

This resource includes 2 books. **BOOK 1** has information about cancer, and **BOOK 2** has space to write about your personal cancer journey.

*“As we are more educated,
we find out there is a lot
we can do for ourselves.”*



Canadian
Cancer
Society



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Pauktuutit Inuit Women of Canada and the Canadian Cancer Society
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Design CommPassion Creative
Photography Lee Narraway



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Introduction

Cancer is a leading cause of death among Inuit. Unfortunately, there is very little information about cancer that is written for Inuit or available to Inuit. So Pauktuutit Inuit Women of Canada is now working with the Canadian Cancer Society to develop information for Inuit. This project is funded by Jaguar Land Rover Canada. The goal of this partnership is to create and share relevant health resources for Inuit.

My Journey has easy-to-read cancer information in English and regional dialects of Inuktitut for people with cancer, their caregivers and healthcare professionals. It gives information to people recently diagnosed with cancer to support them through their cancer journey. It is written especially for Inuit to understand cancer better and to make informed decisions. It will also help Inuit and healthcare professionals communicate with each other. The goal is to support Inuit people with cancer and improve their quality of life.

In 2015, Pauktuutit reviewed Inuit cancer resources. We also asked workers in urban cancer centres about the information they have. This helped us design this booklet. The information about cancer is adapted from Canadian Cancer Society materials. A project advisory committee also gave feedback on resources and supported this project. All resources were checked and updated in 2018.

If you have any questions that are not answered by this resource, call the Canadian Cancer Society's information service at 1-888-939-3333 (TTY 1-886-786-3934).

We hope that you find this resource helpful on your cancer journey.



My Journey

I have been diagnosed with cancer. Now what?

For many people, the cancer journey starts at the community health centre. If your doctor or nurse thinks you may have cancer, you will go to a regional or southern urban centre for follow-up tests.

You may have some of these tests:

- A **biopsy** takes cells or tissues from the body to look at them under a microscope.
- A **CT scan** uses a computer to put many x-rays together to create a 3-D picture of organs, tissues, bones and blood vessels in the body.
- An **MRI** uses a magnetic field to make detailed pictures of the inside of the body.
- An **ultrasound** uses high-frequency sound waves to make pictures of the inside of the body.

You may also have other tests to find out if the cancer has spread to other parts of your body and to help plan your treatment.

“All I could hear was ‘cancer.’ I heard my doctor say something like, ‘We’re going to start your treatment as soon as possible.’ I didn’t hear one word after that.”

When you first hear that you have cancer, you may feel alone and afraid. It may be very hard to take in so much information at one time and think about the decisions you need to make.

People react to a cancer diagnosis in different ways. It can affect more than just your body. It can also affect your emotions and relationships.

You may have many questions when you first hear that you have cancer. You may feel shocked, overwhelmed, devastated, numb, afraid or angry, or you may not believe it. Most people experience many different emotions when they learn that they have cancer. These emotions can change from day to day, hour to hour or even minute to minute. People cope with their feelings in their own way and in their own time.

Some people feel alone, even if friends and family are with them. Others feel like they're watching things happen to someone else. Some people find it hard to understand what the doctor is telling them, and they need to be told the same information many times.

All of these responses are normal. It's also normal to have similar feelings and fears again and again throughout your cancer journey.

It's important to know that everyone's cancer experience is different. Each person has a unique cancer journey. And there may be many different treatment options and types of care after treatment. Your friends and family can be a great support along the way. You can also talk to your doctor, nurse or a social worker at the treatment centre if you're having trouble coping.

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Will I be okay?

Most people with cancer want to know what to expect. Can they be cured?

Your doctor will give you their best estimate about how the cancer will affect you and how well your treatment will work. This estimate is called an outlook or a prognosis. A prognosis is made using different information including:

- the type, stage and grade of cancer
- where the tumour is in the body and if it has spread
- your age, sex and overall health

Even with all this information, it can still be very hard for your doctor to say exactly what will happen. Each person's situation is different.

Your doctor is the only person who can give a prognosis. Ask your doctor about other things that may affect your prognosis and what it means for you.

Words you might hear about your diagnosis

Diagnosis Finding the cause of a person's health problem.

