

Wednesday, October 12, 2022



**"HUMOR (IS) THE ONLY THING
THAT GETS ME THROUGH."**

Mary Beth Smith



**"YOU WILL NEVER TAKE
ANOTHER THING FOR GRANTED."**

Mary Burt



**"NOBODY SHOULD GO THROUGH
THIS ALONE."**

Kathleen Casey, left



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

Shaylia Wood

Breast Cancer AWARENESS 2022

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INSIDE

Survivor stories

Remembering
those lost

Treatment
and support

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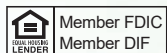
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Breaking down the stages of breast cancer

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 biopsy.

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 across.

■ **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.

■ **N0:** 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) 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 categories

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.

How to support loved ones who have been diagnosed



Efforts to educate women about 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 their 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, 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 with daily living, such as cooking 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.

Do you know?

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Detecting breast cancer: the earlier, the better

BY CAROLINE ENOS
cenos@northofboston.com

Breast cancer can be an overwhelming diagnosis. But the earlier it's detected, the better.

"Women are sometimes afraid to bring things up when it feels like something's wrong," said Kimberly Willis, a nurse practitioner and certified breast patient navigator. "Don't be afraid. Trust yourself, trust your gut, and know that we're here to support you regardless of the end result."

Willis works at the Breast Health Center at the Lahey Outpatient Center in Danvers. She's been in oncology for nearly 25 years and has seen breast

cancer affect many of her family and friends.

It's a diagnosis one in eight American women will receive in their lifetime, according to the National Breast Cancer Foundation. This year alone, more than 43,000 women are expected to die from the disease in the U.S.

That's why regular screenings and early diagnoses are so important.

"I have seen such a tremendous sort of transformation in how we are treating breast cancers, but also how women are surviving it," Willis said.

"We are finding it at earlier stages, and we are able to prevent sometimes more extreme treatments when we can find these cancers at an earlier stage," she said. "That, to me, is amazing."

Signs of breast cancer can include lumps, abnormal tenderness, a change in

skin texture or dimpling, or unexplained swelling or shrinkage seen on one or both breasts. Nipples that become inverted or change texture can also be a sign of the cancer.

Women should have a physical exam every year that includes a clinical breast and pelvic exam.

Monthly self-breast exams can also reveal signs of cancer. Women should look for symptoms and, if something doesn't seem right, call their doctor, Willis said.

"Make sure that we are paying attention to our bodies and that we are advocating for ourselves," she said. "When you go in for a physical and if your doctor isn't doing a breast exam, you have to advocate for that breast exam."

While more rare, breast cancer can also appear in men and show similar symptoms. In 2022, about 2,710

men will be diagnosed with breast cancer in the U.S., according to the National Breast Cancer Foundation.

Knowing your genetic history is a helpful tool in fighting breast cancer and other diseases, Willis said.

"Just knowing what your family history is and knowing what risk factors are there is always important, because that will help guide us as your providers to ideas we may have for screening purposes," she said. "Make sure you have those conversations with your relatives while they're alive."

Willis' work through Lahey largely focuses on breast cancer education, early detection and prevention: three vital roles in fighting this disease.

"Women should get to know what their breasts feel like, learn what a self-breast exam is, when to report something and when to start

DID YOU KNOW?

According to the American Cancer Society, breast cancer mainly occurs in middle-aged or older women.

In fact, the median age at the time of a breast cancer diagnosis is 62. The ACS reports that only a very small number of women younger than 45 are diagnosed with the disease each year.

Despite the average age of onset being over 60, breast cancer is highly treatable. The World Health Organization notes that breast cancer treatments routinely achieve survival probabilities of 90% or higher.

However, those probabilities decline considerably in lower-income countries where access to

screening and other medical services is limited. For example, the WHO notes that five-year survival rates for breast cancer routinely surpass 90% in high-income countries like the United States and Canada. However, those rates are as low as 40% in South Africa, where early detection of the disease is less likely than it is in wealthier nations.

That disparity in survival rates underscores the need for greater resource allocation in lower-income countries, but also highlights the effectiveness of screening and other measures in high-income countries where women are taught to report any abnormalities with their breasts.

doing imaging, which for some women is earlier than 40 years old," Willis said. "It's really just encouraging women to not be afraid to seek care and get the answer

sooner than waiting."

To learn more about the signs of breast cancer, scheduling mammograms and other resources, visit nationalbreastcancer.org.

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Bringing her story to the stage

Playwright Mary Beth Smith turns to humor for production based on her experiences

By GAIL MCCARTHY
gmccarthy@northofboston.com

When Mary Beth Smith was diagnosed with breast cancer 12 years ago, she never imagined that her journey would become an award-winning play.

"I have a sardonic sense of humor, and it comes out in the play," said Smith, of Rockport. "There are so many bizarre things that people with cancer have to deal with. So many things you don't expect. A lot of things in the play are true."

In 2014, "Keep A-breast" was performed at the New Works Festival at the Firehouse Center for the Arts in Newburyport. The one-act play earned the Peter Honegger Prize, given each year by Lois Honegger in memory of her late husband, a longtime member of the local theater community and a judge for the festival.

There is a line in the play when Smith is on a gurney being wheeled through the hall and her family is lined up to say good luck.

"And my mom says to me, 'Don't look so horrified!' But I am headed into surgery to get my breasts amputated, and, of course, that is horrible," Smith said. "People

start telling you things you don't want to hear. I'd look at them and think, 'Did they just say that?'"

