

bloom

Issue

09

August
2011

Reach to Recovery International - RRI

Reach to Recovery International is committed to improving the quality of life for women with breast cancer and their families.

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Countdown to the 16th
RRI Conference in Taiwan

Message from Ann Steyn

President of Reach to Recovery

Greetings to you all!

Many of us who have experienced breast cancer know the changes it makes to our lives.

For some of us the cancer journey gives us the opportunity to support and empower other women with breast cancer.

Three remarkable women, Colleen, Phung Thi and Gracey found a positive in their cancer journey and tell us their stories, (pages 8-10) and how they used their experiences to empower and support women in their communities.

The Cancer Support Community offers all of us the opportunity to share our breast cancer stories by participating in their M.A.P. project (page 3). This project allows researchers to use the information shared by the participants to help develop resources that will improve the quality of life for a breast cancer patient.

To learn more, visit their website at www.cancersupportcommunity.org and see the Cancer Survivor Registry.

In November 2010 the RRI Board of Management endorsed the International Psycho-Oncology Society's recommendation to have distress ranked as a 6th vital sign in cancer care. Read the progress being made on this recommendation (page 7). Bloom readers are also able to access a special free online IPOS edition on this subject.

To end your read on Empowerment we have an interesting article on the wonderful work that the Sunrise group in Jerusalem is doing for women in Palestine (page 5), and one on how a community initiative in South Africa resulted in funding for a mobile mammography van (page 6).

There are only two months before the Taiwan Conference - but it's not too late to register! I hope to meet many of you there.

Warm Reach to Recovery Greetings to you all!

Ann Steyn

Email annsteyn@reachtorecoveryinternational.org



Ann Steyn



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Issue 09 August 2011
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We respectfully acknowledge the Indigenous women of our global community, the traditional custodians of our environment.

Reach to Recovery International is supported by the UICC and Cancer Council Queensland





If you could...
change the course of
breast cancer survivorship
by simply sharing your
experience, would you?

Be counted: It's empowering

The Breast Cancer *M.A.P.* (Mind Affects the Physical) Project

For many, breast cancer has become a chronic condition due to the enormous scientific advances and breakthroughs that allow women to live with this once-feared disease for many years.

Although it may not seem so at first, this is actually phenomenal news for the millions of people who have battled breast cancer and the millions more who will be diagnosed in the future.

What was often viewed as a death sentence is now, for many, a long-term health management issue, and the message is becoming clearer that you can, in fact, "beat" breast cancer.

On the flip side, with the rise in survivorship, there is now also an urgent need to change how physicians and patients look at treatment.

Breast cancer patients and their physicians can take patient care to the next level by expanding their own vision of the disease from a narrow focus on the battle with the cancer itself to one that recognizes and identifies the full range of emotional and

social challenges patients face throughout the breast cancer journey - at diagnosis, during treatment and when treatment ends.

The first step for such long-term breast cancer survivor support is to understand what challenges each person faces after she or he has been diagnosed.

The Cancer Support Community's Research and Training Institute has launched a nationwide registry for breast cancer survivors.

With more than 3,000 members to date, the *Breast Cancer M.A.P. (Mind Affects the Physical) Project* is recruiting survivors to help other survivors by answering questions about the emotional and social needs that accompany a breast cancer diagnosis.

The first of its kind, the registry monitors survivors who have volunteered to share their breast cancer experiences to help researchers better understand the distress women experience during their cancer journey.

"Seeing so many of the *M.A.P. Project* participants wrestle with breast cancer

related-anxiety was so important to validating my own feelings of fear, especially about recurrence," said Elly Cohen, a breast cancer survivor and *M.A.P. Project* registrant.

"The *M.A.P. Project* is a way for me to help others going through a similar experience. Knowing that the information I share will be used to help develop resources that will improve others' quality of life is important to me."

Study findings will be shared with the breast cancer community in a yearly Index that will highlight trends and key findings. The Index will also provide recommendations for innovative ways to address the impact of the disease throughout the course of treatment and survivorship. The first Index will be released later this year.

"Our best resource in helping design new tools that support breast cancer survivors is the patients themselves," said Joanne Buzaglo, Ph.D., Senior Director of Research at the Research and Training Institute of the Cancer Support Community.

“The knowledge we have taken away from listening to our initial 3,000 registrants will help change how we look at the breast cancer world and better understand the survivor experience.”