Grade How different the cancer cells look from normal cells, how quickly they are dividing and how likely they are to spread.

Prognosis The chance of recovery or of a disease coming back.

Stage The amount of cancer in the body, including the size of the tumour and whether cancer has spread nearby or to other parts of the body.

Talking about cancer with family and friends

After a diagnosis, you may first focus on learning about the cancer and working with your healthcare team to plan your treatment. But medical decisions are only one part of living with cancer.

It is also very important to have a social support system. This may include family, friends, community, cancer survivors and other positive, supportive people. You will need support from them during your treatment. If you don't tell your loved ones that you have cancer, it can be hard for your emotional, spiritual and physical health to cope with cancer alone.

How to tell people you have cancer

Different people react differently when they hear the word *cancer*. They may feel sad, afraid and ashamed. For this reason, some people don't want to tell others that they have cancer.

You may choose to tell only family members or a few close friends about your cancer diagnosis. Or you may want to tell everyone you know. It's your choice.

It's usually a good idea to be open and honest with your family about your diagnosis. This way they can support you better. But it can be very hard on them to learn you have cancer. They may also feel overwhelmed and scared.

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These **tips** may help you tell your family and friends about a cancer diagnosis:

- Make it easy to have a private, quiet conversation. Make sure that you won't be interrupted by the phone or other people.
- Have someone who already knows about the diagnosis with you.
- Start the conversation by saying something like:
 - *"I think it would be good to tell you what's going on. Is that okay?"*
 - *"I have something serious to talk to you about."*
 - *"Can I share something with you?"*
- If the person already knows something about the situation, you might start with:
 - *"I think you know some of this already. Can you tell me what you know? I can take it from there."*
- Give information in small amounts, a few sentences at a time. Check to make sure that the person understands. You could ask:
 - *"Is this making sense?"*
 - *"Do you see what I mean?"*
 - *"What are you thinking about?"*
- Don't worry about silences. You may find that holding hands or sitting together quietly says enough.

Be as honest as possible about the situation and your feelings. You don't need to act positive or brave if that's not how you feel.



What is cancer?

There are different terms for cancer across Inuit Nunangat. These include:

Inuvialuktun: **Pukkuqluk**

Nunavut: **Ippinnaittulijuq (Ikpinnaittulijug)**

Inuinnaqtun: **Aanniaruk**

Nunavik: **Piguinnaaq Aarqittaugunnatuq**

Nunatsiavut: **Kiansu**

Cancer is a disease that starts in our cells. Our bodies are made up of trillions of cells, grouped together to form tissues and organs such as muscles and bones, the lungs and the liver. Genes inside each cell tell it when to grow, work, divide and die. Normally, our cells follow these orders and we stay healthy.

But sometimes cells start to act abnormal and grow and divide out of control. After a while, abnormal cells can form a lump called a tumour.

Tumours can be non-cancerous (benign) or cancerous (malignant). Non-cancerous tumour cells stay in one place in the body and are not usually life threatening. Cancerous tumour cells can grow into nearby tissues and spread to other parts of the body. It is important to find cancerous tumours as early as possible. In most cases, finding cancer early increases the chances of successful treatment.

When cancer cells spread to other parts of the body, it is called metastasis. Cancers are named after the part of the body where they start. For example, cancer that starts in the bladder but spreads to the lung is called bladder cancer with lung metastases.

Ask your healthcare professional for more information about your kind of cancer.

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Words you might hear about cancer

Cell The most basic, smallest living part of our bodies.

Tumour An abnormal lump of tissue formed when cells grow and divide more than they should.

Your treatment options

The 3 main cancer treatments are surgery, radiation therapy and chemotherapy (drugs). But other types of treatments may also be used in some cases. Doctors who are cancer specialists (oncologists) give cancer treatments. Some of these doctors have special training in surgery, some in radiation therapy and others in giving drugs such as chemotherapy. These doctors work with you to decide on a treatment plan.

People with cancer have their own treatment plans based on:

- the type of cancer
- the features of the cancer
- the stage of cancer
- your personal situation and what you want

A treatment plan is based on each person's own situation. Sometimes 2 people with the same cancer have very different treatments. Your doctor will talk to you about your treatment options.