One of nine children, including three sisters, Smith recalls how important breasts were as part of growing up and whether one was an early or late developer.

"And in middle school and high school, that's all boys talk about," she said. "During this ordeal, I thought about how older women talk about their breasts starting to sag and women who want smaller and others want bigger, and it's always such a big deal."

Smith talked about the many different kinds of grief when she faced this new reality at age 54.

"When I was first diagnosed, I didn't realize I was grieving for the overall assurance that I was a healthy human being. It doesn't matter what kind of cancer you get — you can no longer trust your body because your body has produced cancer," she said. "Then you grieve your breasts, and then, of course, you grieve your body's scarless beauty."

In total, Smith had five surgeries, starting with two lumpectomies, after which

she was told she still needed a mastectomy. The others were for reconstruction.

"They found cancer on one breast. But as we were driving along the parkway going to Manhattan because I wanted to escape and see some plays, it came to me the realization that I couldn't have breasts that were asymmetrical. There would be one fake and perky and one real and not so perky, so I called the doctor to say I wanted a double mastectomy," she said. "In the end, it looks fine, but you take off your bra every night, and you see the scars. Nowadays, they try to do incisions underneath the breast, whereas 12 years ago, they did it straight across."

Smith said that although it was a frightening journey, she knows how fortunate she was to have people to take care of her.

"I was lucky because I had a wonderful mother and older sister, and my husband, he really took care of me," she said. "After the mastectomy, I couldn't bear to look, so he cut one of his old T-shirts to slip over my head and cover my chest so I could take a shower without sobbing."

"In the years since, I've



PAUL BILODEAU/Staff photo

Mary Beth Smith, who turned her breast cancer journey into an award-winning play, takes a break outside her Rockport home.

talked to women who live away from families and who don't have a lot of friends, and I was grateful that I had these people taking care of me," she said. "All of this got to me. You get on a roller coaster, and you have no control and you feel more and more helpless because things keep spiraling out of control. I'm a fairly modest person, and I can't tell you how many students and medical people touched and prodded my breasts," she said.

Smith poured all of her feelings into her play.

"So with humor, because

it's the only thing that gets me through, I tried to convey the absurdity, the helplessness and horror of it all, as well as the love I experienced," Smith said. "I remember when my playwrighting group invited in a master playwright, and when he read my opening scene, he said the audience wouldn't believe it would happen."

Smith has been an avid writer since she was a young girl, earning a national writing award in the sixth grade.

"I'm a storyteller, and when I found I wanted to keep talking about (breast

cancer) and other people didn't want to hear, I thought to write the play," she said. "I remember once when breast cancer came up during a birthday dinner, someone changed the conversation very quickly. I wrote a poem about that birthday, which was published in a 'Breast' anthology, and then I wrote the play."

Smith is a member of the International Centre for Women Playwrights, Dramatists Guild, StageSource, Theatre Communications Group and Marblehead Little Theatre's Playwrights Collective.

Local survivor and providers team up for cancer forum

In the spring of 2021, Lisa Lewis heard the words everyone fears: "You have breast cancer." Today, Lewis' treatment is over, but her journey continues.

She will share her story in "Teaming Up for Lisa — A Community Forum on Cancer Survivorship," set for Thursday, Oct. 13, from 5 to

7 p.m. at the Firehouse Center for the Arts in Market Square in Newburyport.

Lewis, a Plaistow, New Hampshire, resident, and her caregiving team will recount her journey of diagnosis, treatment, courage, support and hope, from learning she had stage 2 breast cancer to undergoing

chemotherapy, a double mastectomy and radiation.

Panelists include Dr. Peter Hartmann, a surgeon who leads the breast cancer treatment team at the Gerrish Breast Care Center at Anna Jaques Hospital; Dr. Claire Fung, a radiation oncologist; Dr. Colleen Yavarow, a hematologist and oncologist; and

Michelle Petryk, an oncology certified nurse.

Pre- and post-forum, attendees will enjoy light refreshments, a complimentary swag bag, a silent auction, and the opportunity to visit with community-based complementary care and service providers that address many of the

non-medical needs of cancer patients and their families.

Presenting sponsors are Anna Jaques Hospital, the Institution for Savings and Alliance Oncology. Participating partners include North of Boston Cancer Resource, YWCA Encore, Tough Warrior Princesses, Grateful Friends, Karen

Wellington Foundation, Newburyport Society for the Relief of Aged Women and the Pink Revolution Breast Care Alliance of New Hampshire.

The event is free, but registration is required at ajh.org/pinkoctober. COVID-19 vaccination is also mandatory.

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.

Courtesy photos

only 34% of Ellie Fund patients identified themselves as being part of a minority. Therefore, despite having a 70% survival rate, 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 experience treatment delays, as 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.



Nekia Clark, director of patient services and outreach at Ellie Fund, 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 Fund for the past 10 years.

"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 be easier for patients to get into clinical trials.

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'It changed my way of looking at things'

Two decades later, Mary Burt maintains a positive attitude

BY MATT PETRY
mpetry@northofboston.com

Mary Burt was 52 years old when she received her breast cancer diagnosis. "It was a shock," she said. "It was terrifying because I think anyone who hears the word cancer is scared."

But now, 24 years later, what Burt remembers most of all is "the number of people who came through for me," she said.

The Amesbury resident said that it was tough to ask for help, but that she never needed to.

