One Moment in Time:  
A Patient’s Story  

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ABSTRACT

In this patient narrative, the author describes how she was suddenly diagnosed with invasive ductal carcinoma in her right breast, which had proliferated, into the surrounding lymph nodes, despite the fact that she had a negative mammogram and breast examination one month earlier. With a Bloom-Richardson rating of 7-9, the author underwent both a lumpectomy and lymph node removal, along with an aggressive course of chemotherapy followed by daily radiation treatments. The author describes what made life in the radiation department unique to her and fellow patients as they suffered compounding hurdles both physically and emotionally. A brief exchange between the author and a medical technician shed light on both of them and changed the course of events for others. In keeping with one of the main objectives of ‘User Driven Healthcare,’ whereby integrating unique individual patient perspectives with evidence based knowledge around illnesses, this patient narrative invites the reader to share the author’s personal discovery as to what is most important in life after all.

Keywords:  Breast Cancer, Burned Skin, Chemically-Induced Menopause, Chemotherapy, Depression, Hormones, Purpose in Life, Radiation

MY STORY

I want to tell you a story. It took place during the radiation phase of my breast cancer treatments. My radiation sessions were scheduled at the same time, every day, for six weeks. Each day I saw the same patients and the same technicians. We were all on a first name basis. I saw the same hot chocolate-cappuccino-coffee machine, the same cheap plastic bowl of fresh apples, oranges and bananas, the same stack of well-worn out-of-date magazines, the same relatives and friends accompanying their loved ones, and the same zapping of radiation. The one thing that didn’t stay the same was our changing bodies. We were all deteriorating. Not only was my body changing from the radiation but also the deep chemically-induced menopause I was in, was severely affecting my quality of life. If you can imagine how regular menopause affects women who lose their hormones gradually over a period of years, just think how it felt to lose mine in two weeks. I was having extreme hot flashes every ten minutes, twenty-four hours a day, seven days a week, some so harsh they left me faint. Menopause can also create a depressed feeling and I felt that creeping in as well. My doctor told me that losing my hormones so fast due to chemotherapy was doing such a job on my body, it was like driving my car into a brick wall at forty miles an hour. I found his analogy
validating because that’s exactly how it felt. Smash! Bang! Boom!

Just to let you know, radiation in itself is actually quite painless. Unfortunately, what happens as time wears on is, the skin that’s been radiated, gets burned. Sometimes it looks like a fashionable tan, sometimes it looks like a sunburn, and sometimes the skin gets so badly burned, the doctors have no option but to stop the treatments completely. That’s exactly what happened to my friend Lily. Lily and I met in the radiation waiting room while she was being treated for breast cancer. She was of Asian decent, and even though she stumbled with her broken English, and I with my Chinese, we understood each other perfectly. Just like schoolgirls, we saved seats for each other every day. We connected on many levels and as the weeks moved along, we developed a deep love and respect for each other. One day Lily confided in me that she would no longer be coming for treatment. She opened up her shirt and I couldn’t believe my eyes. The severity of the burns on her chest was shocking. I didn’t know if Lily’s skin was more sensitive than mine or her level of radiation stronger. What I did know was that Lily’s chest couldn’t tolerate any more and her treatments were stopped permanently. I felt terrible for the hopelessness of her situation and, selfishly, I also felt terrible for myself — I would miss her. I made several attempts to stay in touch, but sadly Lily and I never saw each other again.

“What’s wrong Peter?” I asked. “You look so sad.”

“I wanted a banana but there’s none left,” he answered.

“Awww…that’s too bad. Well, look down here. Oh my goodness. Is this a banana in my pocket or am I just happy to see ya?” Quickly I whipped out that banana and Peter’s face lit up. What a sight. To most people, this may have seemed like such a small thing, but those kinds of exchanges amused us to no end and it helped get us through the day. That’s not the story I want to tell you.

We all had our own routines when it came to our radiation appointments. This was mine: I’d sign in, walk into one of five closet-like change rooms located within arms reach of the patient’s waiting room, put on one of those terribly revealing hospital gowns and leave my clothes on the hook, praying that no one would steal them. Of course, I really didn’t have to worry too much about that. Being 5 feet tall, my pants would look like knickers on anyone else. After that, I’d sit in the waiting room, have a cappuccino, chat with a friend, read a gossip magazine to get up-to-date with the really important issues in life, and wait for my name to be called, he ate a banana from the fruit bowl. Peter just loved bananas. One day, he was late for his treatment and I noticed that there was only one banana left in the bowl. I didn’t want anyone to grab it, so being the thoughtful prankster that I am; I snatched up that Chiquita and hid it in my pocket. When Peter finally arrived, he ran over to the fruit bowl but alas — no banana. His disappointment was palpable.

Another patient I met while sitting in the waiting room, day after day, was Peter. He had prostate cancer and we soon became buddies. Peter’s treatments were affecting his hormone levels, similar in ways to mine. He was going through a male menopause of sorts, complete with hot flashes, weight gain, frequent bouts of crying, periods of insomnia, low libido and an overall lack of well-being. He often shared his emotional and physiological changes with me in great detail because he knew I would understand. Peter and I developed quite a bond, playing pranks on each other regularly. Each afternoon, while waiting for his name to be
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