

# A family's bravery in the face of breast cancer

## Talladega woman inspired by examples of mother, grandmother

By Kelli Tipton  
Special to The Daily Home

This year, nearly 270,000 women will be diagnosed with invasive breast cancer. It will drastically change their lives and the lives of those that love them.

I have witnessed breast cancer, and the physical, emotional and financial devastation that accompanies it affect two generations of women in my family. Whether I like it or not, and whatever that may mean for me, breast cancer is part of my family history. I could be next.

My grandmother, Katie Wilcox, was larger than life to me. She was strong, both physically and mentally. She wasn't a fragile wisp of a woman. She was stout and tall. Her big-boned frame always supported a few extra pounds that she carried with confidence, while wearing plus-sized fashions and size-12 shoes.

She was active, and she stayed busy taking care of her family, both inside and outside of the home. She tended to her flower beds and worked in her garden, pulling weeds, watering and picking vegetables from vines and stalks to cook for supper and to preserve for winter. She helped tend the little store my grandfather built in Stockdale in the 1960's. She drove to town every Saturday to get her hair done and to church on Sunday to worship. She was both tough and tender-hearted. She was solid. She was stable. I loved everything about her.

In 1978, she was 60 years old and recently widowed when she was diagnosed with cancer in her left breast. As was common in those days, her treatment included a radical mastectomy. A surgeon removed all of the breast tissue, the overlying skin, the underlying chest muscles and the lymph nodes on that side. A skin graft was also needed to close the wound. The surgery was followed with aggressive radiation therapy and chemotherapy to kill any remaining cancer cells that may have been left behind. Her doctor told her if five years passed without a recurrence, it would improve her chances for survival.

My mother, her three sisters and a brother helped their mother through the initial trauma of her surgery, and with each passing year, we all held out hope that the cancer would not return. My grandmother's house was still the hub of activity every holiday, and she still enjoyed cooking for a house full of hungry teenagers



**Photo Submitted**  
**Katie Wilcox with her oncologist, Dr. Allen Yielding, who came from Birmingham to Sylacauga twice weekly to provide her treatments. Yielding practices at Hematology & Oncology Associates of Alabama.**

and any friends they brought with them.

But in 1982, just two months short of the five-year mark, she developed a knot in her right breast. She underwent another radical mastectomy which left her with no muscles in her chest. Her chest was now covered entirely with skin grafts

See **Inspired** page 8C

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Look **Forward.**

# Grandview supports Breast Cancer Awareness Month

By Vallean Jackson  
Special to The Daily Home

As the nation goes pink, the staff at Grandview Medical Center is participating in Breast Cancer Awareness Month to educate the community about the importance of breast health.

“Around mid-September, we had Mammo Day which was dedicated to giving out information about mammograms and scheduling appointments for them,” said Ramie Wesley, Grandview’s imaging/oncology service line administrator.

As part of the effort, stickers have been handed out to a staff of over three thousand to wear on their badges in support of and as reminders for patients, Wesley added.

Though Breast Cancer Awareness Month comes once a year in October, Grandview promotes wellness and better health year-round.

“Every year we promote breast cancer awareness, the gifts change but Project Pink stays the same, and our goal to connect more and educate the community continues,” Wesley said.

Project Pink is a collaboration between Grandview and Pink Heals Central Alabama on behalf of breast cancer awareness.

“Pink Heal Central Alabama uses gently used or retired fire trucks and paints them pink in several ways to help bring attention to the event as well as to allow everyone to sign our truck in honor of or in memory of someone,” said Ronald Moorehead, retired firefighter and paramedic.

“The truck will be parked in front of the hospital for people to sign and take pictures with,” Wesley added.

But Grandview does not stop there when it comes to showing its love and support for patients.

“For the annual Race For The Cure, we have a Grandview team participating in the race and will be recruiting participants up until the day of,” Wesley said.

Grandview is well-rounded when it comes to ensuring patients are supported and encouraged no matter

what they are going through.

“This year we are doing a photo booth that will have props and hashtags as one of the gifts for patients,” Wesley said. “#GrandviewProud, #GrandviewBham-Mammo and #FightLikeAGirl will be some of the hashtags, just to mention a few.”

Asked if any free services were going to be provided, Wesley said that it would be very challenging to offer free mammograms, as they are complex and because a physician has to be present. Therefore, that is not a service that can be free.

However, “we offer a comprehensive approach to breast cancer patients and mammography for screening of early detection. If a suspicious nodule is found, Grandview is capable of providing image guidance, biopsy and for positive or malignant tumors, our cancer center provides a customized treatment plan catered to the patient. This depends on the type, stage, and location of the tumor, but it is all tailored to the patient’s specific disease for the best possible outcome. This may include surgery, chemotherapy and radiation therapy as far as treatments,” Wesley added.