They may ask if you want to be part of a clinical trial. A clinical trial looks at new ways to treat cancer.

Words you might hear about treatment

Adjuvant therapy A treatment used after the standard treatment to lower the risk of cancer coming back.

Alternative therapy A treatment used outside of a hospital or medical clinic instead of the widely accepted and common treatment.

Chemoradiation A treatment that gives chemotherapy during the same period of time as radiation therapy.

Chemotherapy A treatment that uses drugs to kill or destroy cancer cells.

Clinical trial A research study that tests new ways to prevent, find, treat or manage a disease.

Combination therapy A treatment that uses more than one type of treatment at the same time.

Drug therapy A treatment that uses drugs given by a doctor to treat a disease.

Experimental drug A drug that is being tested to learn if it works and is safe, but it is not yet approved for use. Experimental drugs are used in a clinical trial.

Hormonal therapy Treatment that adds, blocks or removes hormones to slow or stop cancer cells that need hormones to grow.

Immunotherapy A treatment that uses the body's own immune system to protect the body against infection and disease.

Radiation therapy A treatment that uses high-energy rays or particles, such as x-rays, to damage or destroy cancer cells.

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Stem cell transplant A procedure that replaces a person's stem cells because those cells were damaged by the cancer or other treatments. A stem cell is the most basic cell. All different types of cells develop from it.

Surgery An operation to look for disease or to remove or fix tissue, an organ or a part of the body.

Targeted therapy A treatment that slows the growth of cancer cells or kills cancer cells but limits harm to normal cells. Targeted therapy often uses drugs to target specific molecules (usually proteins) involved in the growth of cancer cells.

Meet your healthcare team

Cancer care often involves a team of healthcare professionals – doctors, nurses, pharmacists, dietitians, social workers and others.

Your healthcare team is there to treat the cancer and to help you and your family cope. They can:

- give you information about cancer
- help you manage side effects and feelings
- give you emotional support
- help you find your way through the healthcare system
- suggest support services in the community to help you care for yourself in your home

You have a choice when making decisions about your health and your care. Stay involved with your team by keeping track of and sharing information about side

effects. Tell them what is happening and how you are coping. Some of the people you may meet on your journey are listed below:

Anesthesiologist (anesthetist)

This doctor gives anesthetics during surgery and other procedures done in the hospital. Anesthetics are drugs that stop pain or make you sleep.

Dietitian (nutritionist)

A dietitian teaches you about healthy eating. They help you with eating problems that may be a side effect of cancer or treatment.

Family doctor (general practitioner, GP)

A family doctor gives general care. They take care of a person's general health before, during and after cancer treatments. They are often the first doctor you see before seeing a specialist.

Interpreter (translator)

An interpreter speaks both your language and the language of the doctor. They interpret or translate all communications between you and the healthcare team to help you understand and get all of the information you need.

Nurse

Nurses are trained to give basic healthcare to people in the hospital, in the community or at home. They often have the most contact with you. Nurses can answer questions, bring your medicine and give emotional support.

Occupational therapist

Occupational therapists help you with your daily activities. They can help you return to work and adapt your work activities. They can suggest how to make changes in your home while you have treatment or deal with side effects to make life easier.

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Oncologist (cancer doctor)

This type of doctor has special training in surgery or radiation therapy or in treating cancer using medicines such as chemotherapy drugs.

Oncology nurse

An oncology nurse is trained to care for people with cancer. Oncology nurses work in cancer treatment centres, such as in chemotherapy departments, radiation therapy departments and bone marrow transplant units, and in the community. An oncology nurse helps you with your physical and emotional needs during your cancer treatment. They can also help you find information or support services.

Oncology nurse practitioner

An oncology nurse practitioner also cares for people with cancer but has extra training and duties including research, teaching and administration.

Pathologist

A pathologist is a doctor who studies cells and tissues under a microscope to look for and diagnose diseases such as cancer.

Patient advocate (client advocate)

A patient advocate helps you communicate or work better with other people involved in your care, such as doctors, nurses or social workers.

