

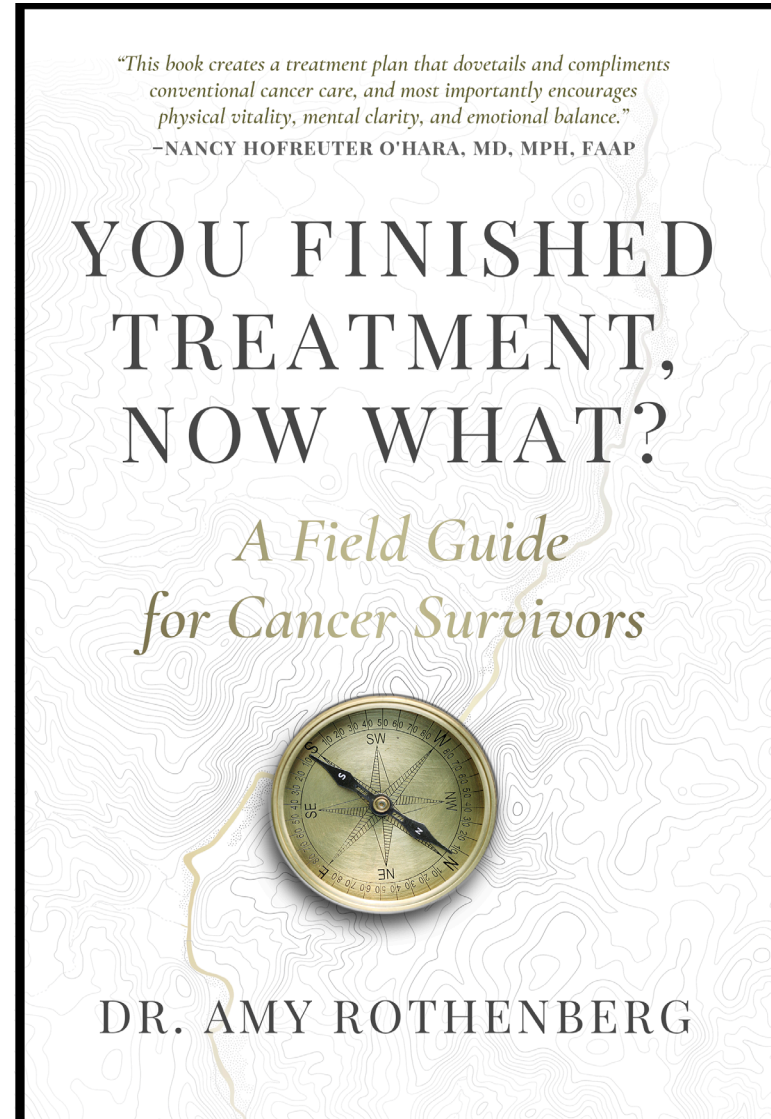
# YOU FINISHED TREATMENT, NOW WHAT?

THOUGHTS FROM A FIELD GUIDE FOR CANCER  
SURVIVORS

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NHAND 2022

# DISCLOSURE: MY BOOK ON THIS TOPIC



# DEMOGRAPHICS OF CANCER SURVIVORSHIP

- The number of survivors is ever growing, as treatment for all kinds of cancer evolves
- By the 2040s there will be more than 26 million cancer survivors
- Younger and younger people diagnosed and treated for cancer with the potential for many more years of survivorship
- There is also a growing number of people living with cancer; similar recommendations are appropriate



# WHAT IS THE ISSUE?

- Many survivors feel lost and abandoned after cancer care ends
- Many are left with symptoms, specific and general due to cancer care
- Many feel anxious and depressed from the treatment time
- Providers of all types will work with survivors over many years
- Clinical recommendations lag even while the scientific research has made great strides



# GETTING THE STORY

- When we sit with a cancer survivor we want to:
  - Understand their medical history
  - Appreciate their most pressing *current* needs
  - Address their psycho-emotional concerns
  - Work toward gradual, more enduring lifestyle changes
  - Create a plan that is not overwhelming
  - Appreciate the patients ability to afford, maintain, and sustain the plan
  - Aim low, aim long



# NATURAL MEDICINE FOR SPECIFIC HEALTH COMPLAINTS

- Most common complaints I see in cancer survivors include:

- Fatigue
- Brain fog
- Lymphedema
- Peripheral neuropathy
- Lack of satisfaction with intimacy/sex
- \*Body aches and pain
- \*Digestive disturbance
- \*Anxiety/depression
- \*Insomnia

\*won't address here as no different than for general population



# TWO THOUGHTS ON THAT LIST

- Pointed preventive care *during* cancer treatment helps prevent many of these issues. Naturopathic treatment during conventional care goes a long way to:

- enhance efficacy of care
- decrease side effects
- address side effects that arise.

