows you and your health history and can be a valuable source of help and advice. It is a good idea to make regular appointments with your Family Doctor during and after your treatment.

Health interpreters (also called translators)
We make every effort to ensure that the needs and expectations of cultures are addressed. If English is not your first language, your healthcare team can provide a cultural/language interpreter (translator) for you. Do not be afraid to ask for this service. It is very important that you understand what your healthcare team says to you about your treatment, and that you understand any instructions they may give you. There is no charge for this service. Your healthcare team has a list of available cultural/language interpreters. Sign language interpreters are also available, upon request.

Nurse Practitioners
Nurse Practitioners are Registered Nurses with specialized training. They work with other team members, including your doctor, to diagnose and treat your illness. They can help you understand about your type of cancer. They can also answer questions about your treatment.
Occupational Therapist
Occupational Therapists help patients manage their daily activities. During and after cancer treatment, it may be more difficult to do things that are important and meaningful to you. The Occupational Therapist can assess your challenges and suggest possible solutions. The occupational therapist may suggest trying various assistive devices or new techniques to make activities easier. The Occupational Therapist may also provide suggestions for dealing with pain or fatigue.

Palliative Care Team
These professionals work with patients and families to support and provide care related to pain and symptom management and end-of-life care. The team is usually made up of doctors, nurses, pharmacists, social workers, dietitians, physiotherapists and occupational therapists. People often think that palliative care is only for cancer patients who are dying. This is not so. Palliative care professionals are skilled, knowledgeable people who focus on aspects of cancer treatment other than the cure. In other words, they treat the symptoms of cancer (like pain) and the side effects of cancer treatment. Their role is to provide you with the best possible care to ensure that you can enjoy the fullest possible range of activities during and after your cancer treatment.

Pharmacist
Pharmacists help you with all of your medications (also called drugs), including chemotherapy. They review your prescriptions carefully so that your drugs are prepared safely and accurately. They will also give you information about how to take your medicine and what to expect during treatment.

Psychosocial Oncology Team
It is common for a cancer diagnosis to create distress of varying degrees for patients and their family members. Your oncologist and nurse are there to help you with this. The psychosocial oncology team also provides help for the psychological, emotional, spiritual, social, family, and symptom management issues that often create distress for patients and their families. Your psychosocial oncology team works with your nurse and cancer doctor. The team includes social workers, spiritual care providers, advanced practice nurses, psychologists and psychiatrists.

- **Advanced Practice Nurses** have completed advanced training and help you manage your symptoms, provide education about your cancer and treatment, and provide support and counseling.
- **Psychiatrists** can help you cope with the adjustments and emotional impact of cancer, and may prescribe medication to help you deal with depression and anxiety.
- **Psychologists** can help you cope with the emotional, psychological, physical, social and practical concerns and adjustments relating to cancer. They can help you cope with the uncertainty; fears and worries that may accompany life with cancer, help you expand your coping strategies, and deal with depression and anxiety. They also provide psychotherapy.
- **Social Workers** help people with cancer and their families manage and cope with the day to day challenges of living with cancer. They provide counselling, education, information, and advocacy. They can also help you connect with health care, government, and community resources.
- **Spiritual Care Providers (Chaplains)** provide emotional and spiritual support to patients and families of any ethnic or religious background, as well as those who do not identify with a religious tradition. Cancer can upset one's entire outlook on life. The chaplain is here to help you regain balance and connect with your inner strength, which can make a huge difference getting you through treatment. Chaplains also help with anxiety, family coping, and can provide spiritual resources as you need.

“Tapping into your spirituality is about becoming more authentically connected to yourself, to God... to whatever gives you the deepest meaning in life. In that respect, everyone is spiritual.”

Rev. David Maginley, Chaplain
QEII Cancer Care Program
Physiotherapist
Physiotherapists can help patients maintain or restore muscle strength, physical function and mobility during and after cancer treatment. The Physiotherapist may also help you manage cancer related pain and fatigue.

Radiation Therapists
Radiation Therapists deliver radiation treatment according to the plan prepared by the patient’s Radiation Oncologist. Every patient has their own unique plan. The radiation therapist plays an important role in educating patients about possible side effects and provides advice on how to minimize them.

Speech Language Pathologists
Speech-language Pathologists help cancer patients manage swallowing and speech problems associated with cancer and cancer treatment.

Volunteers
The QEII is fortunate to be supported by many volunteers who provide a variety of help and support to patients in the in-patient and outpatient areas of the hospital.

Screening for Distress
Cancer can be a difficult and stressful illness. Many people experience distress during their cancer experience. This is because cancer affects more than just your body – it can affect many parts of your life such as your emotions, your work, your finances, and your relationships with family and friends. Distress can be described in many ways. Some people describe distress as a general feeling of discomfort or upset.

To better understand how you are feeling and coping with your cancer, your health care team may ask you to complete a short Screening for Distress Questionnaire. It will only take a few minutes for you to complete.

Once you fill out the questionnaire, someone from your health care team will review it with you. You and your health care provider will then work together to decide on what might help you to deal with the concerns you identified.

Screening is a quick way for your health care team to understand the issues that concern you the most. Screening can help you to play a more active role in your care. By letting us know what is bothering you, we can provide you with information about services and resources that are available to help.

“Most people dealing with cancer will display emotional distress at some point during their cancer experience. This is understandable given the many challenges associated with living with cancer.” Dr. Janice Howes, Psychologist, Capital Health
Patient Rights and Responsibilities

You are an important part of the health care team. If you have questions or want to talk more about your rights and responsibilities, please speak with a member of your health care team or a patient representative (1-855-799-0990) who can help you address concerns related to your health care experience.

You have the right to:

• Expect your personal privacy to be honoured and that all communications and records pertaining to your care be kept confidential.
• Review your records.
• Know by name the doctors, nurses, therapists and other staff members responsible for your care.
• Understand your diagnosis, the treatment prescribed for you, the likely outcome of your illness, and any instructions required for follow-up care.
• You have the right to meet with another doctor to get a second opinion.
• Know the reason why you are given various tests and treatments.
• Know the general nature and any risk of a procedure or treatment prescribed for you.
• Change your mind about any procedure for which you have given your consent.
• Refuse to sign a consent form if you feel everything has not been explained to your satisfaction, or cross out any part of the consent form that you do not want applied to your care.
• Refuse treatment and to be informed of the medical consequences of this action.