Patient navigator (nurse navigator)

A patient or nurse navigator connects you to the health-care system. They may organize services and help you with physical, social, emotional and practical needs.

Pharmacist

Pharmacists prepare cancer drugs and other medicines and explain how they work. A pharmacist tells you how often to take your drugs. They also explain if there is food you should or should not eat while taking a drug. A pharmacist also tells you about side effects and how to deal with them.

Physiotherapist (physical therapist)

Physiotherapists help treat injury and manage pain and help you to move your body more easily through exercise and other physical treatments such as massage.

Plastic surgeon

A plastic surgeon is a doctor who does surgery to reduce scars, prevent disfigurement or improve appearance.

Psychologist and psychiatrist

Psychologists and psychiatrists help you and your family understand and cope with feelings, thoughts, worries and behaviours. They give you ways to manage stress and worry. Psychiatrists are medical doctors who specialize in the diagnosis and treatment of mental illness.

Radiation oncologist

Radiation oncologists are doctors with special training in the treatment of cancer using radiation.

Radiation therapist

A radiation therapist helps plan and give radiation therapy treatment.

Radiologist

Radiologists are doctors who use x-rays, ultrasounds, CT scans, MRIs and other imaging tests to diagnose disease. A radiologist also does some types of biopsies that use x-rays or ultrasound to guide a needle.

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Social worker

A social worker talks with you and your family about your emotional and physical needs. They can find you support services like counselling, support groups, financial help and other resources.

Spiritual care worker

Spiritual care workers offer support and prayer according to your spiritual and religious needs.

Surgeon

A surgeon is a doctor who removes tissues, organs or other parts of the body through an operation or a biopsy.

Surgical oncologist

A surgical oncologist is a doctor who does biopsies and surgeries or other procedures to diagnose or treat cancer.

Technical staff

Technical staff do blood samples and x-rays, ultrasounds, CT scans and MRIs. They also test blood and other samples.

Going to an urban cancer centre for treatment

Inuit people with cancer usually have treatment in one of these 5 main cities – Edmonton, Winnipeg, Ottawa, Montreal and St. John's. All of these urban centres have organizations that give support to help people with cancer and their caregivers.

For example, some organizations offer places to stay if you have to wait a few days or weeks between appointments. Some give local transportation to and from appointments. Between appointments, you can visit local Inuit organizations that offer cultural and social events and services.

Before you leave for the city, contact some of the following organizations for help. **This list may change over time. Ask your nurse for current information about services in the city where you are going for treatment.**

You can also call the Cancer Information Service of the Canadian Cancer Society at 1-888-939-3333. They use interpreter services and can tell you about local organizations.

EDMONTON, ALBERTA

Cross Cancer Institute

The Cross Cancer Institute gives cancer care to northern Alberta. They provide medical and supportive care for people with cancer who need medical treatment.

For more information: 780-432-8771

Web: Alberta Health Services, tinyurl.com/y8hkpnac

Cross Cancer Institute Aboriginal Cancer Patient Navigator

The Cross Cancer Institute has an Aboriginal cancer navigator who works directly with First Nations, Inuit and Métis patients to organize appointments and give administrative help.

For more information: 780-735-5326

Web: Alberta Health Services, tinyurl.com/h6gcn4t

Edmonton Inuit Cultural Society

The Edmonton Inuit Cultural Society builds a strong Inuit community in the greater Edmonton area by offering cultural support services.

For more information: 780-756-3106

Larga Edmonton Ltd.

Larga Edmonton Ltd. is a medical boarding home for people travelling to Edmonton for medical services not available in Nunavut or the Northwest Territories. They provide accommodation and local transportation to and from appointments and the airport. They also arrange medical

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appointments and referrals. Larga Ltd. is an Inuit company owned by the Kitikmeot Corporation and Nunasi Corporation.

For more information: 780-477-6284

Web: Kitikmeot Corporation, tinyurl.com/z37l2wo

Northern Health Services Network (NHSN)

NHSN helps people from the Northwest Territories, Nunavut and the Yukon who are getting medical treatment in Edmonton. The services include support for patients and their families when meeting with healthcare providers, help with territorial benefits they may be eligible for, and information for families about transportation and housing in Edmonton.

