

"THIS HAS DEFINITELY CHANGED OUR PERSPECTIVE."

Dianne Lynch



"YOU HAVE TO FIND SOME PURPOSE IN THIS."

Muriel Boles



"THE THING ABOUT CANCER IS, IT'S NEVER OVER."

Johanna Myers



"I'M LEARNING TO SLOW DOWN AND DO THINGS FOR ME."

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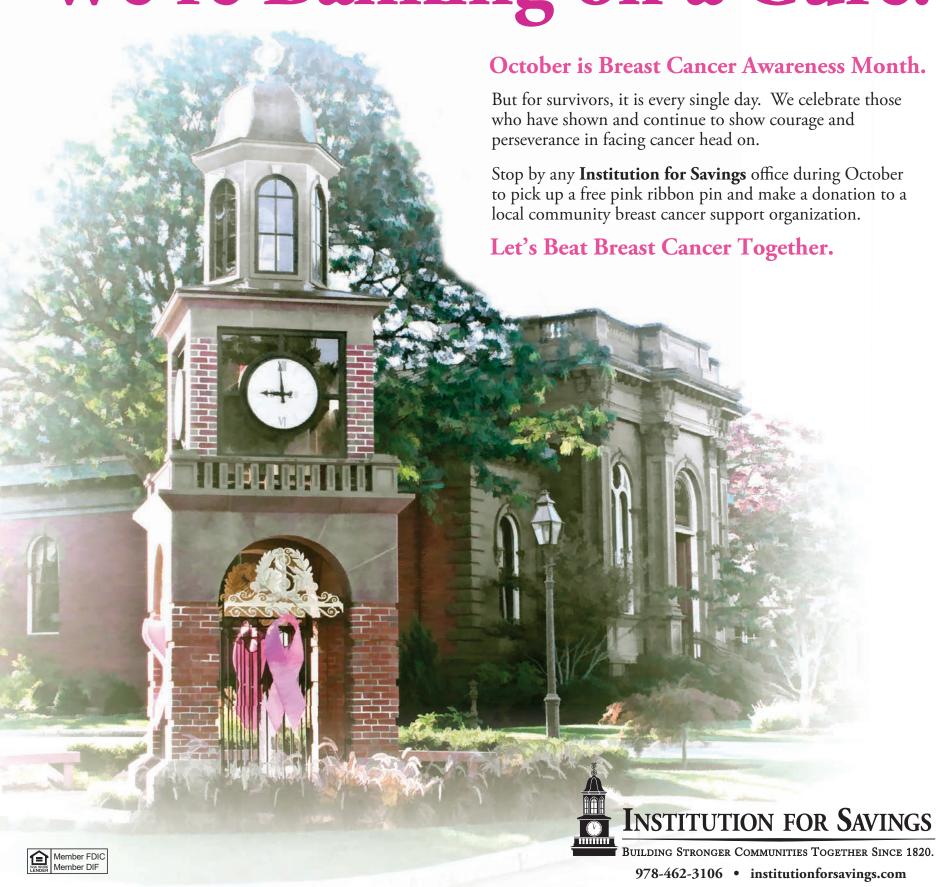
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Breaking down the stages of breast cancer

Once a person is diagnosed with cancer, his or her physician will try to determine how far the illness has progressed, including whether or not it has spread to other areas of the body. This effort is known as "staging."

The stage of the cancer ultimately refers to how much cancer is present in the body, according to the American Cancer Society. Each cancer has its unique staging characteristics, and breast cancer is no different.

Doctors treating breast cancer adhere to the TNM staging system, which is overseen by the American Joint Committee on Cancer. This staging uses both clinical and pathological (surgical) systems for breast cancer staging. Pathological staging may be more accurate because it examines tissues taken during surgery or a

North of Boston Media Group • Note that this staging system also uses substages within each category, which further breaks down breast cancer staging into more characteristics and



combinations. There are so many possibilities that can go into staging that two women at the same breast cancer stage may have different experiences.

T categories

T in the staging system refers to the tumor's size and whether it has spread to the skin or chest wall under the breast. Higher numbers refer to larger tumors and greater spread.