As a preventative measure, she advises self-examinations each month in order to become familiar with your body and to be able to detect abnormalities that may need to be further investigated.

“It used to be said that breast exams were best done in the shower, but my best advice would be to pay attention to your body, get your check-ups and ask questions,” said Dr. Emily Mills Craner of Grandview OB/GYN.

Craner sees patients throughout the year and as part of every annual visit a breast exam is included.

When asked how she prepares for Breast Cancer Awareness Month, Craner said, “I get to talk about it more with patients, but for me, it is a year-long process. I love that the media highlights it, but breast health is all year long.”

For patients who have a higher risk of breast cancer, they should undergo a risk assessment and visits twice a year opposed to one annual visit and mammograms,



**Dr. Emily Mills Craner**  
Grandview Medical Group

Craner recommends.

However, there are ways to possibly prevent and decrease the risk of breast cancer. According to Craner, living a healthy lifestyle, having controlled or regulated menstrual cycles, having at least one child and breastfeeding at some point in your life may help reduce one’s risk of developing breast cancer.

Breast cancer, although scary, can be treated if caught early and even prevented. Learning your body, paying attention to abnormalities, asking questions when unsure and living a healthy lifestyle can all help to prevent the disease.

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Breast Cancer Awareness Month

# Breast Cancer Awareness Month: What you need to know

American Cancer Society

During National Breast Cancer Awareness Month, researchers remind patients and the community that remarkable progress against the disease should not obscure the significant challenges remaining.

**The Facts:**

Thanks to largely stable incidence rates and improved treatment, as well as earlier detection through screening and increased awareness, a woman’s risk of dying of breast cancer dropped 39 percent between the late 1980s and 2015, translating into more than 300,000 breast cancer deaths avoided during that time.

Despite that progress, there’s much more to be done. Breast cancer is still the second-leading cause of cancer death in women, second only to lung cancer. There is still a large racial gap in mortality, with African-American women having higher death rates compared to whites, even as incidence rates are similar.

- During 2018,
- About 266,000 new cases of invasive breast cancer were diagnosed in women.
  - About 63,000 new cases of carcinoma in situ (CIS) were diagnosed (CIS is non-invasive and is the earliest form of breast cancer).
  - About 40,000 deaths were



attributed to breast cancer.

- While black and white women get breast cancer at roughly the same rate, the mortality rate is about 40% higher among black women than white women.

At this time, there are more than 3.1 million people with a history of breast cancer in the United States. (This includes women still being treated and

those who have completed treatment.)

**Risk factors:**

- Numerous studies have confirmed that alcohol consumption increases the risk of breast cancer in women by about 7%-10% for each one drink of alcohol consumed per day on average. Women who have 2-3 alcoholic drinks per day have a 20 percent higher risk of breast cancer compared to non-drinkers.

- Obesity increases the risk of postmenopausal breast cancer. Risk is about 1.5 times higher in overweight women and about 2 times higher in obese women than in lean women.
- Growing evidence suggests that women who get regular physical activity have a 10%-25% lower risk of breast cancer compared to women who are inactive, with stronger evidence for postmenopausal than premenopausal women
- Limited but accumulating research indicates that smoking may slightly increase breast cancer risk, particularly long-term, heavy smoking and among women who start smoking before their first pregnancy.

If you or someone you love are concerned about developing breast cancer, has been recently diagnosed, are going through treatment or are trying to stay well after treatment, the American Cancer Society (ACS) provides important information on these topics and more.

The ACS currently funds 155 multi-year grants focused on breast cancer totaling \$60.2 million. The organization has played a key role in many of the advances against breast cancer, including funding early work that eventually led to the development of tamoxifen and Herceptin.

To learn more about advocacy work and to help make fighting breast cancer a priority in your community, visit [aacrc.org/makingstrides](https://www.aacrc.org/makingstrides).

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# Plant-based diet may be key component in treating breast cancer, UAB study says

By Katherine Stephen  
Special to The Daily Home

Researchers at the University of Alabama at Birmingham have found a dietary combination that transforms the most lethal of all breast cancers into a highly treatable breast cancer. Specifically, scientists involved in the Scientific Reports study say a particular plant-based diet may be the key.

Trygve Tollefsbol, Ph.D., D.O., professor of biology in the College of Arts and Sciences and senior scientist with the Comprehensive Cancer Center as well as Yuanyuan Li, M.D., Ph.D., a research assistant professor of biology, use epigenetics — the study of biological mechanisms that will switch genes on and off — as a mechanism to identify ways we can change human gene expressions in fatal diseases, including breast cancer.