"It's very hard for me,

and for most women, to ask for help," Burt said. "So we don't, and instead, women just show up and they don't say, 'What can I do?' They say, 'How about I walk the dog?' Or how about I do this? And it really changed my life."

Burt described coping by listening to beautiful, soft music and then taking a bath or shower. After that ritual, she would feel good for the day.

Her sister, who lived in New Jersey at the time, would come up for her oncology visits and chemo trips, which Burt said she

found very helpful as her sister happened to be an oncology nurse. Burt said she hit a turning point when one of her friends, who had gone through chemotherapy previously, offered her the advice to keep counting down the visits.

"And each one will make it less and less, then about halfway through, I remember going outside and I just thought everything was so much more beautiful than I thought it was before, and it's never stopped feeling that way," Burt said. "And I just — we live in a house that looks out on

just trees in Maine — I was surrounded by water and I look out at the trees and they're just, we watch them change, we watch the snow come and it takes my breath away."

She said that she asked herself what she wanted to do once she was finished with her treatment.

"All I wanted to do was to be able to walk again for long distances, because I loved to walk a few miles every day, and I could, and I just felt lucky," Burt said. "I felt really lucky and I felt like everything was worth it in the world. It changed my



MIKE SPRINGER/Staff photo

Mary Burt, 77 and cancer-free after her diagnosis 25 years ago, relaxes outside her Amesbury home.

way of looking at things. And "I just, maybe something I've never been more optimistic than since that time. will happen. Maybe I will have another rough time,"

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she said. "But for right now, I just don't think negatively about much at all, because it changed me. It made me believe in people, and it made me feel safe because I believed in people and because they all showed up, and I try to do that now for other people."

Burt is now 77 years old and cancer-free. She enjoys spending her time with her three kids and five grandchildren, as well as taking long walks, reading and gardening. During the COVID-19 lockdowns, she and her husband adopted a cockapoo named Daisy.

Burt said that she hopes people will see her story and feel hope.

"I have a lucky life, and it's amazing for me to be able to say that after having gone through the year that I went through so long ago," she said. "And I hope that maybe it gives people a little hope and that they make sure they get their mammograms and make sure they talk to their doctor and make sure they ask questions."

First, it hurts to breathe and you think consciously about each breath. The tears are there, but you are too frozen to let them fall. It is painful to keep them in, but if you let them go, you may never be able to stop.

You need your strength for more important things.

Others are sympathetic, but that, too, is scary. You need to protect yourself from thinking the worst.

There are some whose strength you need so much that you don't allow them to cry either, and they know and they don't.

Of course, when you are not there, they do, and it is all about love and wanting to help and protection and keeping the Unspeakable away.

You know that, because, once long ago, you were in that place.

But for now, if you are going to be strong, so must they.

You go from doctor to doctor, hearing the decrees, the treatments, the choices, the side effects, the stages, the prognosis.

Your standards for hope are different now, but you adjust and

make choices you never thought of making.

Someone told you to bring a friend with a pencil, and you do and are glad because it has all taken on a dreamlike quality.

You listen, but it is all cushioned in a dense fog that separates you from the worst words.

Percentages are given, and you hang on to that news, grabbing at the high numbers, dismissing the low.

This could not be you they are discussing, but it is and even in the distance where you now live, you know that.

You stop answering the phone; someone else will collect the messages. It is too hard to keep reassuring others. Instinctively, you are conserving energy.

Then you tell your children. Their voices and faces give them away, and you wish, more than anything, that they didn't have to hear this.

You hide in grocery store aisles to avoid telling casual acquaintances what's going on, news they have probably heard.

What you are grateful for is a

IN HER OWN WORDS

doctor who looks you right in the eye and gives you the facts and tells you, you will survive. It helps that she is supremely irreverent, and for the first time, you laugh and think you might like hanging out with her for a while.

Because of her, you have made your decision. You have a plan, and it is one that focuses on healing, on recovery, on the future and no other options.

So you begin.

It is harder than you thought. Of course. Many suffer a few side effects. You have them all. But each session is one less in your journey and you begin counting them off.

So much to be grateful for: the neighbor who delivers homemade soup; the friend who brings large quantities of rice pudding, one of the few things you can eat; the sister who flies up for chemo trips and brings you scrambled eggs in bed and cuts up cold watermelon because it makes your mouth happy.

There is a friend who wraps your Christmas presents and one who walks the dog. Then there is the

dog, who never leaves your side.

There is the daughter who sends just the right solution for the piercing headaches, the son who understands more than anyone for he has been there and the daughter who lies next to you in bed in the dark to tell you about her school day.

You will now always know that people are good and kind, and you will never forget that.

All this helps, but, at the end of the day, you are alone. The cancer is in your body. The indescribable fatigue and pain are yours. The scary thoughts that push to the surface are only about you, it is not a disease you can share. But it is the strength of your loved ones that allows you to push the thoughts away and keep your mind on the future.

Eventually, you do cry and sometimes rage, but you remember a wise friend who said, each time you cry is one less along the way.

So you give in to tears, too exhausted to hold them in, and your friend's words help.

You learn so many ways to make it better: music and meditation,

salt water rinses and Zofran, and allowing friends and family to share the journey.

Sue is always there, sitting quietly and listening or making you laugh out loud. Karin delivers tea every Friday and shares her own story.

Your family is all about love, and it wraps around you and keeps you safe.

Soon, you are halfway there and you start to notice that when you go outside, the air is amazingly sweet and you can't get enough of it.

