

healthierYOU

your healthy living newsletter

R U N F O R T H E C U R E



October 4, 2009 marks the **CIBC Run for the Cure** across Canada. This run attracts thousands of runners and walkers each year and is the largest single-day, fund-raising event for breast cancer research in the country. Many of LifeMark's clinicians and staff have been involved in past events and this year **LifeMark** has decided to step into a sponsorship role for the Calgary run. In order to showcase the personal side of cancer, this issue highlights the struggle of **Kathleen Yanosik**, a breast cancer survivor who has taken the Run for the Cure to heart. **This is Kathy's story.**

WHEN WERE YOU DIAGNOSED WITH CANCER AND HOW DID YOU FIND OUT?

January 9, 2003 I went for my annual check-up. During the breast examination, my family doctor discovered an indentation on the side of my right breast. The next day I had a mammogram and an ultrasound. The results were inconclusive so I was sent for a biopsy. Following this, I received a call to see the surgeon immediately. I knew that this was not good. A few days later I had a right mastectomy done.

In 2004, I opted to have my other breast removed, and had double reconstruction done. That was the best decision I could have made. I am a Survivor of 6 years now. I feel good and "don't look too bad either", as my husband tells me!

HOW DID THE DIAGNOSIS IMPACT YOU?

I was very quiet about it at first. I tried not to scare my husband, but I knew something was wrong. When we were told, my husband broke down. I just sat there in shock. The doctor explained my best option was to take the breast off quickly.

"I am a Survivor of 6 years now"

WHAT KIND OF TREATMENT DID YOU HAVE?

Because of the tumor size, I had chemotherapy, radiation and the drug Tamoxifen for 5 years. During the Tamoxifen therapy, the lining of my cervix enlarged to the point that they feared Cancer developing there, so I had a total hysterectomy done with my ovaries removed as well. I still am taking medication for 3 more years.

During this time I went to LifeMark Physiotherapy - Village Square Calgary for 2 years to help me get my mobility back in my right arm and deal with the pain from the scar tissue and stiffness in my neck. I also did Deep Water Running and kept as physically fit as I could.

WHAT HAVE YOU DONE TO MOVE FORWARD SINCE YOUR DIAGNOSIS?

I walked the CIBC Run for the Cure the first two years, then I found out that the Running Room gave free "Learn to Run" classes for Survivors. I was 58 years old at the time, and I found that even running for a minute was hard. I was slow and was always at the back of the group, but I just kept going because I was alive and I wanted to feel alive. I completed several 5Km clinics and then 10Km clinics. I never went into races though because I was too slow. After my hysterectomy in the fall of 2006, I started teaching a Learn to Run Class to get me back to running again. That year I ran my first 10Km race and also began training for my first half-marathon. I ran my first half-marathon in February 2008 and have now finished five at age 62. I'm now training for my first full marathon and will be racing in Kelowna on Thanksgiving Weekend. I did not do this by myself. I had great mentors and was in Physio almost every 3 to 4 months with an injury that I needed help with.

WHAT ADVICE DO YOU HAVE FOR PEOPLE AFFECTED BY CANCER?

Think positive and that **YOU ARE A SURVIVOR!** Take one step at a time, and stay away from the negative attitudes that people have today. I am at my best when I think **positive**, live **healthy** and **believe** in my **faith**. Find a great **support system** and learn to lean on others as well as to give to others. Go forward. Living is good.

For donations or information on Run for the Cure visit:
www.cbcf.org



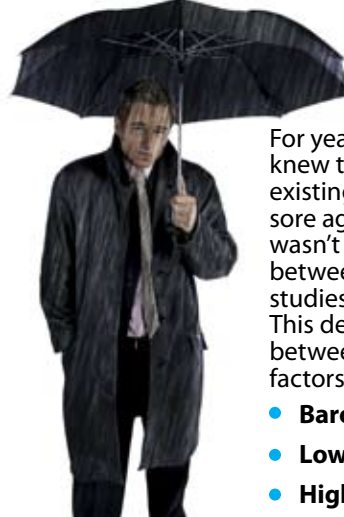
Beat The Bug What You Need To Know With The Coming Flu Season

Influenza (commonly known as “the flu”) is a serious, acute respiratory illness that is caused by a virus. People who get influenza have a **cough, fever, chills, sore throat, headache, muscle aches and fatigue.**

Illness due to influenza usually **lasts** from **two to seven days**, but can last longer. The cough and fatigue can persist for several weeks, making the return to personal and work routine difficult.

Influenza can lead to pneumonia, hospitalization, and even death in some people, particularly the elderly and those with chronic medical conditions, such as heart or lung problems. Influenza spreads by respiratory droplets mainly from infected persons through **coughing and sneezing**. It may also spread through direct contact with surfaces contaminated by the influenza virus.

