

bloom

ISSUE 21 AUGUST 2014



Reach to Recovery International (RRI)

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

Upcoming Events

Beijing CHINA

18th Reach to Recovery Breast Cancer Support Conference

16 – 19 September 2015

www.reachtorecoveryinternational.org



Lisbon PORTUGAL

16th World Congress of Psycho Oncology

20 - 24 October 2014

www.ipos-society.org.ipos2014

Tel Aviv ISRAEL

BY2 - 2nd Breast Cancer in Young Women Conference

06 - 07 November 2014

Texas UNITED STATES

8 San Antonio Breast Cancer Symposium

9 - 13 December 2014

www.sabcs.org

Melbourne AUSTRALIA

2014 World Cancer Congress

3 - 6 December 2014

www.worldcancercongress.org

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.

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Held in conjunction with the Clinical Oncology Society of Australia (COSA) Annual Scientific Meeting

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bloom

Bloom is published by Reach to Recovery International. Contributions to Bloom are welcome, please email info@reachtorecoveryinternational.org. For more information about RRI, go to www.reachtorecoveryinternational.org.

We respectfully acknowledge the Indigenous women of our global community, the traditional custodians of our environment.



Reach to Recovery International is a program of the Union for International Cancer Control and is administered by Cancer Council Queensland.



Message from Cathy Hirsch - President of RRI



Cathy Hirsch

Before delving into the theme of this issue, we would like to bid farewell and express our sincere gratitude to our much-valued colleague, Megan Dwyer, who has moved on to become Sales Manager for International Conventions at the Brisbane Convention and Exhibition Center. A co-founder of Amazon Heart Thunder, Megan first teamed up with Reach to Recovery International as Conference Manager for the 15th RRI Breast Cancer Support Conference in Brisbane. She subsequently became Executive Projects Manager at Cancer Council Queensland, but continued to offer her experience and expertise to virtually every aspect of the operation of RRI. Among other things, Megan continued to assist in planning RRI conferences held around the world and played key roles in developing the current RRI website, establishing RRI's Guiding Principles and Membership Code of Conduct and Training Guidelines, and defining Bloom as we know it today. Her calm manner and laudable skills are already sorely missed!

The theme for this issue is **Reducing the breast cancer risk through a healthy lifestyle and diet.**

Most of us will never know exactly what series of biological and environmental events converged to trigger the development of our breast cancers. Although some cancers can be linked conclusively to genetic mutations and research has established strong links between certain lifestyle choices and breast cancer, the vast majority of us were not at particularly high risk of developing it. That is, until we did. Could we have prevented our diagnoses if we had done things differently? Are there steps we can take to prevent recurrence? What can our daughters do to lower their breast cancer risks? We explore these questions in this issue of *Bloom*.

Professor Karima Elshamy, DNSc, Vice President of the African Organization for Research and Training in Cancer (AORTIC) for North Africa, tackles the question of reducing the risk of developing an initial breast cancer. She outlines a number of steps that should be taken starting in the teenage years and continuing into adulthood. The list includes engaging regularly in vigorous exercise, modifying our diets, avoiding certain toxins, and managing stress.

According to Dr. Sandi Hayes and Ms. Kelly Prosser of the Queensland University of Technology, physical activity plays a pivotal role in reducing breast cancer risk, perhaps more so than any other factor we can control.

They categorize types of physical activity based on intensity and explain exactly how much and how often we should exercise.

Exercise remains important even after a breast cancer diagnosis to reduce the risk of recurrence. Breast Cancer Network Australia (BCNA), has developed a booklet, *Breast cancer and Exercise*, that's designed to help women decide on and commit to a manageable exercise program.

Cancer Council Queensland (CCQ) is taking a population-wide approach to promoting healthy lifestyles and thereby lowering cancer rates. RRI Chair Jeff Dunn explains that CCQ has introduced an on-line program called QUEST, which consists of tools and resources that can help schools and other organizations teach strategies needed to stay healthy.

Several *Bloom* readers are living proof that physical activity and positive lifestyle choices enhance our lives after breast cancer. Sharon Cohrs of Australia reports that, within a few months of completing surgery and chemotherapy, she climbed to the top of the world's highest mountain in 2011! After surviving her own breast cancer, Anita Mital of India developed a passion for helping other women fighting the disease. She described how that passion transformed her from a sedentary, stay-at-home person into a physically active volunteer who travels throughout Mumbai to meet with new patients.

Taiwan Breast Cancer Alliance (TBCA) introduces us to Jian-qiu, a 21-year survivor whose breast cancer experience inspired her to adopt a new approach to food. Jian-qiu, who was already a vegetarian when she was diagnosed, committed to cooking only with whole, fresh, and natural foods. She eventually opened a vegetarian restaurant and went on to publish several cookbooks. Jian-qiu shares her recipe for a healthy vegetarian chili in this issue's *Global Kitchen*.

Josephine Bamuwamye of Uganda was a widowed mother of two living in Nairobi, Kenya when she was diagnosed with breast

Continued from page 03

cancer 14 years ago. She describes the difficulties and challenges she encountered and overcame before moving home to Uganda and finding her silver lining in the form of the Uganda Women's Cancer Support Organization, for which she has volunteered for 6 years.

We also share news from several of our member organizations.

- Donna Ukraine will hold its annual Day Against Breast Cancer in Ukraine on 2-3 October, 2014 and has provided a website you can access for more information.
- Pink Ribbon Pakistan is working to establish Pakistan's first dedicated breast cancer diagnostic and training center. Land for the center has already been acquired, and funds are currently being raised to build a state-of-the-art facility.
- The results of a study by AORTIC of North Africa suggest that an informational program presented in a single day can significantly raise women's awareness about breast cancer and early detection methods and could lead to improved detection by way of breast self-examination.
- Breast cancer patient Jayne Coe has worked with Zonta Club of Redcliffe in Queensland and a Brisbane film production company to create a documentary for newly diagnosed breast cancer patients. The film, *Side by Side*, covers all stages of the breast cancer journey and provides practical advice and information.
- The Association for Women with Breast Cancer of Italy describes its many accomplishments since its inception 38 years ago and reports that it is now supporting very promising breast cancer research.

Plans are progressing for the 18th Reach to Recovery International Breast Cancer Support Conference. The Chinese Cancer Rehabilitation Society (CCRS), its parent organization, the Chinese Anti-Cancer Association (CACA), as well as the Chinese Breast Cancer Society (CBCS) and TrendsHealth Magazine are working tirelessly to develop an agenda filled with cutting-edge information, topical discussion, as well as fellowship and fun. I hope to see all of you in Beijing in September 2015!

Email your bloom submissions!

Email your *bloom* submissions! The theme of the next edition will be *Complementary therapies*. Submissions close 10 October 2014. Please send submissions in Microsoft Word format with any photos to info@reachtorecoveryinternational.org

How healthy living has helped me as a survivor

By Anita Mital

I was diagnosed with breast cancer in 1999, when I was 50 years of age, and ever since then my life has revolved around memories of chemotherapy and radiation.

