



WELLNESS

Cancer and work

By Maureen Parkinson, Provincial BC Cancer Rehabilitation Counselor

COPING WITH THE EMOTIONAL, physical and cognitive impacts of a cancer diagnosis and navigating treatment can be challenging enough. Returning to work or school after a cancer diagnosis also may present a host of difficulties. The Cancer and Work website was developed as an information hub to provide guidance to cancer survivors, health care professionals and employers.



The website is a collaboration between BC Cancer and McGill University and is designed to address the unique needs of cancer survivors who would like to return to or remain at work, or find a new type of employment after a cancer diagnosis. It was created with the help of cancer survivors and health care professionals and provides useful and reliable information and tools to help employees, employers and healthcare providers.

The website provides resources and interactive tools customized into three groups: cancer patients/survivors, healthcare providers and employers. Content includes topics such as:

- disease and treatment impact on work abilities
- planning for a return to work during or after treatment
- insurance and financial information
- specific workplace challenges
- caregiver information
- legal rights and responsibilities

and much more. It promotes a deeper understanding about the roadblocks that survivors face, offers suggestions for health care professionals to support their patients and addresses the responsibilities of employers in facilitating a successful return to work strategy.

The website is the result of the collaboration of experts across Canada. Health professionals in oncology have provided an in-depth review of the most common symptoms and treatments that impact cancer patients and survivors at work. Other experts have provided symptom management options and ideas to facilitate job accommodations.

From BC Cancer the content experts include: Maureen Parkinson, co-lead of the Cancer and Work website and

Provincial Vocational Rehabilitation Counsellor; Rosemary Cashman, Nurse Practitioner; Melanie McDonald, Patient and Family Counselling Practice Leader; Amy Rappaport, Social Worker; and Dr. Alan Bates, Provincial Practice Leader for Psychiatry.

In addition, the team includes rehabilitation professionals, career consultants, human rights and employment lawyers, union representatives, insurance providers, vocational rehabilitation counsellors, nurses, clinicians, dieticians, occupational therapists, physiotherapists, kinesiologists, psychologists, disability managers, lymphedema specialists, and many more – including cancer survivors. Survivors and patients who have gone through the return-to-work experience offer real life examples and tools for success.

For more information, see the Cancer and Work website at www.cancerandwork.ca



The Cancer and Work website was designed to address the unique needs of cancer survivors with returning, remaining, changing work or looking for work after a diagnosis of cancer. The website provides newly created information, resources, and interactive tools for cancer survivors, healthcare providers, employers, and highlights helpful information from across the globe.

QUESTION & ANSWER

By Dr. Brian Thiessen, Neuro-oncologist

Q1 I was diagnosed with a grade 4 glioblastoma and finished radiation many months ago. I didn't feel well before my surgery, but now I feel fine and the tumour is removed and I am just getting chemo which I will finish soon. My oncologist told me I can't drive and I don't understand that. It is inconvenient for me not to drive. Why can't I drive if I feel fine? I have never had a seizure.

Q2 I had a seizure when I first found out about my tumour 2 years ago and was put on medication. I haven't had a seizure since I was diagnosed and now I've finished my treatment so I want to come off the medication. My doctor told me I'd have to stop driving if I do. I want to drive, but I don't like to take medicine. This seems unfair, like I am being penalized for not wanting to take medication that makes me feel groggy.

A There are many factors that go into assessing driver safety in patients with brain tumours. Obviously, epileptic seizures are a major concern and the rules in BC are fairly straight forward:

- If you have had seizures and have a brain tumour, you must remain seizure free for 6 months on seizure medication before returning to driving.
- If you continue to have small seizures that don't impair consciousness, on or off medication, you may be able to return to driving if the seizure pattern is stable for 12 months.
- If your seizure medication dosages are reduced or stopped entirely, you must stop driving for a period of 3 months to ensure the seizures do not return. After 3 months of observation without seizure recurrence, you can return to driving.



These are the requirements for class 5 (personal use) driving privileges. Higher class licenses are far more restrictive.

Seizures are not the only safety consideration in brain tumour patients. Both the brain tumour and its treatment can cause significant challenges in brain function especially with respect to focus, concentration, memory and judgement. Tumours in the frontal and temporal lobes are particularly prone to adversely affect these aspects of cognition. If the driver is suspected of being cognitively impaired, they need to be referred to Road Safety BC for a driver's assessment.

Additional concerns related to vision and mobility have to be considered. Patients must have reasonable peripheral vision (at least 120 degrees of horizontal visual field) to drive safely. Tumours in the occipital lobe and posterior temporal lobe frequently affect visual fields and may need formal testing by a neuro-ophthalmologist. Motor paralysis of the right arm and leg in particular can affect driving and control of the vehicle. Tumours of the posterior frontal lobes can cause significant weakness and affect driving.