In the meantime, people don't have to face the challenges associated with breast cancer alone.

Dedicated to providing support, education and hope to people affected by cancer, the Cancer Support Community offers support and resources to all people touched by breast cancer, from in-person support networks at its local affiliates to its Frankly Speaking About Cancer educational series that provides an in-depth look into the variety of concerns of cancer patients and their loved ones.

To access these resources and more, visit www.cancersupportcommunity.org

Participation is empowering!

The insights gleaned from the *M.A.P. Project* would not be possible without the voices of the thousands of survivors who have joined together to change the face of breast cancer care.

The more voices added to the registry, the more researchers can learn about the breast cancer experience.

To be a part of this groundbreaking movement, breast cancer survivors can join the *M.A.P. Project* by signing up online at www.breastcancerregistry.org or by calling +1-888-MAP-CSC9 (1-888-627-2729).

Oncologists, primary care physicians and oncology social workers interested in learning more about the registry should visit the website for more information.

The *Breast Cancer M.A.P. Project* is made possible through a generous grant from The Breast Cancer Fund of National Philanthropic Trust.

CANCER SURVIVOR REGISTRY
THE BREAST CANCER M.A.P. PROJECT

CANCER SUPPORT COMMUNITY
A Global Network of Education and Hope

Home Resources

4 out of 5 breast cancer survivors have experienced some form of distress
[Register today to help change the breast cancer journey](#)

Login

Username

Password

Login

[Forgot login?](#)

You are here: Home

Join the Movement!

There are more than 12.5 million cancer survivors in the United States. Thanks to advances in treatment, today, cancer is being managed more as a chronic disease, meaning more long-term treatment. While there is a great deal of research surrounding the medical/physical needs of survivors, very little research has been devoted to studying and addressing their emotional and social needs. In order to fully support women through the challenges breast cancer presents, it is important to identify these needs and develop effective programs that will help improve quality of life of breast cancer survivors.

The Cancer Support Community's Research and Training Institute recognizes that women who have faced breast cancer are more than patients, more than survivors and more than their breast cancer. That's why, with a generous grant from the Breast Cancer Fund of National Philanthropic Trust, we've started the *Cancer Survivor Registry: The Breast Cancer M.A.P. (Mind Affects the Physical) Project*, a new movement to identify and address the emotional and social needs that accompany a breast cancer diagnosis.

Newsflash NEW

When asked about their five greatest needs, breast cancer survivors reported:

- * Addressing fears of recurrence
- * Making healthy lifestyle choices
- * Financial support
- * Reducing anxiety
- * Addressing insomnia

Living with cancer: Empowering women in Palestine



Women affected by breast cancer attend a health education presentation at the Sunrise Group's new office in Hebron.

The Sunrise Group was established ten years ago in Jerusalem, the first psychosocial support group in Palestine for women living with breast cancer.

One of the Sunrise Group's main objectives was to reach survivors especially in rural and marginalized areas, which lack the necessary health services to educate and empower them.

Due to numerous restrictions and the economic burden on people who need to travel long distances, many women in the region are unable to attend meetings and participate in social activities any distance from their homes.

To overcome this problem, in March 2011 the Sunrise Group opened a new office in Hebron, the largest city in Palestine, located in the south of the country.

Through the new office, the Group has been able to identify patients and survivors, listen to their stories, experiences, answer their questions, and importantly increase awareness and education through lectures provided by professionals and through provision of health education materials.

For many women, the Sunrise Group provides them with their first opportunity to share their experience with other women who understand the breast cancer journey, to learn and share their stories and talk through concerns in a safe, comfortable setting.

"I have had cancer for ten years and only my husband knew," said one Group member, while another broke down in tears and was then comforted by others after expressing her worry of "How can I look after my children?" She is a widow.

The expanded Sunrise Group has become a vital service to help, advise and support women in the region, and its impact is noticeable, improving the quality of life of many survivors.

Right now the new Sunrise Group is actively assisting with preparations for the Patient's Friends Society-Jerusalem's 3rd cancer awareness event, which will take place in Hebron in October.

Through this event the Sunrise Group aims to convey the messages and experiences of these women to others, serving as models for survivorship and hope!

Visit the website to find out more!