- TX: A primary tumor cannot be assessed.
- **T0:** No evidence of primary tumor.
- T1: Tumor is 2 centimeters or less across.
 - **T2:** Tumor is more than 2 cm

but not more than 5 cm across.

- **T3:** Tumor is more than 5 cm
- **T4:** Tumor is of any size growing into the chest wall or skin.

N categories

N in the staging system identifies if the cancer has spread to the lymph nodes near the breast and, if so, how many.

- NX: Nearby lymph nodes cannot be assessed, which can happen if they were previously removed.
- NO: Cancer has not spread to nearby lymph nodes.
- N1: Cancer has spread to one to three axillary (underarm) lymph node(s), and/or cancer is found in internal mammary lymph nodes (those near the breast bone) M categories on a sentinel lymph node biopsy.
- N2: Cancer has spread to four to nine lymph nodes under the arm. One or more area of cancer spread is larger than 2 millimeters.
- N3: Cancer has spread to any of the following: 10 or more axillary lymph nodes with area

of cancer spread greater than 2 mm; to lymph nodes under the collarbone, with at least one area of cancer spread greater than 2 mm; cancer found in at least one axillary lymph node (with at least one area of cancer spread greater than 2 mm) and has enlarged the internal mammary lymph nodes; cancer in four or more axillary lymph nodes (with at least one area of cancer spread greater than 2 mm), and to the internal mammary lymph nodes on a sentinel lymph node biopsy; to the lymph nodes above the collarbone on the same side of the cancer with at least one area of cancer spread greater than 2 mm.

M indicates if the cancer has spread to distant organs.

- M0: No distant spread is present on X-rays or other imaging and physical tests.
- M1: Cancer has spread to other organs, notably the brain, bones, liver or lungs as determined by a biopsy or testing.



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How to support loved ones who have been diagnosed



breast cancer have helped raise awareness of the disease and just how treatable it is when detected early. Despite that, a diagnosis can still be difficult for women and with daily living, such as cooktheir families.

When someone close to you is affected by breast cancer, priorities suddenly change and you may be wondering what you can do to provide the support needed to help this person navigate any ups and downs that could be on the horizon.

A breast cancer diagnosis does not produce a uniform response. While one loved one may embrace others wanting to help, another may feel like a burden and exhibit an unwillingness to accept help. In the latter instance, being a supportive bystander may require walking on eggshells.

Even still, there are some universal ways to lend support when a friend or a loved one has been diagnosed with cancer:

■ Offer practical support. Cancer affects the body in a number of ways. Energy levels may wane,

Efforts to educate women about and certain symptoms may arise. Side effects from treatments also can make it difficult to continue with daily tasks. So an offer to help with tasks associated ing meals, gardening, washing clothes or cleaning up around the house, can be practical and much appreciated.

Approach the individual and ask questions in pointed ways. Rather than, "What can I do to help?" which may result in an answer of "nothing" — figure out a way to pitch in and then ask if that would be acceptable. This may be, "Would you like me to run to the supermarket for you today?"

■ Offer emotional support. Someone with breast cancer may just need a person who can be there and listen. A hug, a nod of understanding or even a companion who can chat and take the person's mind off the cancer can be immensely helpful.

Keep in mind that emotions may change on a dime, and some emotions may be directed at support systems. While it can feel hurtful,

remember the real reason for any outburst is the disease. Patience is needed at all times.

- Learn what you can about breast cancer. Research the type of cancer your loved one has, which may make it easier to understand what to expect. If the person is amenable, you may consider going along to appointments to hear firsthand about the next steps in treatment and recovery.
- Maintain a positive attitude. It's never easy knowing that someone you love is sick. He or she is going through an emotional roller coaster ride, and support systems can help lift spirits by maintaining positive attitudes. Avoid wearing rose-colored glasses, but try to remain as upbeat as possible.
- **Find a support group.** Professional support groups are great resources for coping with a cancer journey. Supporting a person with cancer takes its own unique toll, particularly when caring for a spouse, child or mother with breast cancer. Support groups for support networks can be helpful.