The last criterion for safe driving involves tumour control. A tumour that is growing or is at high risk of growing means seizure control, cognitive function, vision and motor function can change often rapidly over a few days. These changes may not be readily apparent to the brain tumour patient, but can significantly affect their safety behind the wheel. Therefore, if patients are at high risk of tumour recurrence, as most grade 4 tumours are, we generally recommend not driving. That recommendation becomes even stronger when we know the tumour is growing and is not controlled by treatment.

So in the end, the key factors for safely returning to class 5 driving privileges are:

1. Seizure control
2. Tumour control with low recurrence risk
3. Intact cognitive, motor and visual functions.

Based on these criteria, your oncologist is able to determine whether or not you should be driving to ensure your safety and the safety of those around you.

BC CANCER SUMMIT

Sheraton Wall Centre, Vancouver, November 21-23, 2019

This event provides oncology education, professional development and unique relationship-building opportunities for BC Cancer's oncology professionals from all specialties and disciplines. In addition, there will be talks about patient perspectives on person-centred care, the benefits of art therapy, the role of patient-reported outcomes in research and the tailoring of information to suit the needs of patients and their families.

For complete information about the 2019 BCC Summit see: bcccancersummit.ca or contact: info@bcccancersummit.ca

Reconnecting with movement

By Sarah Buddingh Smith, BSc, MPT
BC Cancer Physiotherapist

WHEN WE CAN MOVE OUR BODIES with ease, we feel a sense of vitality and health. Being able

to move in ways that are important to us allows us to connect with the people and activities that we love. Our movement goals change throughout our lives, so periodically we need to take a kind, clear look at our current function and adjust our goals.

Movement is often restricted as a result of cancer and cancer treatments. Physical activity is an important part of recovery and long term health. Many people who have experienced cancer are not sure how to safely and effectively get back to moving.

There are many exercise and rehabilitation resources available for people with cancer and neurological conditions.

General fitness advice is provided by kinesiologists, exercise physiologists and physiotherapists. BC Cancer has summarized the American College of Sports Medicine's exercise guidelines for people with cancer. www.bccancer.bc.ca/health-info/coping-with-cancer/exercise-support

Physiotherapists (also known as physical therapists) treat specific physical challenges, such as in the muscles, joints and nervous system. We work towards improving strength, balance, pain, cardiovascular fitness, and bone density. We can be an important part of improving your function at home and in your community.

HealthLinkBC provides free phone consultations for general exercise from an exercise physiologist with training in

cancer. You can access this service by calling 811 and asking for "Physical Activity Services for Cancer."

www.healthlinkbc.ca/physical-activity/cancer



Inspire Health provides Supportive Cancer Care services in Vancouver, Victoria and Kelowna. Their kinesiologist can provide one on one general fitness advice. They also have a range of free group exercise classes, from chair yoga to circuit training to tai chi.

www.inspirehealth.ca/programs/classes

PainBC advocates for and supports people living with pain. They run a range of free web-based, telephone and group programs, including Coaching for Health and Pain Support & Wellness Groups in various areas throughout BC.

<https://painbc.ca/find-help>

The Physiotherapy Association of BC "Find a Physio" search engine allows you to do an advanced search of private practice physiotherapists

by specialty, such as neurology, oncology, chronic pain and vestibular (dizziness) rehabilitation. If you have extended benefits, this may help to cover the cost.

<https://bcphysio.org>

The UBC Physical Therapy & Research Clinic (UBC PTRC) is located in the Department of Physical Therapy on the UBC Vancouver campus. This innovative clinic has a student-led model where physical therapy students provide care in collaboration with a registered physical therapist. We are very fortunate that this clinic is run by a physiotherapist experienced

in both inpatient and outpatient cancer rehabilitation. This clinic has affordable rates, and accepts extended benefits and Medical Services Plan (MSP) premium assistance.

<https://physioclinc.med.ubc.ca>

For people who receive disability assistance, MSP provides \$23 towards each visit for 10 extended medical therapy visits/year. This includes Physiotherapy and Massage Therapy.

www2.gov.bc.ca/gov/content/governments/policies-for-government/bcea-policy-and-procedure-manual/health-supplements-and-programs/extended-medical-therapies