Your responsibilities are to:

• Ask questions until you clearly understand your diagnosis, treatment and/or method of care.
• Know and follow hospital policies, such as: no smoking within the facility and the QEII is a scent-free environment.
• Let your Cancer Care Team know if you have any side effects.
• Let your Cancer Care Team know how you are coping.
• Tell your Cancer Care Team if your Family Doctor changes any medication you are taking for any other health conditions.
• Respect the privacy of other patients.

What if I have concerns or complaints about my care?
The Patient Representative Service can respond to concerns or complaints you have about your care or your experience in the Cancer Care Program. They will work with you to improve patient care and services and encourage open communication, compassion and respectful partnerships between you and your health care team. To contact a patient representative, email healthcareexperience@cdha.nshealth.ca or call (902) 473-2133, toll free number 1 (855) 799-0990.
For some people, a cancer diagnosis can have a big impact on their financial situation. If you have financial concerns, please discuss them with your Nurse or Doctor, and they will try to find help. The Social Worker at the Cancer Centre can connect you to the government services and community organizations that can provide financial help.

Nova Scotia health insurance (MSI) covers the costs of treatments that you receive at a hospital (including surgery, IV chemotherapy and radiation therapy). However, there are some things not covered by MSI that you may have to pay for. These include:

- Oral medications (pills) and other medications that you buy at the drug store. These include medications for pain and nausea, as well as some types of chemotherapy.
- Nutritional supplements (for example Boost®)
- Ostomy supplies

If you have any concerns about the cost of medications, call the Medication Resource Specialist at the QEII, 902-473-8241 or your Patient Navigator, 1-866-524-1234.

It is a good idea to keep all your travel, food and accommodation receipts. You may be able to claim them on your income tax return. You can get more information from the Canada Revenue Agency and/or the person who prepares your tax return.

Some people have difficulty getting to the QEII or their local satellite clinic. In Nova Scotia, we do not have a province-wide driving service for cancer patients. If you have difficulty getting to your treatments, ask the QEII Social Worker, 902-473-5180, or your Cancer Patient Navigator, 1-866-524-1234, for help.

The Nova Scotia Department of Health and Wellness provides financial help for travel and accommodations for eligible cancer patients. Call 1-800-563-8880 to see if you qualify for this program.

Some communities offer shuttle services and/or volunteer driver services. Ask the QEII Social Worker, 902-473-5180, or your Patient Navigator, 1-866-524-1234, about services in your area.

“It wasn’t something we were prepared for financially, we just didn’t know.”
Cancer Survivor

“I didn’t know you could claim all your trips on income tax.”
Cancer Survivor
Accommodations for Patients and Families

If you need to travel to the city and stay overnight in Halifax, there are two lodges available for patients and families:

**The Lodge That Gives**
Canadian Cancer Society
5826 South Street
Tel: 902-420-1849 or 1-800-639-0222 ext 223
www.cancer.ca

The Canadian Cancer Society’s Lodge That Gives offers accommodations to cancer patients and their families living more than 50 kilometers away from the cancer treatment centre in Halifax. Nova Scotia cancer patients stay free of charge and meals are provided at no cost. There is no charge for a parent or a guardian staying with a child, an escort required by a transplant patient or a patient who requires support for their “tube feeding”. Family members and/or support persons can stay for $55 per night. This fee covers the cost of the room and three meals per day; however, fees may be waived in special circumstances, at the discretion of the Lodge Coordinator.

First time reservations for the Lodge That Gives can be made through a booking clerk at the QEII Cancer Treatment Centre, a family physician, or by a cancer specialist. If you have stayed at the Lodge in the last year, you can make reservations by phone or on-line, www.cancer.ca. You will be asked to show your medical appointment card upon arrival. You may arrive the night before your appointment and are welcome to stay one night after your appointment if needed.

**Point Pleasant Lodge**
Point Pleasant Lodge is associated with the QEII
1121 South Park Street
Tel: 902-421-1599
www.pointpleasantlodge.com

Point Pleasant Lodge is located one block from the QEII Hospital. It is within walking distance and a free shuttle bus service is also available to and from the hospital. Patients receiving treatment at the QEII Hospital can stay at Point Pleasant Lodge for free during their treatment. The reservation must be made by a booking clerk at the QEII Hospital. Additional charges apply for each guest, unless a person is confirmed to be an “essential escort” by the booking clerk at the time of the reservation. You must contact Point Pleasant Lodge before 10:00am on the day of your arrival to confirm your reservation. There is limited parking at Point Pleasant Lodge. The cost of parking is $10.00/day plus tax. Parking is available on a first come, first served basis. Most of the rooms are double rooms. Patients who are staying at the lodge on their own may be asked to share a double room with someone of the same gender. There is a charge for meals. Meal vouchers for cancer patients and essential escorts are available through your Clinic.

Patients from New Brunswick and Prince Edward Island are given a daily meal allowance for their entire stay.

“A lot of people do not know that there is financial assistance available. A lot of people do not know that if you are under a certain income, there is financial assistance available for medications and transportation...” Cancer Survivor
Hotels/Bed and Breakfasts
These hotels, inns, and bed and breakfasts offer discounts or special rates for QEII patients. When you book, tell the clerk that you are a patient at the hospital or a family member. They will let you know if they need any paperwork to give you a special rate.

- **Atlantica Hotel Halifax**
  902-423-1161
  1980 Robie St.
  www.atlanticahotelhalifax.com

- **Chebucto Inn**
  902-453-4330
  6151 Lady Hammond Rd.
  www.chebuctoinn.com

- **Commons Inn**
  1-877-797-7999
  5780 West St.
  www.commonsinn.ca

- **Halifax Haven Guest Home**
  902-421-1650
  5897 Inglis St.
  The Halifax Haven Guest Home is a not-for-profit place to stay operated by the Mennonite Church. For patients who can afford it, there is a suggested donation of $40 per night. Transportation may be available for patients.