The colors of the sky and the river and the grass are more beautiful than ever, and you are amazed at their brilliance.

Your body, even now, is turning toward a new life, one where you will never take another thing for granted, a life where every morning you will wake up and be grateful for all that you have. A life filled with joy, and you plan for it and look forward to it and you expect it.

And one day, years later, you realize, it is all yours.

— Mary Burt



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remembering those
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Walking for the future

Runway for Recovery is 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

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

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.”

But what was conceived as a one-off event has become a fundraising juggernaut, not to mention an inspiring

evening for cancer survivors and their families.

This year’s 16th annual Runway Show takes place Friday, Oct. 14, at 6 p.m. at The Westin Boston Seaport District. Among those who will be parading down the catwalk are Newburyport

EASING THE BURDEN

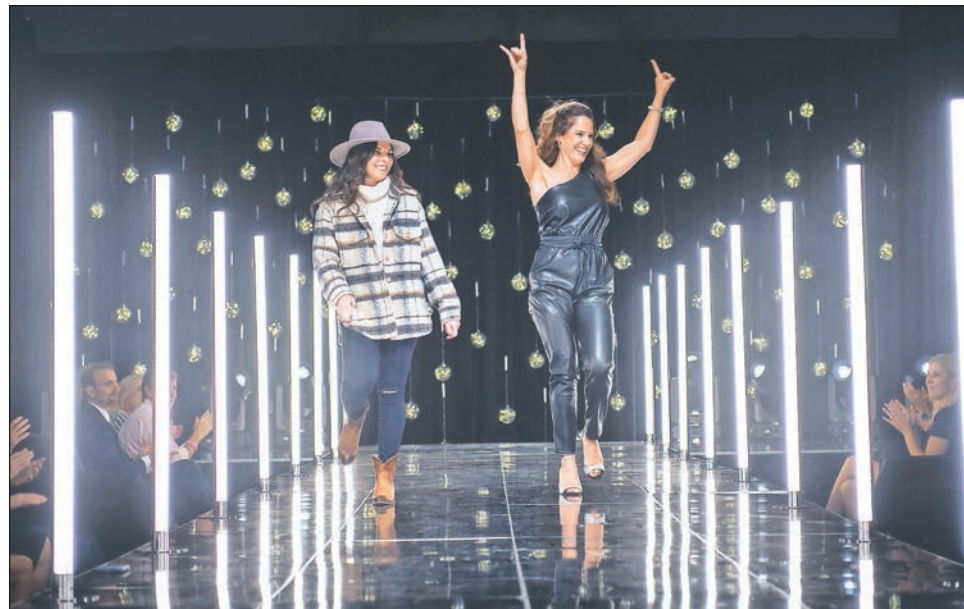
The Runway for Recovery Family Grants Program offers psychological, social and monetary support to families dealing with a cancer diagnosis.

Anyone from New England who is struggling financially due to experiences with cancer is encouraged to apply. Applicants can be the immediate family member of someone who died from breast cancer and/or the caregiver for a child or children who lost a parent to breast cancer. Patients living with stage 4 breast cancer whose families need help with funding are also eligible for the program.

Some of the things covered by the program include summer camp fees, child care, counseling, tutoring, wellness classes, school supplies and meals.

To make a donation, apply for a grant or more information, visit runwayforrecovery.org.

residents Diane Hansen and Becky Conary, who both participated in last year’s event.



TIM LLEWELLYN/Courtesy photos

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Above left, Runway for Recovery founder Olivia Boger addresses the crowd at The Westin Boston Seaport District for the 2021 Runway Show. Above right, breast cancer survivor Diane Hansen, right, and her daughter, Anastasia, dance down the runway.

Joining Hansen during her appearance in last year's show was her 22-year-old 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."

Asked what it's like to get ready for the show, Hansen gushed about how much she was pampered and taken care of.

"They just make you feel

like a queen, they make you feel so good," Hansen said.

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 there is a very good chance

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)."

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'Cancer is a battle'

In remission for a year and a half, Stacey Williams is winning her war

By JIM SULLIVAN
jsullivan@northofboston.com

Stacey Williams was getting ready to go to work one day in the late summer of 2020 when she suddenly couldn't go anywhere.

"I just passed out getting ready for work," she said.

Williams, an Amesbury resident, was 31 years old at the time and was working happily as a food manager at Ocean State Job lot in Danvers.

"I was rocking it, I was doing so good," she said.

Her boyfriend rushed her to the hospital, and Williams told the doctors she had some pain in her left breast.

"I had noticed a lump over the course of a couple of months, but I didn't think much of it," she said. "So, when I opened up my shirt, the doctor looked at it and said, 'That doesn't look right.'"

The lump on Williams' left breast was now purple and had grown larger.

The Salem native had her first mammogram, as well as an ultrasound and biopsy, and was diagnosed with invasive ductal carcinoma, a common type of breast cancer.

"Intuition told me that something wasn't right, so I already kind of knew it was cancer," she said. "But, when I got the call, I started to cry."

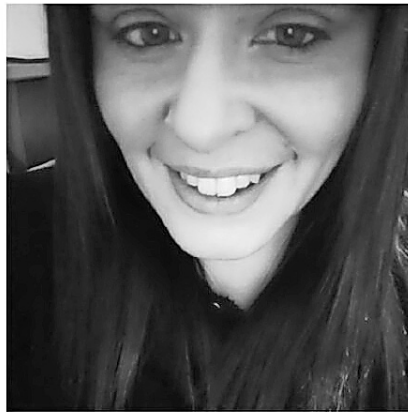
Williams admitted that she was despondent for a bit, but a voice inside her soon told her that she was going to beat this and be all right.

