

A collage of diverse people's faces, including a man with a beard, a woman with long hair, a man with a mustache, and a woman with a headband. The collage is overlaid with a grid pattern and a red vertical band.

our

OCTOBER/NOVEMBER 2024

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HEALTH

YOUR GUIDE
TO HEALTHY
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CANCER IS ON THE RISE IN YOUNGER ADULTS

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AND GET SCREENED

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CANCER CENTER



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Cancer is on the Rise in Younger Adults

We explain some of the root causes of early onset cancers being diagnosed in younger people ages 18-49. According to the American Cancer Society (ACS), cancer is occurring more often in younger people, who are less likely to be screened and tend to have more aggressive tumors. Overall ACS estimates that U.S. women have a one in 17 chance of being diagnosed with an invasive cancer before the age of 50. For men, it's one in 29.

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In Loving Memory of Marisa Rouser

Nov 16, 1976 — Dec 21, 2023



I am dedicating this cancer edition to Marisa Rouser's memory. On December 21, 2023, we experienced the loss of Marisa Rouser, my son's girlfriend, who was only 47 years old. She was like a daughter to me. Marisa succumbed to stage 4 breast cancer after battling it for four years. She was very kind and caring, and she lit up the room with her smile. Throughout her journey she urged women and men to "get a cancer screening!" She enjoyed participating in annual cancer walks and crusaded for early detection of cancer. Marisa owned a beauty salon. She enjoyed reading *Our Health Matters* and encouraged her customers to take copies home.

Marisa's favorite word was "SMOOCHES!"  She gave many hugs and kisses. Marisa, you will always be in our hearts.

In this edition we bring to everyone's attention a trend we don't want to see increasing—younger people ages 18-49 being diagnosed with early onset cancers (page 15). We introduce two amazing organizations: **Prostate Network**, which supports men diagnosed with prostate cancer, and **Gilda's Club KC**, which annually serves close to 3,000 cancer patients, their families, caregivers, and medical providers.

Our Health Matters™ applauds every family member, caregiver, oncologist and healthcare professional for their compassion and support of individuals who should never experience this journey alone.

I extend special thanks to the **Health Forward Foundation, The University of Kansas Cancer Center, University Health** and **Children's Mercy Kansas City**, whose support of this very important edition makes it possible to offer it to the community free of charge.



As we look ahead to our 20th anniversary celebration in 2025, we are grateful that we have been able to encourage you to become aware of the importance of taking control of your health.

Stay informed. Stay healthy.



Ruth Ramsey, Publisher and CEO



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WE WOULD LOVE TO HEAR FROM YOU.

Send us your suggestions for health topics you would like to see in *Our Health Matters*. Also share what you enjoy about the magazine. Email us at info@kcourhealthmatters.com or write to us at

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WALDORF SALAD

Extra apples from the market? Try this Waldorf Salad with walnuts and crunchy fall apples.

Ingredients

- 1/4 cup walnuts (chopped)
- 2 apples (cored and diced)
- 1 cup celery (diced)
- 1/2 cup raisins
- 1/4 cup plain yogurt, non-fat
- 1/2 teaspoon sugar
- 1 teaspoon lemon juice

Directions

1. Wash hands with soap and water.
2. Preheat oven to 350 °F.
3. Place chopped walnuts on a baking sheet and bake for 12 to 15 minutes. Stir occasionally until they are evenly toasted.
4. Combine apples, celery, nuts, and raisins.
5. Stir together yogurt, sugar, and lemon juice. Pour over apple mixture and toss lightly.
6. Refrigerate leftovers within 2 hours.
7. Serve this dish with a whole wheat roll for a hearty meal.

Recipe: Food Hero

Oregon State University Cooperative Extension Service

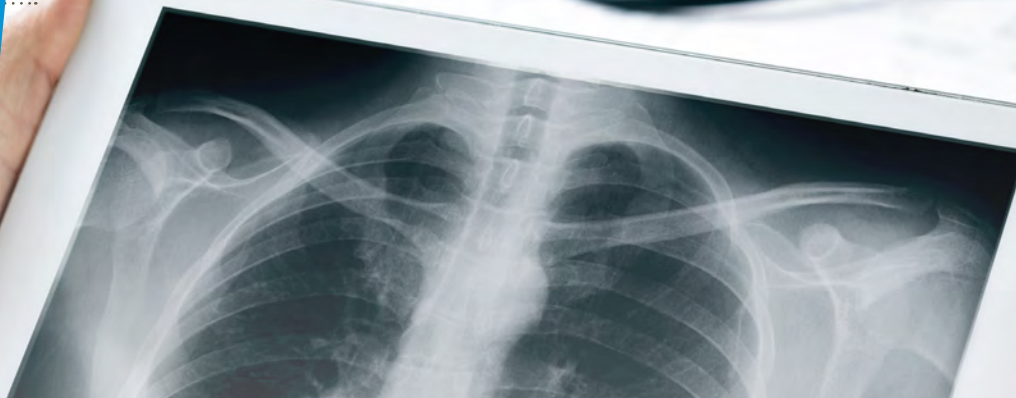
SOURCE: USDA.GOV, www.myplate.gov

Nutrition Information

Serving Size: 2/3 cup (87g)

NUTRIENTS.....	AMOUNT
Total Calories	103
Total Fat	3g
Saturated Fat	0g
Cholesterol.....	0mg
Sodium	23mg
Carbohydrates.....	18g
Dietary Fiber	2g
Total Sugars.....	14g
Added Sugars included	0g
Protein	2g
Vitamin D.....	0mcg
Calcium	41mg
Iron.....	0mg
Potassium.....	232mg

N/A will display when nutrient data is unavailable



What Is An Oncologist?

The American Cancer Society (ACS) estimates that 2,001,140 new cancer cases will be diagnosed in the United States in 2024. Cancer remains one of the leading causes of death in the United States, but survival rates continue to improve due to advances in cancer detection, treatment and management.

An oncologist is a physician who specializes in diagnosing and treating cancer. They act as the primary healthcare provider for people with cancer, coordinating and managing their treatment.

WHAT DO ONCOLOGISTS DO?

When an MRI, CT scan (medical imaging methods used to create images of the internal body to help diagnose a medical condition) or blood test confirms a cancer diagnosis, the physician will recommend that the patient visit an oncologist. During the first appointment, the oncologist may perform a physical exam and order additional blood work, imaging tests, or biopsies. These tests determine the type and stage of the cancer, which helps identify a person's best treatment options. Oncologists also administer treatments and closely monitor disease progression. Patients can expect to work with a medical oncologist throughout the course of their cancer treatment.