Cancer has taught me that life will throw challenges but one can overcome them with resolution. One has to train the mind to be positive, be a fighter and never accept defeat.

Today, my main goal is to make cancer patients smile and spread the message that cancer is not contagious and is not a stigma. When I received my own diagnosis, I was too shocked and numb at first to react. I did not know what I was going through but slowly I realized that I had to fight. This was scary. I felt anxious at times and feared the worst.

Honestly, there is a lack of information and awareness about this disease. In India, it is associated with many a myth. My husband, two daughters and my extended family were all pillars of strength to me during my cancer journey. In such times, a loving family makes the biggest difference. They never left me alone, always ensured that I was taken care of and tried to cheer me up.

I definitely had my down moments, my whole outer appearance changed, even the color of my skin. I was depressed. Then I met the volunteers of V Care, who provided me with appropriate psychological and emotional support.

After I was cured, I decided to join the very NGO that helped me during my difficult times. It wasn't an easy task for me, going to the very hospital where I had been treated to see patients day in and day out. Working with cancer patients takes commitment, a selfless and positive

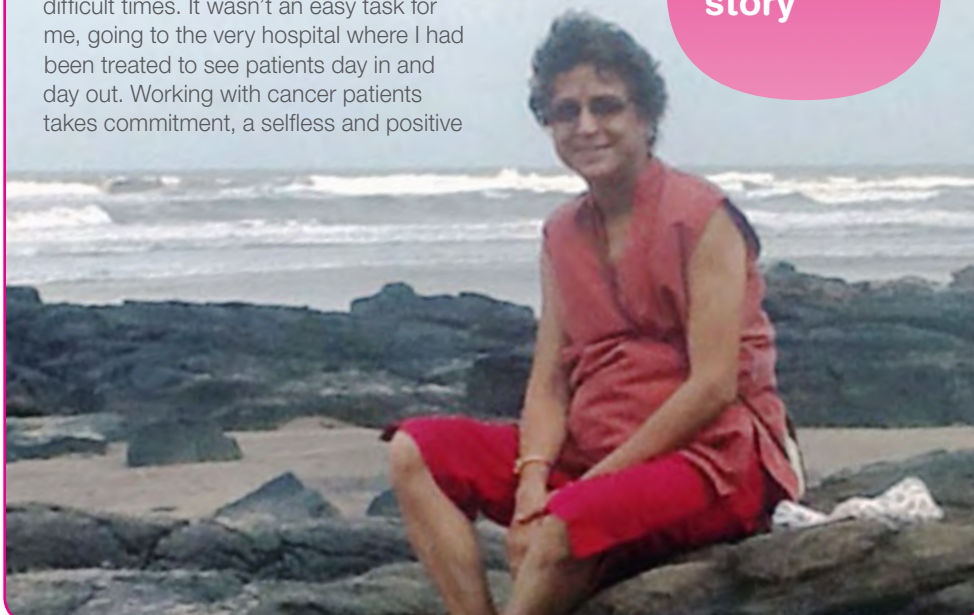
attitude, a cheerful bent of mind and the ability to cope with stress, as the work is emotionally demanding and can be draining at times.

In my own case, the disease was caught at an early stage when it could be treated effectively. Even though my cancer and treatment are well behind me, I know it is important to take care of the body and go for periodic check ups. Eating a well-balanced diet, exercising, and living a healthy lifestyle have helped me survive and live life to the fullest.

Fifteen years later, at 65, I am blessed with four grand children and a happy family. It is my 10th year of working with V Care. My family quips that when I was young I stayed at home, but now I am always out, cheerfully commuting by buses and trains in Mumbai to be a volunteer with V Care. I like what I am doing. It has given me meaning and direction in life. Nothing is more important to me than the smile I see on patients' faces as I interact with them.

Each day is a blessing and I look forward to it.

a
personal
story



Breast Cancer Network Australia (BCNA) Breast Cancer and Exercise booklet

We know that regular exercise has enormous benefits for our general health and wellbeing, and in the prevention of diseases such as diabetes and heart disease.

There is also good evidence that exercise can reduce the risk of breast cancer recurring, with one large observational study finding that regular, moderate exercise reduces the risk by 24 per cent.

Regular exercise during and following breast cancer treatment has many additional health benefits for women diagnosed with breast cancer. It can help to improve physical and emotional wellbeing, including confidence and mood, sleep, bone density and muscle strength.

It has also been shown to help prevent or manage some side effects of breast cancer treatment, including weight gain, fatigue, symptoms of menopause and lymphoedema, joint stiffness and nausea.

Breast Cancer Network Australia (BCNA) Breast Cancer and Exercise booklet provides women with reliable and comprehensive information about exercising after a breast cancer diagnosis.

The booklet was developed in consultation with women diagnosed with breast cancer, health professionals and researchers, and contains information on the benefits of exercise, weight loss and diet, as well as offering practical tips about keeping active, based on the experiences of other women and an exercise diary.

BCNA CEO Maxine Morand, herself a breast cancer survivor, says it is important that women are supported through clinical information and first-hand advice from other women.

“Exercise is a really important part of staying well after a diagnosis of breast cancer. This booklet provides reliable information about the recommended amount of physical activity, types of activities women can try and practical strategies from other women about how to keep active,” Maxine said.

Figures released by Cancer Australia in 2012 show one in four women with breast cancer are unaware of the benefits of regular physical activity after a diagnosis of breast cancer.

Research suggests that lifestyle factors such as a moderate level of physical activity may reduce the risk of breast cancer recurrence by 24% and the risk of death by

The Breast Cancer and Exercise booklet covers:

- The benefits of exercise
- When it's safe for women to start exercising
- The amount and intensity of exercise that is recommended to women
- Examples of exercises that women can try
- Practical tips to keep women motivated, and overcome common hurdles like exercising in the cold
- Writing exercises to help women identify why exercise is important to them, and set realistic goals to keep them motivated.
- The facts about exercise and lymphoedema
- Information and practical tips to help women maintain a healthy weight and healthy diet
- A list of exercise programs that are available around Australia
- An exercise diary to help women keep track of their exercise



About Breast Cancer Network Australia (BCNA)
Breast Cancer Network Australia (BCNA) is the peak national organisation for Australians personally affected by breast cancer, and consists of a network of more than 95,000 individual members and 300 Member Groups. BCNA supports, informs, represents and connects Australians affected by breast cancer. BCNA works to ensure that Australians affected by breast cancer receive the very best support, information, treatment and care appropriate to their individual needs. Visit us at www.bcna.org.au to find out more about our programs and services, including the free My Journey Kit for women newly diagnosed with breast cancer.

more than one third when compared with inactive breast cancer survivors.

BCNA often hears from our members that while there is a lot of information and advice about exercise available for women, much of it is conflicting and confusing.

Maxine says many women can start exercising any time during or after treatment for breast cancer.