"You really have to go into this with a positive mindset," she said. "So that's what I did."

Williams made the decision to endure chemotherapy treatment.

"My heart was strong enough to take it, but my oncologist really wasn't that optimistic that it would work for me," she said. "But I told her, 'Let's go for it.'"

Williams went through six months of chemotherapy, which she called "a test of the mind and the physical will."



Courtesy image

Stacey Williams created this collage chronicling herself before, during and after her treatment for invasive ductal carcinoma.

"It is very tiring. You are prone to infection and, at the time, COVID-19 was so rampant, so that was scary," she said. "It was painful, and there was a loss of appetite. I didn't want to eat too much, and I slept a lot."

Although she tried cold cap systems in an effort to help keep her hair during chemotherapy, Williams said they proved to be of little help.

"I lost all my hair, my eyebrows, my eyelashes, everything," she said.

A single mastectomy and lymph node removal was also performed on Williams' left side, and she ended up undergoing roughly 30 rounds of radiation treatment along the way.

"That was extremely painful because you get burnt," she said.

Williams admitted that some days were better than others, but she is glad she stayed strong.

"Some days, I wanted to quit, and then there were other days when I figured I could go and do this," she said. "I've never been in a war, but cancer is a battle all its own. So I would compare it to being in war."

The treatments worked, and Williams has been cancer-free since May 9, 2021.

"As far as I know, I'm good, but just trying to get back into society and knowing that you don't have to fight something all the time was very difficult," she said. "Getting back into the swing of things really is the hardest part. It took me about a good year and a half to really feel accepted back into society, after all."

Although her hair grew back pretty quickly, Williams said that she looks at the world in a different way today.

"You are softer about things, and you don't take things for granted," she said. "I really wasn't a people person because everybody these days seems uptight to me for some reason. But I have gotten into the swing of 'Hey, how ya doing?' You just don't take things so serious anymore. It's like a rebirth in many ways."

Williams currently works at Cumberland Farms in downtown Amesbury and said she has plenty of regular customers at the convenience store.

"It took me awhile to open up to my boss about it, but eventually I did, because I have to lift things sometimes," she said. "She gets it, and everyone is really sensitive about it."

Strolling for charity

"Paws for a Cause" will step out along the Clipper City Rail Trail in Newburyport on Saturday, Oct. 15, from 10 a.m. to noon.

The fundraising walk hosted by the New England chapter of the Karen Wellington Foundation for Living With Breast Cancer is open to everyone, with or without dogs. Proceeds support the nonprofit organization, which helps women living with breast cancer and their families.

The walk starts at the Washington Street entrance to the rail trail and ends at Parker Street, with participants welcome to join at Washington Street any time before 11:30. In the case of rain, it will be held the following day, Oct. 16.

Registration is available online at <https://bit.ly/3xmT5aJ> and costs \$15 each for walkers without dogs and \$20 for one walker and one dog. Each additional dog is \$10. On-site registration will also be available but costs \$25 for walkers with dogs, \$18 for walkers without dogs and \$12 for additional dogs.

Activities along the walk will include a raffle, snacks for people and pups, contests, and photographers taking candid and professional posed photos of participants.

The Karen Wellington Foundation gives vacations, event tickets, spa days and other gifts to women living with breast cancer and their loved ones. The goal is to help recipients put cancer aside briefly, make lasting memories and have something on their calendars to look forward to — something other than chemo, radiation, surgery and the next doctor appointment.

"Recipients often tell us how much a KWF trip meant to them, that it created wonderful memories, rejuvenated them and helped them heal," said Debbie Hart-Klein, leader of the New England chapter, based in Newburyport. "Hearing such positive responses is heartwarming and confirms the benefits of our work."

With Paws for a Cause, the foundation is "looking forward to raising money for more 'gifts of fun' in a way that in itself will be a fun, family-friendly event," Hart-Klein said.

If you know anyone who might benefit from a gift, submit a nomination at karenwellingtonfoundation.org/nominate. Anyone with breast cancer is eligible.

For more information, contact Debbie Hart-Klein at 617-916-8984 or debbie.newengland@karenwellingtonfoundation.org.

Making an impact in pink

It's time to Pink Up the Port — and beyond.

Now in its eighth year, the community photo contest raises breast cancer awareness and promotes cancer prevention and the importance of early screening.

Businesses, organizations, schools and individuals throughout the Merrimack Valley, Seacoast and Greater Newburyport are encouraged to wear pink and partake in a little friendly competition to support those affected by breast cancer.

Join the initiative by taking a pink-themed photo of your group or workplace, and submit it to mphadke@bilh.org by Tuesday, Oct. 25. Voting is based on creativity and incorporation of awareness and prevention.

Anna Jaques Hospital coordinates Pink Up the Port in partnership with the Amesbury, Greater Haverhill and Greater Newburyport chambers of commerce and launched the initiative as one way to encourage prevention efforts and celebrate survivors.

The strength to fight

Kathleen Casey encourages others while in the midst of her own journey

BY ARIELLA WEISS
Contributing writer

Kathleen Casey, 37, has been a part of the Torigian Family YMCA in Peabody her whole life.