Several areas of oncology treatment include: medical, surgical and radiation.

MEDICAL ONCOLOGY

Medical Oncologists treat and manage cancer using nonsurgical methods, such as:

- **Chemotherapy** (chemo) uses anti-cancer drugs to destroy cancer cells.
- **Radiotherapy** uses high-energy rays to destroy cancer cells. Chemotherapy drugs can make cancer cells more sensitive to radiotherapy.

- **Biologic therapy** (biotherapy) treatment uses substances derived from living organisms to treat disease. These substances may occur naturally in the body or may be made in the laboratory.
- **Hormone therapy** is a treatment that slows or stops the growth of breast and prostate cancers whose growth is promoted by the body's own hormones.
- **Targeted therapy** uses drugs or other substances to target specific molecules in cancer cells to stop them from growing, dividing and spreading.
- **Immunotherapy** uses a person's own immune system to fight cancer.

Medical oncologists coordinate cancer treatment closely to monitor for side effects and follow up with patients after they complete their treatment.

SURGICAL ONCOLOGY

Surgical oncologists are general surgeons with specialty training in procedures for diagnosing, staging (determining the stage of cancer), performing biopsies and removing cancerous growths.

RADIATION ONCOLOGY

A radiation oncologist specializes in delivering external and internal radiation therapy to people with cancer. External radiation therapy uses high energy photon beams to kill cancer cells and shrink tumors. Internal radiation therapy is a systemic treatment that involves swallowing, injecting, or implanting a radioactive material, such as radioactive iodine.

Oncologists have extensive, specialized education and expertise that prepares them to devise a care plan that is personalized for each cancer patient.

Sources: [National Foundation for Cancer Research: nfcr.org](https://www.nfcr.org)
[American Cancer Society: cancer.org](https://www.cancer.org)

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KANSAS CITY





Community is Stronger than Cancer

Hearing the words “You have cancer” can cause one’s life to change in an instant. But knowing there is an agency like Gilda’s Club Kansas City that offers resources and support can also bring hope.

Kansas City is fortunate to be the home of one of many Gilda’s Clubs established nationwide. Gilda’s Club KC was established to honor the memory of Gilda Radner, a comedian who brought warmth and laughter on the TV show Saturday Night Live and sadly lost her battle with cancer. Gilda’s Club KC opened its clubhouse doors in October 2011 to forge Gilda’s legacy and provide support to people living with cancer, their caregivers and families as they navigate this terrible disease.

MEETING SO MANY NEEDS

Now, 13 years later, GCKC is serving close to 3,000 people annually. It is Kansas City’s most resourceful and compassionate advocate for cancer patients, their families, caregivers and medical providers. GCKC partners with healthcare systems throughout the region and serves many families at their mid-town clubhouse. Evidence-based programs include educational workshops from the Frankly Speaking About Cancer series: Navigating Social Security Disability, Cancer Treatment and Side Effects, Understanding Lymphedema; healthy lifestyle classes, support groups, social engagement and resource referrals.

GILDA’S CLUB IS UNIQUE

Programs are open to anyone with any type of cancer, from any healthcare system. Each aspect of the Gilda’s Club KC program is supervised or led by a licensed mental health provider. All services are provided free of charge.

HOW YOU CAN HELP

Gilda’s Club KC relies on the generous donations of individuals and businesses to sustain their programs. To donate or sign up as a volunteer, visit www.gildasclubkc.org or contact Executive Director, Siobhan McLaughlin Lesley at 816.531.5444.





CornerStone Enterprise, Ltd

Empowering Youth for Success in Adulthood

One of the most pivotal developmental stages of a young person's life is **BECOMING AN ADULT**. Navigating the journey to adulthood means taking ownership for your life, learning how to independently make wise decisions, and gaining financial independence. Providing the knowledge, financial acumen and social-emotional skills needed for this critical transition is what **CORNERSTONE DOES BEST!**

Research shows that only 30% of high school students felt prepared for life after graduation; 72% of emerging adults wanted more guidance on how to become an adult. According to the US Census Bureau, 1 in 3 emerging adults have not gained their financial independence by age 30. These numbers are even worse in under-resourced communities and for people of color.

CornerStone Enterprise, Ltd., was founded by Latasha and Clifton Wilson in 2020 with a vision of building a world where every person realizes their true PURPOSE and power to create a lasting LEGACY for the next generation. Over the last four years, they have served over a thousand emerging adults, providing access to high quality training, education, and personalized coaching that supports healthy development into adulthood.

CORNERSTONE IS MAKING A DIFFERENCE BY BUILDING INDIVIDUAL RELATIONSHIPS WITH ONE EMERGING ADULT AT A TIME.

- Financial Growth: 45% of emerging adults gained and/or improved financial skills needed for adulthood (have received financial coaching, established a financial plan, opened first savings accounts, contributed to employer-sponsored 401k plan, ROTH, Brokerage Investment Accts and/or increased their Net Worth).
- Social-Emotional Growth: 1 in 5 of emerging adults have improved mental health (able to address childhood trauma, identify triggers, and build resilience skills by gaining access to licensed clinical therapists).
- Professional/Academic Growth: 30% of emerging adults advanced in their career or improved academic performance (received professional training or personalized coaching toward these goals).



Latasha Wilson and husband Cliff Wilson co-founded CornerStone. They are shaping young adults' mindsets to realize all of life's possibilities.

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Building Brains, Shaping Futures



By June McDaniel, CEO
EarlystART
www.earlystartkc.org

At EarlystART, our mission is rooted in the belief that the formative years of a child's life are a critical time to instill values such as empathy, respect and kindness. These traits are important not just for a child's own emotional development, but also as building blocks for healthier communities. As the CEO of EarlystART, I've seen firsthand how teaching these principles in early

childhood shapes not only the trajectory of a child's life, but also the environment around them.

Empathy helps children understand the emotions of others, fostering strong interpersonal relationships and reducing conflict. **Respect** teaches them the value of others' perspectives. When children learn to navigate their world with these qualities, they grow up to be adults who contribute positively to society. These foundational values create a ripple effect—improving family dynamics, classroom settings and ultimately, the communities in which they live.

We encourage parents to be visible, consistent and active participants in their child's learning journey. Parents create a supportive ecosystem that strengthens a child's understanding of these values. As children see the adults in their lives model empathy and respect, they learn what these characteristics look like in action, making them more likely to practice them both at home and in social settings.