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Helping others fight

After losing son and facing own diagnosis, Dianne Lynch focuses on nonprofit work

By Teddy Tauscher. ttauscher@northofboston.com

In the fall of 2003, Dianne and Ed Lynch's 2-year-old son, Jack, started walking with a limp. Soon afterward, his parents learned that he had stage 4 neuroblastoma.

That same year, the North Andover couple's second son, Aidan, was born.

For the next three years, Jack went through treatment at Tufts Medical Center in Boston.

In October 2006, the Lynches' third son, Thomas, was born. A month later, Jack died.

Then three months into nursing Thomas, Dianne found a lump.

"I thought this can't possibly be anything, really?" she said. "But we found within about four months that I was also diagnosed with breast cancer, four months after Jack passed away."

"We could just not imagine how we were going to tell our family and friends that we are about to go through this again," Dianne said.

However, after the initial shock, Dianne said that her family adjusted quickly. Within a few weeks of her diagnosis, she was in treatment.

"We knew what the next step was, we knew what the process was," Ed said.

Dianne had stage 3B breast cancer and underwent a double mastectomy. After three years of treatment, she was cancer-free.

"We have always been fairly empathetic people, we are." Dianne said. "But this has definitely changed our perspective as to why we help and knowing that we can help other people in this cancer space because of what we have gone through collectively as a family and



TIM JEAN/Staff photo

Breast cancer survivor Dianne Lynch and her husband, Ed, shown outside their North Andover home, are using their experiences to help others.





Courtesy photos

From left, Dianne, Aidan, Ed and Thomas Lynch hold a picture of Jack Lynch, who died of cancer in 2006. Jack, also shown at right with his mother, was diagnosed with neuroblastoma when he was 2.

each one of us individually."

The experiences have touched the whole family. Ed said.

"Thomas was only a month old when Jack passed away, and then he was under 3 when Dianne was diagnosed and went through treatment, but he was still raised in a cancer house and a bereaved cancer house," Ed said.

Now 18 and 16, Aidan and Thomas host an annual blood drive in their brother's memory.

For the past six years, Dianne has been the executive director of One Summit, and Family Reach, which

a nonprofit that serves pediatric cancer patients. In addition to her personal stories, she draws upon a lengthy career working in sports marketing and years spent working with and for a number of charities, including Golf Fights Cancer

SIGNS AND SYMPTOMS OF BREAST CANCER

The American Cancer Society urges women to take note of how their breasts normally look and feel. That knowledge is vital because it helps women recognize when something does not look or feel good to the touch with their breasts. Screening alone may not be sufficient, as the ACS notes that mammograms do not find every breast cancer. The ACS reports that the following are some potential warning signs of

- A new lump or mass: This is the most common symptom. A lump or mass that is cancerous is often painless, but hard and has irregular edges. However, lumps caused by breast cancer also can be soft, round and tender. Some even cause pain.
- Swelling: Some women experience swelling of all or part of a breast even if they don't detect a lump.
- Dimpling: The skin on the breast may dimple, sometimes mimicking the look of an orange peel.
- Pain: Pain on the breast or nipple could indicate breast cancer.
- **Retraction:** This occurs when the nipple turns inward.
- Skin abnormalities: The skin on the breast may redden, dry out, flake or thicken.
- **Swollen lymph nodes:** Some women with breast cancer experience swelling of the lymph nodes under the arm or near the collarbone.

helps with the financial side superheroes," he said. of being diagnosed with cancer.

"Very quickly, I was able to turn those skills of events and talking passionately about things that I know about and am passionate about and use it toward non- SEALs who participated in profit work," Dianne said.

At One Summit, "the mission is to build resilience and facilitate growth in pediatric cancer patients and their siblings, through mentorship, experiential learning, storytelling and community engagement with U.S Navy SEALs," she said.

One Summit was founded in 2013 by Adam La Reau, who was inspired by his own experience as a Navy SEAL and the loss of his mother to breast cancer.