- **Lord Nelson Hotel**
  1-800-565-2020
  1515 South Park St.
  www.lordnelsonhotel.com

- **The Garden South Park Inn**
  1-877-414-8577
  Bed & Breakfast
  1263 South Park St.
  www.gardensouthparkinn.com

- **Waverly Inn**
  1-800-565-9346
  1266 Barrington St.
  www.waverleyinn.com

- **Westin Nova Scotia Hotel**
  1-888-627-8553
  1181 Hollis St.
  www.thewestinnovascotian.com

For more information about accommodations, phone Tourism Nova Scotia at 1-800-565-0000 or visit www.novascotia.com.
Support groups

There are many different cancer support groups. Some are for the patients. Others are for the family and/or friends of the patient. Others are open to anyone. Groups may be led by a health care professional or made up completely of peers. You can find support groups that meet face-to-face or online.

There are several ways to find a support group in your area:

• By dialing 211 or visiting the website, ns.211.ca, users can easily and quickly connect to the social, health and community services they need, anywhere in the province, regardless of where they’re located.

• Halifax: 902-473-6067 (Nova Scotia Cancer Centre); for Hematology, contact David Maginley at 902-473-3449, or Janice Spencer at 902-473-4072.

• Sydney: 902-567-8551 (Social Worker at the Cape Breton Cancer Centre)

• All other areas: 1-866-524-1234 (Cancer Patient Navigators).

• Contact the Canadian Cancer Society at 1-800-639-0222 or visit www.cancer.ca.

• If you are interested in online groups, visit www.cancerchatcanada.ca. Health care professionals from various cancer centres in Canada lead these groups. Most are available to residents of any province or territory.

Other Services at the QEII

Banking Machine
Banking machines are located in several areas of the VG Site. Ask the receptionist to direct you to one.

Bus Service
Contact Metro Transit at 902-490-4000 for routes and times.

Food Services
• Cafeteria, Main Floor, Centennial Building, VG Site.
• Tim Hortons, Main floor Dickson Centre and main floor Centennial Building, Victoria General Site.

Parking
There is an hourly rate for parking in the QEII lots. Speak to the social worker at the QEII if you have concerns about paying for parking.

Prayer and worship
There is a chapel and prayer room located on the main floor of the Victoria building.

Within a short walking distance of the VG, you can find places of worship of most major denominations. For a complete listing, look under the word “Churches” in the Yellow Pages of the Halifax Regional Municipality phone book.

Resource Library
All cancer care areas will have information available for you and your family. A resource library, supported by volunteers, is available to cancer patients. It is located in the Cancer Centre on the main floor of the Dickson Building.

Sunshine Room
Room 11-017, 11th floor, Victoria General Building, VG Site
This is a comfortable, supportive area where people undergoing cancer treatments can be introduced to massage therapy, therapeutic touch and reflexology. Head wraps are available. These services are provided free of charge by trained volunteers. Feel free to drop in.

Taxi Service
There are direct lines at the entrance to the VG Site.

Telephones
Pay phones are located at the main entrances of the VG Site.
Satellite Oncology Clinics

Satellite oncology clinics have been set up at other hospitals so patients can have their first visit, follow-up visits and some treatments closer to their homes.

The decision about where a patient receives care is based on individual patient needs, and is based on things such as the kind and extent of cancer a patient has and the suggested treatment.

When you are contacted about your appointment, you will be told if you will be seen at one of the satellite oncology clinics or at the QEII Health Sciences Centre in Halifax.

Aberdeen Hospital
835 East River Road
New Glasgow, NS  B2H 3S6

Directions to the Clinic
You must first register at the central registry which is located on the ground floor. The oncology unit is located on the West Wing of the Fourth Floor.

Contact Information
Telephone: 902-752-7600, extension 4922

Clinic Information
Clinics are held monthly. Appointments are required. They are made by referral from a Physician.

Other Information
• Cafeteria: A cafeteria is located on the ground floor of the hospital. Hours of operation for the cafeteria are 8:30am–1:00pm.
• Vending machines are located in the cafeteria.
• Parking lot is located beside the hospital. Parking is a flat rate of $2.00. If a patient is unable to pay for parking, a token will be given by the oncology clinic staff.
• Pay phones are located at the main entrance on the ground floor.
• A banking machine is located at the main entrance on the ground floor.

Cobequid Community Health Centre
40 Freer Lane
Lower Sackville, NS  B4C 0A2

Directions to the Clinic
You must first register at the Cobequid Community Health Centre central registry.

Contact Information
Telephone: 902-473-6000
Valley Regional Hospital
150 Exhibition Street
Kentville, NS  B4N 5E3

Directions to the Clinic
Enter through the main doors at the Valley Regional Hospital.
• By Stairs: Go up the main stairs and turn right. The registration desk will be on your left.
• By Elevator: After coming in the main entrance, turn right and go down the hallway to the first set of elevators. After leaving the elevator, turn left.

Contact Information
Telephone: 902-679-2835

Clinic Information
Clinics are held daily, excluding holidays. Appointments are required.

Other Information
• Cafeteria: A cafeteria is located in the hospital. Hours of operation for the cafeteria are: 7:30am – 6:15pm.
• Parking lot is located at front of hospital. Parking is $2.00 a day.
• Pay phones are located at the main entrance.
• A banking machine is located in the hospital.
• A change machine is located in the main lobby of the hospital.
• For further information about services offered at the Valley Regional Hospital, ask your healthcare team for the Patient Information Manual or visit www.avdha.nshealth.ca.

Yarmouth Regional Hospital
60 Vancouver Street
Yarmouth, NS  B5A 2P5

Directions to the Clinic
Patients register in the South West Health Cancer Centre, located on the 4th floor of building C at Yarmouth Regional Hospital.

Contact Information
Telephone: 902-742-3542, ext: 1381
Website: www.swndha.nshealth.ca

Clinic Information
Medical Oncology Clinic is held one day every 2 weeks. Radiation Oncology Clinic is held one day every month. Appointments are required. They are made by referral from a Physician.

Other Information
• Cafeteria: A cafeteria is located in the basement of the hospital. Hours of operation for the cafeteria are: 7:30am–6:00pm Monday–Friday. Weekend and Holiday hours are: 9:30am–1:00pm and 4:00pm–6:00pm.
• Parking is a flat rate of $2.00. The parking lot is located off Vancouver St. Limited free parking is available by entering the Grove Road entrance.
• Pay phones are located in the main lobby of the hospital, on the first floor of building C near the elevators and on the 4th Floor near the Cancer Centre waiting area.
• A banking machine is located in the main lobby of the hospital. A change machine is located in the main lobby of the hospital.
• The Cancer Patient and Family Resource Room offers resources such as literature, DVDs, wigs, head wraps, breast prostheses, mastectomy bras, etc. It is located in the South West Health Cancer Centre and is open daily from 8:00am–4:00pm.
• The Harmony Room is also located in the Cancer Centre and offers free complementary therapies including therapeutic touch, reflexology, reiki and light massage.