EarlystART's Conscious Discipline curriculum helps our students learn critical self-regulation skills and empowers them to manage their emotions in healthy ways. Conscious Discipline teaches children how to identify their feelings, understand how those emotions affect their behavior, and ultimately, choose positive responses to challenging situations.

Identifying the emotions they are feeling helps students develop positive self-regulation habits. Our students have been reading Anna Llenas's book, *The Color Monster*, which teaches them how to identify their emotions with colors—yellow being happy, red being angry and green being calm. By associating the colors with what they are feeling, they are able to more easily identify their emotions.

We believe that teaching young children empathy, respect and self-regulation isn't just about their individual success—it's about creating generations of caring, respectful and emotionally intelligent leaders for tomorrow. This responsibility falls on all of our shoulders.



EarlystART is an early childhood education center in Kansas City, MO which offers an arts-infused curriculum using music, visual arts and movement to spark creativity in students ranging from six weeks to five years of age. They prepare children for success while simultaneously supporting families and empowering the community.



Over the summer, KC 360 partners with Pro X to provide young people safe spaces and opportunities to connect with employers.

GOOD FOR THE COMMUNITY GOOD FOR THE FUTURE

Every crime has a root cause that is complex and multifaceted. Poverty, limited access to a quality education, lack of economic opportunities, substance abuse and untreated mental health conditions are some of the root causes that can drive people to engage in criminal activities.

Where There's Good, There's Hope

KC Common Good, a non-profit organization, is addressing the root causes of violence in Kansas City. Their KC 360 initiative offers a comprehensive, community-based approach to crime reduction. Since its first meetings in mid-2022, KC 360 has grown to include more than 85 partnerships with community-based organizations, the faith community, business leaders, city government officials and law enforcement. They focus on five pillars to address the root causes of violence: prevention, intervention, enforcement support, reentry and reforms, and support services.

Crime Reduction Can Happen

KC 360's first Village Initiative focused on a high crime zip code in the Santa Fe neighborhood. They saw a significant reduction in homicides, non-fatal shootings and other violent crimes. Residents are experiencing renewed empowerment and a stronger community-police relationship.

How You Can Help

Join the movement. Attend weekly KC 360 meetings every Thursday at 9 a.m., at the Magis Activity Center at Rockhurst University. To make a donation or for more information, visit: kccommongood.org



Klassie Alcine, KC Common Good CEO with Board Chair Jeff Simon and Director of the Bureau of Justice Assistance Karhlton F. Moore.

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According to the American Cancer Society, cancer is occurring more often in younger people, who are less likely to be screened and tend to have more aggressive tumors. Overall, the ACS estimates that U.S. women have a one in 17 chance of being diagnosed with an invasive cancer before the age of 50. For men, it's one in 29.

Our Health Matters provides a glimpse into some of the root causes of cancer and encourages everyone to be proactive in cancer prevention and early cancer detection.

CANCER IS ON THE RISE IN YOUNGER ADULTS

KNOW YOUR **RISKS**
AND GET SCREENED



Take a Closer Look at Cancer

Why Are So Many Younger People (18-49) Being Diagnosed with Cancer?

By OHM Staff

A growing number of young adults between the ages of 18 and 49 are being diagnosed with “early-onset” cancers, a troubling trend that can be attributed to a complex interplay of a variety of factors.

Societal trends and cultural shifts have influenced the prevalence of risk factors associated with cancer in younger adults. Changes in tobacco use patterns, alcohol consumption habits, dietary preferences and exposure to ultraviolet radiation have all contributed to alterations in cancer risk profiles among individuals in this age group.

Understanding the root causes behind this increase requires an examination of the many influences that contribute to the development of cancer at a younger age.

Lifestyle

Unhealthy lifestyle choices play a significant role in the rising incidence of early-onset cancers. Poor dietary habits characterized by high consumption of processed foods, sugary beverages and red or processed meats,

coupled with insufficient intake of fruits, vegetables and whole grains can contribute to an increased cancer risk. Additionally, lack of physical activity, sedentary behaviors, smoking and excessive alcohol consumption are known risk factors for various types of cancer.

Making lifestyle changes can help reduce the risk of cancer. Here are some key changes to consider:

HEALTHY DIET:

- Eat a variety of fruits, vegetables, whole grains and lean proteins.
- Limit processed foods, red meats and sugary drinks.
- Maintain a healthy weight.

REGULAR EXERCISE:

- Aim for at least 150 minutes of moderate aerobic activity or 75 minutes of vigorous activity each week.
- Include strength training exercises at least twice a week.

AVOID TOBACCO:

- Quit smoking and avoid exposure to secondhand smoke.
- Use resources and support programs to help quit if needed.

“Cancer is no longer only a disease of the elderly. We believe that genetics, environmental toxins, the lack of fruits and vegetables in our diet and obesity are all contributing to the increased number of young adults with cancer. These patients also have less frequent screening, are less likely to have insurance, experience more financial toxicity and have different treatment challenges such as fertility, menopause and longer-term side effects.”

— Blair Smith, MD
Gynecologic Oncologist, University Health



LIMIT ALCOHOL:

- If you drink alcohol, do so in moderation (up to one drink per day for women and two for men).

SUN PROTECTION:

- Use sunscreen, wear protective clothing and seek shade to reduce UV exposure.
- Avoid tanning beds.

REGULAR SCREENINGS:

- Get recommended cancer screenings (e.g., mammograms, colonoscopies) based on age and risk factors.

VACCINATIONS:

- Get vaccinated against certain viruses that can lead to cancer, such as HPV and hepatitis B.

MANAGE STRESS:

- Practice stress-reduction techniques such as mindfulness, meditation or yoga.

STAY HYDRATED:

- Drink plenty of water and limit sugary beverages.

SLEEP WELL:

- Aim for 7-9 hours of quality sleep per night.

Incorporating these lifestyle changes can significantly decrease the risk of developing various types of cancer. Always consult with a healthcare provider for personalized advice and recommendations.

Obesity

The global obesity epidemic has emerged as a major driver of cancer incidence across all age groups, including young adults. Excess body weight is associated with a heightened risk of developing several types of cancer, such as colorectal, breast, endometrial and pancreatic cancer. The metabolic changes associated with obesity, including chronic inflammation and altered hormone levels, create an environment conducive to cancer development.