I address hopes for the future at the end of this talk

- This list, with the exception of lymphedema and peripheral neuropathy, is not unlike many of our patients who come in with one complaint but we soon learn have many others



# WHO SHOULD TREAT CANCER SURVIVORS?

- Certainly the oncology team where patient had treatment
- Naturopathic oncology specialists (FABNOs)
- Integrative oncologists
- Naturopathic doctors in general- let's emphasize this point
  - Our FABNO colleagues have so much to offer and we can refer when possible and indicated
  - AND even our basic training in healthy living, lifestyle medicine, therapeutic nutrition, botanical medicine, homeopathy, stress management, hydrotherapy, etc., all have key roles to play





# FATIGUE

- Defined as: “a distressing, persistent, subjective sense of physical, emotional, and/or cognitive tiredness or exhaustion related to cancer or cancer treatment that is not proportional to recent activity and interferes with usual functioning.”<sup>1</sup>
- Without enough energy, it’s difficult to get things done, to work, to take part in activities once enjoyed, to relate to family and friends, and to take up many of the approaches to ensure best outcomes!
- Most patients have some fatigue *during* treatment from the toxic exposure and/or from anemia. One-third of patients have cancer related fatigue for months, and for some, it lasts *for years*.

Frustratingly, the fatigue is *not ameliorated* by rest and sleep



# FATIGUE

- Contributors to fatigue include:
  - the cancer itself
  - side effects of care
  - underlying comorbidities
  - ongoing stress
  - the psychological state
  - nutritional status
- May be experienced as any combination of:
  - overall weakness
  - shortness of breath
  - loss of muscle mass
  - difficulty thinking/poor memory
  - feelings of depression and lack of motivation.



# FATIGUE

- Rule out or address
  - anemia
  - hypothyroidism
  - dysregulation of the HPA system
  - overall inflammation
- Cancer and treatment may impact organ systems such as the heart, kidney, and lungs, which may add to lower energy
- Nutritional intake, digestion and absorption also inform energy level



# CONVENTIONAL TREATMENT OF FATIGUE

- Corticosteroids
- Stimulant medications such as those used to treat ADHD
- Antidepressants
- A growing list of other substances is being studied to see if they might show efficacy



# NATUROPATHIC APPROACHES FOR CANCER-RELATED FATIGUE

- Exercise
- Anti-inflammatory diet
- Working on the head game/ Individual or group therapy
- Support adrenal function and decrease inflammation
  - Ginseng (*Panax ginseng*)
  - Vitamin B complex
  - Ashwaganda (*Withania somnifera*)
  - Rhodiola (*Rhodiola rosea*)
  - Licorice root (*Glycyrrhiza glabra*)
  - Tumeric (*Curcumin longa*)

Acupuncture or constitutional homeopathy

Support the emunctories for ongoing detox



# MANAGING EXPECTATIONS

- The role of not “overdoing”
- Short naps may be helpful for some people
- Ensuring adequate sleep



# BRAIN FOG, COGNITIVE DECLINE, & FEELING LESS SHARP

- Some people were going in this direction before diagnosis, for others entirely new symptom
- Causes related to cancer treatment include: stress and anxiety, depression, side-effect of surgery, chemo and/or radiation
- Other causes that contribute to cognitive decline for everyone include heart disease, diabetes, uncorrected hypothyroidism, depression, aging, social isolation, and hearing loss
- Common challenges include: inability to multi-task, poor concentration, poor long and/or short term memory, difficulty coming up with the right word, slower processing, misplacing or losing things, feeling less sharp, less connected to others and/or less creative