PFS Jerusalem Sunrise women from Ramallah and Hebron meeting Dr. Sabatin (oncologist) after his lecture in Hebron



جمعية أصدقاء المريضة الخيرية - القدس

Patient's Friends Society - Jerusalem

PinkDrive South Africa



Since inception in 2009, PinkDrive has become one of South Africa's best-loved community initiatives and serves as an indispensable, tangible breast cancer organisation that powers a mobile mammography and an educational unit through the country with the message that Early Detection Saves Lives.

A Cause Marketing Fundraisers (CMF) initiative has been at the forefront of developing and implementing projects for the purpose of cancer education and awareness.

The educational unit travels to corporate and peri-urban areas in the Gauteng Province with the aim of providing various disadvantaged communities with accessible breast health education in a language they are comfortable

with and offering clinical breast examinations, so any referrals can then be made through local clinics or community health centers.

The PinkDrive is the only organization in Sub Sahara Africa that does mobile mammography screening. The mammography unit can screen up to 30 women a day and provides a service to the community valued at more than R30 000 a day.

This public private initiative with the Western Cape Department of health enables women to undergo mammograms and be screened for breast cancer in a state of the art mobile unit.

As a registered public benefit organisation the PinkDrive is afforded the opportunity to sustain the public sector work through their private sector endeavors.

These endeavours include activities such as Corporate Wellness Days.

The PinkDrive Corporate Wellness Days provide employers with the resources to pro-actively address risks by developing a health care and corporate wellness strategy within the workplace that comprises of educational and personalised breast health screenings.

In today's fast paced corporate environment increasing attention is placed on empowering employees with the means and knowledge to invest in their health and future.

Investing in organizational health and wellness empowers staff to increase productivity and efficiency and create the necessary support systems within the work environment.

"The tangibility of the project has resulted in community support, corporate social responsibility and has made a significant impact on the health of our nation.

The private and public sectors provide sustainable harmonious systems for ongoing health whilst our affiliations with the major sporting events in the country allows for much needed fundraising and community support" said Timna Kleinberg Russell, PinkDrive Director

To date the PinkDrive has been responsible for 1,444 free mammograms, 14,963 clinical breast examinations and has educated more than 19,780 South African women on breast cancer and the importance of early cancer detection.

For more information visit www.pinkdrive.co.za



The 6th Vital Sign

International experts unite: Overcoming the challenges in treating cancer-related distress

More research is needed to investigate the effects of screening and treatments for distress in cancer care, according to the latest edition of the international journal *Psycho-Oncology*.

The special edition includes a review of screening for distress and depression over 40 years in cancer care, 10 new papers examining aspects of cancer-related distress, and two brief reports on studies of screening for distress in inpatient and outpatient settings.

Screening for distress in breast cancer care would ensure that women affected by breast cancer have the support they need during treatment and beyond, to help empower recovery and survival.

Co-editor of the journal, Jimmie C. Holland MD, said a global focus on distress as the 6th Vital Sign could greatly improve the experience of cancer patients worldwide, enhancing patient care.

“The next obstacle to overcome for psycho-oncology is to address the social, organizational and economic challenges that prevent cancer patients from being routinely screened and treated for distress.

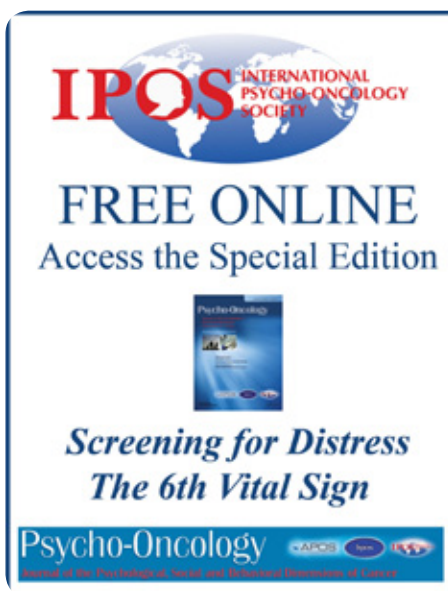
“We have a long way to go in understanding the effects distress can have on patients, and much more research is required to build scientific knowledge that can be translated into effective practice.

“Psycho-oncologists have a critical role to play in developing clinical guidelines that identify distressed patients, by routinely implementing a new screening standard for distress integrated with cancer care systems in all nations.”

According to Dr Holland, progress has been made in countries such as the US, Australia, the UK, and Canada, but more could be done on a global scale.