Environmental Factors

Exposure to environmental carcinogens (any agent that promotes the development of cancer) presents a significant risk for the development of cancer at a younger age. Environmental pollutants, occupational hazards, ionizing radiation and chemicals present in everyday products can all contribute to the initiation and progression of cancer. Increased urbanization, industrialization and deforestation (large scale destruction of trees) affects ecosystems and climate and even increases risk for infections that are spread between people and animals. This heightened human exposure to environmental toxins further worsens the risk of early-onset cancers.

Genetic Predisposition

Genetic predisposition plays a crucial role in the development of cancer, particularly in cases of early-onset disease. Inherited genetic mutations such as BRCA1 and BRCA2 mutations in breast and ovarian cancer, Lynch syndrome in colorectal cancer and RET mutations in thyroid cancer can significantly elevate an individual's risk of developing cancer at a young age.

What are inherited genetic mutations? If a parent carries a gene mutation in their egg or sperm, it can pass to their child. These hereditary mutations are in almost every cell of the person's body throughout their life. Some hereditary mutations are those that cause cystic fibrosis, hemophilia and sickle cell disease.

What can someone do to detect their risk for an inherited genetic mutation?

Family History Assessment. Learn about family medical history to identify any patterns of genetic diseases or conditions that may indicate inherited mutations.

Genetic Counseling. Consult a genetic counselor who can provide information about genetic testing options and help assess risk based on family history.

Genetic Testing. Consider undergoing genetic testing, which can be done through:

- **Blood Tests.** Samples are taken from the individual to analyze DNA.
- **Saliva Tests.** Cheek swabs or saliva samples can also be used for genetic analysis.
- **Targeted Testing.** If there is a known mutation in the family, targeted tests can specifically look for that mutation.
- **Whole Exome or Whole Genome Sequencing.** For a broader analysis, whole exome sequencing (which focuses on protein-coding regions) or whole genome sequencing can be performed.

Review Test Results. After testing, it's important to discuss results with a healthcare provider or genetic counselor to understand the implications.

Lifestyle and Monitoring. If a mutation is detected, individuals may need to adopt certain lifestyle changes or undergo regular monitoring for associated health conditions.

Support Groups. Joining support groups for individuals with similar genetic conditions can provide helpful resources and community support.

These steps can help someone determine their risk of having inherited genetic mutations and understand the potential health implications.

Delay in Diagnosis

Young adults may face unique challenges in accessing timely cancer diagnosis and treatment. Symptoms of cancer in this age group may be mistaken for less serious conditions or may be overlooked altogether, leading to delays in diagnosis and treatment initiation. Limited awareness of cancer risk factors and screening guidelines among healthcare providers and patients can also contribute to diagnostic delays in young adults.

How Can this Trend Be Slowed?

Education. It is important to educate younger adults and promote awareness about signs and symptoms

of cancer risk factors. Primary care physicians should be encouraged to be more proactive in screening high risk patients.

Improved Diagnostic Techniques. Advances in medical technology and diagnostic methods or processes have led to earlier detection of cancers in young adults, potentially contributing to the observed increase in early-onset cancer diagnoses. Improved imaging techniques, genetic testing capabilities, and screening programs have enhanced healthcare providers' ability to identify cancer at earlier stages, offering young adults a better chance at successful treatment outcomes. Younger patients should be their own advocates by asking questions and requesting screenings based on their symptoms and family history.

Manage Stress and Mental Health

The impact of chronic stress, anxiety and poor mental health on cancer risk cannot be overlooked. Young adults today face unique stressors, including academic pressures, financial burdens, career uncertainties and social challenges, which can contribute to physiological changes that increase susceptibility to cancer. The intricate interplay between the mind and body underscores the importance of addressing mental health as a crucial component of cancer prevention and management strategies.

The rising incidence of early-onset cancers in adults aged 18 to 49 is affected by a combination of lifestyle factors, environmental influences, genetic predisposition, healthcare challenges and societal trends. Addressing this concerning trend requires different views and approaches that includes public health education and interventions, individual behavior modifications, genetic counseling, early detection screening and holistic healthcare strategies.

Increased health promotion to younger audiences and early adoption of preventive methods aimed at promoting overall well-being and reducing cancer risk among young adults is a good start.

SCREENING TESTS



Editor's Note: The information provided in this issue is not intended to replace the advice or recommendations of your healthcare provider. **ALWAYS** consult with your primary care physician and specialist about your medical history and health concerns. Ask about annual screening tests that are appropriate for your age and health. Early detection of cancer contributes to better health outcomes.

Cancer screening tests aim to find cancer before it causes symptoms and when it may be easier to treat successfully. An effective screening test is one that:

- finds cancer early
- reduces the chance that someone who is screened regularly will die from the cancer
- has more potential benefits than harms (possible harms of screening tests include bleeding or other physical damage, false-positive or false-negative test results, and over-diagnosis—the diagnosis of cancers that would not have caused problems and did not need treatment)

Breast Cancer Screening. Screening mammography has been shown to reduce deaths from breast cancer among women ages 40 to 74, especially those ages 50 to 69.

Expert groups generally recommend that women begin breast cancer screening at age 40.

Breast MRI. A breast MRI imaging test is often used for women who carry a harmful mutation in the BRCA1 gene or the BRCA2 gene; these mutations increase the risk of breast cancer, as well as other cancers.

Clinical Breast Exams and Regular Breast Self-exams.

Routine examination of the breasts by healthcare providers (clinical breast exam) or by women themselves (breast self-exam) has not been shown to reduce deaths from breast cancer. However, if a woman or her healthcare provider notices a lump or other unusual change in the breast, it is important to get it checked out.

Cervical Cancer Screening. Human papillomavirus (HPV) tests and Pap tests are recommended cervical cancer screening tests that can be used alone or in combination. These tests prevent the disease because they allow abnormal cells to be found and treated before they become cancer.

Expert groups generally recommend that testing begin at age 21 and end at age 65 for women who have had adequate prior screening and are not otherwise at high risk for cervical cancer.

Colorectal Cancer Screening. Several screening tests, including colonoscopy, sigmoidoscopy, and stool tests (high-sensitivity fecal occult blood tests and stool DNA tests) have been shown to reduce the risk of dying from

colorectal cancer. In addition to detecting colorectal cancer early, colonoscopy and sigmoidoscopy can help prevent the disease from developing. That's because these tests can find abnormal colon growths (polyps) that can be removed before they become cancer.

Expert groups generally recommend that people who are at average risk for colorectal cancer have screening with one of these tests at ages 45 or 50 through 75.

Lung Cancer Screening. Low-dose helical computed tomography, a type of CT scan, has been shown to reduce lung cancer deaths among heavy smokers.