As a 10-year-old, she attended Camp Eastman at the Y. She continued to work there throughout her time in college at Salem State University. In 2006, she began taking group fitness classes there, and eventually became a fitness instructor herself. She began her current role as a branch administrator “around seven or eight years ago,” she said.

This year, her role as administrator will look a little different.

Each October, the Y celebrates Breast Cancer Awareness Month, encouraging members and the public to hang pink ribbons in the lobby and designating Wednesdays as “Pink Days,” where everyone wears pink to raise awareness and honor everyone affected by breast cancer. The ribbons are displayed on a window that looks out over the pool, according to Casey, and show “support and remembrance” for those living with breast cancer and for those who died because of it.

“It can be an overwhelming display,” Casey said.

The Y’s campaign took on more meaning for her when her mother faced breast cancer in 2018.

“It wasn’t until my mom was diagnosed that I started to have an emotional connection to it,” Casey said.

“Without sounding too morbid, it was a fun way to celebrate my mom,” she said. “I encourage people to come and try it and see if it gives them the same feeling.”

Last fall, it hit even closer



Kathleen Casey, left, executive branch administrator at the Torigian Family YMCA in Peabody, and her friend and lifting partner Danielle Harrington stand in front of pink notes of encouragement left by members and staff to support Casey in her breast cancer journey.

to home for Casey when she was diagnosed with stage 4 triple-positive breast cancer, which had spread to her spine.

She remembers the day clearly — it was Nov. 1. Coincidentally, that marked the end of 2021’s breast cancer awareness campaign. That makes this the first year that Casey will be involved in promoting the “Power of Pink” as a breast cancer survivor herself.

“I’m anticipating a feel-good month,” she said. “I know this October, a lot of people will be looking at me. I’m excited, but it also brings back a lot of anxiety.”

The month of October is a “constant reminder,” she said, of breast cancer.

As Casey sees it, it confronts the reality and creates space to instead “celebrate the victories,” she said.

The amount of people who have breast cancer is “overwhelming,” Casey said, and being diagnosed “opens you up to so many more stories.”

Since her diagnosis, Casey has undergone 12 weeks of chemotherapy and three

months of radiation on her spine, as well as a lumpectomy last month.

“I went straight at this and never looked back,” she said. “I think what kept me going was that every time I had a negative thought, I would push it out of my head and think of five things to be positive about and grateful for.”

As a fitness instructor, Casey believes her job is to “advocate for health and well-being.” Casey explained that if people take care of their physical health, “your body is already that much ahead,” should something come up unexpectedly.

Cancer awareness continues at the Torigian Family Y next month, when it launches into raising money for the Livestrong at the Y 5K Road Race, set for Saturday, Nov. 19, at Lt. Ross Park in Peabody.

Livestrong at the Y is a 12-week program that helps cancer survivors regain strength after treatment.

For Casey, Livestrong is personal, as well. As a fitness instructor, her next



Courtesy photos

The Torigian Family YMCA team wears pink on a late September day to show their support for Casey, who was undergoing a lumpectomy that day.

goal is to get her “Lives-strong at the Y” certification so she can help others overcome the physical effects of cancer treatment through exercise and camaraderie.

“I’m really looking forward to it,” she said.

Often, when someone gets diagnosed with cancer,

people try to advise the person on health and nutrition habits, Casey said.

“You want to say, ‘Mind your business, you don’t know what you’re talking about,’” Casey said. “I can actually look these people in the eye and say, ‘I know what you’re going through.’”

She wants to provide others with a support system like the one she’s had so far.

“If anyone needs a buddy to go on a walk or needs someone to be around, I’m here,” Casey said. “I had so much support when I was diagnosed. Nobody should go through this alone.”

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'It changes how you feel about yourself'

Shaylia Wood grateful for early detection, her instincts and a caring community

By ANGELINA BERUBE
aberube@northofboston.com

Shaylia Wood is celebrating her first Breast Cancer Awareness Month this year.

It's been a journey of healing — both inside and out — for the breast cancer survivor as she navigates life after recovery.

"It changes how you feel about yourself," said Wood, who lives in Seabrook, New Hampshire.

She's been on a roller coaster of emotions in less than a year's span.

Wood was 38 years old at the time of her diagnosis in November 2021.

For nearly three months prior, she experienced symptoms of pain, inflammation and fullness in her right breast.

In the beginning, doctors told her the discomfort was the effect of her lymph nodes reacting to the presence 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 results for six to eight weeks.

"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



MARK R. DUCHARME/Courtesy photo

Shaylia Wood, of Seabrook, started experiencing symptoms before her wedding in July 2021.

said. "It made me nervous."

Once home in New Hampshire, she went for a mammogram 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 ultrasound picked up on a 1-centimeter lump.

Biopsy results further indicated Wood had ductal carcinoma in situ — an early 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 positive for COVID-19.

This delayed more imaging needed to be done after the diagnosis. After quarantine, 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 a more aggressive type and 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

not cause her cancer, it aggravated her lymph nodes enough to find the breast cancer sooner than later.

Prior to her surgeries, she wanted to honor her body and breasts that nourished her children, Wood said. She 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.



Courtesy photo

Wood shows part of her radiation burn and her scar from her second surgery to remove 9 centimeters more cancer and more lymph nodes.

Her story reached people she'd never have the chance to meet if not for an online community. She found solace in these new friends who helped her healing process — and she helped them in return.