“Improving standards of care to screen for distress requires a concentrated effort on building government capacity in health service delivery, particularly in developing nations.

“Psycho-oncological research is vital to redefining cancer care systems worldwide to recognise distress as the 6th Vital Sign, to raise the benchmark in clinical treatment,” Dr Holland said.



International cancer organisations such as LIVESTRONG and the UICC have endorsed the International Psycho-Oncology Society’s recommendation to revise cancer care standards and clinical practice guidelines by ranking distress as the 6th Vital Sign in cancer care.

President of IPOS and co-editor of *Psycho-Oncology*, Professor Maggie Watson, said distress must be a primary concern in the treatment of cancer patients.

“The high prevalence of distress in cancer patients world-wide has been well documented, with significant impacts on patients’ basic functioning,” she said.

Professor Watson, together with IPOS Vice-President, Dr Barry Bultz, worked with IPOS Board Members from around the world to develop the revised international standard.

“We expect that recognising distress as the 6th Vital Sign will improve the treatment of cancer patients, improve outcomes for cancer patients, and improve the effectiveness of cancer care systems around the world,” Dr Bultz said.

Board member of IPOS, and leading proponent of the recommendation, Professor Jeff Dunn, said IPOS was collaborating with the World Health Organisation to further promote global efforts to rank distress as the 6th Vital Sign in cancer care.

“WHO and IPOS share a joint commitment to comprehensive cancer care, championing the principle to treat the whole person, not just the cancer.

“Our approach is wholeheartedly embraced by cancer patients, survivors, and supporters around the world.

“Importantly, WHO support provides a mandate for all nations to take progressive action to integrate distress screening and management into cancer care practice,” he said.

“Any such action has the potential to transform international cancer control and enhance the wellbeing of cancer patients and their loved ones during treatment and beyond.

“The effect of distress on cancer patients, families and the community has largely been overlooked in models of primary care, despite its serious consequences on patients’ prospects of long-term survival and quality of life,” Prof Dunn said.

In routine medical practice Vital Signs assess basic functioning, and include body temperature, pulse (heart rate), blood pressure, respiratory rate, and pain.

Bloom readers can access the Special Edition of *Psycho-Oncology* for free online and are welcome to join IPOS today!

Reach Towards a New Horizon

16th Reach to Recovery International
Breast Cancer Support Conference



Countdown to Taiwan!

The countdown has begun to the **16th Reach to Recovery International Breast Cancer Support Conference** in Taiwan this November. In this edition of Bloom, we share the personal stories of three inspiring women who have received travel grants to attend the conference!

Colleen Thompson

**BICC & Support4Cancer
Ballarat, Australia**

My breast cancer story began when I was 33 years old. I was breast feeding my daughter Demi, who was nine months old at the time. Tess, my eldest daughter, was in prep school. She was five. I thought I had mastitis, so I went to see my GP. She recommended that I have the lump looked at, because just two weeks earlier I had found out I was a BRCA1 carrier...

Our family had decided to get genetic testing, because I lost my mum when I was 13, she was just 44 years old, and my sister Julie was 37 and five months pregnant when she was diagnosed with breast cancer.

There were also other members of my Mum's family who had passed away from either breast or ovarian cancer. I also lost my dad to bowel cancer in 2006.

All five siblings, including my brother are BRCA1 carriers. I had a mammogram and ultrasound, followed by a biopsy. Two days later I found out I had breast cancer.

Within a week the breast had been removed. I began chemotherapy six weeks later - it was the most challenging experience I have ever had. I thought child birth was bad, but chemo was worse!!

Halfway through treatment I was still unwell with nausea. I went to my GP and she discovered I was seven weeks pregnant!! Although my oncologist and gyno had concerns, the pregnancy gave me hope and something to look forward to.

I carried the pregnancy and gave birth to our little miracle Polly Amy. I hemorrhaged severely during Polly's birth and was rushed to theatre for a blood transfusion. This was an experience that I would not wish on anyone. The pain was excruciating.

I was lucky I could feed Polly with the one breast, which was a very special time to bond. Six weeks after Polly was born I had to have a full hysterectomy, to reduce the chance that the cancer will return.

When Polly reached six months I was advised to have the other breast removed. I had the breast removed and have since had reconstruction, which does make me feel more womanly, although I still have the nipple and tattooing to go. These will come when I am ready.

