



DECODING CANCER

THE BIG C IS THE AILMENT OF OUR TIME. UNDERSTAND HOW MALIGNANT CELLS IMPACT THE BODY AND LEARN THE TRUTH BEHIND POPULAR MISCONCEPTIONS

BY GINA ROBERTS-GREY

Few words can stir as wide a range of emotions as *cancer*. And with good cause. About 189,910 of us will be diagnosed with this scourge this year, according to the American Cancer Society. The disease disproportionately impacts our community. Consequently, life expectancy is lower for Blacks than Whites among both men and women. Diet and smoking feed those numbers, edging upward the incidence of cancer. But belief in some prevailing myths can also affect your health. "Making decisions based on inaccurate information can delay or prevent lifesaving screenings, diagnostics and treatment," says Brion Randolph, M.D., chief of medical oncology and medical director of hematologic oncology at the Cancer Treatment Centers of America at Southeastern Regional Medical Center in Atlanta. Come with us behind the curtain as we address seven common sources of confusion.

HEALTHY & HAPPY



MYTH #1 | WE ALL HAVE CANCER CELLS IN US.

Ever hear the story about the dormant cancer cell in your body that isn't sure whether to activate? One thing is certain: We're not born with sleeper cancer cells that may "wake up" or suddenly switch on.

All cancers (solid tumor and blood) start as one itty-bitty, teeny-weeny immature cell that's invisible to the naked eye. "We're all made up of millions and millions of cells," says Marcus Noel, M.D., an oncologist at the University of Rochester's Wilmot Cancer Institute. From your blood to your bones to your brain to everything else, you're a walking, talking collection of cells.

Noel says every one of those cells starts off much like a person. "It's 'born' immature and has to develop into a mature cell in the colon, breast and so on, where it lives and does its job until it dies and is replaced by a new one."

Cancer occurs when that maturing cell mutates or develops abnormally. "It takes two different points of damage for a cell to mutate and grow into cancer," says Noel. As a normal cell matures, it can be altered by carcinogens and turn cancerous. Carcinogens are found in chemicals inhaled when smoking or introduced through exposure to excessive radiation that produces free radicals in the body. Instead of being able to repair itself, or kill itself off, the damaged cell mutates or grows into a cancerous tumor or blood cancer cell.

MYTH #2 | CHEMO WILL MAKE ME SICKER THAN CANCER.

Too many of us have known someone who has battled a cancerous beast. And that fight may have included nausea-inducing chemotherapy that left them sick, weak and fatigued. But vomiting and nausea associated with treatment are no longer a foregone conclusion, says Noel. "New, targeted therapies seek to specifically kill only mutated cancer cells instead of all rapidly multiplying cells, like those in hair follicles and along the gastrointestinal [GI] tract, and minimize side effects

and complications for a better quality of life," he adds.

Using DNA extracted from the tumor, doctors can provide personalized precision care unavailable a few years ago. Immuno-oncology arms your own immune system with superhero powers. "We can remove a person's own immune cells and teach them to recognize and kill cancerous ones," Randolph states. "Then we reintroduce those cells into the body to circulate and kill cancer cells that typically know how to hide from your immune system."

MYTH #3 | YOU SHOULDN'T START TREATMENT WITHOUT GETTING A SECOND OPINION.

Doctors say there's a lot of value in obtaining an additional review of a diagnosis or treatment plan. "Physicians can learn from others' opinions," says Bruce Wayne Porterfield, M.D., Ph.D., a medical oncologist at Arizona Oncology, a practice in The U.S. Oncology Network. "That's especially true when dealing with a rare or unusual form of the disease."

But he cautions those extra consultations can come at a price. "You shouldn't delay recommended treatment by seeking multiple opinions, especially with an aggressive cancer," says Porterfield. You need to have an honest conversation with your doctor about why you want another point of view and how holding off on treatment might put you at risk.

You might even cancel your plans if you're set on receiving the advice of a doctor because of his or her ZIP code. Unless you're diagnosed with a rare or typically treatment-resistant cancer that requires participation in clinical trials or the expertise of those who have experience in handling similar cases, the care offered in large metropolitan areas is probably available at smaller facilities. "You can receive the same chemotherapy in a big city as you can in rural areas," says Porterfield.

Noel specializes in gastrointestinal cancers (colon, esophagus, stomach, pancreas) and frequently provides a second opinion for patients. He then coordinates efforts with an oncologist closer to the patient's home: "You don't have to travel for weekly chemotherapy."

MYTH #4 | SURGERY CAUSES CANCER TO SPREAD.

Listen up: Air does not accelerate cancer growth. "Year after year I hear patients not wanting surgery because they fear being 'opened up' will cause their cancer to spread," says B. Lee Green, Ph.D., vice-president of diversity, public relations and strategic communications at Moffitt Cancer Center in Tampa. "There is no truth to that myth," adds Noel. In fact, some physicians believe surgery is the best form of treatment because it physically removes a cancerous growth.

