

# COPING

## with Breast Cancer

By Jennifer Shaw

Part 2 of a Special Report on  
Breast Cancer in the Bay Area

In July 2002, a diagnosis of an aggressive malignancy in her left breast catapulted Angela Padilla, then 36, into a nightmare. She had just adopted her 6-month-old daughter Isabella from Guatemala when she got the news.

"The doctors were talking about five and 10-year survival rates ... it was devastating that I would not live long enough to see her reach fourth grade," says the San Francisco attorney. "When I was first diagnosed, I couldn't go to playgrounds. I would be overwhelmed with grief. I couldn't bear to be around children that were older than Isabella."

While undergoing surgeries and receiving powerful doses of chemotherapy, Padilla added a vigorous exercise regimen, yoga, massage, guided imagery and Chinese supplements to the arsenal. Those therapies became essential means of coping with the emotional side of the disease.

"I wanted to treat this like a triathlon that I had to really prepare for mentally and physically," she recalls. "It made me feel like I was getting up every morning, putting on my boxing gloves and beating those cancer cells ... that was crucial to my emotional well-being."

Padilla's thoughts and concerns are



Becoming a breast-cancer advocate helped Angela Padilla, shown with daughter Isabella, to cope with the disease. PHOTO COURTESY OF ANGELA PADILLA.

## How Bay Area moms and families have handled the emotional impact of the disease

common for women with breast cancer. Psychologist Ilene Scharlach says that those feelings can include fears about dying, disfigurement and a loss of fertility following chemotherapy, as well as concerns about being able to continue parenting responsibilities while receiving treatment.

"It's so important for women to know that all these feelings are to be expected.

There is going to be a roller coaster," notes Scharlach, the facilitator of breast-cancer support groups at the Wellness Community in Walnut Creek.

"Everybody walks this journey alone, but building support makes all the difference between feeling isolated and feeling connected," she adds.

For Marcie Hall-Mennes, the emotional gamut that came with having breast cancer included being in a state of shock, feeling fearful of harming the baby she was carrying, thinking she'd be dead in two years – and intense anger. "I had recently lost my mom. I thought that had been my suffering crite-

riem," she says. "I couldn't enjoy the pregnancy. I couldn't enjoy anything. I had to live with so much discomfort and pain and the fear of not surviving."

The San Francisco mom sought solace by reading books such as *Why I Wore Lipstick To My Mastectomy* (St. Martin's Press, 2004), getting counseling, and contacting a group called Pregnant with Cancer Network ([www.pregnantwithcancer.org](http://www.pregnantwithcancer.org)). With the help of the network, Hall-Mennes, who gave birth to her daughter this past August, was able to talk with women who had undergone chemotherapy during gestation and had healthy babies.

Padilla joined a support group, initially at UCSF. "The support group was the one place I could express my fears about dying and leaving my little girl behind," she adds. She also had individual therapy.

In February 2004, Padilla co-founded Bay Area Young Survivors to address issues unique to younger women with breast cancer. The group, which has 70 members from all over the Greater Bay Area, meets monthly at Padilla's home.

"Becoming a breast cancer advocate, I feel like I'm taking charge of my life and

I'm helping other women avoid this disease. And, for those who already have it, I'm helping them survive it," she explains.

Aside from friends and family, Karen Barnes gained support from other patients while waiting in her doctor's office during her weekly visits for her dose of Herceptin, a cancer-prevention drug. "You could moan about it with each other. You'd say, 'Oh, I feel sick,' and they were going through it, too," says the San Ramon resident.

Barnes was able to process a lot of her angst in writing. "The surgeries were like a whirlwind. (Doctors said) this is what you have. This is what we're going to do ... bang, bang, bang. I got real scared around the time of the chemo," she recalls. Journal entries describe the liberation Barnes felt when her husband shaved her head, as well as her anger and ambivalence when friends visited.

"I felt like a circus act. They wanted to be there for me, but I was like, 'Leave me alone,'" she says. "Then a couple of weeks later I was excited they were coming."

Such ambivalence is understandable, Scharlach notes. She suggests that friends of cancer patients consistently stay in contact throughout the treatment and recovery process. "Let them know that (you're) there to talk, to do that errand, to go for a walk, to listen," she says. "Sometimes they do want to talk and other times they want a distraction."

Spirituality can also be an emotional balm. Padilla's fortitude was strengthened by her affiliation with a prayer group and services at Glide Memorial Church. "My spiritual nature was affirmed," she asserts. "You have to really trust God when you're going through chemotherapy."

After sleepless nights and crying bouts, Dublin resident Michelle Williamson relied on faith as well. Shortly after her diagnosis, she went to

mass where she experienced a distinct wave of inner peace. "I've always had faith, but now more than ever. The presence of God is overwhelming," Williamson says.