Chemotherapy Clinics
Chemotherapy is available at most hospitals in the province. Your cancer doctor or nurse will let you know if you can have chemotherapy at a hospital closer to your home.
Finding out that you have cancer

When you first learn that you have cancer, your feelings may overwhelm you. Common reactions are sadness, fear, anger, denial and feeling helpless. These feelings are normal. Almost all people will have them. They are not a sign of weakness. You should not feel guilty about having these feelings.

To better understand how you are feeling and coping with your cancer, your health care team may ask you to complete a short Screening for Distress Questionnaire. It will only take a few minutes for you to complete. Once you fill out the questionnaire, someone from your health care team will review it with you. You and your health care provider will then work together to decide on what might help you to deal with the concerns you identified.

It is important to remember that everyone is different. Some people feel they will cope better with their cancer if they have a greater understanding of the disease and its treatment. Others only want to receive a little information.

What is cancer?

Cancer is not a single disease. There are more than 200 different kinds of cancers. The different kinds of cancer are usually named according to the part of the body where they first develop, for example, breast cancer and prostate cancer.

Cancer occurs when certain cells in your body become abnormal and then reproduce themselves (multiply). These abnormal cells sometimes form a mass (or lump) that is called a tumour. But not all tumours are cancer. There are two kinds of tumours: benign and malignant.

- **Benign tumours** do not spread to other parts of the body. They are not cancer.
- **Malignant tumours** are cancer. They can spread to other parts of the body.

Cancer spreads in different ways:

- Sometimes cancer tumours grow (spread) directly from where they start growing to nearby organs and tissues.
- Cancer also can spread when cancer cells break away from a tumour and travel to other parts of the body. These cells grow and create new tumours. The cancer cells travel through either the blood stream or the lymphatic system to reach other parts of the body. The lymphatic system is a series of vessels that carry lymph to different parts of the body. Lymph is a watery fluid that contains cells that fight infection and disease.
- In some kinds of cancer, such as leukemia (blood cancer), these cancer cells start to grow in many places at the same time.

When cancer cells spread to other parts of the body, it is called metastasis. Whenever and wherever cancer cells grow and spread in a person’s body, they can prevent healthy cells and organs from doing their job. As a result, the body cannot work like it should and the person gets sick.
Kinds of cancer

There are four main kinds of cancer:

1. **Carcinomas** are the most common kind of cancer. They start in a gland or solid organ, such as a lung, breast, prostate, bowel or ovary.

2. **Sarcomas** are cancers that start in the muscles, bones and tissues that connect different parts of the body.

3. **Leukemias**, or blood cancers, are cancers of the white blood cells.

4. **Lymphomas** are cancers of the lymphatic system. The lymphatic system is a series of vessels that carry lymph to different parts of the body. Lymph is a watery fluid that contains cells that fight infection and disease.

You cannot catch cancer from someone who has cancer. It is not contagious.

Cancer is still a common disease, and there is no magic cure. In fact, as doctors and scientists have succeeded in treating and preventing other diseases, helping people to live longer, cancer has become more common. This is because the older a person is; the more likely they are to get cancer. As people live longer and longer, cancer will strike more people. One out of every three people can expect to have some kind of cancer during their lifetime.

How do doctors diagnose cancer?

To diagnose (find out) if you have cancer, your doctors will do a number of tests. One of these tests may be a biopsy. A biopsy is when a doctor takes out a very small piece of a tumour or tissue from where a tumour may have spread. They look at the piece under a microscope and do tests on it.

A biopsy will tell you and your doctor if you have cancer and what kind of cancer you have. Knowing the kind of cancer helps your healthcare team plan the best treatment for you.

For most kinds of cancer, your doctor will also do other tests to find out the stage of your cancer. The stage of your cancer means how far it has spread, or how advanced it is.

Staging involves doing tests to learn more about your cancer. These tests will show the size of a tumour, and if your cancer has spread to nearby lymph nodes or to other parts of your body. Staging gives your healthcare team the information they need to discuss treatment options with you.

The tests you might have will depend on the medical guidelines for your specific kind of cancer. Some of the tests are listed below:

- CAT scan, MRI, PET scan
- Biopsy
- Chest X-ray
- Mammogram
- Bone scan
- Ultrasound
- Blood tests
- Exploratory surgery

Who gets cancer?

Anyone can get cancer. However, this does not mean that anyone in particular will get cancer. Most people will not get cancer.

Cancer has many different causes. For example, cancer can be caused by exposure to tobacco smoke or other poisons, or the ultraviolet rays in sunlight.

While things like smoking may cause some cancers, the exact cause of most cancers is unknown. Cancer also strikes people who look after themselves and are otherwise very healthy.

A person’s ethnic origin (their race) can be a factor in getting some types of cancer.

Cancer is also said to “run” in some families. This is not because you “catch” cancer from a family member. It is because parents can pass on to their children a genetic weakness that makes them more likely to get certain types of cancer.
Cancer treatments

The kind of treatment you need depends on the kind of cancer you have and how advanced it is.

The goal of your treatment may be to:
• shrink the cancer tumour;
• remove the tumour altogether;
• kill cancer cells that may have already spread;
• reduce the chance that the cancer will come back; or
• help you deal with the symptoms caused by certain cancers.

There are several types of cancer treatments:
• Surgery
• Chemotherapy
• Radiation therapy
• Hormone therapy
• Biotherapy
  (immunotherapy and biological therapy)

Understanding these treatments can help you talk about your choices with your healthcare team. To learn more about cancer treatments, call the Canadian Cancer Society’s Cancer Information Service 1-888-939-3333 or visit their website www.cancer.ca or visit the credible websites listed on page 23.

Radiation therapy unit downtime

Like any piece of medical equipment, radiation therapy units sometimes need to be repaired. We call this downtime. If the unit you are assigned to is on down time, your Radiation Therapist will let you know.