For more information: 780-342-2000

Web: Alberta Health Services, tinyurl.com/hbzo8n6

WINNIPEG, MANITOBA

CancerCare Manitoba

CancerCare Manitoba provides cancer treatment and support for Manitoba Inuit and people from the Kivalliq region of Nunavut. CancerCare Manitoba has online cancer information sheets and audio files translated into Inuktitut.

Patient pathway diagrams in English and Inuktitut help show what a cancer journey may look like for a patient. The lung, breast and colon pathway diagrams also provide expected timelines to move to the next steps along the journey for these types of cancer. All pathway diagrams have contact information for different programs and services at CancerCare Manitoba, including WRHA Indigenous Health.

For more information: Toll-free 1-866-561-1026

Web: CancerCare Manitoba, cancercare.mb.ca,
tinyurl.com/y8m8nkdl

Kivalliq Inuit Centre

Kivalliq Inuit Centre provides services to 8 communities in the Kivalliq region of Nunavut. Services are funded by the Government of Nunavut and include travel expenses, accommodation, meals, interpretation, discharge planning and some patient care services. Kivalliq staff coordinate appointment times and travel to and from appointments outside home communities for eligible clients. Each client must be a Nunavut resident and have a valid healthcare number. The Government of Nunavut provides services regionally when possible. Tertiary care for Kivalliq residents is provided by the Winnipeg Health Region.

For more information:

Discharge planning and interpreters: 204-989-1020

Boarding home and transportation: 204-944-7110

Churchill: 204-675-8313 or 204-675-8320

Address: 310 Burnell St., Winnipeg MB

Manitoba Inuit Association

The Manitoba Inuit Association supports Inuit values, community and culture while connecting Inuit to services. They offer many cultural and social events and services for Inuit in Winnipeg.

For more information: 204-77-INUIT (204-774-6848)

Web: Manitoba Inuit Association, manitobainuit.ca

OTTAWA, ONTARIO

Akausivik Inuit Family Health Team (AIFHT)

The Akausivik Inuit Family Health Team treats Inuit in Ottawa. They offer testing, treatment, medicines, prescriptions and physician support. They also serve Inuit who have travelled to Ottawa for cancer treatment at the hospitals. The AIFHT also provides primary care, palliative support, medical assessment, screening and coordination with specialists.

For more information: 613-740-0999

Web: Champlainhealthline.ca, Akausivik Inuit Family Health Team, tinyurl.com/guyhxdu

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Champlain Aboriginal Cancer Program

The Champlain Aboriginal Cancer Program was established at the Ottawa Hospital, General Campus, to help improve the cancer care experience of Indigenous people. They support patients and families by:

- helping to navigate the healthcare system
- helping coordinate services
- assisting with language and translation services
- providing support during clinic visits and other appointments
- coordinating access to spiritual support and connecting with Elders
- preparing patients for their first appointment within the cancer program

The Windocage Community Room is available to Indigenous patients and family members as a place of comfort and peace throughout their cancer journey.

For more information: 613-737-7700 ext. 73607

Web: Ottawa Hospital, tinyurl.com/y74dq4hc

Larga Baffin House

Larga Baffin House is a medical boarding home for people travelling to Ottawa for medical services not available in Nunavut. They offer local transportation to and from appointments in the greater Ottawa region, home-cooked meals, comfortable accommodation and return travel.

Larga Baffin is an Inuit-owned company started by Nunasi Corporation and Qikiqtaaluk Corporation.

For more information: 613-248-3552

Web: Larga Baffin, largabaffin.ca

Ottawa-Baffin Nunavut Health Services (OBNHS)

The Ottawa-Baffin Nunavut Health Services supports people from Nunavut who need medical treatment in Ottawa. OBNHS helps communication between medical providers and families in the North. OBNHS also provides translation and interpretation services, administrative support and nursing case management.

For more information: 613-523-7822 ext. 153

Web: Ottawa-Baffin Nunavut Health Services, obnhs.com

Ottawa Hospital and Queensway Carleton Hospital

The Ottawa Hospital (General Campus) and the Queensway Carleton Hospital provide cancer services for the Ottawa region. The 2 hospitals offer an integrated cancer program with services in chemotherapy, radiation, oncology, palliative medicine and supportive care.