Since my diagnosis I've launched BICC-Breast Cancer In City/Country, a support group for young woman travelling the breast cancer journey. We meet monthly just to have dinner and to chat about our families. This is a special night connecting with other woman in the same situation.



In 2009 I opened Support4Cancer. This centre is for all aspects of cancer. We provide information, resources and help to guide patients, families, carers and friends to the right support network. Support4Cancer is well recognised in my local community. I was lucky enough to win 2009 Citizen of the Year and then last year took out the GCU Ballarat Commerce 'People's Choice Award'. I am also in three Who's Who of Australian women novels. It's nice to know that my work is recognised in the community.

I am also a community liaison person for Breast Cancer Network Australia (BCNA) and have had the honour of many wonderful experiences with the amazing BCNA CEO, Lyn Swinburne.

I can honestly say travelling the cancer journey has been rewarding and I am fortunate enough to have a wonderful husband to support me and our three gorgeous daughters, who all make me smile every day!

HUONG Phung Thi

Breast Cancer Club, Hanoi, Vietnam

I am an expert of environmental management with over 26 years of experience. I very much love both my job and my family. One day in April 2007, I found a tumor on the right breast, but I think it is normal and was busy preparing my son for finishing secondary school.

In August 2007, I went to National Cancer Hospital in Hanoi Vietnam for checking and received serious result: Breast Cancer. I was very shocked and my blood pressure went up to 165/120 at once. I must have treatment with surgery, chemotherapy and radiotherapy for 9 months...



This time is terrible in my life. However, I have very good help from my husband, family, friends and colleagues.

I read many documents related to cancer and breast cancer in website, books, reports.

I started to understand my situation and period for treatment. I try to fight with breast cancer and none stop working in my office.

I continued to be busy with my work in my office and I tried to work to complete my responsibilities and unintentionally forgot I that am a cancer patient!

After several years, my result in the office were very good and I received a promotion, becoming manager of a department in my office, all the staff very highly appreciates my role in the office.

In 2009, Oncologist-Dr.LINH Dieu Nguyen invited me to Breast Cancer Club(BCC) in the first some month established. This is unique Breast Cancer Club in Vietnam.

Next month, I joined the BCC as a volunteer and with all my heart when I understand charitable functions and activities of BCC.

On the other hand, I recognized that many cancer patients very little information on cancer and very worried, hopeless about it.

Understand thoroughly with the same situation of other breast cancer patients and hopefully all people never have cancer, I combined with Oncologists and other members in BCC to collect information in website in the world, reports, books for translation, edition, presentation and communication for breast cancer patients, their relative as well as consideration people in a Saturday of the end of every month.

We have been supplied information on breast cancer treatment methods, suggestion, consultancy and explain all asking for patients.

At present, after two years we distributed 20 topics, answer, consultancy many questions and we have a long list of patients to join in this club with over 2,000 people.

Many patients volunteer actively with us to distribute information from the BCC to other people in the local area, cities and provinces.

Many patients are sad, disappointed, crying then after joining the club they have a good feeling, positive attitude and are smiling, even they are singing with all members in the club.

They feel happy when they meet together in this club. BCC become very good forum for cancer patients.

Some poor patient to be moved to tears received assistant money immediately at club from all member pockets when they said about their difficult situation.

Leaders and Managers of this hospital and Cancer Institute are very highly appreciate and supportive of our club activities.

Next every month a volunteer patients group will registration to present and discussion more very good topics in the club follow our control. The participation, discussion, sharing and happiness from patients are encouraging me more inspiration working and look good ways for them.

It's motive power make me more love of life, youthfulness and learning more social knowledge as well as people vision.

We are happy when we join this club and hopefully can be of more assistance for other breast cancer patients in Vietnam and in the world. However, my experience in BCC only from my head and volunteer only.

I very happy if I join in RRI workshop, I will share my experience and present our 20 topics in BCC as well as learn very much experience from all members in the world and I will collect this information and would be communication for breast cancer community in Vietnam.

Register today on the conference website!

www.reachtotherecovery2011.org

Reach Towards a New Horizon

16th Reach to Recovery International
Breast Cancer Support Conference



Gracey Varghese, a breast cancer survivor from Chennai, India, shares her personal experiences of helping Indian women with breast cancer overcome the stigma associated with breast cancer and anxiety about treatment.