We will have the unit back in service as soon as possible. You will receive your planned number of radiation treatments, but you may finish later than you expected.

If downtime occurs on your review day, you may or may not be seen or your review may be moved to another day. If we need to order a part to repair the unit, the unit may be on downtime for a few days. You may be assigned to another unit for your treatments. These treatments may be scheduled later than 5 pm and your regular review may be on another day.

What is a clinical trial?

Clinical trials test new cancer treatments. Clinical trials are set up carefully and the results are carefully measured. You may want to ask your healthcare team if you can participate in clinical trials. Or your healthcare team may ask you to join a clinical trial. Be sure to ask any questions you have before deciding whether to take part. It is OK to say no if you do not want to be part of a clinical trial. Your healthcare team will still offer you the best cancer treatment available. For more information about clinical trials, visit www.canadiancancertrials.ca.

Other therapies

Before, during, and after cancer treatment there are other therapies that can assist you with relaxation and pain management. Many cancer patients have benefitted from Massage Therapy, Acupuncture, Aromatherapy, Tai Chi and other approaches. Before trying any other therapy, talk to your healthcare team about the benefits and risks. Together you can make the best decision for you.

You may find it helpful to read the booklet Complementary Therapies available from the Canadian Cancer Society, call 1-888-939-3333 or visit www.cancer.ca.
What else can I do to support my health during my cancer treatment?

Having cancer and going through cancer treatment can be draining. There are a number of things you can do to support your health during your cancer treatment:

- Stop smoking – if you smoke, the most important thing you can do for your health is stop smoking. Ask your Doctor and Nurse how they can help or call the Canadian Cancer Society’s Smoker’s Helpline 1-877-513-3333
- Eat healthy meals and snacks – while there will be times you may not feel like eating, eating healthy foods will help you stay strong and feel better
  - eat lots of fruits and vegetables
  - choose breads, rice, pasta and noodles (preferably wholegrain)
  - keep your muscles strong by eating enough protein
    - lean meat, fish, chicken, turkey, eggs, beans and nuts
  - keep your bones strong by drinking milk, eating yogurt and cheese
  - If you are having trouble eating, ask to see a dietitian
- Drink at least 8 glasses of water every day
- Avoid drinking alcohol
- Exercise - being active can help you cope with cancer, manage fatigue and stay strong. There may be times you don’t feel like doing much, even a short walk or some gentle stretching can make a difference.

Side effects

Cancer treatments damage or kill cancer cells. Treatments can also harm healthy cells causing side effects. Some examples of side effects are skin redness, upset stomach and tiredness. Some people do not have any side effects from their treatments. Other people have some or many side effects.

The good news is that today there are many ways to manage both cancer symptoms and treatment side effects. Be sure and let your health care team know what side effects, if any, you are having. They may be able to suggest something that is helpful. It is also important to remember that many treatment side effects go away when treatment ends.

During your treatment, you will get support to manage any side effects you have. In some cases, specialized doctors and nurses from the Palliative Care Team will help with symptom management, support and counseling.

Keeping your mouth healthy during cancer treatment

Good mouth care is important before, during and after cancer treatment. Having a healthy mouth can reduce your risk of the mouth problems that cancer and cancer treatment can cause.

See your Dentist as soon as possible after your cancer diagnosis. Ask your Cancer Doctor if you should see your Dentist before you start your cancer treatment.
Talking about your cancer

Telling people you have cancer and explaining your treatment can be very difficult. You may wish to tell family, close friends and your employer. You may not want to tell others. Everyone’s comfort level is different.

Here are some suggestions to help you talk about your cancer:

• Make the first move - people may be unsure or afraid to ask you questions.
• Be prepared for difficult questions.
• Speak at the level they understand, especially when talking with children.
• Let them experience it their way – their reaction may not be the same as yours.
• Let them know what to expect during your treatment.
• Tell them how they can help - people want to help but often don’t know how.

You and your family may find it helpful to read the booklet Living with Cancer: A guide for people with cancer and their caregivers available from the Canadian Cancer Society, call 1-888-939-3333 or visit www.cancer.ca.

Talking with your children

Many parents don’t quite know where to begin to talk with their children about their cancer or a loved ones’ cancer. Often, parents are unsure about how much to share, how to explain things in a way that makes sense for children, or when to share information. Your healthcare team can connect you with resource people who can help you talk with your children about your cancer and your treatments.

You and your family may also find it helpful to access these resources:

• When a Parent is Sick: Helping Parents Explain Serious Illness to Children, Joan Hamilton, Clinical Nurse Specialist, Cancer Care, QEII. Available from the Cancer Program at the QEII or Chapters.
• Talking to Kids About Cancer www.cancercouncil.com.au
• When a Parent has Cancer www.cancercouncil.com.au

What happens after my cancer treatments have finished?

After your cancer treatments have finished, you will receive follow-up care to make sure you are recovering and that your cancer has not returned. Where you get your follow-up care will depend on the kind of care that you need and the type of cancer you have. You may get your follow-up care in your community, or you may have to go to a cancer centre (Halifax or Sydney).

Follow-up care is often provided by your family doctor. Your family doctor will be told about your treatment and any further tests or care that you should receive. Through your family doctor, your healthcare team at the Cancer Centre will stay in touch with you and monitor your progress.

Ask your health care team about the Cancer Transitions program, Living Beyond Cancer session or the Your Way to Wellness program available in your area. These programs are for patients who have finished treatment and are getting back to daily life.
Living Beyond Cancer – What Happens Now
Living Beyond Cancer is a three hour class for people who have completed their cancer treatment. This class is not a support group. The class helps people learn more about follow up care, how to deal with the short and long term side effects of cancer treatment, nutrition, coping and adjustment. It is also a chance to learn what services are available, to talk with the cancer care team and meet other cancer survivors. The class is held on a monthly basis in the Ballroom, main floor Bethune building at the QEII and is available throughout the province via telehealth. For more information about schedules and to register please call 1-866-599-2267, or contact the Cancer Patient Navigator in your area by dialing 1-866-524-1234.

Cancer Transitions
Cancer Transitions is a free, 2½-hour, six-week program designed to help cancer survivors make the transition from active treatment to post-treatment life. The program is offered at YMCA of Greater Halifax-Dartmouth, 1565 South Park Street, Halifax, NS.