For more information:

Ottawa Hospital, 613-722-7000

Queensway Carleton Hospital, 613-721-2000

Web: Ottawa Hospital, ottawahospital.on.ca
Queensway Carleton Hospital, qch.on.ca

Tungasuvvingat Inuit

Tungasuvvingat Inuit is a place for Inuit of all ages in Ottawa. It offers many cultural and social events and services.

For more information: 613-565-5885

Web: Tungasuvvingat Inuit, tungasuvvingatinuit.ca

MONTREAL, QUEBEC

McGill University Health Centre (MUHC)

The McGill University Health Centre is the hospital network in Montreal that provides cancer care. Depending on the type of treatment, patients are sent to different hospitals. Most patients will go to the Cedars Cancer Centre (Glen site) but may also have appointments in other hospitals.

For more information: 514-398-2705

Web: McGill University Health Centre, muhc.ca

My Journey

Southern Quebec Inuit Association (SQIA)

The Southern Quebec Inuit Association unites southern Quebec Inuit living outside of Inuit Nunangat, mostly from Montreal.

For more information: 514-545-1885

Web: Southern Quebec Inuit Association,
facebook.com/SQIA2017/

Ullivik

Ullivik supports people from Nunavik who need medical treatment in Montreal, linking patients to the McGill University Health Centre. Ullivik offers accommodation, transportation to and from medical appointments, liaison nurses and interpreters.

For more information: 514-932-9047

Web: Inuulitsivik Health Centre, tinyurl.com/zeykpm7

ST. JOHN'S, NEWFOUNDLAND AND LABRADOR

Aboriginal Patient Navigator (APN) Program

This program operates through the Health Sciences Centre. The APN works with Aboriginal patients, their caregivers and their families. The APN links the Aboriginal community with healthcare providers to support patients and access community services. If you are not referred right away, ask to connect with an APN.

For more information: 709-777-2110

Web: Eastern Health Aboriginal Patient Navigator Program,
tinyurl.com/y7sguw7r

Daffodil Place

Daffodil Place is a boarding home operated by the Newfoundland and Labrador Division of the Canadian Cancer Society. Daffodil Place is a place to stay for people with cancer and their caregivers who must travel to St. John's for cancer care. Daffodil Place also offers support services, including emotional support, information resources and recreational activities.

For more information: 1-888-753-6520

Web: Canadian Cancer Society, tinyurl.com/hvb53zm

Dr. H. Bliss Murphy Cancer Centre

Dr. H. Bliss Murphy Cancer Centre is part of the Health Sciences Centre. It is the only facility in the province that provides radiation treatment and is an outpatient facility. At this centre, you will meet with a family doctor and an oncologist.

For more information: 709-777-6555

Web: Eastern Health, tinyurl.com/jg77plc

St. John's Native Friendship Centre

The St. John's Native Friendship Centre offers boarding for hospital outpatients and their families having treatments that are not available in their own community. The facility includes a kitchen, play area, living room and dining room.

For more information: 709-726-5902

Web: St. John's Native Friendship Centre, sjnfc.com

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**Add additional local contact
or support information here**

**Add additional local contact
or support information here**

My Journey

Make healthy lifestyle choices

Nutrition

Good nutrition is very important for people with cancer. Eating a variety of foods and well-balanced meals can help you feel better and stay stronger. Eating well during treatment helps:

- maintain your body weight
- improve your strength and energy
- reduce the risk of infection
- your body heal and recover from cancer treatments

People with cancer who can eat well, are well nourished and keep a healthy body weight often have a better prognosis.

A healthy diet includes eating and drinking foods and liquids with nutrients that your body needs – proteins, carbohydrates, fats, vitamins, minerals and water. Eating country foods is important for many Inuit. It is widely recognized that many country foods are part of a healthy lifestyle.

Ask your doctor to refer you to a registered dietitian if you have questions about nutrition. The Dietitians of Canada website (dietitians.ca) also gives information about healthy eating and how to find a dietitian.

Country foods

There are ways to get country foods when you are in the South for cancer treatment. Speak with your patient navigator or ask at your medical boarding house.