Mehrunissa, a young mother diagnosed with breast cancer was at the Cancer Institute waiting for her turn to meet the doctor for charting her treatment process.

I happened to see her weeping and on enquiry she mentioned that now with this 'dreadful disease' her husband is sure to abandon her as she would now be 'useless' to him as she will not be 'normal'.

After speaking to her for a while I realized that her husband had in fact accompanied her to the hospital but was not willing to be seen with her due to the stigma attached to her disease.

He was waiting outside the waiting room. I then spoke to her at length assuring her that once her treatment is complete she can continue her 'normal' life.

But she was not convinced. It is then that I told her that I was a survivor and that I am now living life 'normally'.

That brought an astonished look on her face and then she asked me to speak to her husband to convince him.

I then spoke to her husband separately. He was misled by his relatives that cancer is a curse and in case he continues to live with her, he might also be a victim.

After an hour-long chat, he seemed convinced and I could see signs of a smile on his lips. Then Mehrunissa was also called into the room and as a first step both of them shook hands with each other.

I met her after six months when she had come for her routine check up and this time her husband was seated next to her while they were waiting to see the doctor. My heart was filled with joy.

One day I got a call from the Psycho-Oncology department of the Cancer Institute asking me to meet Lakshmi who was diagnosed with breast cancer but was refusing to take treatment.

I rushed to the Institute and saw Lakshmi with her daughter sitting in the waiting room with her head bent and weeping. Lakshmi was a widow and her daughter had just completed her graduation.

Lakshmi was employed in a school in a temporary role. They somehow managed to survive on her meager salary. She said she did not have the money to spend on treating her disease and she believed that cancer could not be cured.

She also showed me some write-ups from local dailies and some printed handouts which she was carrying which confirmed that there is no cure for cancer.

That being the case, she said that hospitals and doctors were out to make money by offering some kind of treatment and she hence had decided to go home and wait for her death.

Whatever little money she had saved up was for her daughter's survival and not for wasting on 'useless treatment', as she called it. I patiently listened to her, and then turned to her and said 'what if I tell you there is cure for cancer and that you can live a normal life after treatment?' She looked at me with a mock smile on her face and asked me 'Are you canvassing for the hospital?'

I then told her that I was a breast cancer survivor, but she refused to believe and her mock smile only got larger and said 'you are lying, you look so nice and healthy, I just can't believe it'. At this point I pulled out my patient identity card, issued by the Institute.

When she saw my card, her entire body language changed from negative to positive.... she got up from her seat and fell at my feet and said 'I am now seeing God in front of me'.

She agreed to take the treatment and went straight to meet the doctor. Three months into her treatment, I met her, she looked cheerful and strong. This time she had come alone, her daughter had taken up a job. Lakshmi herself was planning to go back to her job at the school.

On one of my usual visits to the Institute, I met Krithika, a young mother of two little children who was posted for surgery. She was surrounded by her husband and relatives but she was sitting grimly on her bed. There was a sense of gloom in the room as everyone had a worried look on their faces.

I introduced myself as a breast cancer survivor and let them know I was there to talk to her. She had several unanswered questions and one by one she started asking them: Will I pass on my illness to my daughters? Who will marry the children of a cancer patient? Will I be alive to take care of my children? Will my husband accept me and love me as earlier?

After talking to her for some time, she seemed to have gained some amount of courage and she was prepared for the surgery.

I met her after a month and this time she looked so strong and cheerful.

She had completed her fourth cycle of chemotherapy and was on the road to recovery. Her husband was with her with his arms around her – all her doubts seemed to have been erased!

Reach Towards a New Horizon

16th Reach to Recovery International
Breast Cancer Support Conference



Over 540 delegates registered from 26 countries!



Visit the
conference
website now
to view the
program!

Take a tour through Taiwan's famous Night Markets

Delegates will be able to enjoy five half-day travel tours to explore Taiwan and Taipei culture, including Taiwan's famous Night Markets!

Many people know that Taiwan is renowned for its beautiful landscape, but did you know that it's also popular for its delicious snacks, which are called 'xiaochi'.

Taiwan's Night Markets are the best place to taste-test xiaochi and explore local culture.

No matter which route you take, you will have an opportunity to experience authentic Taiwanese culture and enjoy shopping, eating, drinking, and lively games and entertainment.

For visitors to Taiwan, the Night Markets are a must see!