Facilitators and guest speakers will discuss strategies for managing stress, eating nutritiously and managing your health concerns. A YMCA fitness specialist will lead you in exercises at each session, tailored to participants’ abilities. For more information and to pre-register (902) 473-8241

Your Way to Wellness
The Nova Scotia Department of Health and Wellness offers a free program to help people manage chronic illness. The group meets for 2 ½ hours, once a week for six consecutive weeks. Programs are offered throughout Nova Scotia. For more information call 1-888-672-3444 or visit http://yourway.novascotia.ca/

Life after Cancer
You and your family may also find it helpful to read the booklet Life after Cancer available from the Canadian Cancer Society, call 1-888-939-3333 or visit www.cancer.ca.

“People often tell me they expected to feel relieved when treatment ended and were surprised that they felt sad, anxious, down, or uncertain instead; not knowing exactly what to do next or how to do it. This is actually a very normal way to feel. When treatment is over, it is often the first time you really have a chance to pause and process the emotional and practical aspects of the experience, which can feel really overwhelming. The good news is that there are many ways to explore and cope with these feelings, and generally, that relief you were hoping for does arrive.”

Alyson Currie, Social Worker, Nova Scotia Cancer Centre
**Information & Support Services**

In addition to the services provided by the Nova Scotia Cancer Centre, information and support services are available in your community. Ask your healthcare team to direct you to services that may be helpful.

**Canadian Cancer Society (CCS)**
The CCS offers information resources and support programs. Call 1-888-939-3333 or visit www.cancer.ca

**Pink Rose Program**
Pink Rose Program is a package of information and guided support developed to aid the patient diagnosed with breast cancer. Available from the Nova Scotia Breast Screening Program www.breastscreening.nshealth.ca

**Public Library**
The public library in your community is a valuable source of cancer information. Most libraries also offer free Internet access. Please speak to the librarian at your local branch.

**Resources available on the Internet**

Today, you can find an endless amount of information on the Internet. It is helpful to remember that not all information you will find is correct. The best advice is to treat everything you find on the Internet with caution unless you know it is from a reliable website. Look for sites that are Health on the Internet (HON) certified, they will display this HON icon. www.hon.ch

Below is a list of reputable online resources:

**General Cancer Information**

- BC Cancer Agency: www.bccancer.ca
- Canadian Association of Psychosocial Oncology: www.capo.ca
- Canadian Cancer Society: www.cancer.ca
- Canadian Virtual Hospice: www.virtualhospice.ca
- Cancer Care: www.cancercare.org
- Cancer View Canada: www.cancerview.ca
- Livestrong: www.livestrong.ca
- National Cancer Institute: www.cancer.gov/cancertopics/PDQ
- Young Adult Cancer Canada: www.youngadultcancer.ca

**Cancer-Specific Websites**

- Bladder Cancer Canada: www.bladdercancercanada.org
- Brain Tumour Foundation of Canada: www.braintumour.ca
- Breast Reconstruction: www.breastreconstruction.ca
- Canadian Breast Cancer Foundation: www.cbcf.ca
- Carcinoid-NeuroEndocrine Tumour Society of Canada: www.cnetscanada.org/
- Colorectal Cancer Association of Canada: www.colorectal-cancer.ca
- Kidney Cancer Canada: www.kidneycancercanada.org
- Leukemia & Lymphoma society of Canada: www.leukemia-lymphoma.org
- Lung Cancer Canada: www.lungcancercanada.ca
- Myeloma Canada: www.myelomacanada.ca
- Ovarian Cancer Canada: www.ovariancanada.org
- Prostate Cancer Canada: www.prostatecancer.ca
- Rethink Breast Cancer: http://rethinkbreastcancer.com
- The Breast Cancer Society of Canada: www.bsc.ca
- Thyroid Cancer Canada: www.thyroidcancercanada.org
- United Ostomy Association: www.ostomycanada.ca

**Childhood Cancer**

- IWK Health Centre for Women and Children: www.iwk.nshealth.ca/
- Childhood Cancer: www.childhoodcancer.ca
- Cure Search: www.curesearch.org
- Pogo: www.pogo.ca
- Starlight Canada: www.starlightcanada.org
- Teens Living with Cancer: www.teenslivingwithcancer.ca

“They try to make sure you understand, but you need something to refer back to sometimes, when you are sitting at home.” Family Member
Online Support Groups

- Cancer Chat Canada: www.cancerchatcanada.ca
- Cancer Connection: www.cancerconnection.ca
- Life with Cancer: www.lifewithcancer.org
- Survivor Net: www.survivornet.ca
- Teen Connect: www.teenconnection.ca

Palliative Care

- Canadian Hospice Palliative Care Association: www.chpca.net
- Canadian Virtual Hospice: www.virtualhospice.ca
- Capital Health’s Palliative Care Program: www.cdha.nshealth.ca/palliative-care
- Living Lessons: www.living-lessons.org
- Nova Scotia Hospice Palliative Care Association: www.nshpca.ca

Survivorship

- American Cancer Society: www.cancer.org/treatment/survivorshippardanaftertreatment/index
- American Society of Clinical Oncology: www.cancer.net/survivorship
- BC Cancer Agency: www.bccancer.bc.ca/HPI/RecommendedLinks/coping/survivorship.htm

Smoking Cessation

- Department of Health & Wellness: www.gov.ns.ca
- Canadian Cancer Society: www.cancer.ca or call 1-877-513-5333

Information in languages other than English

There are a number of reputable sources of cancer information in languages other than English. We recommend the following Canadian resources:

- Canadian Cancer Society: www.cancer.ca or call 1-888-939-3333
- Cancer Care Manitoba: www.cancercare.mb.ca
- Vancouver Coastal Health: http://vch.eduhealth.ca

You may also be interested in accessing resources outside of Canada. Please note that there may be differences between Canadian information and the information you read on a website outside of Canada. Talk to your healthcare team about how this information applies to you. The BC Cancer Agency and the Canadian Cancer Society both have lists of websites in languages other than English:

- BC Cancer Agency: www.bccancer.bc.ca
- Canadian Cancer Society: www.cancer.ca

“I’m very much an information seeker.”
Cancer Survivor
Important phone numbers

Make sure you have these phone numbers:

- Emergency: 911
- Healthlink, non-emergency health information: 811
- Family Doctor

