Katie Johnson:

Good morning, and welcome to Apple A Day, Lake Region Healthcare's health and wellness segment, where we feature news and information you can use to live a healthier life. I'm Katie Johnson, your host, and my guest today is Karen Wulfekuhle. She's a social worker at our Cancer Care and Research Center, and she joins me today during October Breast Cancer Awareness Month. Good morning, Karen.

Karen

Good morning, Katie.

Wulfekuhle: Katie Johnson:

Last week, we spoke with Dr. Swenson and talked about prevention of breast cancer, risks, and a little bit more of the physician's view surrounding cancer. This week, I am glad that you're willing to join us as we talk a little bit more on the patient's perspective. As a social worker, I know that you see it all, and you have a vast resource of experiences that you can draw from as we look at this coping and supporting topic. I know that any type of cancer diagnosis is traumatic, and breast cancer is no exception. When we talk breast cancer specifically, what are the biggest emotional and mental hurdles that you see breast cancer patients having to face?

Karen Wulfekuhle: That is a great question. It's also, in my mind, that's a very big question. I think I would like to unpack that just a little bit more. I think that there could be a difference. If we're going to specifically talk about breast cancer, I think that there definitely is a difference between younger women and the older population because all cancer can derive fear, worry, pain, nervousness, sadness, some of those emotions that can bring about various family and practical problems, although I think that the metrics behind those problems are different.

There are some studies out there that indicate that younger women do face more of the concerns and more of the emotional hurdles just based on their age, maybe taking care of their family, maybe it's surviving work-related issues, different things like that. Maybe someone that is an older patient maybe whose children are grown, who maybe is not looking at fertility as an issue or anything like that. Appearance might be a different factor. I truly think that, as an overview, that the whole concept of this could be highly personalized. Truly, it is so patient-specific. While something may be very detrimental to myself, you may define that differently.

Katie Johnson:

You make a good point that everything is so individual. The next question I was going to ask was about advice to give people, helping them cope with this emotional challenge. My guess is, you're going to say, again, that's pretty individual, but there are probably some typical pieces of advice we hear and some that might be helpful and some that might not be helpful.

Karen Wulfekuhle: Absolutely. I was thinking about this question a little bit, and there was a couple of things that came to mind. When I sit down with a new patient, I always observe who's there with them. It's a tell-tale type of sign. It's an observation, so

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to speak. If my patient is there by themselves, I wonder where their support is, and it's possible that they have to work and they couldn't get that time off. Maybe they live too far away. Maybe they don't have anybody.

I think, from that standpoint, I really ask the questions of patients, "Tell me a little bit more about the relationships in your life, and those relationships can be with your family. It could be with ..." We would talk maybe about your chosen family instead of your given family. I talk about relationships with maybe a faith-based relationship. Again, that doesn't always necessarily include being actively involved in a church, but maybe it's your spiritual relationship. Where do you find peace? Do you practice any type of meditation, something that would bring you comfort?

I focus a lot on relationships and, again, I'll go back to that just because I want to know where your helpers are because, unless you've done this before, somebody like me who's going to be supporting this or taking a look at this situation, we're going to want to take a look at where this person's support network is.

Also, I just want to bring about another point, too, the whole element of your relationship with your provider. I think that's a real important element when you start the care. Do you have a good relationship with your provider? This is may be new provider. Do you feel good when you come in here? Do you feel like you're heard, that's somebody's paying attention to your needs, different things like that? That is really going to help frame up how you feel about starting this plan of care.

Katie Johnson:

That is a really important point, I think, not only feeling like you have the support of people or spiritual guidance in your life, but do you feel confident in being a participant in your plan of care? I think when we talk about individual scenarios and each patient being different, that's an important part about how we approach treatment at our cancer center. Really being so much a part of this community, we also become so much a part of each individual patient's journey.

Karen Wulfekuhle: Absolutely. I think it's important, too, to really highlight. Those of us that work at the Cancer Center within this treatment team, I feel very passionately about making sure that we follow what the needs of that patient are because every plan of care is going to be different.

Katie Johnson:

Dr. Swenson told us last week that one in eight women will have a breast cancer diagnosis, and that number is just so staggering. It's been kind of haunting me since I heard it, and I think about, if one in eight women has that diagnosis, that means the number of loved ones impacted by breast cancer is only that much exponentially larger. The hype around Breast Cancer Awareness Month, I think, has some legitimacy. When we talk about loved ones, patients aren't the only ones going through this. What kind of advice do you offer to friends and family who are supporting those with breast cancer?