“In general, the earlier you start the better, but it is never too late. Low impact activity such as walking or bike riding is a great way to start,” Maxine said.

Research suggests that any amount of exercise is better than none, and more is generally better than less. It is recommended that women diagnosed with breast cancer try to undertake the same amount of exercise recommended for all Australian adults – at least 2 ½ hours of moderate intensity exercise per week (or 30 minutes five times a week).

Breast Cancer and Exercise booklet is free and can be ordered from BCNA by calling 1800 500 258 or downloaded from www.bcna.org.au

All women can act now to help beat breast cancer

By Josephine Bamuwamye
Breast Cancer Survivor
A Board Member at UWOCASO

My name is Josephine Bamuwamye, and I am a retired midwife, having formerly worked with Pumwami maternity hospital in Nairobi, Kenya.

One day in February 2000, when I was doing a breast self-examination, I noticed that my left breast appeared bigger than before. On palpation, I felt a lump in my breast. I became concerned and I talked to a friend about my observations. The friend then took the initiative to examine both my breasts. However, her findings were contrary to mine: she reported not feeling a lump in either breast. In my mind, I knew she felt the lump but didn't want to worry me. The following day, I went to a clinic in Nairobi where I was examined by a doctor who told me to go immediately to Kenyatta National Hospital.. This scared me but she emphasized: "Go now".

I didn't go that day but rather I went back home and talked to my children about it as well as a female neighbor. My neighbor was scheduled to undergo breast screening at the same hospital, and she suggested that we go to the hospital together. Once there, a doctor examined me and found a lump in my left breast. He later examined my neighbor and found that she had a breast lump as well. The doctor then sent us for needle aspirations and advised us to come back for the results in one month.

The month of waiting for results was a very difficult one, with the fear of what would be the outcome of the investigations. In addition, many people kept on coming to my house and would advise me against mastectomy, saying the life of a woman is in the breast. Others would share sad stories of their relatives who died of cancer and they would say that I was going to die, too. Some would suggest to me to use Chinese medicines and others would bring people to pray for me. Among the people who came, I cannot forget one lady in particular -- also named Josephine -- who advised me to accept mastectomy. She said, "Josephine, if they find out that you have cancer, just allow the breast to go and save your life." She had been a victim of breast cancer but she survived after mastectomy.

At the end of the month-long wait, my neighbor and I went back to Kenyatta National Hospital for the results. The news for my neighbor was good -- the results were negative. I was not as fortunate. The doctor told me that I had cancer in my left breast and advised that the breast had to be removed immediately. I broke down, cried and blamed God for allowing such a disease to fall on me.

I had lost my husband in a traffic accident after only 10 years of marriage. I was looking after my children as a single mother and now I was newly diagnosed with breast cancer. It was a trying time for me and my children.

I accepted mastectomy plus the removal of axillary lymph nodes, and later started on chemotherapy. I experienced hair loss on the whole body, my tongue became black, my skin darkened, I had nausea and sometimes vomiting. My body became very weak.

After a break in treatment I underwent radiotherapy daily for 25 days. Other patients advised me not to pour water around the area where radiotherapy was done until after two weeks. I was put on monthly review, then every two months, then every four months and finally every six months.

After two years had passed, I underwent an abdominal ultrasound, chest x-ray and CT scan of the head. Although the results were good, the doctor recommended the removal of my uterus because I was at a high risk of developing cervical cancer. He advised me to undergo a total hysterectomy, which I agreed to do.

One month after the hysterectomy, I was examined and the doctors said I was doing well. I was advised to continue visiting the breast clinic.

Two years later, I joined a survivors group in Nairobi, Kenya which made me so happy. I was welcomed by the late Mary Onyango, may her soul rest in eternal peace.

We were trained to start doing outreach through Reach to Recovery. We had another group at Agha Khan hospital and we used to conduct outreach programmes in different Communities.

On 8 Dec 2007, I returned to my home country of Uganda. I looked for a survivors' group and I finally discovered Uganda Women Cancer Support Organization (UWOCASO). I visited their offices and I was welcomed by the Chairperson, Speciosa Kabwegyere, the Public Relations and Advocacy Officer, Gertrude Nakigudde and other survivors. I joined their outreach team six years ago and we are currently partnering with Uganda Cancer Institute, doing outreach and patient counselling. We also conduct community outreach in schools, hospitals, churches and mosques to create awareness about cancer of the cervix and breast. I thank UWOCASO for their support and allowing me to be part of the survivors group.

I am now a 14-year survivor of breast cancer. In addition to my volunteer work with UWOCASO, I have also volunteered as a counsellor at Uganda Non-Communicable Disease Alliance (UNCDA), and I volunteer at Uganda Martyrs Catholic Church Namugongo. I am thankful to God for healing me and giving me a new life.

I advise everyone to love your body and make time to do breast self-examination at least once a month. Go for routine screening for cervical cancer. Early diagnosis can mean a better diagnosis and higher chances of recovery.

Effect of one day training program on raising women's awareness regarding knowledge about breast cancer and early detection methods at Mansoura City, Egypt



Prof. Dr. Karima Elshamy, DNSc,
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AORTIC Vice President of North Africa



Introduction

About 1.7 million women's are diagnosed with breast cancer each year, and more than 500,000 women die of the disease. While global incidence rates are increasing, the number of women surviving breast cancer has also continued to grow, with approximately six million women alive today who have been diagnosed with breast cancer in the past five years. At the same time, women diagnosed with metastatic breast cancer only have a median survival of three years and the majority of breast cancer deaths (90%) are due to cancer metastasis, with clinical treatments unable to effectively treat many advanced and complex breast cancer cases.

The psychological impacts of breast cancer can also be distressing for women, impacting quality of life and affecting mental health and wellbeing.

Aim

The aim of this study was to assess the effect of a one day training program on raising women's awareness of knowledge about breast cancer and the risk factors, signs, symptoms and options for screening and early detection available in Mansoura, Egypt.

Hypotheses

A one day training program will help to raise women's awareness and knowledge of breast cancer and the risk factors, signs, symptoms and options for screening and early detection available in Mansoura, Egypt.

Methods

Approval to conduct the study was granted by the Research Ethical Committee of the Faculty of Nursing, Mansoura University. The research tools were constructed and developed by the researchers, with validity provided by a panel of experts in medical-surgical nursing, community health nursing, radiation oncology, general surgery and nuclear medicine. The panel evaluated the tool for clarity, relevance,

applicability, comprehensiveness, and ease of implementation. Minor modifications were applied in accord with the panel's advice. All participants were interviewed by the researcher, who outlined the aim of the study in easily understood terms.

Pilot Study:

A pilot study was conducted on 12 women in order to test the applicability of the research method and tool, to ensure the questionnaire was clear and easy to follow, and to confirm the amount of time needed to complete the study questions. Pilot study participants were excluded from the main study sample. Necessary modifications were carried out based on the findings of the pilot study, in order to inform the final form of the tool.