But a lack of the state-of-the-art imaging and diagnostics available today may have given birth to this notion in the past. "Many years ago doctors might not have realized how advanced a cancer was before performing surgery. They had no other way of seeing how far it had spread," explains Green. "The air had nothing to do with the cancer spreading, but patients and their families assumed that connection because a person came out of the operating room with a more advanced diagnosis than on their way in."

MYTH #3 | IT'S ALL IN THE GENES.

Having a family history of cancer does not necessarily mean you are destined to get the disease. "There have been instances of multiple cases of lymphoma in families, but it is rare," says Beatrice Abetti, director of The Leukemia & Lymphoma Society's Information Resource Center.

What you *can* inherit is the inability to repair those damaged cells that can grow into a cancerous tumor. "The BRCA [breast cancer] gene is one that normally repairs cells that are damaged," says Randolph.

He advises that the two-damage rule for a cell still applies: "All people with the BRCA gene mutation don't develop breast cancer." Perhaps that may be because they don't smoke or there isn't another factor that causes damage to a cell.

MYTH #6 | ONLY PEOPLE WITH A FAMILY HISTORY OF CANCER NEED SCREENINGS.

Speaking of your folks, you also shouldn't be lulled into a false sense of security because cancer doesn't run in your family. "Even patients who do all the right things and have no family history of the disease can be diagnosed with cancer," says Noel. That's why it's important to talk to your doctor about your individual risk of cancer and have the recommended tests based on that discussion.

"Our community is not receptive to screenings. Early detection is critical because that is usually when the disease is more treatable," he adds.

There's no one-size-fits-all approach when it comes to screening guidelines for colon, breast, prostate and other cancers. Those standards assume you're at an average risk for a disease and don't take into account a history of smoking, your ethnicity and your lifestyle.

MYTH #7 | BEING CURED IS BETTER THAN BEING IN REMISSION.

The goal of any medical treatment is to have no detectable evidence of the illness or disease once it's done. And cancer is no exception. But don't get discouraged if your doctor doesn't proclaim you "cured" similar to when antibiotics wipe out strep throat or a cast heals a broken bone. "You can't take cells away from yourself, and by definition cancer is your own cells not acting correctly. So you can't truly use the word 'cure' to describe effectiveness of treatment," explains Kosj Yamoah, M.D., Ph.D., a radiation oncologist at H. Lee Moffitt Cancer Center & Research Institute.

Physicians will often crunch numbers and look at a person's statistical chance of having the cancer recur. Then if there's no evidence of cancer based on life expectancy and scans, blood tests and so on, some will say people are cured after five or ten years because it's not likely they will experience the same cancer again.

But the buzzword signifying you've successfully slain a malignant beast is *remission*. "Most physicians agree that it best demonstrates there's no evidence of cancer," says Yamoah.

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Survivor Salute

After beating bone cancer, American Cancer Society ambassador and jewelry designer Simone Smith raised more than \$200,000 to help find a cure **BY MARIYA MOSELEY**

Simone Smith's life changed with three words: *stage III chondrosarcoma*. In 2004 she was diagnosed with a rare form of bone cancer. "At first I definitely felt sorry for myself, but then I remembered the family I was raised in," she says. "My grandmother always said, 'Why not you? God isn't going to give you anything you can't handle.'" Smith focused on survival. Because of the location of the cancer, she had to have an intense surgery that removed bone in her leg and left her in a wheelchair with a cast for six months. She relearned how to walk over the next two years.

Twelve years later, a cancer-free Smith values each day. "I don't take anything for granted," she says. "I'm blessed and even more spiritually grounded." Her recovery was a family effort that included husband James Todd Smith, aka rapper-actor LL Cool J, and their four children. "My husband did not allow negative people around me," she recalls of her recuperation. "If somebody came in the house crying before they got to the room, he said, 'You can't go in that room crying. You gotta go.'"

After her journey, Smith was inspired to create her signature jewelry collection, Simone I. Smith (SIS), with two goals: "to bring beauty to the world and to make women feel special." Since she unveiled her collection in 2011, this New York City native has merged style and service. A portion of the proceeds from every purchase of the line, sold at simoneismith.com, is donated to the American Cancer Society. Her "A Sweet Touch of Hope" necklaces (pictured above) sell for \$300 each. Smith has gifted more than \$200,000 to the organization thus far.

Regina King and Mary J. Blige have rocked pieces by Smith, and Missy Elliott wore SIS "Galaxy" hoops at this year's VH1 Hip-Hop Honors. The designer, who's partial to earrings, received her first gold hoops as a teen from her future husband shortly after they met. "I want women to feel good when they're purchasing my jewelry. They're purchasing quality jewelry that also gives back to the American Cancer Society," says Smith, who shares her journey on Instagram @simoneismithjewelry. "It's definitely my mission to raise funds so we can find a cure."