Karen Wulfekuhle: That's a big question, as well, although ... You know what I'm going to say? I'm going to say, be present. That's a tall order because not a lot of people know how to do that. I work on doing that. I try to work on that every day. This is my career. The whole element of being present, what does that look like? How does that feel? I know that I recently had some training that I went to, an oncology conference.

I thought it was so significant because I met with this educator, and they talked about this element of this well-intended advice for families and friends and how, sometimes, families will say things like, "You've got this" and "Stay strong" and "Don't have a lot of stress around because that's going to impact your recovery" and different things like that. "Always maintain a positive attitude. If you maintain a positive attitude and do the right things, you're going to have a good outcome." I think what has been really difficult for the patient and for me observing this is that, sometimes. it doesn't work like that.

That has a negative effect on the patient because, guess what? Then, they feel shameful, and they feel like, "I didn't have this. I don't got it." Then, it kind of closes that door for that element of communication, which is so hard to have, which is maybe being able to say these words like, "You know what? I got nothing. I do not know what it's like to walk in your shoes. I have no idea what it feels like to do what you're doing. I just want to be here with you, and I want to be quiet with you. I'm going to go rake your leaves, and I'll be back." My ultimate message would be, be present in this moment, in this day.

Katie Johnson:

That's fantastic advice and for us all to stop and think about that well-intended advice that might not be received that way. By being present, we should be in tune to whether or not that's appropriate or not. What about resources available to patients and to loved ones at any stage, new diagnosis, active treatment, after treatment through survivorship? What kind of resources do you have to point people to?

Karen Wulfekuhle: Absolutely. That's a large part of my role as a social worker here on campus. I'm an advocate. I'm passionate. You probably can hear that in our discussion how I'm very passionate about some of these things. Also, I do a significant amount of resource connectedness, support services right here in town, maybe connecting them to a counselor in town. Maybe during this process, they have found a new connection with a group. Maybe it's the book club. Maybe it's the fellowship of a church. We try to help facilitate what has worked through this process. There's also nationally based resources through cancercare.org, American Cancer Society, and Reach to Recovery, Susan G. Komen.

Those are some big names that some people might associate breast cancer with, as well. Young Survival Coalition. That's another nationally-based resource. Books. Victor Lundeen's our local book company in town here. They've always been so open to getting whatever titles we're interested in. Our local library is a huge partner with us as we provide printed resources. Here again, I think if you're at a loss of, or just maybe uncertain of where to turn, I would always

encourage you to call us at the cancer center. Together, we could visit. We could highlight what sort of things you might be interested in finding and then kind of go to work for you a little bit and find out where some of those important connections are.

Katie Johnson:

What a great resource you are to the community. As we wrap up, one maybe last piece of advice or nugget of encouragement that you would offer based on your years of experience and your individual experience with breast cancer patients and those who support them as we talk about coping and supporting those people during Breast Cancer Awareness Month.

Karen Wulfekuhle: I think Breast Cancer Awareness Month, I think the whole year long. If your family or anyone that you love has been touched by cancer or some significant disease process that's taken you here or to another healthcare facility, I'm going to encourage you to practice that whole concept of being present. Stay with them. Sometimes, it's hard because we don't know what to say and, when we don't know what to say, we have a tendency to not want to say it at all. That's not always the best thing either.

The one thing that I will say is you don't have to say the right things. Just stay connected and be present and continue to practice that. It gets easier, just like anything we do in life, you know? I do that. I really would like for patients and families or anyone, again, if they struggle with trying to figure out how this all lines up and looks, we're pretty easy to talk to, actually, so just give us a call.

Katie Johnson:

Karen Wulfekuhle, a social worker at the Cancer Center, my guest today, as we offer some tips for coping and supporting during Breast Cancer Awareness Month. Thanks for all you do for us and for our patients, Karen, and for being my guest today.

Karen

Wulfekuhle:

Katie Johnson:

Thank you so much.

Karen Wulfekuhle and Katie Johnson on Apple A Day, reminding you there is so

much to do here. Stay healthy for it. Have a great day!