Expert groups generally recommend screening of current or former heavy smokers at ages 50 to 80.

Liver Cancer Screening. The alpha-fetoprotein blood test is sometimes used, along with ultrasound of the liver, to try to detect liver cancer early in people at high risk of the disease.

Ovarian Cancer Screening. The CA-125 blood test, which is often done together with a transvaginal ultrasound, may be used to try to detect ovarian cancer early, especially in women with an increased risk of the disease. Although this test can help to diagnose ovarian cancer in women who have symptoms and can be used to evaluate the recurrence of cancer in women previously diagnosed with the disease, it has not been shown to be an effective ovarian cancer screening test.

Prostate Cancer Screening. The prostate-specific antigen (PSA) blood test has been used, often along with a digital rectal exam, for prostate cancer screening. However, expert groups no longer recommend routine PSA testing for most men because many prostate cancers detected with PSA testing are not deadly, and early detection and treatment of PSA-detected cancers has not been shown to reduce the chance of dying from prostate cancer.

Skin Cancer Exams. Doctors often recommend that people who are at risk for skin cancer examine their skin regularly or have a healthcare provider do so. Such exams have not been shown to decrease the risk of dying from skin cancer, and they may lead to overtreatment.

However, people should be aware of changes in their skin, such as a new mole or a change to an existing mole, and report these to their doctor promptly.

Questions to Ask Your Doctor About Cancer Screening

Knowing if you should have a cancer screening test, when and how often you should have it, and at what age to stop having it can be confusing. Talking over the following questions with your doctor can help you understand the best cancer screening plan for you.

- Are any cancer screening tests recommended for me? Which ones?
- How often should I have the test? At what age should I stop having it?
- What is the purpose of the test?
- Does the test require preparation and how do I do that?
- What happens during the test?
- Are there risks to having the test?
- How long does it take to get test results?
- How will you tell me about the test results? For example, email, online health portal, phone?
- If I do not get my test results, who should I contact? Is there a phone number I can call?
- What happens if the results are not normal?

Does Insurance Cover Cancer Screening?

Screening means checking your body for cancer before you have symptoms. Getting screening tests regularly may find breast, cervical and colorectal (colon) cancers early, when treatment is likely to work best. Lung cancer screening is recommended for some people who are at high risk.

Some cancer screenings are considered preventive care services. These types of services are rolled into what you already pay for your health insurance. This means no out-of-pocket costs for you, as long as you get preventive care services from an in-network doctor or clinic your plan covers.

To find out if a screening is covered, check with your insurance provider.

Imaging Tests Used in Cancer

Imaging tests create pictures of areas inside your body that help the doctor see whether a tumor is present. These pictures can be made in several ways.

CT Scan. A CT scan uses an x-ray machine linked to a computer to take a series of pictures of your organs from different angles. These pictures are used to create detailed 3-D images of the inside of your body.

Sometimes you may receive a dye or other contrast material before you have the scan. You might swallow the dye, or it may be given by a needle into a vein. Contrast material helps make the pictures easier to read by highlighting certain areas in the body.

During the CT scan, you lie still on a table that slides into a donut-shaped scanner. The CT machine moves around you, taking pictures.

MRI. An MRI uses a powerful magnet and radio waves to take pictures of your body in slices. These slices are combined to create detailed images of the inside of your body, which can show places where there may be tumors.

When you have an MRI, you lie still on a table that is pushed into a long chamber that surrounds part or all of your body. The MRI machine makes loud thumping noises and rhythmic beats.

Sometimes you might have a special dye injected into your vein before or during your MRI exam. This dye, called a contrast agent, can make tumors show up brighter in the pictures.

Ultrasound. An ultrasound exam uses high-energy sound waves that people cannot hear. The sound waves echo off tissues inside your body. A computer uses these echoes to create pictures of areas inside your body. This picture is called a sonogram.

During an ultrasound exam, you lie on a table while a technologist slowly moves a device called a transducer,

which makes the high-energy sound waves, on the skin over the part of the body that is being examined. The transducer is covered with a warm gel that helps it glide over the skin.

X-rays. X-rays use low doses of radiation to create pictures inside your body. An x-ray technologist puts you in position and directs the x-ray beam to the correct part of your body. While the images are taken, you need to stay very still and may need to hold your breath for a second or two.

These are the most used tests; however, there are many other kinds of imaging tests to screen for cancer.

What Kind of Cancer Screening Tests Do I Need to Undergo?

You might question, “What kind of cancer screening test do I need?” The sooner you know, the better result you will get. Thus, cancer screening tests are very important and useful. Here are the recommended cancer screening tests:

- Breast cancer screening test: Recommended for women over 40 years old.
- Lung cancer screening test: Recommended for people over 55 years old who have smoked around a pack of cigarettes a day for over 30 years.
- Colorectal cancer screening test: Recommended for people 45–50 years old. At age 45, African Americans should discuss prostate cancer screening with a doctor.
- Prostate cancer screening test: Recommended for men over 45 years old.
- Liver cancer screening test: Recommended for women over 50 years old and men over 40 years old who have hepatitis B virus and/or cirrhosis caused by alcohol drinking, fatty liver, hepatitis B and C, etc.

Connect with cancer information specialists at 1-800-4-CANCER

SOURCES: National Cancer Institute | www.cancer.gov

How AI is Helping in Cancer Treatment

The technology is helping researchers better understand the disease.

By OHM Staff

Artificial intelligence, or AI, is like a smart helper for computers. It helps computers learn, solve problems and understand information just like people do. AI uses special instructions called algorithms to make sense of large amounts of collected information.

How Cancer Researchers Use AI in Their Work

AI is helping scientists learn more—to understand how cancer starts and spreads and how to treat it. Here are some ways that is happening:

- **Quicker access to research information.** Scientists use AI to read and understand lots of research papers about cancer. AI tools help them find this information more quickly.
- **Studying how certain proteins behave.** Researchers are using AI to learn how a protein called RAS behaves. RAS proteins (genes) are tiny helpers that control important actions in our cells. When RAS proteins are working properly, they help cells grow and divide (mutate) normally.

Scientists have known for more than 30 years that about a third of cancers are driven by mutations in RAS genes, including high percentages of colorectal, pancreatic and lung cancers. As more is known and understood, more effective treatments can be developed.