- Cancer doctor/nurse

- Treatment unit/clinic:
  - Cancer Care Program, QEII, Referral Office, 902-473-5140
  - Nova Scotia Cancer Centre, 902-473-6000
  - Hematology Clinic, QEII, 902-473-6605
  - Cape Breton Cancer Centre, 902-567-7771
  - Cancer Care Nova Scotia, 1-866-599-2267
  - Canadian Cancer Society Information Service, 1-888-939-3333
  - Cancer Patient Navigators, 1-866-524-1234
  - Drug Assistance for Cancer Patients, 1-877-330-0323
  - Nova Scotia Family Pharmacare Program, 1-877-330-0323
  - Nova Scotia Seniors Pharmacare Program, 1-800-544-6191
  - Others:
Understanding Medical Words

During your cancer treatment you will hear a number of medical words that may be new to you. We’ve provided definitions for some of the more common medical terms used in cancer care. If you are looking for a word that is not on this list, check the Canadian Cancer Society’s website www.cancer.ca or the National Cancer Institute’s Dictionary of Cancer Terms http://www.cancer.gov/dictionary.

Ablation A treatment that removes or destroys cells, tissues or organs. Ablation may be done by surgery, radiation, chemicals, heat, high-frequency electrical current, radiofrequency waves, lasers or other methods.

Absolute neutrophil count (ANC) The number of neutrophils (a kind of white blood cell) in a blood sample.

Active surveillance Treatment that involves closely monitoring a person by doing tests on a regular schedule, it is also called watchful waiting.

Adjuvant therapy Treatment given in addition to the first treatment to help reduce the risk of cancer coming back.

Allogeneic transplant A transplant that uses bone marrow or stem cells that are donated by someone else.

Alopecia When hair on your body or head falls out because you had chemotherapy. Radiation therapy only causes hair loss in the treatment area. Your hair will most likely grow back.

Anemia A medical term that means you do not have enough red blood cells or hemoglobin (which is part of red blood cells). Hemoglobin carries oxygen from your lungs to your tissues and cells. Your body needs oxygen to produce energy.

Anti-emetics Medicine that you might take to reduce or prevent nausea (feeling like you will throw up) and vomiting (throwing up).

Autologous transplant A transplant that uses your own bone marrow or stem cells.

Benign Non-cancerous or non-malignant (no cancer).

Biomarker Any cellular, molecular, chemical or physical change that can be measured and used to study a normal or abnormal process in the body. Biomarkers are used to check the risk for, presence of or progress of a disease or the effects of treatment.

Biopsy A short operation to remove a small piece of tissue, which is then sent to a lab to see if it contains cancer cells.

Biotherapy A type of treatment that uses substances made from living organisms to treat disease. Some biotherapies stimulate or suppress the immune system to help the body fight cancer, infection, and other diseases. Other biotherapies attack specific cancer cells, which may help keep them from growing or kill them. They may also lessen certain side effects caused by some cancer treatments. Types of biotherapy include immunotherapy (such as vaccines, cytokines, and some antibodies), gene therapy and some targeted therapies. Also called biological response modifier therapy, biological therapy, and BRM therapy.

Bone scan A radioactive dye is injected into the blood, collects in the bones and is detected by a scanner. Bone scans can detect unusual changes to the bone, such as areas of fast growth.

Bone marrow The soft part at the centre of your major bones. It creates red blood cells, white blood cells and platelets.

Bone marrow transplant See Stem Cell Transplant.

Brachytherapy A type of radiation therapy that uses implants (needles, catheters, wires or seeds) to deliver radiation directly into or near a tumour.

Breast-conserving surgery (BCS) A surgical procedure to remove a tumour along with a margin of healthy tissue surrounding the tumour, while saving most of the breast. Also called breast-sparing surgery, lumpectomy or partial mastectomy.

Breast reconstruction A surgical procedure to rebuild the breast after mastectomy (a surgical procedure to remove a breast).
CBC Complete Blood Count. A set of tests that counts red blood cells (including hemoglobin), white blood cells, and platelets.

Cancer A general term for more than 200 diseases. Cancer is when abnormal cells grow out of control in your body’s organs or tissues.

Carcinoma The most common type of cancer. It may start in the bowel, breasts, cervix, lungs, kidneys, ovaries, prostate gland, or in the skin.

Chemotherapy The cancer treatment that uses drugs to kill cancer cells or stop them from growing.

Combination therapy When more than one cancer treatment is used to treat your cancer. For example, you may have surgery and radiation therapy, or surgery and chemotherapy.

Computed tomography (CT) scan An imaging technique that uses a computer to put a series of x-ray images together to create a 3-dimensional picture of organs, tissues, bones and blood vessels inside the body. A contrast medium may be injected to make organs and structures show up clearly on the x-ray images. The image produced is called a CT scan.

Constipation Not being able to have a bowel movement.

Cure When all signs of the cancer are gone and there is no chance that it will come back.

Cytotoxic Something that kills cells. Chemotherapy and radiation therapy are examples of cytotoxic therapy.

Diagnosis When your doctor finds out what your health problem is. Doctors will diagnose a disease by listening to what signs and symptoms you have, doing a physical check-up and sometimes, doing tests to provide more details.

Diarrhea When you have more than three bowel movements per day and that what comes out is watery (not solid).

Dietitian A healthcare professional trained and registered to give you advice about food and nutrition.

Edema Swelling caused by an abnormal buildup of fluid in the body.

Estrogen receptor (ER) A protein in some healthy and cancerous (malignant) cells that binds with estrogen. An estrogen receptor assay (test) is used to find out if breast cancer cells have estrogen receptors, which will help doctors to decide on a treatment plan. If the cells have estrogen receptors, they are called estrogen receptor positive (ER+). If the cells don’t have estrogen receptors, they are called estrogen receptor negative (ER).

External beam radiation A type of radiation therapy that uses a machine outside the body to direct radiation at a tumour and surrounding tissue.

Fatigue Feeling very tired or weak. It is a common side effect of cancer and cancer treatments.

Genetic counselling Providing education and help for people and families who have or are at risk for a genetic disease. A genetic counsellor is a healthcare professional who helps people to understand the personal and scientific aspects of genetics, clarify genetic risk assessment and present information and available options to help people make informed decisions.

Gynecological oncologist A doctor who has special training in treating women with tumours of the ovary, womb, or cervix.

