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*Both with Cancer Treatment Centers
of America*

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**by Maurie Markman, MD;
Carolyn Lammersfeld, RD;
and Christina Torster Loguidice**

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Introduction

Almost no words generate more fear than “You have cancer.” Suddenly, the future feels uncertain, and you’re flooded with all kinds of overwhelming emotions — from shock, to fear, to anger, to sadness. This is a normal part of coming to terms with your diagnosis. During this time, you may think about how other family members or friends went through their cancer diagnoses. Some may have been cured, providing you with a sense of hope; others may have ultimately succumbed to their illness, leaving you filled with dread.

But a cancer diagnosis today doesn’t mean the same thing it meant even five years ago. The medical community’s understanding of cancer is growing by leaps and bounds, enabling us to provide better treatments than ever before, and they’ll only continue to improve. Today we also know that everyone’s cancer is different, so even if you’re told your prognosis is poor, remember that you’re not marked with an expiration date.

After you come to terms with your diagnosis, you may wonder what you can do to improve your outcomes. Depending on what type of cancer you have, you may not have much choice when it comes to your treatments, leaving you feeling like a crash-test dummy strapped in for a wild ride. But you do have control over what you eat, which can give you a sense of empowerment and stability. Optimizing what you eat and your nutrient intake during and after your cancer journey can play an integral role in

- ✓ Combating the side effects of treatment
- ✓ Preventing infections when your immune system is compromised
- ✓ Giving your body the reserves it needs to fight the cancer and prevent a secondary cancer, a recurrence, or another chronic illness like heart disease or diabetes

Plus, it’ll help you feel better and more energetic.

And that’s what this book is meant to do: help empower you through nutrition. Depending on where you are on your cancer journey, your nutritional needs vary. You may also be struggling with side effects that make eating a challenge, such as loss of appetite. This can be overwhelming, leaving you wondering what you can and should eat to get you through these times. But this book is here to help. Think of it as a friend, guiding and supporting you through your changing needs, from diagnosis, through treatment, through recovery.

About This Book

To ensure that you eat properly during your cancer journey, you need to understand how cancer and its treatments affect nutritional demands. You also need a basic understanding of nutrients and how to monitor your nutrient intake. This book provides all this information in simple, easy-to-understand terms. And to help you put the information into practice, we provide more than 80 tasty and nutrient-packed recipes for meals, snacks, and desserts. Although these recipes appear in a cancer nutrition book, they can be enjoyed by anyone.

In this book, we also provide guidance on tools you can consider purchasing to simplify meal preparation, review cooking methods that help foods retain their nutrients, and examine ways to organize your kitchen to help you optimize nutrition and food safety, while being friendly for those times when you're dealing with side effects. If you want to adopt a healthy lifestyle beyond your eating, we offer some lifestyle recommendations to decrease cancer risk as well.

In the recipes, we use the following conventions, unless otherwise stated:

- ✓ All butter is unsalted.
- ✓ All eggs are large.
- ✓ All onions are yellow.
- ✓ All broths and stocks are low fat and low sodium.
- ✓ All milk and dairy products are low fat.
- ✓ All dry ingredient measurements are level.
- ✓ All temperatures are Fahrenheit.

All vegetarian recipes are preceded with a 🌱 icon in the lists of recipes at the beginning of every chapter, as well as in the Recipes at a Glance, before the Table of Contents.

Within this book, you may note that some web addresses break across two lines of text. If you're reading this book in print and want to visit one of these web pages, simply key in the web address exactly as it's noted in the text, pretending as though the line break doesn't exist. If you're reading this as an e-book, you've got it easy — just click the web address to be taken directly to the web page.

Foolish Assumptions

As we wrote this book, we assumed the following about you:

- ✓ You or someone you love has received a cancer diagnosis or is at high risk of developing cancer.
- ✓ You're interested in understanding cancer and nutrition, including how cancer and its treatments can affect your nutritional needs.
- ✓ You want to understand how you can eat optimally during your cancer journey, whether you've just been diagnosed, are actively undergoing treatment, or are a survivor.
- ✓ You're interested in living healthier, but you aren't sure how to go about it.
- ✓ You want truthful information and not a bunch of hype.

Regardless of why you're reading this book, you can assume the following about us: We've made every effort to provide you with the latest and most widely supported cancer nutrition information in a way that's easy to understand and put into practice.

Icons Used in This Book



This book contains several icons that are intended to help you locate key ideas and information. The icons you'll see include the following:

The Tip icon appears next to information that can make your life easier or save you time.



The Remember icon points to important information that you won't want to forget. By flipping through this book and reading all the information next to this icon, you'll extract the most essential points we're trying to make.



The Warning icon alerts you to potential hazards, so be sure to look out for it and heed any information associated with it.



Paragraphs marked by the Technical Stuff icon are really interesting (at least to us), but you don't have to read them word for word to grasp the core concepts. In fact, you can skip right over them if you think the information contains more detail than you need.