Making Cancer Screening Easier

AI is also helping doctors find cancer faster:

- **Finding Cancer in Tests.** The U.S. Food and Drug Administration (FDA) has allowed AI software to help doctors check prostate biopsy images for cancer spots.
- **Improving X-rays.** AI can quickly analyze mammograms (breast x-rays), so doctors can spend more time on other important tasks. This AI can detect breast cancer better and even predict future risks.
- **Cervical Cancer Checks.** National Cancer Institute (NCI) scientists are using AI to find early signs of cervical cancer from digital images.

Challenges and Next Steps

AI is exciting because it can help researchers and doctors learn more about cancer and improve care for patients. But there are challenges too. If the data used to train AI isn't diverse, it might not work well for everyone. It's important to create standards to make sure that AI is accurate for multiple populations.

More clinical trials (studies that test new treatments) are needed to see how well AI works in real-life situations. Researchers are using AI to find cures for cancer.

Source: National Cancer Institute



“Our nurse navigator program—the largest in the region and one of the most extensive in the nation—includes more than 30 disease-specific navigators.”

— Teri Banman, RN, leads a team of expert nurse navigators at The University of Kansas Cancer Center.

NURSE NAVIGATORS GUIDE CANCER PATIENTS

A cancer diagnosis can leave patients feeling stunned and overwhelmed. But at The University of Kansas Cancer Center, patients don't have to navigate their cancer journey alone.

In 2011, the University of Kansas Cancer Center launched its nurse navigator program to help improve the patient experience and increase overall patient satisfaction. Nurse navigators are responsible for working step by step with new patients to make their cancer journeys a little easier.

While our physicians and staff use the best technologies to tailor treatment to each person's needs, our nurse navigators steer patients and their families through an unfamiliar world of appointments, resources, fears and questions.

From initial diagnosis until a treatment plan is established, our nurse navigators guide patients through early testing, answering questions and providing emotional support every step of the way. The navigator then remains an additional resource throughout the cancer journey, providing referrals to necessary supportive care services such as social work, clinical nutrition and onco-psychology.

Our navigators are disease-site-specific nurses who are experts in their fields. Some work with only breast cancer patients, others with prostate cancer patients and so on. These nurses work with patients and provider teams to

ensure each patient is scheduled with the appropriate physician(s) and has all the necessary testing and medical information required so physicians can make timely treatment recommendations.

Nurse navigators also connect patients with community resources to help with issues they may face. For instance, they can help patients traveling from a long distance connect with lodging options or schedule an appointment with a nutritionist.

At The University of Kansas Cancer Center, every patient is assured that they do not have to make this journey alone. Our nurse navigators provide guidance and support during this difficult time.

The University of Kansas Cancer Center is one of fewer than 60 National Cancer Institute-designated comprehensive cancer centers, providing the latest treatment options including clinical trials. Learn more at KUCancerCenter.org.

THE UNIVERSITY OF KANSAS
CANCER CENTER



CANCER WHO'S MORE AT RISK?

FROM DIAGNOSIS TO TREATMENT AND BEYOND...KNOW YOUR RISK.

When it comes to racial disparities in cancer diagnosis, African Americans are at the highest risk of dying from cancer, even though whites have the highest rate of new cancers. Why? This increased mortality risk partly reflects a later stage of disease at diagnosis among black patients. Additionally, for most cancer types, black patients have lower survival rates at each stage of cancer.

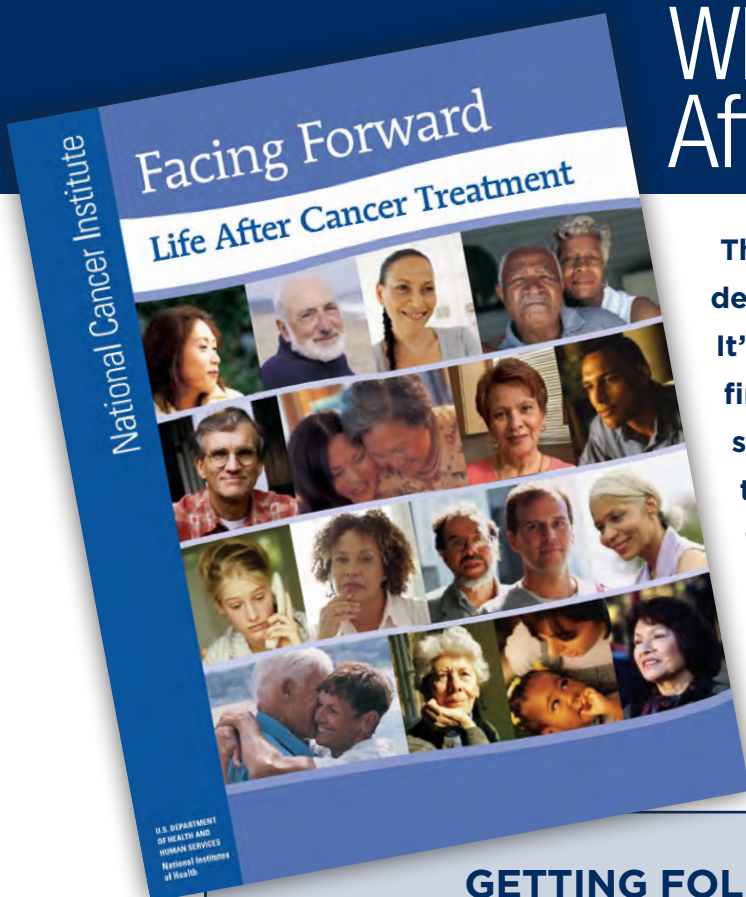
Compared to members of other racial and ethnic groups, black and African American people have higher rates of developing and dying from many kinds of cancer. Black people have the highest death rate for cancer overall.

- Black people have a lower overall 5-year cancer survival rate than white people.
- Black people are more likely than white people to be diagnosed with female breast, lung and colorectal cancers at a late stage. Cancer is harder to treat after it spreads from the place where it started to other parts of the body.

Regardless of race, many cancers can be prevented. Staying away from tobacco smoke, keeping a healthy weight, drinking little or no alcohol, and getting human papillomavirus (HPV) vaccinations at the recommended age of 11 or 12 and until age 26 can lower the risk of getting cancer. Cancer screenings can prevent some cancers or find them early, when treatment works best. Some of these risk factors vary by race and ethnicity.

- More black men than white men say they smoke cigarettes.
- Non-Hispanic black Americans are more likely than other groups to be exposed to smoke from other people's cigarettes (secondhand smoke).
- Obesity is most prevalent among non-Hispanic black adults.
- Overall, non-Hispanic black adults are less likely than non-Hispanic white adults to be vaccinated against HPV. HPV vaccines help prevent several kinds of cancer.
- Non-Hispanic black adults are less likely than non-Hispanic white adults to engage in heavy drinking.