All breast cancers are either estrogen receptor-positive or estrogen receptor-negative. The tumors in estrogen receptor, or ER, negative breast cancer are much less likely to respond to hormone therapy than are tumors that are ER-positive, which means that ER-negative breast cancers are typically very aggressive.

“Unfortunately, there are few options for women who develop ER-negative breast cancer,” Tollefsbol said. “Because of the poor prognosis this type of cancer carries, new advances in prevention and treatment for ER-negative breast cancer have particular significance.”

With that in mind, Tollefsbol and fellow researchers set out to further research how scientists can efficiently neutralize mechanisms that lead to and worsen ER-negative cancers. Up until this time, conventional cancer prevention has focused primarily on single chemopreventive compounds.

“One reason many in the field shy away from com-



binning two or more compounds at a time for treatment research is the fear of adverse effects and potential interactions that are unknown,” Tollefsbol said. “To overcome that concern, we chose compounds that we felt confident would interact well together, because they have similar favorable biological effects but still have





different mechanisms for carrying out these effects that would not interfere with one another.”

Tollefsbol and his team identified two compounds in common foods that are known to have success in cancer prevention and that could potentially be combined to successfully “turn on” the ER gene in ER-neg-



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ative breast cancer so that the cancer could be treated with estrogen receptor inhibitors such as tamoxifen.

“One way we can use epigenetics as a powerful tool to fight cancer is through compounds found in our everyday diet,” Tollefsbol said. “Vegetables, for example, are filled with these types of compounds. Your mother always told you to eat your vegetables, and science now tells us she was right.”

Another compound found in green tea has been shown to stimulate epigenetic changes in cancerous genes, according to prior studies from Tollefsbol’s lab.

These compounds, used in the right way, can help modulate gene expression aberrations that are contrib-

uting to the disease.

The researchers found that a combination of dietary plant-derived compounds consisting of sulforaphane from cruciferous vegetables such as broccoli sprouts, along with polyphenols from green tea, is successful in preventing and treating ER-negative breast cancer in mice that are genetically programed to develop ER-negative breast cancer at high rates.

Further investigation revealed that the mechanism for the efficacy of these two dietary compounds involved epigenetic changes induced in the ER gene regulatory region.

With the combined dietary treatment the re-

searchers administered, the tumors in the mice were converted from ER-negative to ER-positive cancers. This rendered the breast cancer easily treatable with tamoxifen, an estrogen receptor inhibitor.

“The results of this research provide a novel approach to preventing and treating ER-negative breast cancer, which currently takes hundreds of thousands of lives worldwide,” said Li. “The next step would be to move this to clinical trial, and to eventually be able to provide more effective treatment options for women either predisposed to or afflicted with this deadly disease.”

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# Alabama media personality inspires others through her journey to defeat breast cancer

By Karim Shamsi-Basha  
Special to The Daily Home

In 2001, Brenda Ladun felt a lump. She went to the doctor, who told her it was stage two breast cancer. Ladun's first thought was, "I can't have cancer. I have kids."

The next few years would prove strength is something she could summon when needed.

"The cancer enhanced my faith and my inner strength," Ladun said. "I was a lot stronger than I thought I was."

What followed was surgery to determine whether the cancer had spread to other organs. There would be months of chemotherapy following the surgery.

"The journey I had through cancer was a shock at first, but then I learned so much as a result of the struggle," she said. "I wouldn't trade it for anything in the world."

A familiar face to many in Talladega and St. Clair counties, the ABC 33/40 news anchor has made her fight with cancer public through three books, and an event she has held for more than a decade called Conquer Cancer Run. The annual event in the spring raises money for cancer



Photo by Karim Shamsi-Basha  
As a television news anchor, Brenda Ladun was a public figure before her breast cancer diagnosis in 2001. In the years since, she has used her position to raise awareness, raise money and help other people with their own struggles.

research, education and prevention.

"I decided I had to do everything I could to fight it and get healthy again," Ladun said. "I didn't know what the future would hold. It really makes you look back and take account of your

life and say, 'What's really important here?' At the end of the day, it's about the people you care about, the love in your life; it's about the people you can show love to."

Ladun has shared her journey

through "Behind the Scenes of Breast Cancer: A News Anchor Tells Her Story of Body and Soul Recovery," "Getting Better, Not Bitter" and "Encouraged: An Inspiring Journey with Real-Life Stories of Hope."