# NATUROPATHIC APPROACHES TO COGNITIVE DECLINE

- Temporary ketogenic diet if feasible/tolerable
  - Anti-inflammatory diet
  - Regular exercise and cognitive workouts
  - Addressing underlying chronic ailments
  - *Botanicals* like Curcumin, Resveratrol and Bacopa monnieri
  - Addressing hearing loss if present
  - Stress reduction
- Re-prescribing medications known for cognitive decline side effects





# LYMPHEDEMA

- Many kinds of cancers and treatments may lead to lymphedema
- Etiology may be from a tumor, trauma of surgery, removal of lymph nodes, radiation, and/or infection
- Main symptoms include fullness and swelling due to increased fluid in the area, skin changes including itching, skin infection, decrease in strength, pain, shift in range of motion, and various kinds of pain



# LYMPHEDEMA

- Risk factors for arm lymphedema include axillary or sentinel lymph node dissection and/or radiation to the breast, having more than eight positive nodes, being overweight, or having larger breasts
- Lower-limb lymphedema can occur after gynecological or prostate cancer treatments
- Head and neck cancers can lead to lymphedema in the jaw, neck, and chest areas
- Internal lymphedema, such as in the abdomen, may also take place



# CONVENTIONAL CARE FOR LYMPHEDEMA

- Noninvasive, complete decongestive therapy (CDT): manual lymphatic drainage, compression therapy, a daily exercise program, skin and nail care
- Kinesio taping increasingly being used
- Surgery for patients who do not respond well enough to CDT, though CDT approaches continue to be used before and after surgery
- Compression wear limits build-up of lymphatic fluid and encourages movement of fluid to areas of better drainage, with the help of local muscles pumping fluid away.
- These recommendations show good effect, though not for everyone, and are time and resource intensive and require a big commitment by patient



# NATUROPATHIC APPROACHES TO LYMPHEDEMA

- Best approaches are preventive— some good research on using compression sleeves *preventively* but also working on circulation, the microbiome, and adequate digestion and absorption, all the “prehab” things we can do with our cancer patients



# NATUROPATHIC APPROACHES TO LYMPHEDEMA

- Everything done as above plus:
  - Exercise and yoga. General exercise, helps with overall blood *and* lymph flow, modify based on individual
  - Resistance training, previously thought to worsen lymphedema, now shown to help build muscle, helps pump excessive fluid away without creating risk of developing or worsening lymphedema
  - Deep diaphragmatic breathing stimulates lymphatic flow.



# NATUROPATHIC APPROACHES TO LYMPHEDEMA

- An anti-inflammatory diet
- Monitor salt intake, as excessive sodium may add to swelling.
- Ensuring that you are getting enough folate and B vitamins to decrease capillary fragility
- Bioflavonoids, including quercetin and hesperidin, may prove useful as they help stabilize capillary membranes.
- Selenium has been shown to reduce the risk of developing lymphedema.



# NATUROPATHIC APPROACHES TO LYMPHEDEMA

- The herbs astragalus (*Astragalus membranaceus*) and peony (*Paeoniae rubra*)
- Pycnogenol, derived from French maritime pine bark, has helped people with chronic venous insufficiency (CVI).
  - While these two diagnoses are different, they share certain features, especially in the lower extremities. Taking the supplement pycnogenol may reduce fluid volume and the sensation of heaviness especially for lymphedema in the legs.



# NATUROPATHIC APPROACHES TO LYMPHEDEMA

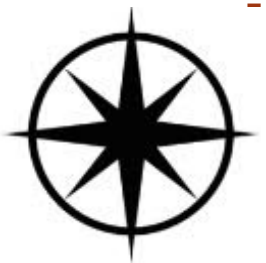
- Acupuncture is another approach to consider
- Low-level laser therapy (LLLT) is a newer approach to consider, as early studies show good impact and limited side effects.
- Localized hyperthermia, the application of heat to a specific area, has also been examined and shows some results with few side effects.  
However, it requires special equipment not readily available.