Sources: Centers for Disease Control: www.cdc.gov/cancer
American Cancer Society: www.acs.org



What Is “Normal” After Cancer Treatment?

Those who have gone through cancer treatment describe the first few months as a time of change. It's not so much “getting back to normal” as it is finding out what's normal for you now. People often say that life has new meaning or that they look at things differently now. You can also expect things to keep changing as you begin your recovery.

According to the National Cancer Institute, your new “normal” may include making changes in the way you eat, the things you do, and your sources of support.

GETTING FOLLOW-UP MEDICAL CARE

All cancer survivors should have follow-up care. Knowing what to expect after cancer treatment can help you and your family make plans, lifestyle changes and important decisions.

Some common questions you may have are:

- Should I tell the doctor about symptoms that worry me?
- Which doctors should I see after treatment?
- How often should I see my doctor?
- What tests do I need?
- What can be done to relieve pain, fatigue or other problems after treatment?
- How long will it take for me to recover and feel more like myself?
- Is there anything I can or should be doing to keep cancer from coming back?
- Will I have trouble with health insurance?
- Are there any support groups I can go to?

Coping with these issues can be a challenge. Yet many say that getting involved in decisions about their medical care and lifestyle was a good way for them to regain some of the control they felt they lost during cancer treatment. Research has shown that people who have a sense of control feel and function better than those who do not.

Remember you are not alone. The first step is to be an active partner with your doctor and others on your healthcare team.

Men with Prostate Cancer Find Support

By **Steve Hentzen**, Co-Founder, Prostate Network

I co-founded the Prostate Network in 2011 with my best friend, Caesar Blevins. He and I met when we both were undergoing cancer treatment. We recognized there was nowhere for men with cancer to connect with others who were going through the same experience. We started Prostate Network to promote the importance of men getting screened and to provide a safe space to talk about prostate cancer, treatment and other health concerns. Sadly, Caesar passed away on April 7, 2021 after his battle with prostate cancer.

AFRICAN-AMERICAN MEN ARE AT ESPECIALLY HIGH RISK FOR PROSTATE CANCER; THEY ARE 65% MORE LIKELY TO DEVELOP THIS DISEASE THAN NON-HISPANIC WHITE MEN. WHEN DETECTED EARLY, PROSTATE CANCER IS 95-100% CURABLE WITH FIVE-YEAR SURVIVORSHIP.

My story

Every year my doctor had to sign a health form that cleared me as an adult leader for my son's Boy Scout troop. I received a call from my doctor's office declining to sign the form and telling me I needed a complete physical exam. I was 46 years old. They ordered blood work, and a short time later my doctor called and said, "It might be nothing, but to play it safe I want you to see a urologist." That was the beginning of my prostate cancer journey. A biopsy found Gleason 9 aggressive prostate cancer. Had my doctor not ordered a PSA test, it is unlikely that I would be here today to tell this story.

A PSA (Prostate-specific antigen) is a protein produced by normal, as well as malignant, cells of the prostate gland. The PSA test measures the level of PSA in the blood.

My doctors agreed that surgery was the best path forward due to my young age and the aggressive nature of my cancer. I had taken my health for granted for years—

overweight, poor diet, not working out and smoking cigarettes. I was a single dad to a 13-year-old boy, and this wasn't just about me. It was time to make serious changes to beat this and be there for my son.

That motivation made me unstoppable, and the smoker's life became history. A cancer exercise specialist told me if I exercised and changed my diet, it was possible to cut the reoccurrence rate in half. I did everything she advised.

I preach to every guy who attends our meetings that diet and exercise stack the deck in their favor. Prostate Network is a safe space for men impacted by cancer to come together to share information and help others.

Meetings are held every first Wednesday at 6:30 pm at Gilda's Club KC, 21 W. 43rd St., Kansas City, MO. Visit www.prostatenetwork.org or call 913-485-1892.

Steve with his dogs, Nyx and Abie.



A message to prostate cancer survivors and caregivers from
Caesar Augustus Blevins, our co-founder & prostate cancer warrior, May 24, 1957-April 7, 2021

“We are on a journey we didn’t sign up for, yet here we are. But we aren’t alone. Support makes us stronger emotionally and physically. Stay open to receiving help, and do your part to uplift others. We are **STRONGER TOGETHER”**

Survivors

Those who get support do better mentally and physically. There are 29.5 million American men living with prostate cancer. Support is all around you. Just reach out.

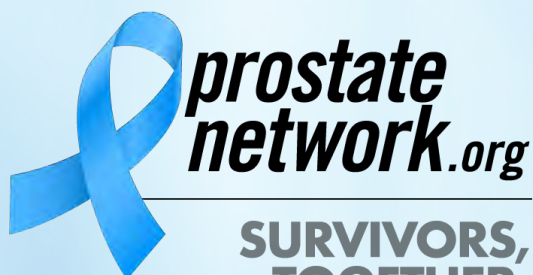
Stack the deck in your favor by eating well and exercising. So much of this journey is out of your control, but these two key factors are in your hands!

Be open and honest with your nurses and doctors.

Caregivers

Men often express fear as anger. On behalf of us all ahead of time, we’re sorry and we love you.

➡ **The Prostate Network is 100% committed to helping everyone facing prostate cancer. Please reach out if you need more help.**



**SURVIVORS,
TOGETHER.**

www.ProstateNetwork.org
(913) 485-1892



HORMONE THERAPY

SOME HORMONES MAY INCREASE YOUR CANCER RISK

Hormone-dependent cancers of the breast and prostate are the most common cancers in women and men. Hormone-dependent cancers are those that are fueled by hormones the body produces.

Scientists have identified more than 50 hormones that control and coordinate many functions in the human body. They are referred to as chemical messengers because they carry messages through the bloodstream to various organs and tissues such as skin and muscles.

Two Hormone-Dependent Cancers

1. Breast Cancer: Most breast cancers (about 80%) are sensitive to hormones such as estrogen and progesterone. These types are called estrogen-receptor-positive or progesterone-receptor-positive. If cancer cells have these receptors, hormones can help them grow.

2. Prostate Cancer: Most prostate cancers are affected by male hormones such as testosterone. Doctors often use treatments called “androgen deprivation therapy” to lower the levels of these hormones and slow the cancer.