Beyond the Book

In addition to the material in the print or e-book you're reading right now, this product comes with some access-anywhere goodies on the web. Check out the free Cheat Sheet at [www.dummies.com/cheatsheet/cancer nutritionrecipes](http://www.dummies.com/cheatsheet/cancernutritionrecipes) for tips on combatting treatment-related side effects (everything from nausea to a sore mouth or throat to taste changes) through the foods you eat, advice on staying active during treatment, and more.

Where to Go from Here

If you read the entire book cover to cover, you won't be disappointed, but we've organized the book so that you can dive in wherever you want and get the information you need. If you prefer to read only certain sections, you can use the Table of Contents to locate broad categories or subjects, or you can refer to the Index when you want to drill down to key terms or ideas. If you're looking for a recipe to ease a symptom you're experiencing (for example, nausea), the Recipes at a Glance points you in the right direction. Of course, you also can just flip through the book and read whatever catches your eye.

No matter how you decide to read this book, we recommend that you personalize it by highlighting text, writing questions in the margins, or putting sticky notes on pages that contain information that resonates with you or that you want to ask your oncologist or healthcare team about.

If you try a recipe in Part III, consider noting any substitutions you made, what you thought of the recipe, and how the recipe made you feel. If a recipe doesn't sit well with you, you may want to avoid making it again or wait a while before doing so. Finally, consider adding sticky notes to your favorite recipes so that you can easily find them again. Enjoy!

Part I

Getting Started with Cancer Nutrition



For Dummies can help you get started with lots of subjects. Visit www.dummies.com to learn more and do more with *For Dummies*.

In this part . . .

- ✓ Find out about cancer and the terminology that surrounds it.
- ✓ Meet the healthcare providers who may treat you and find out about the treatments you may receive.
- ✓ Get clear on the common physical and emotional effects of cancer, their treatments, and how to overcome them.
- ✓ Discover the importance of nutrition and why it's a powerful weapon in your cancer-fighting arsenal.
- ✓ See how you can overcome any treatment-related obstacles that impede your ability to nourish yourself.

Chapter 1

The 4-1-1 on Cancer

In This Chapter

- ▶ Getting clear on cancer basics
 - ▶ Dealing with your diagnosis
 - ▶ Looking at the various types of cancer
 - ▶ Making sense of the diagnostic tests
 - ▶ Getting a handle on cancer staging
-

Everyone knows someone who's had cancer. In the United States, approximately one in two men and one in three women will develop some form of cancer during their lifetimes. But cancer isn't one disease — it's actually a wide spectrum of diseases, ranging from conditions that can be easily managed with surgery to illnesses that require extensive treatments, including surgery, radiation, and chemotherapy.

So, what exactly is cancer? How does it develop? Why are some cancers cured, but others progress despite the best available treatment? Why are some cancers found early, when they're confined to one specific region of the body, while others aren't found until they're widespread?

If you or your loved one received a cancer diagnosis, these questions were probably rolling around in your head at some point. In this chapter, we answer some of these important, yet often complex, questions so that you understand what a cancer diagnosis really means.

A Primer on the "Big C"

Ever have a symptom and go online to see what it may be? We've all done it, and no possibility of what that symptom might indicate instills more fear than the word *cancer*. After the diagnosis is made, you have an even greater thirst for information. Being educated about your disease is essential. Studies indicate that educated patients are more compliant with their treatments and have better outcomes, which is what you want! But to have real knowledge, you need to be able to distinguish fact from fiction — and with cancer,

there's a lot of fiction out there. So, in this section, we give you a quick overview of cancer, answering the key questions, so that you're truly educated about your disease and the cancer landscape you'll be traversing.

What is cancer?

In the early development of our understanding of cancer, most researchers thought that it resulted from cells no longer being under the control of normal growth factors and immune regulation, causing them to suddenly grow wildly. If the cancer couldn't be removed completely with surgery, it would spread and cause the patient to die. Although this explanation does appear to describe the course of *some* malignancies, the scientific and medical communities now know that cancer is actually a far more complex and remarkably diverse group of medical conditions. In fact, even two seemingly similar cancers — like two breast cancers or two colorectal cancers — may actually be quite different, causing them to respond differently to the same treatments.

As a result, we can't describe every type of cancer in this book — that would be akin to trying to describe every snowflake that falls from the sky. So, for our purposes, it's fair to simplify things by saying that cancer is characterized by the growth of abnormal cells, their invasion into surrounding tissue, and, ultimately, their spread to other regions of the body if not caught early enough. This process occurs because these abnormal cells (also called *cancerous cells* or *malignant cells*) have somehow lost their ability to appropriately respond to the extensive network of highly complex regulatory mechanisms whose primary purpose is to ensure the normal functioning of the particular tissue. (For more on the definition of *malignant*, see the nearby sidebar, “Building your cancer vocabulary.”)

How does cancer develop?