Ed said that at first he didn't really understand the program, but after thinking about how the kids view the Navy SEALs, it made sense to him.

"These kids think these Navy SEALs are like

Dianne said that the program holds a dual purpose, benefiting both pediatric cancer patients and veterans.

Ed remembers a conversation he had with one of the the program after returning from deployment.

"It was really his chance to come back and get centered," Ed said.

In addition to her work at One Summit, Dianne Lynch also uses her own experiences to advise many people facing cancer diagnoses.

"Two to three times a year, I will be introduced to a newly diagnosed woman with breast cancer," she said. "To be able to be that person on the front end of. 'I just got my lab results,' to see them come through the back end of, 'I am now done with treatment,' on the survivorship side, is really a gift."

For more information about One Summit, visit onesummit.org.

Throwing a 'Pink Party' to give back

Nine years after her stage 4 diagnosis, Muriel Boles knows 'there is always hope'

By Mike LaBella mlabella@northofboston.com

Stage 4 cancer survivor Muriel Boles has found her own way of recognizing the extra years of life she has been blessed with — raising money to help eradicate breast cancer, a disease she's been battling for over 10 years.

For the second year in a row, she organized and ran the Pink Party for Dana-Farber, an art show and auction held at Riverside Church in her hometown of Haverhill.

The 2022 event was held Saturday, Oct. 1, and featured a silent auction of original artwork — including prints, photographs, mixed media and watercolprofessional portrait shoot.

When her cancer was diagnosed in 2013, Boles had no idea what the future would bring.

"My oncologist, Dr. Ankur Mehta at Dana-Farber in Methuen, sat by my bed one afternoon during my stay and told me, 'There is always hope," she said.

Boles, now 61, took his words to heart and resolved to do whatever was needed to keep living.

"He's a compassionate, caring and brilliant man who shared stories of people a ray of hope. who lived longer with this disease, and he said there are always new treatments coming along, which made me feel I could get through this and maybe live longer," she said. "There was one thing that made me feel I could get through this, and that's the Boston Marathon and watching those injured people trying to get their lives back. I thought to myself, 'If they can do it, so can I."

Her battle with metastatic breast cancer began around 2011, when she began sensing changes in her body,



A table centerpiece and a handmade print by Joe Sweeney were among the artworks available at the Pink Party for Dana-Farber, held at Riverside Church in Haverhill.

such as aches and lumps that weren't there before. Because of a longtime fear of doctors, and having lived ors — and other items, like a through her mother's death from cancer just six months after graduating from Haverhill High School, she didn't want to face the reality of such an illness.

> "It got to the point in 2013 where I finally decided to go until the business was sold the emergency room at Holy in 2017. Now, she works as Family in Methuen," she said. "During a two-week stay and after much testing, they discovered I had stage 4 metastatic breast cancer."

The cancer had spread to her right lung and her bones, and the outlook was grim — until Mehta offered

Boles underwent seven months of traditional chemotherapy and contended with fluid buildup from a tumor in her right lung that required a drain.

The treatments continued — from pills to injections — in an effort to keep the cancer at bay.

"I kept telling myself I can handle this and then I asked God for help, and to put this in his hands," she said. "People prayed for me and supported me, and it was important to know I wasn't alone in this."

A sign on a wall in Boles'

home carries a Bible verse: "Faith, it does not make things easy, it makes them possible."

"I feel a lot of my strength comes from God," she said.

Boles was able to return to work in February 2014 as a graphic designer for a printing company, a job she held for nearly 22 years an office manager at Riverside Church.

"You're never really cancer-free with this form of cancer," she said. "All they can do is keep it under control, and I continue to receive chemotherapy. I just push no matter what, as I'm very determined to continue to do what I can do to support the cancer community, and maybe someday, someone won't have to go through what I'm going through.

"You have to find some purpose in this, and people must realize it's not always a death sentence," she said. "I've been given this incredible gift of 91/2 years, and I feel I need to do something to give back."