Hormone Therapy Treatments

Hormone therapy is a common way to treat these cancers. It can be used alone or with other treatments. There are two main types of hormone therapy:

Neoadjuvant Hormonal Therapy: This is given before surgery or radiation to help shrink the tumor, making it easier to treat.

Adjuvant Hormonal Therapy: This is given after surgery or other treatments to lower the risk of the cancer coming back.

Hormone therapy can be applied through the use of pills, injections, or even surgery to remove hormone-producing organs.

Some Side Effects

Changing hormone levels can cause side effects, which varies from person to person. Some common side effects include:

- Mood changes
- Hot flashes
- Loss of interest in sex
- Fatigue
- Weight gain
- Breast tenderness or enlargement

Some bodily processes controlled by hormones include:

- Metabolism (chemical reactions in the body's cells that change food into energy)
- Blood pressure
- Blood sugar regulation
- Fluid balance
- Body temperature
- Growth and development
- Sleep-wake cycle

Oncologists and a team of specialists adopt personalized cancer treatments to ensure the best possible outcome for each patient.

Source: National Cancer Institute



A Second Alzheimer's Drug Has Been Approved

An estimated 6.7 million people in the U.S. ages 65 and older are living with Alzheimer's, according to the Alzheimer's Association. This number is projected to increase to 13.8 million by 2060.

The Food and Drug Administration recently approved a new Alzheimer's drug from Eli Lilly to treat early symptomatic Alzheimer's disease. The new drug will be sold under the brand name Kisunla-IV Infusion.

The FDA cleared Kisunla for use in adults with mild cognitive (memory and reasoning) impairment or early Alzheimer's disease. Kisunla works by targeting amyloid, a protein that forms in the organs and tissues and cannot be dissolved. Amyloid in the brain is considered a hallmark of Alzheimer's disease.

Kisunla is given as an injection in IV solution in an infusion center every four weeks. It has shown in clinical trials to modestly slow a decline in memory and thinking abilities in people with the disease.

Once a patient's amyloid has reached very low levels, Eli Lilly expects they would be allowed to stop taking the treatment. It is not yet known whether or when the amyloid might come back, but if it does, a patient would most likely need to restart the treatment.

Like other drugs in its class, Kisunla comes with potentially life-threatening side effects, including brain swelling and brain bleeding. Although most side effects

identified in the trial were mild, three deaths were linked to the drug, according to the FDA.

Previously, the FDA granted full approval to a similar drug called Leqembi. With the introduction of Kisunla, clinicians and patients have another treatment option.

The agency's approval was based on a late-stage clinical trial of 1,700 people that showed the drug slowed the progression of Alzheimer's by about 35% after 18 months, compared to a placebo. Decline was measured using the clinical dementia rating scale, which focuses on how well patients performed in six categories: memory, orientation, judgment and problem solving, community affairs, home and hobbies, and personal care. The results were similar to those seen with Leqembi.

Medicare likely to cover treatment

In 2023, the Centers for Medicare and Medicaid Services said it will pay for new Alzheimer's drugs that are granted full FDA approval, although it will require physicians to collect data about how well the drugs perform in the real world. Lilly said Kisunla will cost \$32,000 for a 12-month supply, and Medicare is expected to provide coverage for the drug.

Source: [Eli Lilly, Lilly.com](https://www.lilly.com)



CARING FOR CAREGIVERS

November is National Family Caregivers Month. This year's theme is "Caregiving Around the Clock." This month is dedicated to showing support and honoring our nation's vital caregivers as they care for others. The Family Caregiver Alliance (caregiver.org) provides resources for self-care, advocacy and relieving stress.

Caregiving is a tough job. This is a time to remember the people who lovingly give baths, clean the home, shop for and comfort the millions of elderly and ill people who are loved ones and friends.

Five Reasons Caregiving Is So Tough

1. Where's the other half?

Over half of family caregivers are women.

2. Relationships may suffer.

One out of every four caregivers reports diminished family relationships because of caregiving for a loved one.

3. No wonder you're tired.

Most caregivers work outside the home either part- or fulltime in addition to their caregiving responsibilities.

4. Children do it, too.

Over a million American young people, aged eight to 18, care for an adult relative on a daily basis.

5. Caregivers often neglect their own health.

Nearly 70% of caregivers report they don't see their doctor regularly because of their responsibilities.

Caregivers Need Help, Too.

Caregiving while holding down an outside job is exhausting. In addition, much of caregiving is unpaid.

There are actions the caregiver can take to help themselves in this difficult role.

Ask for help. Caregiving.org offers tips for caregivers such as taking care of your own health, accepting offers of help from others, learning the skills to speak effectively with doctors, and being open to new, assistive technologies that can lighten your load.

Check yourself for depression. Take some time to monitor your own well-being. If you are not sleeping well or exercising, or if you feel yourself becoming reclusive, asked to be screened by a medical professional.

You are not alone. Connecting with other caregivers who understand what you're going through may provide the comfort you need.

Reach out to local support groups to find caregiving resources and connect with caregivers who share your experience.

**University of Kansas Medical Center
Landon Center on Aging
3901 Rainbow Boulevard
Kansas City, KS 66160
913-588-5000**

**Clay County Senior Services
4444 N Belleview, Suite 110
Gladstone, MO 64116
816-455-4800**

Source: Family Caregiver Alliance, caregiver.org



WHAT'S NEXT?

DECEMBER 2024 GOOD HEALTH IS WEALTH

The saying “Health is Wealth” is a powerful reminder that the greatest wealth anyone can have is “good health” and not money alone. We ask our diverse audience how they view their health and what they want in order to live healthier, happier and safer lives. We introduce readers to:

- Goal-setting behaviors for better health
- Physical and mental health support systems
- Creative and intentional ways to invest in their health

Better health starts with small decisions you make each and every day. Small, consistent lifestyle modifications to diet, exercise and stress go a long way towards living healthier. It's never too late. *Our Health Matters™* guides you through the journey of achieving a better life and better health outcomes.

As we near the end of 2024, it is our hope that our leaders will come together to meet the healthcare, education and economic needs of families across America.

INCREASE YOUR EXPOSURE AND EXPAND YOUR BUSINESS. ADVERTISE IN OUR *HEALTH MATTERS™*

If you are looking to reach new customers and foster lasting relationships, call 816.361.6400 or email your request to info@kcourhealthmatters.com.





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Call 816-361-6400

CALL 911 IF YOU ARE EXPERIENCING A MEDICAL EMERGENCY

CALL 988 to reach a trained crisis counselor who can help in a mental health, substance use or suicide crisis.