"You carry it through your life," Wood said of surviving 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 yoga 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 caregivers.

The yoga program has

allowed Wood to focus on breathing skills and building up her strength all while being surrounded by people with similar life experiences.

She's gone through a lot in less than a year since 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 this year as she enters the next phase on her breast cancer survival journey.

Remembering Malka

A mother recounts daughter's bravery and determination while facing trifecta of breast cancers

BY BARBARA FELDMAN
Contributing writer

It was a week after Mother's Day, May 2012. I had just returned to my home in Boston from a vacation in New Mexico. Unlocking the front door, I discovered that, while away, my daughter, Malka, had trekked from her home in Albany, New York, to surprise me, decorating my house for Mother's Day with streamers and banners, a trail of gifts from room to room, and a card that sang a Van Morrison refrain, "Have I told you lately that I love you?"

As soon as she was old enough to grasp the concept of Mother's Day, she rightly asserted that she and her brother, Jake, were the reason I was entitled to celebrate. Eventually, Mother's Day became our mother-daughter thing — a way to celebrate us — bonded by our femalehood, which was our planet, and our mother-daughter-hood, which was its moon.

That year, I had missed our celebration, but she had planned this surprise for me to honor our tradition and welcome me back home. I called her to thank her, to share descriptions of New Mexico's stunning landscape, and talk about the plans for her first wedding anniversary and her 29th birthday both coming right up in June. Before she hung up, she said, "Mom, I think I pulled a muscle at the gym, under my left arm. It hurts."

After that, nothing was ever the same.

The following week, Malka called me from the emergency room at Albany Medical Center. She had awakened that morning, her breast inflamed and her nipple inverted. The medical staff were putting her on

antibiotics to ensure there was no infection, as these are the symptoms of mastitis, inflammation associated with breastfeeding. But she wasn't breastfeeding nor even pregnant. I was told that this was standard treatment before doing more serious testing. More serious testing for what? I started Googling and suddenly found myself on the American Cancer Society website looking at the horrific disease of inflammatory breast cancer. How quickly had I arrived there — the tears streaming, my anxiety mounting, my heart pounding.

Malka's husband, Mike, and I accompanied her to the first meeting with her oncologist at Albany Med, to learn she had tested positive for IBC. He explained that IBC is one of the most aggressive cancers, typically affecting women under 40. It grows and spreads more quickly, so that when diagnosed, it is already at an advanced stage. In about every 1 of 3 cases, IBC has metastasized, making successful treatment more difficult. Malka was one of those — stage 4.

It was extremely urgent that she have surgery to remove the infected breast, then radiation, then chemotherapy. The cancer had spread to her lymph nodes under her left arm, and it was imperative to try to prevent further spreading. Because her case was so advanced, surgery would be scheduled immediately. After surgery and radiation, her doctor recommended she pursue chemotherapy at Dana-Farber Cancer Institute in Boston, where there is a unit dedicated exclusively to inflammatory breast cancer. He had interned with the doctor



Courtesy photo

Malka Nuselovici is shown on her wedding day, June 18, 2011.

who headed the unit, and he would be allowed to follow her closely.

Malka's oncologist asked if she was of Jewish Eastern European descent.

"Yes, that's our family on both sides," I said. "Mine from Eastern Europe, Ukraine and Russia and my ex-husband, Alexis', from Romania" (as his family name, Nuselovici, corroborated).

The doctor told us that she would need to be tested for the genetic mutation BRCA1 and BRCA2, which was common in our gene pool. The mutated BRCA gene greatly increases the risk of breast cancer (up to

75%), ovarian cancer (up to 50%) and prostate cancer (up to 25%), as well as substantially increasing the occurrence of breast cancer in very young women (in their 20s and 30s). If she tested positive, members of the family would need to undergo testing, and if any should test positive, prophylactic surgery had to be considered, depending on age and a range of qualifying criteria.

There was shock, disbelief, tears and vain efforts of bravery in that office that morning. Malka's doctor took her hands, looked her in the eyes and told her that this would be the fight

of her life. He recognized and acknowledged what he saw — a young woman filled with hope and promise and eager for life, strong of will, drive and determination. He encouraged her always.

Malka tested positive for BRCA1. Testing determined that her father's side of the family were the carriers. Malka's first cousin tested positive for the mutated gene. She was 21 and would have to wait several years before undergoing prophylactic surgery. And then there was more.

It seemed Malka's was an extreme case — the perfect storm, the trifecta of breast cancers. Along with IBC and BRCA1, her diagnosis indicated triple-negative breast cancer. This means the cancer cells in the breast don't have estrogen or progesterone receptors and also don't produce a key protein called HER2. The protein HER2-positive is often a path to hope through a treatment for metastatic breast cancer called ENHERTU, one of the first successful genetic-targeted breast cancer treatments of its kind. It is designed to target HER2-positive cancer cells and improve the chances for survival. Malka was not a candidate.

Nevertheless, Malka fought for her own path to hope. She was surrounded by unbounded love and kindness — the measure of the love and kindness she gave. She was supported and cared for by her most generous and attentive husband and his family, by her brother and his wife, by aunts and uncles, and by a close group of young women friends. She was meticulous about her diet, organic, and was determined to continue working, doing photography, kickboxing and going out

albeit with precautions. She took part in every clinical trial for which she was a candidate. She participated in cancer runs and then, when she could no longer run, in walks.