It was determined that 20 minutes was required for participants to complete the questionnaire and pre-test. The program included two sessions. Firstly, an educational session, providing theoretical information about breast cancer; risk factors, signs, symptoms, and options for screening and early detection. This session made use of a power point presentation, in common Arabic language, and ran for about 90 minutes. Secondly, a practical session to educate women on how to conduct a breast self-examination. Every woman was provided with handout materials as a reference. Women were given chances to ask questions, enabling the convenors to correct any misconceptions. The post-test was administered on the conclusion of the both parts of the session.

Results

Prior to participating in the session, the majority of women lacked knowledge of breast cancer; risk factors, signs, symptoms, and options for screening and early detection. After program implementation, the researchers found a remarkable improvement in women's knowledge. The differences were statistically significant ($p > 0.01$).

Conclusion

A one day training program is an effective way to raise women's awareness of knowledge about breast cancer and the risk factors, signs, symptoms and options for screening and early detection available in Mansoura, Egypt. Additionally, the program helped to overcome some of the individual, social, and cultural stigmas associated with breast cancer and improved women's skills of breast self-examination.

Recommendations:

1. It was recommended that the program be implemented in the community.
2. Further, researchers recommended that national media should be engaged to emphasize the importance of creating proactive attitudes toward breast cancer and breast cancer screening and early detection.
3. The researchers found that ongoing research was required to investigate barriers to the routine practice of breast self-examination.
4. It was recommended that breast cancer programs be implemented in workplaces, schools and universities.
5. The researchers also suggested the establishment of training programs for men, to encourage them to support women with breast cancer awareness and early detection.

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Can lifestyle and dietary modifications protect our daughters from the risks of developing breast cancer?



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Introduction

Breast cancer is the most prevalent cancer in females worldwide and still the most common cause of death in women. Many risk factors for developing breast cancer later in life can be reduced during the teenage years and young adulthood. Lifestyle changes we make today could lower our risk tomorrow.

Get regular exercise and enough

vitamin D: Vigorous exercise during the teenage and young adult years has been found to reduce the risks of both premenopausal and postmenopausal breast cancer. Since adequate **vitamin D** early in life also reduces the risk of breast cancer, it makes sense for teenagers and young women to participate in regular physical activity outdoors.

Diet: Research suggests that the following foods, if consumed during the teenage years, may reduce the risk of developing breast cancer later in life:

- **Calcium-rich** foods in general
- **High fiber** foods in general
- **Milk** (milk has both beneficial and harmful components)
- **Soybeans**
- **Tofu**
- **Vitamin D**

Note that some of these foods may have the opposite effect when consumed by adult women.

Butter and red meat are not

recommended. If consumed during the teenage years, they may increase the risk of developing breast cancer later in life.

It is recommend that teenagers and young women eat a wide variety of the foods on the recommended food list and limit those foods that could increase risks.

Get to a healthy weight and stick to it:

Keeping to a healthy weight is mandatory for breast cancer risk reduction. Girls who stay at a healthy weight and keep physically active are less likely to have early puberty and more likely to maintain these healthy habits as adults.

Avoid empty calories: Avoid high-calorie foods and drinks that offer little nutritional value. Think of each meal and snack as an opportunity for healthy nourishment.

Anorexia nervosa: Studies of the relationship between anorexia nervosa and breast cancer risk have reported that anorexia that occurs during the years up to age 25 actually reduces the risk of breast cancer. We suggest attempting to keep girls and teenagers at normal weight, if possible. Most breast cancer occurs after menopause, when being overweight increases risk and when it becomes increasingly difficult to lose weight.

Breast self-exams: Teenagers should be taught how to perform breast self-exams and encouraged to perform them on a monthly basis. While rare, some aggressive breast cancers can occur during the teenage years and 20s.

Personal care products: Some personal care products contain estrogenic products that should be avoided. These include shampoo and other hair care products, body creams, body oils, and other products for external use containing **lavender**, tea tree oil, or **parabens**. These products are intended for external use, but are absorbed through the skin or scalp. Teenage girls and young women should be discouraged from working in beauty salons where such products are used.

Avoid unnecessary radiation: Whether used to treat or to diagnose illness, **radiation** to the chest or back during the teenage years can result in breast cancer in adulthood. While such radiation normally is administered for medically necessary reasons, parents of teenagers at high risk for later breast cancer should pay attention to the degree of exposure and try to limit it, where possible.

Exposure to light at night: Night shift work has been associated with increased risk of breast cancer in adult women, as has sleeping in the presence of light. Exposure to light during normal sleeping hours interferes with **melatonin** production.

Blue light wavelengths appear to have a far greater suppressive effect on melatonin production than red wavelengths, suggesting that girls should use red light when light is necessary.

Acne treatments: Topical treatments containing **tea tree oil** have been shown to stimulate breast growth in children and should be avoided. Long-term use of **antibiotics** for treatment of acne or other conditions is suspected to increase the risk of breast cancer, although there is no consensus on this point. On the other hand, the use of Accutane for treatment of acne does not appear to increase the risk of breast cancer.

Herbal supplements designed to regulate

menstruation: Some herbal supplements designed to regulate menstruation may promote breast cancer development. Use of birth control pills by teenagers also has been found to increase risk of breast cancer. It is important for teenagers to limit the period of time during which any hormonal preparations are used to regulate menstruation.

Birth control and HPV: Birth control

pills and other forms of hormonal contraception started at a young age increase the subsequent risk of breast cancer. The tumors of three of five women who developed breast cancer before age 25 contained a marker of **HPV** (human papilloma virus)-associated cancer in one 2009 study. While breast cancer at such a young age is extremely rare, the findings provide another reason to have daughters vaccinated against HPV.

Weight loss and fitness products: Care should be taken in selecting weight loss and fitness products. Supplemental human growth hormone might also contribute to breast cancer risk.

Breast enlargement: Pills and creams designed to increase breast size should be avoided. These products typically contain a variety of ingredients. Breast cancer patients with cosmetic breast implants tend to be diagnosed at a later stage and have poorer

Continued from page 08

survival than those without implants. On the other hand, [breast reduction surgery](#) has been shown to reduce the risk of breast cancer by reducing the volume of breast tissue that could develop cancer.

Stop smoking: While [smoking](#) is not a major risk factor for breast cancer when begun in adulthood, both smoking before age 15 and smoking before giving birth for the first time have been found to increase the risk of breast cancer in later years.

Alcohol consumption: Adolescent [alcohol](#) consumption has been shown to increase the risks of subsequent [proliferative benign breast disease](#) and breast cancer, especially among those with a [family history](#) of breast cancer.


Choose healthy cooking methods: There are many ways to prepare food that maintains or enhances its nutrients. You can microwave your food, but not in plastic. Broiling and grilling also are healthy methods, as long as food is not blackened.

Manage your emotional stress: Anything you can do to reduce your stress and enhance your emotional comfort and joy will help your body recover better from the wear and tear of modern life. Focus on the present rather than worry about the past and future. Adjust your expectations to make them reasonable. Don't take on too much at once.