That something turned out to be her first Pink Party last year at her church. She surpassed her goal of raising \$5,000 for Dr.



stands in her Haverhill home among several local works of art that were auctioned off during her Pink Party for Dana-Farber on Oct. 1. The second annual fundraiser benefits Dr. Sara Tolaney's **Novel Therapeutics** Research Fund.

TIM JEAN/Staff photos

Sara Tolaney's development of novel therapies for breast cancer at Dana-Farber Cancer Institute.

This year, Boles' party raised more than \$9,000,

which she will donate to Tolaney's research again.

Tolaney is the chief of breast oncology and associate director of the Susan F. Smith Center for Women's

Cancers at Dana-Farber in Boston.

"I saw her once in person in 2020 and virtually after that," Boles said. "We hope to grow the event each year."



Nonprofit's initiative aims to improve access to care

By Christopher Roberson croberson@northofboston.com

For the past two years, the Equitable Pathways to Breast Cancer Care Initiative has continued to break down health care barriers that have been a burden to scores of minority patients.

Equitable Pathways operates under the Ellie Fund, a nonprofit organization in Needham that serves up to 1,000 breast cancer patients each year. The organization was founded in 1995 in memory of Eleanor Popkin, who lost her battle with breast cancer eight years earlier at the age of 49.

"Equitable Pathways is Ellie Fund's approach to addressing the very serious matter of disparities in breast cancer care and outcomes," said Meredith Mendelson, executive director of the Ellie Fund. "Our initiative offers solutions for underserved patients who need support services to ensure they can access and adhere to their breast cancer treatment plans."

In 2020, it was discovered that



The Ellie Fund hosted "Red Carpet Unplugged, A Critical Discussion About Equitable Pathways to Breast Cancer Care" this past spring.

only 34% of Ellie Fund patients identified themselves as being part of a minority. Therefore, despite having a 70% survival rate, experience treatment delays, as breast cancer was still taking the lives of women who may have lived had it not been for the socioeconomic barriers embedded in the health care system.

The results of a recent study showed that in Massachusetts, Black, non-Hispanic women and patients insured by Medicaid are two to three times more likely to opposed to patients who are white or privately insured.

Although there are no financial requirements to qualify for assistance from Equitable Pathways, patients must be in active treatment and reside in Massachusetts. Fund for the past 10 years.



Nekia Clark, director of patient services and outreach at Ellie Fund, Courtesy photos records a podcast with state Rep. Patricia Haddad about the Equitable **Pathways to Breast Cancer Care** Initiative.

> Some of the services offered include grocery gift cards, transportation to treatment and meal deliveries.

Patricia Gonzalez, lead resource specialist at the Dana-Farber Cancer Institute — Merrimack Valley in Methuen, said she has been referring patients to the Ellie be easier for patients to get into

"This is great assistance for our patients," she said.

Gonzalez also said that unlike other organizations, the application process for the Ellie Fund is very "easy and straightforward."

Launched in phases, the first phase of Equitable Pathways will continue through 2024. The goals of the first phase include bolstering diversity in the patient population, as well as establishing relationships with a diversified group of referral partners.

In April, the Ellie Fund received a \$110,000 donation from medical technology company Hologic. The funding allowed Equitable Pathways to launch its self-referral platform. Using this platform, patients can apply for services themselves rather than waiting for a social worker or patient navigator.

"We want to make it easier for patients to get our services," said Nekia Clark, director of patient services and outreach at the Ellie Fund and leader of the equity initiative, adding that it will also clinical trials.

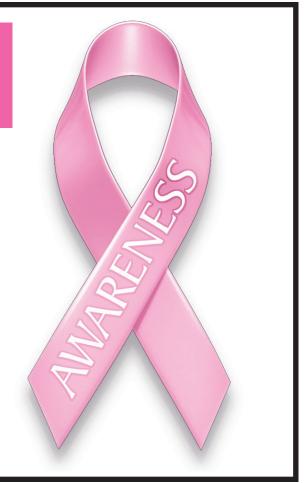




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Runway for Recovery a model of hope and inspiration

By Dave Rogers drogers@northofboston.com

Even years after successfully beating back breast cancer, survivors are sometimes left wondering "what next?"

