[TRACK 5: SURVIVOR STORIES: WEIGHING THE PROS AND CONS]

Joan, Oncology Nurse: Part II

[Narrator]

Now that we’ve heard Jim’s story and you have identified your preference in making decisions, let’s move on to another important point: weighing the pros and cons in making a decision about cancer treatment. This is useful in not only deciding about treatment, but also in deciding whether to be part of a clinical trial. A clinical trial is a study in which a new cancer treatment is compared to a standard, or usual, treatment for a certain disease. We will look at how to weigh the pros and cons from the viewpoint of three women with ovarian cancer. Are there ways in which your situation is similar to any of the ones these women face? Have you thought about taking part in a clinical trial?

[Joan]

I’ve been working with Maria, LaVerne, and Rebecca. I’ve talked with them about opportunities to be part of clinical trials. Maria is a 35-year-old mother with three children in grade school. She lives in a small farming community located 80 miles away from the cancer treatment center. She told me that she is worried about the treatment side effects that can occur, and about the time that she might have to be away from her children. She wonders who will look after her children then. She is also concerned about whether she’ll be able to keep up with her other family activities and responsibilities that she takes great pride in.

[Joan]

LaVerne is a 64-year-old widow who lives near the cancer treatment center. She doesn’t trust the idea of a clinical trial. To her, the words sound like an “experiment” and she doesn’t want to become someone’s guinea pig, as she puts it. She worries that she will not live a normal life if she takes part in a clinical trial and that the demands of a clinical trial will take over her life.

[Joan]

Rebecca is a 22-year-old college student who lives with friends off campus. She has made it very clear to us on her health-care team that she will do anything that might cure her disease. She will consider any treatment, whether it is standard therapy or a clinical trial, as long as it fits her individual lifestyle and circumstances.

[Joan]

Each of these women has different needs and goals. So, how do I help them think about making important treatment decisions, like deciding whether to enter a clinical trial? I start with weighing the pros and cons, that is, the benefits and drawbacks. It is a fairly simple exercise and one that can help you with your decisions. Here’s what we do: First, get a sheet of paper. At the top of the paper, jot down the most important things in your life. They might include your family, your job, your goals, your hopes, or your dreams for the future. Now, draw a line down the middle of the sheet of paper. On one side, write down the pros of treatment, and on the other side; write down the cons. Look at each of the pros and cons and how they relate to the important things in your life or the dreams that you have yet to fulfill. Now put the sheet of paper away in a drawer and leave it there for at least a day. Take out the sheet of paper, reread it, and think about what you wrote. Make any changes in the pros and cons that you feel are needed. Finally, think about the decisions you must make in light of your list of pros and cons.
One of the biggest questions that people ask in making their list of pros and cons, and in making decisions about cancer treatment is, "What are my prospects if I choose this treatment over another?" Or, "How much longer can I expect to live if I choose this treatment over another?" Some doctors respond by giving statistics. Others refuse to even discuss them. Whether your doctor provides you with statistical information or not, don’t put too much faith in these numbers. Your chances of a cure depend on many things – not only on the type of cancer you have, but at what stage it was discovered, your general health, your family history, any other health conditions, and much, much more.

Remember that you are an individual, not a cancer statistic. Yes, statistical information can help you to sort out your different treatment options. This information can help you identify the risk of complications that may occur. But, statistics only show what has happened in general in large groups of cancer survivors. They cannot guarantee that a specific person -- you -- will be among those with improved chances for survival. You are a person with hopes, plans, and dreams. You are not a cancer statistic.

Now, let’s talk about cancer treatments that are called "complementary" or "alternative" therapies. Have you ever thought about using any of them? You may have picked up a newspaper or magazine article report on the "benefits" of alternative therapies. Or you may have heard about complementary therapies in your support group or from other cancer survivors. Complementary and alternative therapies are not conventional therapies. They are used either to "complement", that is work along with standard cancer treatment, or as an "alternative" instead of standard cancer treatment. Complementary therapy may include homeopathy, dietary changes, psychotherapy, social support, reiki, meditations, exercise, massage, and spiritual support that are used along with conventional or standard treatment to help improve quality of life during and after treatment. On the other hand, alternative therapies you may have heard about may include anti-neoplastons, hydrazine sulfate, and other pharmacological approaches that are "outside" of the use of standard therapy for cancer.