Know your personal and family history: It's critically important to know your personal and family history of cancer as well as other risk factors. You may be at high risk for breast cancer if you have a strong family history of breast and related cancers. Get information about any type of cancer in your blood relatives from both your mother's and father's sides of the family. Also, find out each relative's age at the time of cancer diagnosis.

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Engaging in regular physical activity does much more than you realise.

*Dr Sandi Hayes, Associate Professor, Senior Research Fellow
Ms Kelly Prosser, Accredited Exercise Physiologist
School of Public Health, Institute of Health and Biomedical
Innovation, Queensland University of Technology*

Maintaining a healthy lifestyle through good behaviours such as eating a well-balanced diet, being physically active, keeping within a healthy weight range, and limiting exposure to processed foods, cigarette smoke and alcohol is essential for good health.

Being in good health is important for cancer prevention. This is likely not surprising news. However, the importance of participating in regular physical activity alone, irrespective of participation in other healthy behaviours, is astonishing, yet less well-known.

To discuss physical activity, it is first important to define what it is. The World Health Organisation (WHO) describes physical activity as "any bodily movement produced by skeletal muscles that requires energy expenditure – including activities undertaken while working, playing, carrying out household chores, travelling, and engaging in recreational pursuits." The term 'physical activity' should not be confused with 'exercise', which is a category of physical activity that is planned, structured, repetitive, and aims to improve or maintain one or more components of physical fitness. Both moderate- and vigorous-intensity physical activity, including exercise, bring

health benefits. Moderate-intensity activity involves doing activities that cause you to puff moderately, (e.g., walking up a small hill), while vigorous-intensity activity makes you 'huff and puff' more intensely (e.g., walking briskly up a long flight of stairs).

The Australian Government recommends participation in at least 150 minutes of moderate-intensity activity per week, or more than 75 minutes of vigorous-intensity activity per week. This recommendation comes from research that shows that this amount of physical activity is associated with reduced rates of chronic disease such as cardiovascular disease, osteoporosis, type II diabetes, certain cancers and hypertension. These are common diseases in our westernized society. There is also a relationship with this amount of physical activity and improved fitness, function, body composition, mental health and overall quality of life. This is of note since

Continued from page 09

higher fitness, function and quality of life is associated with better health, reduced rates of chronic disease and improved survival (longevity). That is, 150 minutes of weekly physical activity makes you feel good in the short term and helps you stay healthy for longer.

But let's now talk more specifically about the relationship between physical activity and breast cancer, with research results showing that the higher the level of physical activity (at least up to 150 minutes per week and the inclusion of moderate- or vigorous-intensity exercise), the lower the risk of developing breast cancer (risk reduces by around 30%). This is especially for women who are 50 years or older, and who are post-menopausal. That is, exercise becomes even more important as women age and it is never too late to become physically active. Being regularly physically active is associated with improved weight maintenance (especially in post-menopausal women), reduced sex-hormones (such as oestrogen and progesterone), reduced insulin, and reduced inflammation, and this may partly explain why exercise is associated with reduced breast cancer risk. However, we still have much to learn about how physical activity influences breast cancer risk.

But what about women who have already been diagnosed with breast cancer?

Well, participating in regular physical activity becomes even more important and the research demonstrating the benefits of exercise with respect to fitness, health, quality of life and survival post-breast cancer is compelling. Being physically active during treatment is associated with fewer and less severe treatment-related side effects, such as fatigue, lymphoedema and pain, as well as reduced fitness and function. Being physically active can also improve cognition, body image, self-esteem, mood, and reduce depression and anxiety. For the majority of women, fitness, strength and function typically decline during the active treatment period and do not return to age-matched levels post-treatment. Unfortunately, even small reductions in fitness, strength, or function are associated with significantly higher risk of cardiovascular mortality and breast cancer recurrence. In contrast, being regularly active during treatment can prevent, or at the very least minimise these declines and facilitates recovery post-treatment.

For a long time, the benefits of exercise post-breast cancer were thought to only be

about function and quality of life. However, more recently, results from high quality research has demonstrated a relationship between physical activity and survival. Being regularly active post-breast cancer is associated with a 41% reduction in all-cause mortality, 34% decrease in breast cancer death and 24% reduction in breast cancer recurrence. That is, women who were physically active post-diagnosis were more likely to live longer and less likely to die from breast cancer. Also, women diagnosed with breast cancer are at risk of developing other chronic disease, with risk of chronic disease sometimes exacerbated by treatment for breast cancer. Importantly, there is also good evidence that shows being physically active post-breast cancer reduces the risk of developing other chronic disease.

Less than half of all Australians and only 15 per cent of women who have had breast cancer are achieving recommended weekly physical activity levels of at least 150 minutes of activity. Lack of time, motivation and know-how about how to become and stay regularly active are key issues women need to overcome to incorporate sufficient amounts of activity into their daily lives. For women with breast cancer, treatment-related issues such as fatigue or pain may also interfere with their ability to be physically active. While these issues are not brought on or exacerbated by physical activity, their presence makes it even more difficult to be regularly active. So while knowing that one should be active is one thing, being sufficiently active is another.

What can women do to improve their physical activity levels?

It is important to recognise that doing something is better than nothing and more is generally better than less. Also, the 150+ minutes of weekly physical activity can be accumulated in any way that best fits individual circumstances. For some, 30 minutes of exercise five days per week may be the most effective way to reach recommended levels, while for others 45-minute exercise sessions three times a week plus walking to the bus stop each day for work may be more appropriate. Small increases in physical activity can make a big difference to health, prevention of chronic disease and recovery from breast cancer. If you are not currently meeting recommendations, it is important for increases in physical activity to be small and progressive (that is, don't go from being sedentary to meeting national

guidelines in one week). Exercise and other types of physical activity don't need to be undertaken at high intensity, like what you might see on television; it can be as simple as going for a walk or doing some exercises within your home. Finding activities that bring enjoyment, peace of mind and an element of socialisation is a great way to become and stay sufficiently active. At the very least, aim to avoid inactivity and recognise that participating in typical daily activities, without incorporating some planned exercise, is rarely enough to meet physical activity targets that are associated with health benefits.

More targeted advice can be sought from allied health professionals, such as Accredited Exercise Physiologists (AEPs). AEPs are trained to prescribe exercise, including for women who have had or are currently under treatment for breast cancer. For more information, check out the Exercise is Medicine Factsheet on Cancer and Breast Cancer, as well as the Exercise and Sport Science Association (ESSA) website.