Cancer is caused by changes in a cell's DNA (its genetic blueprint), leading to cellular mutations. Some of these mutations may be genetic (inherited from our parents), while others may be caused by exposure to *carcinogens* (cancer-causing substances). But although all cancers are caused by mutations, not all mutations cause cancer. Mutations within genes of normal cells occur quite regularly, particularly when cells divide to increase their numbers, and most mutations are harmless. The increase in the number of cells in a given tissue may be due to any of the following:

- ✓ **The normal process of growth of the individual:** This kind of cell division occurs during childhood.
- ✓ **As part of the repair of damaged tissue:** When you have a cut on your hand or surgery for a broken leg, cells divide to repair the tissue that was damaged.

- ✔ **As a component of the body's strategy to successfully combat external threats:** For example, there is an increase in immune cells after infection by bacteria or a virus, or the body is exposed to carcinogens that cause mutations, affect hormone levels, or impair the immune response.

Building your cancer vocabulary

If you find that your oncologist or anyone else on your treatment team is using words that you don't understand, ask for clarification and be sure to write it down. When you get home, you can look up that word online and familiarize yourself with what it means.

It would be impossible for us to outline all the cancer terms you'll be encountering. We'd need volumes for that, and you don't need us to provide you with a dictionary anyway. But what we can provide you with is some of the terminology that you may encounter with regard to your tumor:

- ✔ **Benign versus malignant:** A *benign* tumor is a mass that grows locally, does not invade surrounding tissue, and, in most cases, doesn't spread to distant sites. Such tumors may also be referred to as *noncancerous* or *nonmalignant*. In contrast, *malignant* tumors can invade surrounding normal tissue and spread to distant sites.

Although most people are relieved when they hear that their tumor is benign, depending on its location, benign tumors can still cause considerable harm. For example, a benign tumor in the brain may destroy normal tissue as it grows. In contrast, some malignant tumors may be easily removed through surgical excision and require no further treatment, such as in many cases of basal cell carcinoma of the skin. So, as you can see, *benign* and *malignant* can be relative terms.

However, in most circumstances, benign tumors can be removed surgically and don't

require subsequent external radiation, and there is no role for chemotherapy when it comes to these tumors.

- ✔ **Noninvasive and locally invasive versus metastatic:** *Noninvasive tumors* are generally considered superficial cancers because the tumor cells haven't spread into the surrounding tissue, whereas *locally invasive* cancer has spread beyond the confines of its own tissue space and directly into the surrounding tissues where it's not normally present. *Metastatic* cancer means the cancer has spread to sites beyond its tissue of origin. This may be to local lymph nodes or to distant organs. The method of spread may be by growth of the cancer into surrounding organs or spread to the lymph nodes or the blood.
- ✔ **Primary tumor versus secondary tumor:** *Primary tumor* refers to what is believed to be the initial site of the malignancy, while *secondary tumor* or *metastatic site(s)* refers to locations where the tumor may have spread.

It may not always be easy to distinguish between the primary and secondary tumor sites. This is particularly the case when the cancer is found in multiple sites at diagnosis and one of a number of locations might have been the "primary site." In general, in this situation, the most important reason to know the primary site is to determine the most effective treatment program.

The complex system of normal regulatory mechanisms present within all of us allows for necessary cellular growth. When the required task has been completed, that same system slows the growth rate. This process occurs in every tissue in the body and is constantly in operation. Unfortunately, in some people, this complex regulatory system fails to keep this growth and spread in complete check, and a cancerous growth develops.

All cancers have some degree of genetic abnormality compared with the corresponding normal tissue. In some situations, there may be a single well-defined event that led to the cancer, but most often there are large numbers of changes from the normal condition, frequently making it very difficult to know which specific mutation or alteration is actually responsible for the initial development of the malignancy or driving its progression. Most cancers require a number of specific events to occur before a given cell becomes malignant.

Therefore, the body may actually have a number of opportunities to control the cancer before it becomes widespread in the body, and this is also why cancer screenings are so important. When regular cancer screenings are undertaken, a cancer may be detected before it has acquired the ability to invade surrounding tissue or spread throughout the body.



Genetic abnormalities develop over a long period of time, usually years or even decades. So, although it may feel like your cancer started and progressed quite suddenly, depending on your tumor, this process may have been going on for many years.

Why aren't all cancers created equal?

You can better appreciate the tremendous variation in the rate of development, growth, and spread of cancer when you consider

- ✓ The remarkable complexity of the genetic background of individual cancers
- ✓ The differences in an individual patient's own biological mechanism that attempts to respond to the presence of the cancer (which may include various immune mechanisms or changes in growth factors that may still influence the rate of tumor growth and spread even after the malignancy has been established)

Certain cancers, by their very nature, are widespread at diagnosis (such as blood cancers), while others are more easily detected because they can be directly observed by the individual (such as skin cancers), by a physical examination (such as breast cancer), by imaging procedures (such as breast and lung cancers), or by blood tests (such as prostate cancer).

In addition, some cancers appear to maintain some degree of the normal mechanisms of control and are, in general, more likely to progress slowly,