The resources on the next page provide information about healthy country food options, recipes and nutrition.

If your dietitian is not familiar with Inuit country foods, share these resources with them.



Food guides

Nunavik Food Guide, Nunavik Regional Board of Health and Social Services

Web: Nunavik Regional Board of Health and Social Services, tinyurl.com/ztnwllr

Nunavut Food Guide, Nunavut Department of Health

Web: Nunavut Department of Health, tinyurl.com/yb68cqwk

Fact sheets

Nutrition Fact Sheet Series, Inuit Traditional Foods, Nunavut Department of Health

Web: Nunavut Department of Health, tinyurl.com/ycu49pt6

Recipes

Nunavimmiut Cookbook

Web: Nunavik Regional Board of Health and Social Services, tinyurl.com/h8a6pw9

Inuit Country Food Recipes

Web: Inuit Cultural Online Resource, tinyurl.com/yc2th5lt

Mamaqtut! Inuit Healthy Living Cookbook (Inuktitut)

Ask for a copy from Tungasuvvingat Inuit at info@tungasuvvingatinuit.ca or 613-749-4500 ext. 22.

Water

Your body needs water and other fluids to stay healthy. If you don't drink enough fluids and you have side effects of cancer treatment such as vomiting or diarrhea, you can easily become dehydrated. One way of getting more water is to drink tea.

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Alcohol

You may wonder if it's okay to drink alcohol during treatment. Talk to your healthcare team first. Alcohol can interfere with some medicines, treatments (such as chemotherapy) and certain health conditions. Alcohol also increases the risk of developing certain types of cancer.

When you just can't eat

There may be times when you feel you just can't eat. If food doesn't appeal to you, or you feel too tired or sick to eat, it may be hard to get all the nutrition you need from food and drinks alone. If you have trouble eating, talk to your healthcare team.

Physical activity

Many doctors now encourage people with cancer to be physically active and exercise during treatment and recovery. Being active can lower stress or anxiety, improve your mood and self-esteem, help your appetite, raise your energy level, help you sleep and help you get your strength back during recovery. Exercise can also help reduce side effects like nausea, fatigue and constipation.

Exercise also helps you keep a healthy body weight, which has many benefits. Studies show that gaining too much weight during and after treatment can raise the risk of cancer coming back.

How much physical activity you can do during cancer treatment depends on your overall health and physical condition, how you cope with treatment and what side effects you have.

Check with your doctor

Check with your doctor before you start any exercise program, even if you exercised regularly before your diagnosis. Although exercise is safe for many people, there are some exceptions. For example, if you're at risk for infection or anemia (not enough healthy red blood cells), you may not be able to exercise. This is why you need to talk to your doctor before starting.

Tips for exercising during treatment

Each person's exercise program is unique and should be based on what is safe and works for that person. Your goals should be endurance, strength and flexibility so that you can do the things you want. There may be times when you don't feel able to exercise. The goal is to be as active as you comfortably can be. These tips may help:

- Start slow. Start with something simple like walking and slowly increase how often and how long you walk.
- Exercise when you have the most energy or feel the best.
- Try to exercise a little or do some type of activity each day, even if you are feeling unwell. Sometimes just a few minutes of gentle stretching can make you feel better.
- If you don't have the energy to exercise for a long period of time, do a few short sessions throughout the day.
- Make exercise fun by exercising with a friend or listening to music.
- Try to stay active within your daily routine.
- Housework can be good exercise. But try to do a little every day instead of all at once.
- Walk instead of drive.
- Drink plenty of fluids before, during and after exercise. Stop and rest when you're tired.

My Journey

Life after cancer treatment

During treatment, you were probably very busy just getting through each day. It may have been hard to imagine the end of treatment. Now that it is over, you may be surprised by mixed feelings. While you're happy to be done treatment and to be home, it's normal to be concerned about the future. Many people find that the time after treatment is a period of change – and harder than they expected. As you adjust, be kind to yourself. Don't expect to feel good about everything. Go slowly and give yourself time to accept all you've been through.

Many people have a range of feelings after treatment is over. You might feel afraid and lost, especially during the first few months after treatment. It can be a confusing time. You're no longer busy with appointments. People seem to think you're doing okay, when you're not so sure.