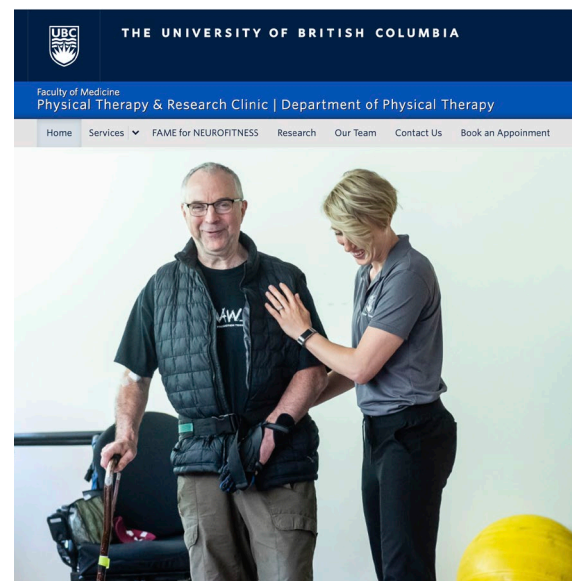
Fitness and Mobility Exercise (FAME) for NEUROFITNESS is a group exercise class for people with neurological conditions. This is run by UBC Vancouver PTRC for \$10/class.

<https://physioclinc.med.ubc.ca/fame-for-neurofitness>

GF Strong and BC Cancer Vancouver provide very limited outpatient neurological rehabilitation services. You can speak with your oncologist about whether you are a candidate for these services.

www.vch.ca/Locations-Services/result?res_id=1277

continued on page 4



Welcome to the UBC Physiotherapy + Research Clinic

We are now open! Contact us to make an appointment.

Who is my buddy?

By Tashina Janus, BC Cancer patient and Tracy Stonehouse, RSW, MSW, Patient and Family Counselling

Tashina: Life expectancy for a brain tumour patient is usually no more than 5 years. That is all I could think of as a 21 year old sitting in the waiting room at BC Cancer.



I looked around and saw pamphlets for support groups, but I wasn't worried about support. I had my family by my side and could not keep up with all the messages from friends wishing me well. I felt scared and nervous and wondered how many other people had sat in my chair feeling the same way. I needed someone to sit calmly with me and explain what would happen next and tell me that I would be all right.

This newsletter is published through the generous support of BC Cancer, Yvette and Hershey Porte Fund.

For more information about how you can support enhanced patient care, patient information and brain tumour research, please contact Fatima Hassam, Associate Vice President, BC Cancer Foundation.
Dir: 604 877 6226 Cell: 604 218 0508
fatima.hassam@bccancer.bc.ca

Editions of *Headlines* are also available as a pdf download on our website at:
www.bccancer.bc.ca/headlines

If you would like to submit an article, ask a question, or serve on our patient and family editorial board, please contact Rosemary Cashman at rcashman@bccancer.bc.ca or 604 877 6072 (phone) 604 877 6180 (fax).

Tracy: When a patient is diagnosed with any kind of cancer it is normal to feel overwhelmed and fearful. There is a period of adjustment that patients and families typically go through with a brain tumour diagnosis. Some people feel that they are constantly on a roller coaster, never knowing when to expect the highs and lows.



BC Cancer has a number of strategies and resources to help patients feel supported and less alone throughout their experience with a brain tumour. At their first visit to the cancer centre, patients complete a questionnaire that lets us know how they are feeling physically and psychologically. At all cancer centres there is a counseling service to provide one on one support to patients and family members. There are also ways to meet other patients with brain tumours and other cancers so that you can hear about their experiences and what has helped them.

These and other services are available at various cancer centres.

- Mindfulness-based Stress Reduction
- After Treatment Healing series (four sessions)
- Relaxation and Music Therapy
- Vocational Rehabilitation Counselling
- Memory Attention and Adaptation Training
- Monthly support groups
- Peer Navigator support program (one on one session with a brain tumour patient who has received training to provide support in Vancouver)
- Children's support group (offered four times a year in Vancouver)
- Spiritual Health Care
- Support circle

Check this link to see what is available at your centre: www.bccancer.bc.ca/our-services/services/support-programs

For more information about any of these services and for other support for you and your family, you can also speak to the Patient & Family Counselling Department at your cancer centre.

Reconnecting with movement

continued from page 3

If you have difficulty with safe movement in your house and cannot leave your house for appointments, you can self-refer – or ask your health care team for a referral - to home care services in your neighbourhood.

- For help with walking aids and exercises for safe mobility in your home, request an appointment with a physical therapist.
- For a home safety assessment, book an appointment with an occupational therapist.

Vancouver Coastal Health:
www.vch.ca/your-care/home-community-care/how-to-access-services

Fraser Health:
www.fraserhealth.ca/Service-Directory/Services/home-and-community-care/home-and-community-care#.
XaeRwNJKiUk

Island Health:
www.islandhealth.ca/our-services/home-care-services

Interior Health:
www.interiorhealth.ca/YourCare/HomeCommunityCare/Pages/default.aspx

Northern Health:
www.northernhealth.ca/services/home-community-care/home-health#home-support

Start with small realistic goals that balance regular gentle movement with rest. Celebrate each small step that you take towards recovery.

For more information about improving your safe mobility, you may also speak to your health care team.