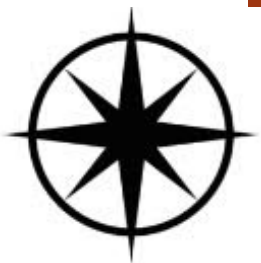
# NATUROPATHIC APPROACHES TO LYMPHEDEMA

- Aerobics class in water, has shown the capacity to reduce swelling and improve range of motion for some people with lymphedema, even many years after the difficulties began.
- Hydrotherapy like alternating hot and cold hand or foot baths encourages circulation to, and most especially away from the areas in question.
- Osteopathic physicians with additional training in osteopathic cranial manipulative medicine bring hands-on help for patients with lymphedema. Consider a consultation for your patients with an osteopath who specializes in manipulative medicine
- Other hands on approaches anecdotally have offered help as well.
- Sauna use is contraindicated for those with lymphedema



# PERIPHERAL NEUROPATHY

- Chemotherapies known to cause neuropathy include: Platinum drugs (cisplatin, carboplatin, and oxaliplatin,) Taxanes (paclitaxel, docetaxel, and cabazitaxel) and others.
- Prevention is best and many of us are regularly supporting patient *during* care to help prevent with the use of cold boots and gloves, fish oil, and B vitamins if not contraindicated
- Aggravating factors include length and dosing of conventional treatment, stress, inflammatory diet, pre-existing underlying ailments
- Main symptoms include: numbness, burning, tingling, altered or lowered sensation, pain, and a reduction in strength anywhere in the extremities
- Can impact fine motor coordination, gait, balance, capacity for daily activities, work and play, all impacting quality of life



# CONVENTIONAL CARE FOR PERIPHERAL NEUROPATHY

- Discontinuation or lowering dose of anti-cancer drug
- Antidepressants
- Anti-seizure medications
- Analgesics including opiate drugs
- Balance training if needed



# NATUROPATHIC APPROACHES TO PERIPHERAL NEUROPATHY

- Anti-inflammatory diet
- Acupuncture individualized to patient
- Exercise helps with both balance and strength, and may also help with numbness, tingling, and altered temperature sensations
- Physical therapy can also be useful
- Topical agents like menthol in 1% preparation applied to affected area. Capsaicin patches like Qutenza (no affiliation.) Some develop rash, itching, nausea, and elevated blood pressure, so recommend only with careful supervision



# NATUROPATHIC APPROACHES TO PERIPHERAL NEUROPATHY

- Nutritional supplements include:
  - acetyl L-carnitine, vitamin E, alpha lipoic acid, vitamin D omega-3 fatty acids and B complex. Glutamine may also show efficacy
- Botanical medicines
  - Curcumin (*Curcumin longa*) and cannabinoid products. Further clinical trials are needed to confirm efficacy
- Attend to the big stressors and educate on stress management
  - Breathing exercises, mindfulness meditation, positive imagery, and/or a gratitude practice can all help decrease the intensity and severity of peripheral neuropathy



# LACK OF SATISFACTION WITH INTIMACY/SEX

- A majority of survivors complain that they have less interest in sex, body-image challenges, genitourinary symptoms that interfere with sex, less satisfaction with sex, and/or “performance” issues.
- The stress of the diagnosis and treatment often puts pressure on relationships, which in turn impacts the desire for or interest in intimacy.
- Studies reflect deterioration of sexual health some years after diagnosis, regardless of cancer site, treatment taken or prognosis



# LACK OF SATISFACTION WITH INTIMACY/SEX

- Important to understand the nature of the relationship, what the actual issue is, and the role of communication and troubleshooting, first just with the patient and then, if they are having sex with another person, with that other person or people
- Some causative factors include: psychological stress, physiologic changes, body image issues, medications taken, hormone suppression, lack of energy in general, lack of capacity and/or pain during sex



# LACK OF SATISFACTION WITH INTIMACY/SEX

- Things to consider—
  - Shift from spontaneous to making a plan to spend intimate time together
  - Bring back a bit of romance, or whatever used to help in past





# LACK OF SATISFACTION WITH INTIMACY/SEX

- Disappointment happens when there are expectations, so keeping the lines of communication open
- Pain can be a strong disincentive
- For women, pain often has to do with both vaginal dryness and the shrinking of vaginal tissues
- So lubrication during intercourse, yes, but also vaginal moisturizers on a regular basis. Insertable moisturizers, often made from organic coconut oil, vitamin E, and beeswax, placed directly inside the vagina and used at night before bed for best absorption
- Topical estrogen creams for the vast majority of women regardless of estrogen receptor status, can be safe