When you finish treatment, it's important to know that there's no right or wrong way to feel. Everyone's experience is different, but it's quite common to feel:

Worried that the cancer will come back – You may spend a lot of time wondering if the treatment really worked and worrying that the cancer will come back.

Lonely and isolated – Many survivors are surprised to find that they miss their healthcare team. After going back home, you may feel that the people around you don't or can't understand what you've been through. If you're coping with changes to your appearance, this can make you feel lonely. You may find that you now feel different from other people – even if the changes aren't obvious to everyone.

Angry – Many cancer survivors feel anger. You may be frustrated about things that happened during diagnosis or treatment. Or you may feel angry if your family and friends aren't as helpful or supportive as they were during treatment.

Sad about what you lost – As a cancer survivor, you may be sad and grieving the loss of a body part, the ability to have children or your financial security.

Afraid to move forward – Some cancer survivors find it hard to move forward after treatment. You may wonder how to put your life back together or how to adapt to the way your life is now.

Unsure about old and new relationships – You may be worried that people will treat you differently from before you were diagnosed and had cancer treatment. Or you may be worried that people will be uncomfortable around you because you had cancer.

Worried about physical side effects – You may worry about how side effects might affect your work and social life.

Different about your body and general health – Many people who have had cancer say they lose self-confidence. And they are more aware of their health now that they have had cancer.

Moving forward

Health will likely be on your mind as you journey from being a cancer patient to a cancer survivor. Many cancer survivors want to take the best care of their health that they can. Along with follow-up visits with your healthcare team, learning how to live a healthy life after cancer can be a positive step forward.

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Just as your cancer treatment plan and experience were unique to you, your wellness plan is also yours alone. Your healthcare team can help you develop a wellness plan for your needs, preferences and fitness level. What's important is that you understand your wellness plan and are comfortable following it. It may include plans to:

- eat well
- be physically active
- protect your skin from the sun as much as possible
- get help to quit smoking

Research has shown that cancer survivors who continue to smoke are at a higher risk of cancer coming back or having another cancer, either at the same site or in a different place in the body. This increased risk can last as long as 20 years after the first cancer has been successfully treated.

A wellness plan can make you feel better and more in control of your health. But it's important to understand that following it doesn't guarantee that cancer won't come back. But you will be doing all that you can to lower your risk.

Going for follow-up visits

Part of living a healthy life after cancer is trying to prevent the cancer from coming back. Going for follow-up visits is an important part of managing your healthcare after treatment.

Follow-up care allows your doctor or nurse to follow your progress and recovery from treatment. It gives you a chance to talk to your healthcare team about any problems or concerns that you have about your health after treatment.

But don't wait until your next scheduled visit to report any new symptoms that don't go away.

The schedule of follow-up visits is different for each person. You will also have certain tests or procedures during follow-up to look for changes in your health and check for signs of the cancer coming back. You may have many appointments in the first few years after your treatment, and then not so many after that.

It is a good idea to keep a personal copy of your cancer treatment history. That way you have a record of your information if you have to change doctors or you have a medical emergency.

Information for caregivers

A caregiver is someone who gives physical and emotional care to someone with cancer – but not in a professional role. As a caregiver, you are an important part of the healthcare team. It's important to know what to expect.

You may have to:

- travel to regional and southern cancer centres
- help with interpretation
- work with patient or nurse navigators
- visit the doctor
- report or manage side effects
- inform family and friends
- coordinate care of your loved one
- give medicines
- keep track of medicines, test results and papers
- give physical care to your loved one including feeding, dressing and bathing
- deal with legal and financial issues

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Being a caregiver also includes giving emotional support, such as helping your loved one cope with their feelings and make hard decisions.

If you feel pressured into being a caregiver, it's best to be honest about how you feel. Respect and speak up for your own feelings as well as those of your loved one. Decide your limits and tell others so that both you and your loved one get the help you need. It's okay to take a break from helping if you need one. You can also ask the healthcare team and your family for more support.



*“We need the knowledge
so we better protect
ourselves in the future.
We need to know
how to get tested.”*





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