Reducing risk through lifestyle changes and diet

Written by Luba Osinceva

Director of the Post-Mastectomy Rehabilitation School, Kyrgyzstan

a
personal
story

I was diagnosed with breast cancer 15-years ago, at the age of 45. That diagnosis and the journey that followed led to many changes in my life

Emotional aspects

After my treatment ended, some emotional difficulties began. I had to teach myself not to obsess over my disease. In my country, breast cancer patients do not talk openly about their battles. But I recognized that I needed support from other people, so I did not hide my situation. I communicated easily with my family and friends, and their support helped me keep a positive attitude and gave me refreshment and encouragement. It also helped to avoid unnecessary talks behind my back. People were not moved with pity when interacting with me. My faith in God, fervent prayer, reading the Bible every day -- all this was a huge help to me as well. My motto for recovery was: "There is no disease that cannot be cured." It has become an axiom for me that no one can take care of my health better than I can. That was even more true in my country in 1999, when I was diagnosed. Until the recent opening of the Post-Mastectomy Rehabilitation School, no organization addressed the need for patient rehabilitation.

Nutrition

My reading convinced me that I needed to change my attitude about food, especially during that first year after surgery when nutrition plays such an important role. What changes did I make? I ate 5 meals every day. Before 3 of those meals, I drank a juice made from beets, carrots and pomegranates. Vegetables and fruits became an integral part of my diet. In particular, I ate tomatoes, green beans, cucumbers, different varieties of cabbage and apples, grapes, apricots, oranges, lemons, and grapefruits. I cooked porridges from rolled oats, buckwheat, and soybeans.

I included a large quantity of greens in my diet: lettuce, green onions, parsley, dill and cilantro. I also added walnuts and almonds. I ate fish twice a week and cooked it only by steaming. I stopped using oils other than olive oil. And I drank 0,5 liters of goat's milk on an empty stomach daily.

Even after 15 years, I still stick to healthy food. I am convinced that a healthy, balanced diet helps us to prolong our life.

Physical activity

A regular daily regimen is also important to recovery. After I learned of my disease, I got into the practice of going to bed and getting up at the same time every day. Usually I went to bed at 9:30 p.m. and avoided emotional and physical overload.

After surgery, I was very weak and could not do most of the housework I normally did. Despite this, I started doing regular physical exercises and gradually increased my range of motion and stamina. Whenever possible, I went for a walk. As my condition improved, my family and I enjoyed hiking in the mountains.

Appearance

Seeing stitches where my breast had been, as well as my affected limb, was very unsettling after surgery. I recognized that I needed to change my self-image. It was very difficult, at that time, to buy a breast prosthesis or mastectomy undergarments. Because I did not want my mastectomy to be obvious even when fully dressed, my style of dressing had to change and loose-fitting clothing began to dominate my wardrobe. Even so, I indulged my feminine

fantasy for pretty things. In time, I started to receive compliments. After overcoming breast cancer it was a balm for the soul to hear compliments about my appearance.

Work

It took a year of recovering before I was able to resume my work as a massage therapist. Having experienced disease, I understood a very important truth: rather than dwelling on limitations, I needed to appreciate possibilities that were within my reach. I started helping other women who had been diagnosed with breast cancer. In 2010, several other survivors and I organized the Post-Mastectomy Rehabilitation School, the purpose of which is two-fold: to help women who are ill keep a positive attitude and believe that cancer is curable, and also to help women rehabilitate and lead healthy lifestyles.

Five years ago, I first discovered Reach to Recovery International (RRI) and Bloom magazine on the internet. I especially appreciate that RRI encourages the mutual sharing of information and experience between Reach to Recovery groups and organizes conferences for that purpose. Bloom magazine contains useful information that helps women fight for -- and change -- their lives.

Fifteen years have passed since I battled and conquered my disease. I am alive, happy and healthy now. I am very grateful to God, my doctors, family and friends, all of whom helped me to survive. They helped me to through a time when I thought that my life was over and it was unbearable to think that I would not survive.

ADOS Association Women with breast cancer: "Since 1976 to help women"

Associazione Donne Operate al Seno (ANDOS) is a non-profit organization based in Italy and originally founded as mastectomy Rehabilitation Center to offer women specific assistance following surgery for breast cancer.

The center aims to support women with overcoming the psychological impacts of their breast cancer experience.

A volunteer-based organisation, ANDOS provides all services

free of charge, including education and awareness, health care, psychological assistance, peer support, and practical aid.

Visit their [website](http://www.andosonline.it) to find out more! [andosonline.it](http://www.andosonline.it)

Survivor Story: Reducing risk through lifestyle change and diet “Healthy Altitude”



Written by Sharon Cohrs

My husband and I have always been adventurous, living life to the fullest with a strong will and desire to challenge ourselves. Nothing however could prepare us for what was to come when, at 36 and just about to depart on yet another mountaineering adventure to scale our highest peak yet, Mt. Aconcagua (6959m) in South America, I was told I had breast cancer.

How could this be? I looked after myself, watched what I ate, enjoyed the occasional glass of wine, but overall was fairly disciplined. What did this diagnosis mean? Would I be all right? You can never prepare yourself for the news. Allan and I had planned to start a family, having just visited a fertility clinic to commence IVF treatment. I was scared, my life had been turned upside down in an instant, and instead of setting off for an amazing adventure we were about to embark on the toughest journey of our lives.

Just 9 months after finishing with the debilitating effects of chemotherapy, and 3 months after reconstructive surgery, I was ready to return to my most beloved pastime. So it was with a mix of fear and trepidation that Allan and I headed to Nepal with the mountain of Baruntse, at an imposing 7129m, firmly in our sights. Despite doubts on whether my body was up to the challenge after having travelled down that long hard road to recovery, I once again found myself standing on top of a mountain, proving I could achieve what seemed utterly impossible just months before. After two further climbs, one in Nepal and one in Tibet, I was ready to take on the ultimate challenge, the challenge that kept me focussed and positive during my darkest days, the challenge to take on Mt Everest.

So at 9.30am on 20 May, 2011, Allan and I reached the highest point on earth, taking in the picturesque views of our wonderful planet whilst looking down into Tibet on one side and Nepal on the other. I could see the curvature of the earth, and a flood

of emotions rushed in. Clean eating, committed training and a resolute determination, along with the love of my beautiful family, had gotten me to this point. No one could take this moment away, and I shared it with my Dad, who was fighting his own battle with pancreatic cancer. From the satellite phone, I yelled, “I did it Dad, I’m standing on the top of the world, and you’re here with me.”

Years of intense training and sacrifice had led to this moment and so I became the first breast cancer survivor in the world to summit Mt Everest at 8850m. Together, Allan and I became the first Australian couple to stand on top of the world.

I have now reached the 5-year milestone and attribute my recovery to the expert care and education I received, highlighting the importance of diet and lifestyle, along with an unwavering determination to return to what I love – climbing mountains.

It took a while before I was able to reflect on what I’d achieved. Now, my husband, who stood beside me every step of the way, and I are fortunate enough to guide intrepid adventurers on their own unique journeys to the stunningly beautiful Himalayas, whilst also sharing our story and the lessons acquired with people around Australia. It is amazing what path our lives can take. My cancer journey has given me incredible resilience and inner strength, and I now feel like I am just getting started. Life is for living. Don’t waste a minute.