Please visit the conference website
<http://www.reachtotherecovery2011.org/SpecialEvents.asp>
to view details of each half-day travel tour - and register today!

IPOS

INTERNATIONAL PSYCHO-ONCOLOGY SOCIETY



13th World Congress

16 - 20 October 2011 - ANTALYA/TURKEY

Integrating the Psychosocial Domain into Routine Cancer Care: Bridging Continents and Cultures for Global Cancer Support

The 13th World Congress of Psycho-Oncology will include symposia, oral abstract presentations and posters addressing a variety of disciplines within psychosocial oncology.

The following plenary speakers have been confirmed.

Tuesday, 18 October 2011

Cultural Myths and Taboos Met in Cancer Care

Michel Daher MD, Lebanese Cancer Society, Lebanon

Lifestyle Challenges in Psycho-Oncology: Nutrition and Exercise

Wendy Demark-Wahnefried PhD, University of Alabama at Birmingham Comprehensive Cancer Center, USA

Wednesday, 19 October 2011

Depressive and Bipolar Disorders in Cancer Care

Ulrik Malt MD, Oslo University Hospital, Norway

Thursday, 20 October 2011

Palliative Care

Professor Michael Silbermann, Middle East Cancer Consortium, Israel

Women as Caregivers in the Middle East

Amal Samy Ibrahim PhD, National Cancer Institute, Egypt

Brain Vulnerability to Chemotherapy Toxicities

Tim Ahles PhD, Memorial Sloan-Kettering Cancer Center, USA

**Visit www.ipos-society.org/ipos2011
for further details.**



Global Kitchen



This edition, Global Kitchen brings you a dish from Turkey

Welcome to Global Kitchen, where we feature exotic recipes and home cooking from cultures around the world.

Tomato Dolmas

Ingredients

- 8 vine-ripened tomatoes
- 1 tbs olive oil
- 1 brown onion, halved, thinly sliced
- 2 tbs pine nuts
- 150g (3/4 cup) long-grain rice
- 310ml (1 1/4 cup) water
- 1 tsp ground cumin
- 1/2 tsp ground allspice
- Salt & freshly ground black pepper
- 500ml (2 cups) chicken stock



Method

Preheat oven to 180°C. Use a sharp knife to slice the top off each tomato. Reserve tops.

Use a teaspoon to scoop out seeds and flesh, leaving a 1cm border.

Place tomato shells in a shallow roasting pan.

Strain tomato pulp through a fine sieve and discard the juice.

Coarsely chop tomato pulp and set aside.

Heat the oil in a large saucepan over medium heat. Add the onion and pine nuts and cook, stirring occasionally, for 6 minutes or until onion softens and pine nuts are golden brown.

Add the rice and water, and bring to the boil. Reduce heat to low and cook, covered, for 12 minutes or until rice is tender.

Add the cumin, allspice and reserved tomato pulp, and stir until combined.

Season with salt and pepper.

Spoon the rice mixture among tomato shells and top with the reserved tops.

Pour over stock and cover tightly with foil. Bake in preheated oven for 45-50 minutes or until tomato is tender and filling is hot. Remove from oven.

Transfer to a platter to serve.

*Note: You can prepare the dolma stuffing one day ahead. Store in separate airtight containers in the fridge.

If you have a recipe to share, please email info@reachtorecoveryinternational.org

Reach to Recovery International Governance Structure

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EVENTS

ANTALYA, TURKEY October 2011:

**13th World Conference of the International Psycho-Oncology Society
October 16 - 20, 2011**

For more information visit www.ipos-society.org/ipos2011

TAIPEI, TAIWAN November 2011:

**16th Reach to Recovery International Breast Cancer Support Conference
November 10 - 12, 2011**

For more information visit www.reachtotherecovery2011.org

VIENNA, AUSTRIA March 2012:

**8th European Breast Cancer Conference
March 21 - 24, 2012**

Go to www.ecco-org.eu/Conferences-and-Events/EBCC-8/page.aspx/2163

Our mission

Reach to Recovery International is built on a simple yet universal principle: a woman who has lived through breast cancer and gives of her time and experience to help another woman confronting the same experience is a valuable source of support. Reach to Recovery International is committed to working to improve the quality of life for women with breast cancer and their families through a wide range of services offered worldwide.

For more information about RRI and bloom, please email info@reachtotherecoveryinternational.org or visit our website at www.reachtotherecoveryinternational.org