The thought process can be humbling, intimidating and downright scary.

But for the last 15 years or so, survivors have been able to strut their stuff, so to speak, during the annual Runway for Recovery fashion show organized by Newburyport resident Olivia Boger.

Boger, whose mother died of breast cancer, took her personal tragedy and changed the conversation. In the process, her runway shows have raised more than \$1.5 million to help families who have lost a mother, or even a father.

Runway to Recovery was formed about 16 years ago in Newburyport as a way

to honor Boger's mother, Cande Achtmeyer, who died in 2001. During Achtmeyer's 10-year illness, little was said to Boger and her siblings about how serious the situation had become.

Six years after her mom's death. Boger decided to begin Runway for Recovery as a one-time fundraiser to help families receive the kind of support that her mother had given her as a child despite her terminal illness.

"I feel very privileged that this is the kind of work I do each day," Boger said. "It doesn't feel like a job to me. It feels exactly like what would make my mom so happy."

a one-off event has become a fundraising juggernaut, not to mention an inspiring evening for cancer survivors are Newburyport residents and their families.

This year's 16th annual Runway Show takes place



Breast cancer survivor Becky Conary, right, and her daughter, Brianna, hit the catwalk during last year's Runway for Recovery show.

Friday, Oct. 14, at 6 p.m. at But what was conceived as The Westin Boston Seaport District.

Among those who will be parading down the catwalk Diane Hansen and Becky Conary, who both participated in last year's event.

Joining Hansen during her appearance in last year's show was her 22-yearold daughter, Anastasia.

"People were cheering from the moment we started. It was like a high I couldn't explain," Hansen said. "It was a very positive experience to participate, so that's why she and I are doing it again this year."

Hansen, 60, was 45 when she was diagnosed with breast cancer and has been in remission for roughly 10 years, a milestone seen by many as the point where

it will never come back, she said.

"So I feel pretty good about that," she said. "Family, faith and friends are kind of what got me through it."

Conary was 39 when she was diagnosed in 2013.

Like Hansen, she enlisted her daughter to join her down the runway last year. Having Brianna by her side definitely chased away the nerves, she said.

"It's fun, yet so heartwarming, it's so touching. It's a way to celebrate those who survived and honor those who are no longer with us," Conary said. "Everybody has a story, every journey is different. Receiving a diagnosis is life-changing, and I wanted to do something different in bringing awareness (to that)."

For more information about Runway for Recovery, visit runwayforrecovery.org.





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A lease on life

Johanna Myers got through diagnosis, treatment with support of 'my people'

By WILL BROADDUS wbroaddus@northofboston.com

Johanna Myers was diagnosed with breast cancer two years ago during Breast Cancer Awareness Month.

"It was a Sunday night call from my doctor," the North Andover resident said. "Don't ever answer the phone on a Sunday night when a doctor's calling.'

Myers said his tone was matter of fact.

"It's bad, but we'll deal with it," she quoted him as saying. "I probably went into shock."

Myers was already dealing with several other pieces had cancer until an anomof bad news, including the fact that her husband of 35 vears had recently asked for breast cancer, showed up in a divorce. That was finalized just before her diagnosis and forced Myers to sell her condominium, which she couldn't afford without her husband's help.

She also couldn't afford anything that was available for rent, and moved in with a friend.

"I was dealing with COVID, a divorce, losing my home and cancer all at the same time," she said.

Originally from Michigan, Myers was in the military from 1990 to 1994 and moved many times with her husband before settling in Massachusetts — where she also lived in the '80s - nine years ago.

Myers works at The Village Studio, a gift shop and crafts studio on High Street where she teaches sewing, fixes sewing machines, and makes pillows and other items for sale. Before that, she worked at the New England Quilt Museum in Lowell for eight years after studying textile conservation at Museum Textile Services in Andover.

DID YOU KNOW?

Various organizations urge women to familiarize themselves with their breasts and conduct somewhat routine self-exams so they can uncover any lumps or other issues that may warrant further examination by a physician.