“Side by Side”- a documentary for newly diagnosed breast cancer patients

My name is Jayne Coe, I'm currently having treatment for secondary breast cancers. I'm also a member of the Zonta Club of Redcliffe, Queensland, Australia, an international service club for women.

A casual conversation with my oncologist initiated the idea of producing a film for newly diagnosed breast cancer patients.

I put forward a funding proposal to Zonta Club of Redcliffe which was met with much excitement and commitment. Extra funding was given by local businesses and Dragons Abreast Redcliffe Club.

Over an 18-month period of time, I discussed and planned the 43-minute documentary with Mandy Lake, who is the director of the Brisbane film production company Flickchicks, and producer Margie Brown. During this time we interviewed and filmed health professionals, allied health workers, breast cancer care nurse, doctor, support group members and breast cancer survivor dragonboat paddlers. The informative, 43 minute film features useful websites and resources, including the Look Good Feel Better program. It comprehensively covers all stages of the breast cancer journey.

Zonta Club of Redcliffe supplies free dvds to the two private and two public hospitals in their region. Many Queensland hospitals have copies of the dvd, mainly funded by local Zonta Clubs. Ten complimentary dvds were sent to most McGrath Foundation breast cancer care nurses in Australia. Recently 1000 dvds were distributed, by BCNA, to breast cancer support groups in Australia.

For more information/orders, please visit our website www.zontaredcliffe.org.au



**DVD
now
available**



Side by Side Documentary

Side by Side is a much-needed resource for Breast Cancer and unlike any other film in the country.

“Side by Side” differs in that it comprehensively covers all stages of the breast cancer journey and doesn't just focus on one aspect of treatment,” Jayne Coe (our Narrator) said.

Often when someone is diagnosed with breast cancer, everything happens so quickly they don't have time to catch their breath, and they rarely know what's going to happen to them or where to get support. This film is a roadmap to that support.

It provides a very non-clinical, guided tour of the host of services, resources and people that are out there to help support the patient along their individual breast cancer journey. And it's a journey that certainly should not be travelled alone. There are plenty of people who can be by your side.

For further information

Please contact Zonta Club of Redcliffe Inc by phone **0457 426 806**, email info@zontaredcliffe.org.au, or download the order form from our website. Email or post to PO Box, 131, Margate, Qld 4019. www.zontaredcliffe.org.au/wp/sidebyside



Pakistan's first dedicated Breast Cancer Diagnostic & Training Centre



Based on our comprehensive experience of more than 10 years of diagnosing and treating breast cancer in Pakistan, and after analyzing the dire need of diagnostic services, we are establishing Pakistan's first dedicated Breast Cancer Diagnostic & Training Centre, which will provide state-of-the-art facilities for early diagnosis and medical trainings for better and preventive health care.

The diagnostic center will include:

- State of the art diagnostic facilities equipped with the latest technology and highly trained technicians and doctors for early diagnosis of breast cancer.
- A Training institute to train personnel such as technicians, nurses, health workers, doctors, and other healthcare workers on the latest techniques and best practices they need to provide quality healthcare to patients.
- Counseling services to help patients and families explore how to cope with

emotions such as fear, anxiety and grief and address challenges such as communication issues, isolation and adjusting to changes in family dynamics.

- A research center to investigate prevalence, high risk factors, differences between geographical areas and trends regarding early and late detection.
- Quality Assurance and Certification to be provided, in collaboration with Pakistan National Accreditation Council, in order to ensure best practices at diagnostic centers nationwide and to insure quality diagnosis procedures for breast cancer patients.

- A Mobile Mammogram Bus to reach out to the poorest of the poor women in rural areas.

Pink Ribbon has already taken the first step: land for clinic has been acquired in a very centrally located vicinity of Lahore.

In the first phase, which is the most expensive one, we will need more funds to build this state-of-the-art facility with all the latest, necessary equipment required.

In the second phase we will need experts to help us develop standards, protocols and processes for the running of the clinic.

For more information please feel free to visit the Pink Ribbon Campaign Pakistan website at www.pinkribbon.org.pk

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Donna Ukraine: Awareness through information

Since its formation in 1997, Donna Ukraine has assisted more than 10,000 women affected by breast cancer. The snapshots below are from a recent training workshop on life after a mastectomy.



The annual action
“Day Against Breast
Cancer in Ukraine”

2-3 October 2014, Ukraine

www.donna.ua

Correction:

The Editors of Bloom wish to apologise to Ms Larisa Yashchenko (pictured), President of Ukraine Donna, for using an incorrect name caption to accompany her photo and story in the last edition of *Bloom*.



Healthy Vegetarian

In Taiwan, people used to become vegetarians because of religious beliefs. Now, more and more people are eating vegetarian for health reasons.

In addition, scientific reports support the correlation between a healthy diet and the reduction of breast cancer occurrence and recurrence. Taiwan Breast Cancer Alliance has always been keen on the well-being of cancer survivors. This year TBCA worked with Jian-qi, a breast cancer survivor, to start a vegetarian cooking workshop for breast cancer survivors. Each week participants learn two dishes. Some of the dishes that they have learned include ten-grain rice, pumpkin whole wheat cake, and vegetable stir-fry.

Jian-qi was diagnosed with breast cancer when she was 49. While she was being treated, she began to examine her life, and tried to figure out what went wrong. She was a perfectionist. She worked too hard. She had a busy and stressful schedule. She understood that she needed to change all that. Another thing that needed to change was the kind of food she put in her body.

Jian-qi has been a vegetarian since she was 33 years old. She thought she was being

health-conscious, but she did not realize that being a vegetarian is not actually good for the body.

Some vegetarian food is deep fried and has a lot of salt added to it in order to enhance its flavor. This makes it very easy for vegetarians to exceed the recommended daily consumption of fat and sodium. Also, the fake meat and seafood used to make the dishes more appetizing are pre-processed products made with preservatives, food coloring and artificial flavors.

Jian-qi wanted to return to the basics of food. She looked into the science of nutrition and organic vegetables. She even studied an ancient Chinese textbook about food and medicine. She adopted a new approach toward food: to eat whole, fresh, and natural food. She also experimented with different ways of preparing food that were healthy and retained the nutrition of the ingredients. Now she cooks with less oil, less salt and less sugar. She also incorporates whole grains into her daily diet.



Jian-qi turns 70 years old this year, and she is still very active. She owns a vegetarian restaurant, teaches cooking all over Taiwan and has published several cookbooks. “There is no need to sacrifice flavor for the sake of health. I am so happy that I am able to share my knowledge with my fellow breast cancer sisters,” says Jian-qi.

Here is one easy recipe from Jian-qi's kitchen: (vegetable) curry.