# SHIFTING THE INTERNAL ENVIRONMENT TO BE LESS HOSPITABLE TO CANCER

- Prevention again essential– and much of the work we do overall with our patients.
- *The macroenvironment* influences the *microenvironment* related to the development, growth, and spread of cancer
- Variables that negatively influence the broader macroenvironment include:
  - a poor microbiome
  - dysfunction in the neurotransmitter system from unrelenting stress
  - immunological impact from infections or trauma



# SHIFTING THE INTERNAL ENVIRONMENT TO BE LESS HOSPITABLE TO CANCER

- Lifestyle choices and the greater external environment all play a role
  - Smoking, excessive alcohol intake
  - Poor diet
  - Being sedentary



# SHIFTING THE INTERNAL ENVIRONMENT TO BE LESS HOSPITABLE TO CANCER

A number of natural medicine substances proven to specifically influence the tumor microenvironment, to make it less hospitable to cancer cells trying to establish a tumor or spread

- Curcumin (*Curcuma longa*)
- DHA (Docosahexaenoic acid)
- EGCG (epigallocatechin gallate)
- Resveratrol
- Sulforaphane
- Vitamin D



# CAREGIVERS AS SURVIVORS

- Essential role so many people play
- Under-supported, burned out
- Checklist for caregivers, things they can do early on to help pave a smoother road



# PUTTING IT ALL TOGETHER

- Don't try to do all at one visit.
- Let patient know there will be several visits
- Learn about their learning style and willingness and capacity to make changes, take responsibility
- Recall that as people start to feel better— from being further out from care, they may well have more appetite for some of your ongoing recommendations



# PUTTING IT ALL TOGETHER

- Don't be afraid to reach out to oncologists. I often send a copy of my plan with references for recommendations
- I always take the call from another provider, I review the chart first and be sure I know what I'm talking about
- Aim low, aim long
- Also need to support our people if cancer returns or new cancer is discovered, we circle back to those other approaches that can help support through treatment
- And also become familiar with both the palliative care and hospice care options in your community.



# SHOUT OUT TO ONCANP

- All of our specialty organizations have an important role to play in our being recognized and respected across medical fields
- OncANP is high on that list with specialty training, excellent CE offerings, and terrific in-person conferences
- I am personally indebted to a number of FABNO NDs including Dr. Tina Kaczor, Dr. Jacob Schor, Dr. Lis Alschuler, and Dr. Gurdev Parmar





# HOPES FOR THE FUTURE

- Every cancer patient goes from seeing their oncology team to the their integrative cancer team
- Access to natural medicine care starts at the time of diagnosis
- Cancer centers continue to expand offerings in integrative medicine
- Work on genetics will be ongoing, so we best understand who is most at risk and take mitigating steps before diagnoses
- Governmental support across the world for addressing our environment and reducing our exposure to toxins that put all of us at risk for cancer and other chronic ailments
- Anyone who wants can access an affordable, licensed naturopathic doctor. We know that if you go *into* a cancer diagnosis healthier, you have better outcomes



*"This book creates a treatment plan that dovetails and compliments conventional cancer care, and most importantly encourages physical vitality, mental clarity, and emotional balance."*

*—NANCY HOFREUTER O'HARA, MD, MPH, FAAP*

# YOU FINISHED TREATMENT, NOW WHAT?

*A Field Guide  
for Cancer Survivors*



DR. AMY ROTHENBERG

**THE BOOK IS BORN  
OUT OF 36 YEARS OF  
TREATING PATIENTS,  
AS WELL AS MY OWN  
EXPERIENCE OF  
RECOVERING FROM  
TREATMENT FOR  
BREAST & OVARIAN  
CANCER IN 2014.**

**I TELL THE STORY  
FROM BOTH SIDES OF  
THE JOHNNY!**



# KEEP IN TOUCH

- For information on *You Finished Treatment, Now What? A Field Guide for Cancer Survivors*

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