Though self-exams can lead to discovery of breast cancer when the disease is most treatable, the World Health Organization notes that as many as 90% of breast masses are not cancerous.

Non-cancerous abnormalities may be benign masses such as fibroadenoma and cysts or indicative of infection. It's also important that women recognize that breast cancer is not always accompanied by a

In fact, the Mayo Clinic reports that many women with breast cancer never experience any signs or symptoms of the disease. In such instances, the disease is discovered during screening tests, which include mammograms.

Myers didn't know she aly, which was eventually diagnosed as HER2-positive a routine mammogram in early October 2020. It was so small that her oncologist couldn't feel it and ultrasound couldn't detect it.

"I didn't think anything of it," Myers said. "I had had abnormal mammograms in the past. There was no breast cancer in my history, so I was positive that I was fine."

The day after Myers' Sunday phone call from her doctor in Worcester, she got an appointment to meet with an oncologist, radiologist, psychologist and one other doctor at UMass Memorial Medical Center.

"They told me to bring a smart friend," Myers said. "When you're confronted with all of this information and you're in shock anyway, it's hard for you to retain all of this. They want somebody to be there to answer questions when you're on the way home and have questions."

That friend, Karen Leavitt, was one of many people that Myers would come to rely on in the coming months

as she drove to and from Worcester for treatments. Unfortunately, because of the pandemic, Myers made most of those visits alone.

"That was the only visit in all of my visits when I had anybody with me," she said.

Myers had a partial mastectomy on Dec. 6, 2020, when surgeons also put a port in her chest where treatments could be administered. Chemotherapy started in January and continued once a week every week for 12 weeks, with each session lasting between four and eight hours while Myers sat in a

"When the nurses started putting on special garments to administer the chemo was when I realized how poisonous this stuff was," Myers said. "But they give you a lot of anti-nausea drugs. I've lost track of how many drugs they give you through that port. They work wonderfully."

At that point, she was still working at the quilt museum, where she was able to take Wednesdays off to receive treatments.

"I lost all of my hair," Myers said. "My hair had always been short, so I



REBA SALDANHA photo

Johanna Myers, co-owner of The Village Studio in North Andover, found she had a strong support system while going through treatment.

didn't miss it. I did miss my evebrows."

Chemo was followed by 24 straight days of radiation therapy, which Myers said almost wore out her car with trips to Worcester. The chemo was also followed by a year's treatment with Herceptin, a drug that Myers said was first introduced in 1994 and has an enormous impact on her type of breast cancer.

"Mine's very aggressive and more difficult to cure," she said. "Before 1994, it was basically, if you had that, you were gone. There was no life expectancy."

But Myers also said that, beyond the basic facts, she doesn't dwell on the details of either her disease or its treatment.

"I didn't do a lot of research, and I was warned, don't, it will drive you crazy," Myers said.

She did struggle with depression over the uncertainty of her situation, until she was reassured by her oncologist during their second visit.

"I asked my oncologist, is it OK if I sign a lease on an apartment? And she said, you can sign a 10-year lease," Myers said. "Just for telling me that, she gave me hope.'

Myers now gets mammograms every six months,



Jenna Wong, left, and her mother, Juanita Wong, sew comfort pillows for breast cancer patients at The Village Studio last year along with Myers, right.

but can't help worrying about what they will show. or what ailments her treatments may have caused. Radiation can damage blood vessels and the heart, so she is regularly checked by electrocardiograms.

"The thing about cancer is, it's never over," Myers said. "The chemo is hard on your body."

Meeting on Facebook with other women who have had the same cancer is a help. but Myers realizes there is no end to her concerns, and she will have to live with them.

I got out of it is how lucky I am to have the friends that I was worth it.'

have and a support system," she said.

Those friends include her older sister, who kept Myers awake on the phone while she drove back from Worcester, sleepy from chemotherapy. Their relationship hasn't always been the best, Myers said, even though she always knew they loved each other. But the ordeal of cancer changed that, and her sister has been wonderfully supportive throughout.