She was also a very funny girl and added a sizable amount of black humor to her repertoire. I remember, after a very promising clinical trial, she tested negative for cancer. She called me so excited — shouting, "Mom, Mom, I'm cancer-free!" We were elated, danced around and toasted each other, screaming over the phone, "L'chaim," To life! But it didn't last — the cancer returned. Then much later, she would say, "Remember when I was cancer-free? You know, I'm going to be cancer-free again, and when I am, I want you to celebrate then, too."

The facts of her disease were incontrovertible. On a Sunday in February 2014, I arrived in Albany, having just taken a leave of absence to help her husband care for her in hospice at home.

We had a bad night, and she slept most of Monday. She woke up in the late afternoon and asked when Mike would be home from work. It was close to 5. She seemed anxious and restless. I held her, her breathing was halting and her voice a whisper. "I want Mike to come home." We called him, and he reassured her, he was on his way. She waited for her husband, for his eyes and his sweet smile, for his arms and his loving being, and for a last-ling embrace before finally becoming cancer-free.

I miss her still, now, and always. Although the pieces of a broken heart may heal, they are forever rearranged.

Barbara Feldman is a Newburyport resident.

The power of love

Jane Shaw's family takes comfort in the memories after 2020 loss

BY MICHAEL CRONIN
mcronin@northofboston.com

A lifelong Gloucester resident, Jane Shaw received her first breast cancer diagnosis when she was 46.

This cancer was caught very early and treated with a radical mastectomy. After care at home surrounded by family and friends, she became active in cancer survivor and support groups, and she treasured the friendships and connections made over the years. According to her daughter Betsy Rich, of special note was the group of women with whom she did the Susan G. Komen 3-Day, a breast cancer walk held each year in Boston.

"They remained very close

friends and bonded over (their diagnoses)," Betsy said.

For the next 20 years, Jane did not have a cancer recurrence. However, in 2014, during a routine physical examine, her nurse discovered a lump in her other breast. This time, the cancer broke through the breast wall. That September, she had a second mastectomy. Her post-surgery treatment options ranged from chemotherapy and radiation to a hormonal pill. The chance that her cancer would return was very small. Much thought went into which treatment option to try.

According to Betsy, her mother wanted "to enjoy each minute of life, with as much comfort and quality

of life as possible. She ultimately decided to go with the hormonal pill."

By the time of Jane's second diagnosis, she and her husband, Ray Shaw, were retired and traveling more. After her second surgery and recovery time, they traveled domestically and abroad to visit family and friends and explore more of the world.

Unfortunately, Jane was notified in 2017 that her cancer antigen 27.29 test was outside of the normal range, and what followed was her third cancer diagnosis.

"She received her initial care at Addison Gilbert and was so comforted to be under the care of her oncologist and a nurse friend and to see people she knew



Courtesy photos

Jane Shaw, third from left, is pictured with her three children, from left, Steven Rich, Jane Fossiano and Betsy Rich.

from her own community," Betsy said. "Although she felt good while taking her first treatment, it was not reducing the tumors, so her oncologist at Addison Gilbert referred her to a breast oncologist at Dana-Farber for a possible trial."

The trial would involve a combination treatment of chemotherapy and immunotherapy. Jane felt it was finally time to start the treatment she previously turned down.

Jane's husband and three children and their families were by her side every step of the way, from the first meeting about the trial to the final chemo treatment.

"We wanted her to know we were there for her no matter what she decided," Betsy said. "The power of the love we all felt for my mom united us all in doing whatever we could do to help her through this experience."

Betsy said that she and her family will be forever grateful for the care that Dr. Harold Burstein and oncology nurse Christine Bordonaro gave to her mother at Dana-Farber Cancer Institute in Boston.

Outside of treatment, the family would gather for monthly family dinners. Betsy's job in the benefits office at Harvard University allowed her to work from



From left, Jane Shaw, Ray Shaw and Dawn Addison Burnham show off their newly shaved heads at the Kid's Cancer Buzz-Off in 2013 at Gillette Stadium in Foxborough. Now, Jane Shaw's memory lives on at the Jane G. Shaw Shave to Save fundraiser held in Essex each year.

home one or two days a week. She used this time to spend full days at her mother's house.

"We made the most of every second we were together," Betsy said, "and by that, I mean we simply spent time together. My siblings and I thanked her for providing us all with the opportunity to live every minute of life to the fullest, with gratitude and passion."

"Her face lit up, and she rewarded us with a big smile," Betsy said.

Though she died in June 2020, Jane's memory still holds strong with those who knew her — particularly her three children, Betsy Rich, Jane Fossiano and Steven Rich; her husband and his children; and their extended

families. The day Jane passed, she was surrounded by members of her family.

"She was warm, loving, kind, compassionate, friendly, fun and extremely thoughtful," Betsy said. "Family and friends were a large part of her life."

Betsy hopes her mother's story will inspire those to live every moment to their fullest.

"You may have known my mother as Jane Rust, or Jane Rich after marrying my father and having her three children, or Jane Shaw — for the last 38 years married to her beloved Raymond Shaw," she said. "We miss her very much. We take comfort in the memories we created and shared, and in the loving care we all gave to each other."



*Proud supporter of
the fight against
Breast Cancer*

**Paul Tucker
State Representative
7th Essex
Salem, MA**

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.



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.



Courtesy photos

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,

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 and Family Reach, which

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 breast cancer:

- **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 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 nonprofit 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

superheroes," he said.

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 SEALs who participated in 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.

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