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Photo by Karim Shamsi-Basha

Ladun decided to be very public with her fight against breast cancer when she was diagnosed 18 years ago. She has since written three inspirational books about the subject.

“You may wonder, how can life go on for a cancer survivor after the ravages of surgery and chemotherapy? The answer is: hope,” she said. “This is why I’ve written the books: to share with you the hope I found at the be-

ginning of my cancer story, a hope that has continued to blossom even through the toughest times of my life. In the five years since I was diagnosed, I’ve had an amazing journey of growing in faith. I want to take you behind the

scenes, if you will, to share the miracles I’ve experienced through my life’s storms as well as my encounters with other stories of hope. And I want to share the practical, spiritual lessons I have learned as I have been in recov-

ery – physically and spiritually. “From my cancer, I realized that life is too short to be worried about the little things that really don’t matter in the end.”

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# Inspired

From page 1C

which became a tight patchwork of scar tissue, and the radiation and chemotherapy treatments were just as brutal as before, and just as necessary.

My mother drove her to every doctor appointment. She had bloodwork, chemotherapy and radiation at regular intervals. She did everything her doctor told her to do, but within a couple of years, a hard knot began to protrude from her chest wall. One day, she asked my mother to look at it. My mom remembers her saying, “It can’t be breast cancer because I don’t have my breasts.”

But it was. And for the third time, she received radiation and chemotherapy treatments. For the third time, she mustered the strength to fight for her life. And she fought until she no longer had an appetite or the strength to get dressed to leave her house. Even when her physical strength left her, she refused to give up.

When a hospice service was called in to care for her, they recommended she get a hospital bed. She got one, but she slept in her recliner. She used a wheelchair to get around in her house until she didn’t have the strength to sit up.

When the day came for her to get in the bed, her children were there to help her. A nurse administered morphine and placed a catheter in her, and she lived six more days in that bed. She died in 1992, after battling breast cancer for 14 years, and my family was never the same after her death.

For the next ten years, we managed. There were weddings and babies and funerals. There was a new millennium. And there were advances in the detection and treatment of breast cancer. So when my mother was diagnosed in 2003, the prevailing practice and trend among doctors was to conserve as much of the breast and underlying muscles and lymph nodes as possible.

My mother’s doctor performed a modified radical mastectomy, taking only the breast. He also removed twenty lymph nodes he suspected were cancerous, and after testing, only 9 were. She also received

radiation and chemotherapy, but newer equipment, techniques and medicines allowed for a much more selective and targeted approach.

She also benefited from nutritional research that found spirulina, a blue-green algae, had anti-cancer properties, reducing both cancer occurrence and tumor formation. She bought a juicer and plenty of fresh fruits and vegetables and added powdered spirulina to smoothies that she drank every day. And while her experience was no walk in the park, she has remained cancer free for 16 years.

She doesn’t like to talk about it. She says she still feels like she’s in denial. But we spoke recently, and she had this to say.

“After seeing what Mama went through, with her situation being worse than mine, I was determined to not let it interfere with my life.

“I remember the times Mama would tell me how uncomfortable and vulnerable she felt in her chest. The doctors had cut her to the bone and had to graph skin from her hips to close her up. She always felt a tight pulling in her chest and kept it lotioned to ease it up some.

She always wanted me to scratch her back when I was there. We would go into the bathroom, and she would take her top off, and I would scratch her back really good. After I had my surgery, I experienced all these things that Mama had experienced, just to a lesser degree. Since I was cut so deep under my arm, I have problems with tightness there too.

The itching is caused from the nerves that were cut during surgery, and they number in the thousands. Some nerves grow back together and some feelings may return, but the area where the meat and flesh have been excised and discarded, will forever be numb.

After 16 years, I’m still not accustomed to the numbness. That’s the worst part to me. It’s like Novocain administered by the dentist, except it’s on your body instead. I also have the tormenting itch that Mama had. I keep my own personal back scratching brush with me at all times. I take it when I travel.”

“Today, there are so many resources for women who develop breast cancer. There are certain risk



**Photo Submitted**  
**Kellie Tipton with her mother Peggy Gurley, who was 10 years cancer-free at the time this photo was taken.**

factors that I cannot change. I am 55 years old now. My age alone carries an increased risk.

I have been tested for mutations in my BRCA1 and BRCA2 genes, which can lead to abnormal cell growth. I have no inherited mutations.

But if I notice a lump one day, and I am diagnosed with breast cancer, it is not the death sentence it once was. There is more research being done and newer and better treatments available today than ever before. Long-term survival rates are increasing.

And I have learned from two incredibly brave women in my family how to fight for my life.

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