Hand-foot syndrome A group of symptoms that include pain, tingling, numbness, redness and scaling or shedding of skin on the hands and feet. Hand-foot syndrome is a side effect of some chemotherapy drugs.

Health care team A group of health care professionals that treat and support people with cancer. The team includes your doctor, nurse, dietitian, pharmacist, radiation therapist, social worker, and others.

Hematologist A doctor who has special training in treating blood diseases, such as leukemia.

Hemoglobin The protein found in red blood cells, which carries oxygen form your lungs to the rest of your body.
**Hormone therapy**  Treatment that adds, blocks, or removes hormones. To slow or stop the growth of certain cancers (such as prostate and breast cancer), synthetic hormones or other drugs may be given to block the body’s natural hormones. Sometimes surgery is needed to remove the gland that makes a certain hormone. Also called endocrine therapy, hormonal therapy, and hormone treatment.

**Hormones**  Proteins produced by your body, which moves around in your blood. Hormones control how you grow, how you burn up the food you eat, and how you reproduce.

**Immunotherapy**  A type of biological therapy that uses substances to stimulate or suppress the immune system to help the body fight cancer, infection, and other diseases.

**Injection**  Also called a needle or shot. An injection is when you use a needle to put fluids into your body.

**Intravenous (IV)**  An injection that allows fluids to go right into a vein. The IV system includes: a needle that goes into your hand, arm, or chest, connected to a thin tube, which is connected to a bag that contains a liquid.

**Leukemia**  Cancer of the white blood cells.

**Lymphoma**  Cancer of the lymph system. This is the system in your body that is made up of the spleen, lymph nodes, and lymph vessels. The lymph system carries food, oxygen, and water to the cells in your tissues.

**Malignant**  Cancerous – with cancer.

**Medical oncologist**  A doctor who diagnoses and treats people with cancer, mainly using chemotherapy (drugs), or hormone therapy.

**Metastasis**  The spread of cancer from one part of the body to another through the bloodstream or lymph system.

**Nausea**  Feeling like you might throw up. Having an upset stomach that makes you feel like you will throw up.

**Neutropenia**  A medical term that means you do not have enough white blood cells, and that you might have trouble fighting off infection.

**Nuclear scan**  An imaging technique that uses a small amount of radioactive substance (called a radioisotope). The radioisotope is injected into the body and collects in certain tissues. A scanner takes pictures of the radiation given off by the radioisotopes and creates an image of the organs or structures.

**Nutritionist**  A person who gives you advice about food and nutrition. In Nova Scotia, a nutritionist may not necessarily be a registered health professional. They may have some training in nutrition.

**Oncologist**  A doctor who has special training in treating cancer.

**Oncology nurse**  A nurse who is trained to support you and your family and help you understand your cancer and treatment. The nurse may give you your treatments, and can help you cope with any side effects or other problems.

**Pathologist**  A doctor who looks at cells and tissues under a microscope to see whether or not they are normal.

**Positron emission tomography (PET) scan**  An imaging technique that uses a computer to create detailed 3-dimensional colour pictures of areas inside the body. A radioisotope is injected into the body and collects in certain tissues. A scanner takes pictures of the radiation given off by the radioisotopes and creates an image of the organs and structures.

**Platelets**  Cells that help you form blood clots, to stop bleeding.

**Prognosis**  The likely outcome of a disease. Your prognosis provides answers to questions like: Will I be able to live a normal life? Will I be cured? Will I die?

**Radiation oncologist**  A doctor who has special training in treating people with cancer using radiation therapy.
Radiation therapist  A health care professional who is trained to give radiation therapy, and to support you during your radiation treatments.

Radiation therapy  The use of radiation from high-energy x-ray machines to treat cancer. Radiation therapy can either be given externally through external beam radiation, or through internal radiation, called brachytherapy.

Red blood cells  Blood cells that contain hemoglobin, which carries oxygen from your lungs to the rest of your body. Red blood cells also carry carbon dioxide (a waste product) from your body back to your lungs so you can breathe it out.

Remission  When the signs and symptoms of cancer disappear, and no more active cancer cells can be found.

Sarcoma  A type of cancer that starts in the muscles, bones and cartilage.

Standard of care  The level of care that anyone with a particular condition or disease should expect to receive.

Stem cells  These are the parent cells for all the blood cells in your body, including white blood cells, red blood cells and platelets.

Stem cell transplant  A type of cancer treatment, sometimes called a bone marrow transplant. It is when you get new stem cells transplanted into your body, giving you a new, healthy immune system.

Subcutaneous injection  An injection where a needle enters your body just under the skin. (Not the same as intravenous, where the needle goes into a vein.)

Surgical oncologist  A doctor who has special training to operate on people with cancer.

Surgery  An operation.

TNM staging system  A system used to describe the extent of cancer in the body (the stage) for most types of cancer. T describes the size of the tumour. N describes the spread to lymph nodes. M describes how far the cancer has spread (metastasized) to distant sites in the body.

Transfusion  When blood or blood products go into your body through an intravenous (IV) system (see intravenous injection).

Treatment protocol  A set of instructions that gives all the details about how you will get cancer treatments.

Tumour  A lump or group of cells. A tumour can be either benign (without cancer) or malignant (with cancer).

X-rays  A type of radiation used to find out about (or diagnose) medical problems. When X-rays are used at high levels, they can treat some kinds of cancer. This is called radiation therapy.
Cancer Care Nova Scotia (CCNS) is a program of the Department of Health and Wellness. CCNS works with health professionals and administrators across the province to enable quality cancer prevention and care for all Nova Scotians.

Through Cancer Patient Navigation, health professional education, and standards and guideline development, Cancer Care Nova Scotia supports health professionals in providing patients with high quality care. Its work with other organizations raises awareness about the importance of healthy lifestyles to reduce cancer risk, and its screening programs educate Nova Scotians about healthy lifestyles and available testing like Pap tests for cervical cancer and the FIT kit for colorectal cancer. The goal is to find cancer earlier and treat it better.
This booklet is meant to support the information that your health care team gives you. It does not replace any information that your health care team gives you. This booklet was developed by the Nova Scotia Cancer Patient Education Committee, the Cape Breton Cancer Centre, Cancer Care Nova Scotia and the Capital Health Cancer Care Program.

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The information in this booklet is to be updated every three years.