"I had people, that's what I got out of it," Myers said. "If I had to go through cancer "The most important thing to learn how important my people were, then I guess it

ence of the COVID-19 vaccine in her body, which she had recently received.

She was unable to go for diagnostics imaging for peace of mind because her doctors said the vaccine could produce incorrect

"I nursed three children, and it felt like a blocked milk duct," Wood said of the symptoms. "There was some drainage."

Wood went on with her life. She was married in July 2021 and then took her family to Walt Disney World in October.

That's when symptoms flared up again. She felt that fullness and pain only on her right side. She went to urgent care on vacation and was given an antibiotic.

Wood was then instructed to get imaging and a biopsy upon returning home.

"It was weighing heavy on me that twice in three months, I had this same symptom on one side," Wood positive for COVID-19.



mogram and ultrasound. She also had a core needle biopsy because fluid drainage from her right breast had some blood in it back in Florida.

While the mammogram showed nothing, the ultraresults for six to eight weeks. sound picked up on a 1-centimeter lump.

Biopsy results further indicated Wood had ductal carcinoma in situ — an early a more aggressive type and stage of breast cancer that attacks the milk duct.

According to the American Cancer Society, nearly 1 in 5 new breast cancers are this form. While it usually does not spread to the breast tissue and is mostly treatable, it can become invasive in certain cases.

For Wood, the tumor was growing within a short time.

To top matters off, the mother of three — who just found out she had cancer was stuck in a 15-day quarantine when her daughter's school class largely tested

antine, new imaging determined that Wood needed to take an aggressive approach to her cancer and undergo surgery.

"I had an MRI with contrast, and it showed that my tumor was 5 centimeters by 8 centimeters, which is a lot worse than we expected," Wood said. "At that point, it showed that my cancer was growing rapidly."

She decided to undergo a double mastectomy. Wood had no family history of breast cancer nor any genetic mutations. Her cancer was considered environmental.

"I didn't have a choice with losing my right breast, but I elected to have my left breast removed," Wood said.

She's thankful for her cancer's early detection. She didn't have any lumps and went off instincts with the symptoms she was feeling.

Her doctors believe while the COVID-19 vaccine did

cancer sooner than later.

Prior to her surgeries, she wanted to honor her body and breasts that nourished created artwork and took professional photos.

One of those photos taken is dear to her, as it highlighted her right breast. She stressed it was "one last time being a whole person."

Wood underwent the double mastectomy and then a subsequent surgery to remove 9 more centimeters of the tumor.

She endured 28 rounds of radiation, and some of her skin was removed because of the cancer's growth.

All surgeries and radiation were performed at Exeter Hospital, whose oncology department works in conjunction with Massachusetts General Hospital.

Wood took to social media throughout the whole process.

She shared pictures of her scars and radiation burns.



cess — and she helped them in return.

life," Wood said of surviving her children, Wood said. She breast cancer. "I don't want it to consume me, so I share online and I talk to people."

Exeter Hospital provided great comfort during her recovery. She said her nurse was always there for her, and the hospital itself offered additional support by gifting massages and linking with financial programs.

Her husband, Robert, has been supportive since the start and reminds her that she's now a better version of herself because she's a cancer-free version.

Wood also found comfort in voga and a program at Prasada Yoga in North Hampton run by teacher Michelle Couture. The Yoga in Action program offers free classes for life to cancer patients, survivors and their this year as she enters the caregivers.

The yoga program has

She's gone through a lot in less than a year since "You carry it through your learning she had breast cancer. Wood has dealt with the highs and lows of emotions and knows her road to healing will be a journey.

"One of the biggest misconceptions that I struggled with, and I'm hard on myself, is what's real cancer," Wood said. "My cancer was a 5-inch tumor, but was considered stage 0 because it stayed in my milk ducts.

"Maybe it's stage 0 cancer, but double mastectomies are real," she added. "The trauma is real."

Through it all, Wood is remembering to live life to the fullest.

"I'm enjoying not being held back," she said, "It does change your perspective on life. I'm learning to slow down and do things for me."

Wood has reconstructive surgery scheduled for later next phase on her breast cancer survival journey.





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