For additional support, members of her



**Karen Barnes, with son Jake, expressed her feelings about cancer by writing in a journal.** PHOTO COURTESY OF KEN BARNES

women's spiritual group brought her a basket of cards the day before her surgery and put their name on a sign-up sheet to continually pray for her during her lumpectomy. Friends from church brought her a rosary and one parishioner delivered Communion each week. "I just needed that food for the soul. I felt good afterwards," she adds.

## The Impact on Partners

While these moms are dealing with the trauma of having breast cancer, their romantic partners are coping with living with the disease, too. "The effect on my family was devastating," says Padilla. "I thought it was harder on (my partner) Amy than it was on me. The night I shaved my head, I could see her eyes were welling up with tears, and

it was reflecting back to me all the fear, grief and heartbreak that this disease brings." Amy benefited from attending a caregivers' support group for partners of lesbians and gays with cancer at UCSF.

Barnes' husband became her "personal nurse," accompanying her to all of her treatments, ever ready with the 12-pack of Aquafina. There were the day trips he planned to cheer her up. And he purposely withheld his own fears knowing that his wife was scared, too.

While that hands-on attention is appreciated, some women may need to remind their spouses they don't need to be micro-managed. For instance, Williamson loves her husband's supportive hugs and encouraging comments, including his referring to her as "the prettiest bald person I've ever seen." Still, she occasionally gets annoyed with the well-intentioned barrage of reminders, such as, "Did you take your green smoothie shake or Vicadin?" Williamson's husband learned a lot by reading *Breast Cancer Husband: How to Help Your Wife (and Yourself) during Diagnosis, Treatment and Beyond* (Rodale, 2004).

Generally speaking, such behavior is reflective of how men respond to a family crisis, according to Scharlach. "The husbands are very worried about their wives who've been their primary emotional support. Who do they turn to now? They're not sure how to help, how to listen," she explains. "They want to help fix things. This is something they can't fix, and they can end up feeling very helpless and estranged from their emotional partner."

Gail Uchiyama, an oncology social worker at the Alta Bates Comprehensive Cancer Center, adds that the loss of libido during treatment, a redefining of sexuality, and intimacy and communication issues between partners can make for a stressful mix. One solution, says Uchiyama, is to open up a dialogue about such issues as body changes and lovemaking. "Some couples are able to do this on their own, but others would benefit from couples counseling," she notes.

## Helping Kids Cope

For these young mothers, telling their children that they have breast cancer adds another dimension to their list of worries. "I was so afraid of how my children would react," Williamson recalls. "They say, 'Mommy can you play? Can you do a puzzle?'"

*Continued on the next page*

## Breast Cancer

Continued from the previous page

zle? Can you get me juice?' They still need me. They're so little. I wanted to be present for them in every way.'

Before she started chemotherapy – which her children came to know as “angel juice” – Williamson explained the hair loss to them in a kid-friendly way. “I told them ‘Mommy is going to have some medicine that’s going to make her feel yucky, but it’s helping Mommy get well, and guess what the medicine does to Mommy? I lose my hair,’ and they started giggling ... As long as I wasn’t sad, I was hoping they’d interpret that as it’s going to be OK,” she says.

To prepare her children, Williamson occasionally wore the wig before her hair fell out. She has also purposely involved her

daughter in the selection of scarves, brushing the wig, and writing and illustrating upbeat messages (such as “Every day in every way I am getting better and better”) to post on her bathroom mirror.

Uchiyama encourages mothers with

**“Everybody walks this journey alone, but building support makes all the difference between feeling isolated and feeling connected.”**

– Psychologist Ilene Scharlach

breast cancer to take a positive yet honest approach when telling their children about the disease. Part of that process is allowing them to see you cry, which she says models the important lesson that it is normal to have and express a range of emotions.

“Kids want answers and they want reassurance. You need to tell them that you’re there to listen,” she explains. “You have to let children guide you. They’ll let you know what they’re ready to hear and when they’re ready to hear it.”

To help her daughter Ava cope, Hall-Mennes offered “as-needed explanations” and used simple language. “I’d watch for

signs of her being overwhelmed. She’d change the subject. She’d start talking about her toys again, and I’d follow her lead,” she notes.

Padilla’s daughter, Isabella, started to verbalize concern about her mother’s illness after Padilla’s mastectomy. “When I was crying with pain, she’d ask ‘Mama, what hurts?’ ... Even now she asks, ‘Why did your hair fall out?’ I told her Mama had a boo boo and the doctor made it better,” she recalls. “Still, she knows the word cancer and she uses it.”

Today, Isabella is 3 and Padilla’s outlook is good. “I have an awareness of the sweetness of the every day,” she says. “I delight in the things other parents take for granted. To me (it’s) so meaningful that I’m alive to take her to preschool.”

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To read Part I of our special series on breast cancer, see the October 2005 edition at [BayAreaParent.com](http://BayAreaParent.com)™.



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