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



If you have a recipe to share, please email

info@reachtorecoveryinternational.org

Here is one easy recipe from Jian-qiu's kitchen: (vegetable) Curry

Ingredients

- 1 chopped onion
- 2 chopped potatoes
- 1 chopped carrot
- 1 box of mushrooms
- 3 spoonfuls of curry powder
- 1 & 1/2 spoonfuls of ground turmeric
- Thick soy sauce
- Soy sauce
- Ginger powder
- One can of coconut milk

Method

First, sauté the onion until it is golden brown; then add the potatoes, carrot and mushrooms. When the vegetables are slightly cooked, place them in another big pot. Add water to the pot with the vegetables. Put the pot on the burner and turn the heat on high. Add the curry powder and the ground turmeric, and sprinkle some thick soy sauce, soy sauce, and ginger powder on the mixture. When the mixture is boiling, turn down the heat to medium. Cook the curry for about 20 minutes, or until the vegetables are completely done. Taste the sauce to see if you need to add more soy sauce. Finally, add the coconut milk to thicken the sauce.



2015 RRI Conference Update

On behalf of Reach to Recovery International, I am delighted to congratulate the Chinese Cancer Rehabilitation Society for hosting the 2015 18th Reach to Recovery International Breast Cancer Support Conference in Beijing, China!

The conference promises to be a unique event, drawing us together to build connections and inspire progress through new partnerships.

About 1.7 million women are diagnosed with breast cancer each year, and more than 500,000 women die of the disease.

While global incidence rates are increasing, the number of women surviving breast cancer also continues to grow, with approximately six million women alive today who have been diagnosed with breast cancer in the past five years.

Peer support networks have a vital role to play in improving quality of life for those affected.

Reach to Recovery International was built on the simple yet universal principle: a woman who has lived through breast cancer and gives freely of her time to help another woman facing the same experience is a valuable source of support. Over the course of RRI's 63 year history, Reach to Recovery International has improved quality of life for women with breast cancer and their families through a wide range of services offered worldwide.

The 2015 conference will take place at a turning point in the provision of worldwide peer support, with new frontiers pointing us to the future.

I do hope you feel inspired to register early for the conference and commend the conference website to you.

I look forward to celebrating with the Chinese Cancer Rehabilitation Society and conference delegates as we explore new horizons!

*Professor Jeff Dunn AO
Chief Executive Officer
Cancer Council Queensland*

The 18th RRI Reach to Recovery International Breast Cancer Support Conference will be held in Beijing, China 16 – 19 September 2015. The conference theme will be “Together we are stronger”.

The conference will feature plenary, concurrent and workshop sessions addressing a range of topics relevant to breast cancer, as well as social and cultural opportunities allowing delegates to experience the essence of China.

A new logo reflects the spirit of the conference. “Two pink ribbons combine to form a heart, which symbolizes that all breast cancer survivors are hand-in-hand and heart-to-heart.”

For those attending the conference, we look forward to welcoming you to Beijing. For the latest conference news follow us on [Facebook](#) or visit the [RRI website](#).

2015 Beijing

我们一起更强大

Together we are stronger

第十八届全球乳腺癌患者支持大会
THE 18th REACH TO RECOVERY INTERNATIONAL
BREAST CANCER SUPPORT CONFERENCE

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Key dates

**18th RRI Conference
16 – 19 September 2015**

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Collaborations and partnerships the key

Professor Jeff Dunn, Chair of RRI, Secretary of the International Psycho-Oncology Society, and CEO of Cancer Council Queensland, examines emerging directions in preventive care.



Professor Jeff Dunn

There can be no doubt that diet and lifestyle are key to creating a healthier global community.

Over the past 25 years as a CEO, behavioural scientist and researcher, my work has brought me into contact with cancer survivors and societies around the world, each with different perspectives and insights on the strategies we need to deploy to eliminate cancer as a life-threatening disease for future generations.

All are agreed that investments in cancer prevention offer among the most cost-effective options to reduce the burden of cancer on current generations. And the cancer community is not alone. On the world stage, an international movement has formed to address the global crisis of non-communicable diseases (NCDs), uniting forces to facilitate action.

Internationally we have seen the formation of advocacy networks such as the NCD Alliance, founded by the Union for International Cancer Control, the International Diabetes Federation, the World Heart Foundation, and the International Union Against Tuberculosis and Lung Disease.

At the local level, cancer societies are following a similar path, forging new collaborations with diverse organisations active in NCD prevention and health promotion.

The Australian state of Queensland provides an interesting case study.

With a population of just 4.6 million people living across a total area of nearly two million square kilometres, the challenges of cancer prevention are made all the more interesting by the dispersion of Queensland's population and geographic distance from regional communities to major health centres.

In Queensland, over 90 per cent of deaths each year are attributed to the escalating burden of NCDs. By 2021, the number of new cancer diagnoses is forecast to increase by 48 per cent, an average increase of 4.4 per cent per year from 2010 to 2021, outstripping the State's population growth, which is projected to increase at a rate of just 2.1 per cent per year. Likewise, diabetes rates have tripled in the past two decades

and are expected to triple again in the next two decades, causing a five-fold escalation in the economic cost of diabetes on the community. And one Queenslanders dies every 12 minutes of cardiovascular disease.

These are deaths that we can help to prevent as part of a worldwide community united in our work to prevent NCDs, with evidence suggesting a significant percentage of NCD-related deaths could be avoided through improvements to diet and lifestyle.

In Queensland health agencies and community-based organisations are increasingly integrating their preventive efforts to minimise the collective impact of NCDs on the community, sharing resources and infrastructure to leverage outcomes on a population-wide scale.

One such example is a new Cancer Council Queensland program called QUEST.

The program, developed by Cancer Council Queensland, is a free healthy lifestyle program for schools, early childhood centres, workplaces, sports clubs and local governments. The acronym QUEST stands for Quit smoking, Understand your body and get checked, Eat healthily and drink less alcohol, Stay SunSmart and Take time to be active.

The initiative is web-based, providing a library of tools and resources to make the healthy choice the easy choice, so that organisations can rapidly register to take part and act autonomously to adopt preventive health strategies suited to their stakeholders.

Early in the development of the online initiative, Cancer Council Queensland identified the need to engage with health agencies and community-based organisations to ensure the program was shared and underpin the effectiveness of QUEST.

A dedicated communication and marketing strategy was deployed to build awareness and support for QUEST, resulting in a successful pre-registration

program and a significant number of expressions of interest from organisations wanting to participate.

QUEST now functions seamlessly to complement population-wide preventive programs by other organisations in Queensland. Such programs include Queensland Health's Healthier Happier and the Heart Foundation's Get Active initiative – both great examples of how collaborations and partnerships can be leveraged to create impactful local change in a complex community setting such as Queensland.

This edition of Bloom reinforces the relevance of Reach to Recovery International in the emerging global movement to combat NCDs. Peer support networks provide an ideal platform for building awareness of preventive health measures and reducing the burden of cancer on the global community.

Together, we can beat cancer.

Links:

<http://www.ncdalliance.org/>

<https://quest.org.au/>

<http://healthier.qld.gov.au/>

<http://www.heartfoundation.org.au/active-living/get-active/Pages/default.aspx>