



The Cancer Recovery Pyramid – Medical Resource #3

Understand Conventional Treatment Options

You are entitled to understand the full range of treatments available. Gaining this knowledge will empower you to make the most informed treatment decisions.

Expect your oncologist to explain which types of conventional treatment are recommended for your cancer type and stage, typically in one or a combination of these three categories:

- **Surgery** – Surgery to remove a tumor is the most frequently used cancer treatment. It is normally used when a solid tumor is small and has not moved to other parts of the body.
- **Radiation** – Exposure to x-rays or radium is used for about half of all cancer cases, often in combination with other treatment options; for example, either before or after surgery.
- **Chemotherapy** – Cytotoxic chemicals are used when cancer has spread or is a systemic-type cancer, often along with radiation and surgery to control tumor growth.

THREE OTHER TYPES OF CONVENTIONAL TREATMENT THERAPIES ARE:

- **Hormonal** – Hormone therapy is used for cancers that depend on hormones for growth. Drugs alter hormone levels or the hormone-producing gland is removed to block production.
- **Immunotherapy** – Immunotherapy attempts to boost or restore the body’s natural defense system. Many people believe this will soon be a fourth widely accepted cancer treatment.
- **Investigative** – Investigative programs, including genetic and stem cell therapy, are experimental. They have yet to prove their efficacy and are typically the last choice.

TREATMENT INSIGHTS

1. **While surgery is the most common form of conventional treatment, dozens of types of cancer are not treatable with surgery.** Many patients panic when they are told their cancer is “inoperable.” If you have been told that your cancer is inoperable, do not despair. Recognize that inoperable does not mean incurable.
2. **If your oncologist suggests surgery, and you concur, the decision as to who actually performs the procedure is yours.** Your choice of surgeons is important. You are more likely to get a well-qualified surgeon if you choose one who is a fellow of the American College of Surgeons and who also is board-certified in his or her field. Only about half of practicing surgeons are board-certified, so be sure to ask.

Special note for premenopausal breast cancer patients: Scientific evidence is mounting that fewer breast cancer recurrences are reported among women who choose to have their surgery during the luteal phase of the menstrual cycle, i.e. 14-30 days following the onset of menstruation. Except for one Canadian study, which suggested Day 8 to be the optimal time, research shows surgery performed in the latter half of the menstrual cycle results in the fewest recurrences. Ask your surgeon for the most up-to-date research prior to scheduling. You may have to assert yourself here; most surgeries are scheduled at the convenience of the surgeon and/or the hospital.



Understand Conventional Treatment Options continued

3. Thoroughly understand chemotherapy.

Before you say yes, ask to see proof, such as scientific papers and reports, on the effectiveness of the recommended treatment. Examine the hard evidence that the suggested chemotherapy protocol actually cures, extends life or improves quality of life. Those are the three “outcomes” against which you must measure all treatments – conventional, experimental complementary and alternative.

If your clinician uses the terms “response” or “tumor response” or “reduce the tumor burden,” these terms mean shrinkage and a corresponding reduction in the immune-suppressive effect the tumor has. None of these terms are synonymous with “cure.” A cure actually requires that your body fight cancer on a cellular level and your immune system maintain a disease-free state. To maximize your opportunity for such a response, follow as many health-enhancing, life-enriching holistic principles as possible.

Additionally, do your own research. Ask about both short-term and long-term side effects. Ask for help getting in touch with long-term survivors who were treated with similar regimens. Ask for their experience and analysis. Learn exactly what you can expect – and not expect– this treatment option to accomplish.

4. The administration of chemotherapy is not an exact science.

Ask your oncologist about chemotherapy sensitivity (in vitro) testing, during which samples of your tissue are chemically analyzed in laboratory tests to determine interaction with different agents. In about a week, your oncologist will receive a report establishing which drugs are not likely to work as well as the most active agents. The net effect is a personalized treatment program optimized before you begin. Do not panic if there are changes in the treatment program. It is common to try different chemotherapy drugs as well as different combinations. These changes are an attempt to improve the effectiveness of the treatment.

5. Chemotherapy may be in pill form taken orally, or may be in liquid form either injected into a muscle or, more commonly,

through a vein. The drugs may be administered in a daily, weekly or monthly program for periods ranging from a few months to a lifetime. Side effects, once a fear of all patients, can now be more effectively controlled.

6. Radiation therapy is most often administered by means of an external beam machine.

The most exact radiation is called proton beam. This type of therapy minimizes damage to surrounding tissue and organs. Internal radiation is becoming more common, where radioactive material is surgically implanted into or on the area to be treated. This procedure requires precision. Choose a physician certified by the American Board of Radiology to maximize your opportunity to receive excellent care.

7. It is a myth that cancer survivors turn exclusively to alternative, non-traditional cancer treatments in large numbers.

Survivors do not give up on traditional treatments. They integrate complementary and alternative practices into a comprehensive recovery program.

FINAL THOUGHT ON CONVENTIONAL TREATMENT OPTIONS

The vast majority of survivors select a conventional program using surgery, chemotherapy or radiation, often in combination, as the foundation of their treatment. Survivors then integrate complementary and alternative practices into a comprehensive recovery program. Implementing a conventional medical treatment program based on clinical evidence and your own research is imperative, but understand that a comprehensive and integrated holistic recovery program represents your very opportunity for surviving cancer.