Weather & Joint Pain



For years people have complained that they knew the weather was about to change because existing knee and back injuries started to get sore again. However the medical community wasn't always convinced there was a correlation between pain and the weather. Recent research studies suggest that patients were right all along. This demonstrates that there is a correlation between arthritic pain and the weather. The factors found to increase joint pain the most are:

- **Barometric pressure changes**
- **Low temperatures**
- **High humidity**



TAKE THIS TRUE/FALSE QUIZ ABOUT INFLUENZA TO SEE HOW MUCH YOU KNOW

- I didn't get an influenza immunization shot last year and I didn't get sick so I will be safe for this season.**
FALSE: Even though you have avoided getting influenza so far, it does not mean that you will not get sick this year. Every year, different strains of the influenza virus circulate. By getting immunized you decrease your chances of becoming ill.
- I don't need another flu shot, I got one last year.**
FALSE: A flu shot is needed every year. There are many strains of the influenza virus with slightly different characteristics. The strains change, and each year a new vaccine is produced that provides protection against the most common strains predicted for the coming season.
- Getting an immunization will give me influenza.**
FALSE: This is simply not true. The vaccine does not contain live virus. Many people confuse influenza with a cold or other respiratory infections, which the influenza vaccine will not protect them against.
- Flu shots are worth getting because they are effective.**
TRUE: An influenza immunization is about 70 to 90 per cent effective in preventing influenza in healthy children and adults. Vaccine effectiveness varies from one person to another, depending upon their general state of health.
- You should get the influenza vaccine if you are pregnant.**
TRUE: Influenza immunizations are safe and recommended for all pregnant women. Researchers have found that influenza-related hospitalization increases as women progress through their pregnancy, and is highest in the third trimester.

Adapted from the Ontario Ministry of Health and Long Term Care, 2007 – www.gettheflushot.ca

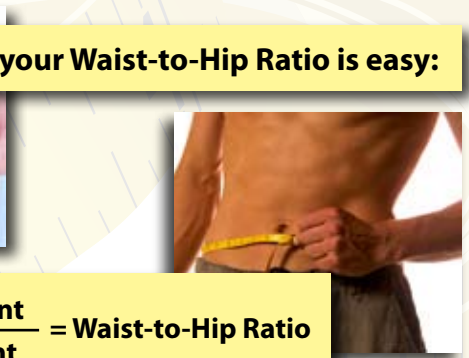
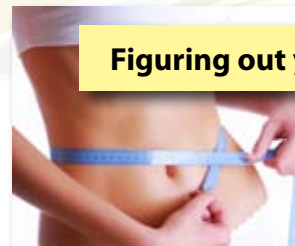
For more information about Flu Immunization Programs or Pandemic Planning in your workplace, contact:

Genevieve Sadak at:
905-652-8617 or genevieve.sadak@lifemark.ca

Last issue we discussed **Body Mass Index (BMI)**. This has been shown to be a **strong predictor** of risk for several types of **diseases** including **cancer, diabetes and heart disease**.

BMI is very widely used in health care, but researchers have found an even stronger predictor of diabetes, cardiovascular disease and death related to heart attack and stroke – the **Waist-to-Hip Ratio**.

The reason this simple measure works so well is that it gives us an idea not just about how much fat a person has, but where the fat is on the body. **If you carry most weight around your waist and less around your hips, you have an elevated risk for cardiovascular (heart and stroke) and metabolic diseases (diabetes).** This is because the higher you carry your weight, the more of it is packed around internal organs like the heart.



Figuring out your Waist-to-Hip Ratio is easy:

$$\frac{\text{Waist Measurement}}{\text{Hip Measurement}} = \text{Waist-to-Hip Ratio}$$

For the waist measurement – measure at the smallest circumference of your waist, usually a little below your belly button.

For the hip measurement – measure it at the widest part of your hips and buttocks.

Health Canada reports that a ratio less than **0.8 for women** and **1.0 for men** is associated with lower health risk; greater than these numbers means an elevated health risk.

ABOUT OUR EDITORS

DR. MICHAEL WESTAWAY
PT, DSc, FCAMT

Dr. Westaway is a Physiotherapist and researcher at LifeMark Village Square & Westside in Calgary. He has a special interest in neck pain and rehabilitation.

KRIS HEAD
B.ScPT, M.Sc.

Kris is the Clinic Director of LifeMark Physiotherapy - Village Square in Calgary. In addition to treating patients, he is an active researcher and instructor with a special interest in shoulder rehabilitation.

Coming up in our next issue:
Female Athletes and Knee Injuries
Your Teeth and Your Heart
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If you have a pre-existing medical condition/injury or are in pain, please consult your health care professional prior to changing your diet or commencing any exercise.

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